

**TEXAS A&M UNIVERSITY-CENTRAL TEXAS SOCIAL WORK DEPARTMENT**

SOWK 3305 110: Biological Foundations of Social Work Practice

Tuesdays and Thursdays, 2:00 to 4:30, Taught Synchronous Online

**Semester:** Summer 2021  
**Instructor's Name:** Claudia Rappaport, PhD, ACSW, MSSW  
**Office Number:** 420D Warrior Hall (but this semester I am still teaching from home due to COVID)  
**Office Phone:** (254) 519-5432 (but this semester email me instead of calling this number)  
**E-Mail:** [rappaport@tamuct.edu](mailto:rappaport@tamuct.edu). **Emails are responded to as soon as possible, usually the same day (or the next day if sent very late at night). I do respond to emails at night if I am still up grading papers.**

## **I. Course Description**

*Catalog Description:* Provides an opportunity to explore issues related to human biological functioning as applied to social work practice. Emphasis is placed on functioning of the human body across the lifespan, on healthy living and prevention of illness, and on illness and disabilities (physical and mental) that social workers encounter in clients.

*Prerequisites:* There are no prerequisites for this class.

## **II. Nature of Course**

This course will provide students an opportunity to explore issues related to human biological functioning as applied to social work practice. Emphasis will be placed on such topics as: the functioning of the human body across the lifespan; illnesses and disabilities that social workers frequently encounter in clients; genetics and heredity; human sexuality; mental disorders and substance abuse and their treatment; the influence of environment on the human body; and healthy living and the prevention of illness. The course content will supplement course content in HBSE I and HBSE II. Ethical and cultural aspects of these topics will also be explored.

This supports students' learning the model of Generalist Social Work Practice: Work with individuals, families, groups, communities and organizations in a variety of social work and host settings. Generalist practitioners view clients and client systems from a strengths perspective in order to recognize, support, and build upon the innate capabilities of all human beings. They use a professional problem-solving process to engage, assess, broker services, advocate, counsel, educate, and organize with and on behalf of clients and client systems. In addition, generalist practitioners engage in community and organizational development. Finally, generalist practitioners evaluate service outcomes in order to continually improve the provision and quality of services most appropriate to client needs. Generalist social work practice is guided by the NASW Code of Ethics and is committed to improving the well-being of individuals, families, groups, communities and organizations and furthering the goals of social justice. (From the website of the Association of Baccalaureate Social Work Program Directors, Inc.)

*Teaching Method:* The primary teaching approaches in this course will be collaborative and active learning. Material in the course will be presented through interactive class discussions on readings, analysis of case scenarios, and videotapes. **ALL ASSIGNMENTS WILL BE SUBMITTED VIA THE CANVAS ONLINE SYSTEM.**

*Grading:* As much as possible, Dr. Rappaport tries to have assignments graded by the class after they were due. For longer assignments it may be the second class after they were due. Twice during the semester Dr. Rappaport will complete grade sheets to show each student where their course grade stands at that time. You can also check the GradeBook in Canvas, but remember that the grade there does not reflect your actual grade in the course because it does not include the grades for class attendance and class participation.

Note: Handouts for the course will be available via the Canvas Online Learning system. Please ensure that you have access to it. For concerns, please contact the Help Desk Central, 24 hours a day, by using the Canvas Help link located at the bottom of the left-hand menu. Select Chat with Canvas Support, submit a support request through “Report a Problem,” or call the Canvas support line at 1-844-757-0953.

### **III. Department Mission**

The mission of the Texas A&M University-Central Texas Bachelor of Social Work Department (TAMUCT BSW Department) is to prepare high quality graduates for entry-level generalist social work practice and for advanced education. This education is delivered in a rigorous and student-centered learning environment that promotes professional behavior, values, and ethics, human and community well-being, respect for human diversity, and a global perspective, and is guided by a person-in-environment framework, knowledge based on scientific inquiry, and social work competencies.

*The TAMUCT Social Work Department has full accreditation through the Council on Social Work Education (CSWE), effective February 2017.*

### **IV. COURSE OBJECTIVES AND RELATED PRACTICE BEHAVIORS**

This course provides content that helps to prepare you, the student, to engage in the following CSWE competencies and related practice behaviors:

- Attend to professional roles and boundaries (2.1.1c)
- Distinguish, appraise, and integrate multiple sources of knowledge, including research-based knowledge and practice wisdom (2.1.3a)
- Utilize conceptual frameworks to guide the process of assessment, intervention, and evaluation (2.1.7a)
- Critique and apply knowledge to understand person in environment (2.1.7b)
- Collect, organize and interpret data (2.1.10b[d])
- Assess client strengths and limitations (2.1.10b[e])
- Select appropriate intervention strategies (2.1.10b[g])
- Implement prevention interventions that enhance client capacities (2.1.10c[i])

The objectives for this course that support the CSWE-related practice behaviors are:

- (1) Express a basic understanding of scientific frameworks in human biology and their importance to professional social work practice.
- (2) Apply understanding of human biological functioning in development of client assessments.
- (3) Utilize understanding of scientific frameworks and human biology to develop/recommend appropriate interventions and prevention services.
- (4) Apply understanding of systems/ecological framework on human biological functioning.

The following table shows the relationship between A) the course objectives, B) the CSWE-related practice behaviors, and C) the assignments used to assess students’ ability to fulfill the objective related to the practice behavior:

<b>A. Objectives</b> <i>(By the completion of the course, it is expected that you will be able to...)</i>	<b>B. CSWE-Related Practice Behaviors</b> <i>(This is the behavior that objective supports)</i>	<b>C. Course Assignments</b> <i>(The assignment is used to assess your ability to fulfill the objective related to the practice behavior)</i>
(1) Express a basic understanding of scientific frameworks in human biology and their importance to professional social work practice.	2.1.1c 2.1.3a	Class discussions Quizzes/exams Case scenarios Observation essay Movie essay
(2) Apply understanding of human biological functioning in development of client assessments.	2.1.7a 2.1.10b(d),(e)	Class discussions Quizzes/exams Case scenarios Observation essay Movie essay
(3) Utilize understanding of scientific frameworks and human biology to develop/recommend appropriate interventions and prevention services.	2.1.10b(g) 2.1.10c(i)	Class discussions Quizzes/exams Case scenarios Observation essay Movie essay
(4) Apply understanding of systems/ecological framework on human biological functioning.	2.1.7b	Class discussions Quizzes/exams Case scenarios Observation essay Movie essay

## V. Course Requirements

**A. Required Texts:** Falvo, Donna R., and Holland, Beverley E. (2018). *Medical and psychosocial aspects of chronic illness and disability* (6<sup>th</sup> ed.). Burlington MA: Jones and Bartlett Learning. ISBN 978-1-2841-050-7.

Van der Kolk, Bessel (2014). *The body keeps the score: Brain, mind, and body in the healing of trauma*. New York: Penguin Books.

There will also be readings assigned in handouts for each class period. Handouts are largely based on the following sources:

Beers, Mark, MD; and Robert Berkow, MD (1999). *The Merck Manual of Diagnosis and Therapy* (17<sup>th</sup> ed.). Whitehouse Station: Merck Research Laboratories.

Ginsberg, Leon; Larry Nackerud; and Christopher Larrison (2004). *Human Biology for Social Workers: Development, Ecology, Genetics, and Health*. Boston: Allyn and Bacon.

Goodenough, Judith; and Betty McGuire (2012). *Biology of Humans: Concepts, Applications, and Issues* (4<sup>th</sup> ed.). San Francisco: Pearson Benjamin Cummings.

*The Medical Advisor: The Complete Guide to Alternative and Conventional Treatments*. Alexandria: Time-Life Books, 1996.

Tsiaras, Alexander (2004). *The Architecture and Design of Man and Woman*. New York: Doubleday.

## B. Final Grades

A total of 10,000 points can be earned from the course assignments, as follows:

Course Assignment	Percentage of final grade	Total possible points
Concept Mastery Quizzes	20%	2,000
Case scenario assignments	20%	2,000
Individual Interview Paper	15%	1,500
Movie assignment	15%	1,500
Mid-term Exam	10%	1,000
Final Exam	10%	1,000
Attendance	5%	500
Class Participation	5%	500
Totals	100%	10,000 (Total points ÷ 100 = final grade)

Final Class Grades are based on the following:

A: 90 to 100 (9,000 to 10,000 points)

B: 89 to 80 (8,900 to 8,000 points)

C: 79 to 70 (7,900 to 7,000 points)

D: 69 to 60 (6,900 to 6,000 points)

F: 59 or less (5,900 points or less)

**Example:** A test worth 15% of the grade, on which a student earned a B+, would give 1,320 points toward the final grade ( $88 \times 15 = 1,320$ ).

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C: 79 to 70 (7,900 to 7,000 points)

D: 69 to 60 (6,900 to 6,000 points)

F: 59 or less (5,900 points or less)

## C. Course Assignments

The following activities will be completed during the semester.

### 1. Concept Mastery Quizzes (20% of final grade)

Many of the class periods will include a quiz to help students solidify their understanding of the concepts presented in the course material and learn how to apply them. The quiz will typically be sent out via Canvas the day of the class, and it is due by midnight the day of the next regularly scheduled class period.

At the end of the course, the student's average numerical grade on all quizzes (including any zeros) will represent 20% of their final grade. Each student will have one quiz grade (the lowest one) dropped by the professor; if you only missed a single class during the semester, that zero will not impact your average quiz grade.

**Note: Quizzes must be completed by each student ALONE. There is to be NO sharing of quiz answers with other students; this constitutes cheating. If a student shares their quiz answers with another student, BOTH students will receive a grade of 0 (zero) on that quiz.**

2. Case scenario assignments (20% of final grade)

In some class periods, students will be given client scenarios that apply some of the material being covered by the course in terms of how social workers would provide services to the person whose story is told in the scenario. The case scenario assignments will be sent out via Canvas and are due at the beginning of the next regularly scheduled class period. Each scenario will have particular questions the student needs to respond to in writing. The purpose of the scenario is to help students consider social work applications of the aspects of human biological functioning that are being studied. The grade will be based on how comprehensive the student's answer is, so responses should be as thorough and thoughtful as possible. **Students are not allowed to use ANY outside sources or the internet while writing their answers. The ONLY sources that can be referred to are the course's assigned readings, and students are NOT to simply copy those readings in their answer. Your focus should be on APPLYING what you read while responding to a client's situation. If it is apparent to the professor that outside sources were used, the student's grade on the assignment will be a zero. SCENARIOS MUST BE TYPED AND DOUBLE-SPACED.**

At the end of the course, the student's average numerical grade on all the case scenarios (including any zeros if the student missed some scenarios due to absence) will represent 20% of their final grade. Dates when scenarios will be given out are listed in the syllabus. Toward the end of the course, two extra (optional) case scenarios will be given. Students who choose to complete those extra assignments can apply the grades to replace the grades of two previous case scenarios or previous quizzes, whichever will help their final grade most.

3. Movie Assignment (15% of final grade)

Each student will select one movie to watch that deals with some of the issues of human biological functioning and their psychosocial implications that we have been studying in this class. This should be a full-length movie (which usually run between 1 hour and 20 minutes and 2 hours). It can be a movie on television or a movie that has been shown in theatres and/or that is available for rental or from libraries. **It cannot be a movie that we use in class; if you DO write your paper on a movie we use in the class, your paper will not be graded, and you will receive a grade of zero.** After watching the movie, the student will write a paper of a minimum of 6 pages (not counting the face sheet and the reference page; there is no limit in terms of a maximum possible number of pages) covering the following:

- A summary (**NO MORE THAN three pages in length**) of the main storyline, stressing **ONLY** the parts of the story that dealt with human functioning, health, illness, and disability. What was the physical condition, and how was it explained in the movie? How did the physical or medical condition affect the main character and/or their family, friends, and other significant people? Were their perceptions of the condition more in line with a chronic illness or with a disability? **DO NOT SIMPLY WRITE A SCENE-BY-SCENE RETELLING OF THE MOVIE!!!** The summary **CANNOT** be more than 3 pages and should **ONLY** address how the movie presented issues related to the mental/biological condition, though giving enough of a summary that the story will make sense to the reader.
- How the movie provided examples of material that we have studied in this class, and whether there were things shown in the movie that contradicted what we have studied. **BE SURE YOU DEFINE OR**

EXPLAIN ANY MEDICAL, BIOLOGICAL, OR PSYCHOLOGICAL TERMS YOU USE IN YOUR PAPER.

- How would a social worker have been able to assist the people in the movie? What would the major kinds of assistance have been, and how could they potentially have changed what occurred in the movie?
- If there was a social worker (or psychologist, psychiatrist, counselor, etc.) in the movie, how effective do you think that person's services were? How do you think they could have been made more effective?
- Were any ethical dilemmas raised by the movie, and how would the social work Code of Ethics have guided social workers regarding how to resolve those dilemmas? **THE CODE OF ETHICS IS THE ONLY NON-COURSE MATERIAL YOU NEED TO USE AS A REFERENCE IN YOUR PAPER; BE SURE TO CITE THE CODE IN THIS PART OF YOUR PAPER.**

In writing your answers to these questions, be sure you are very clear and complete in describing what happened in the movie because this might be a movie I have not seen. Even if it is a movie I have seen, you will lose points if you are not clear in your descriptions of the issues in the movie and what you would have done about them (I pretend I have never seen the movie when I grade how well you described its content). Papers will be graded according to how well the student addresses these questions. Thoroughness and creativity are encouraged. Papers must be typed and double-spaced (if they are not, the paper will not be graded and you will receive a zero for the assignment), and you must use APA format. **STUDENTS ARE NOT ALLOWED TO USE ANY REFERENCE MATERIALS OTHER THAN THE COURSE READING ASSIGNMENTS (INCLUDING ANY SOURCES DESCRIBING THE MOVIE), BUT YOU STILL NEED TO CITE ANY USE OF READING ASSIGNMENTS IN YOUR ESSAY, AS WELL AS CITING THE MOVIE YOU WATCHED. IF YOU USE OTHER OUTSIDE MATERIALS, EVEN IF YOU CITE THEM, YOUR GRADE ON THE ASSIGNMENT WILL BE A ZERO BECAUSE YOU DID NOT FOLLOW INSTRUCTIONS. See the APA section of this syllabus if you do not know how to cite a movie correctly in a paper. See also the rubric in this syllabus as a guideline for how the paper will be graded.**

4. Individual Interview Paper (15% of final grade)

Each student will arrange to spend two hours with a person who has some kind of medical or psychological disorder to observe and interview him/her. Due to COVID-19 restrictions, this can be an online contact (such as Skype or Zoom), a telephone interview, etc. The person can be an adult or a child (if a child, you will also need to spend time interviewing a parent or caregiver). The person you choose preferably should not be **a relative of the student** (and relative is defined as any person related by blood, marriage, or co-habitation) but can be someone you already know, or they can be a person you are meeting for the first time to do this assignment. If due to the COVID-19 restrictions you are unable to arrange to interview someone who is not a family member, then an exception to this rule can be made. After spending the time with this person, you will write a paper of a minimum of 8 pages (there is no limitation in terms of a maximum number of pages; if it is not at least 8 pages, there will be a serious deduction, and the page length counts content only, not the face page or the reference page) describing what you observed in the person and what they told you about their condition and their life situation. You will then compare this person's story with the material you studied for class about a person who has that kind of condition, **AND ACTUALLY UTILIZE THAT MATERIAL TO HELP EXPLAIN THE STORY OF THE PERSON YOU INTERVIEWED. THE COURSE MATERIAL SHOULD BE BLENDED IN WITH THE PERSON'S STORY IN A SMOOTH, EXPLANATORY FASHION.** How was this person's story similar to the material you studied for class about that condition, and were there things about the person that appeared to be different from the material you studied? Be sure you give biological explanations for everything you discuss (for example, if you say the person had an MRI done, you need to explain what an MRI does and what it is used for). You should approach writing the essay from the body systems perspective we have used in the course – what body systems are being affected by their condition, and

how are they being affected? What kinds of medical or psychological care have they required because of the condition, and how effectively has that care helped them? Have they used any types of alternative treatments in addition to standard medical/psychological care? How has the condition affected the person's daily life, and has it affected their ability to function in ways that are important to them? Has the condition affected their family's functioning? What kinds of adaptations has the person made to help them function more effectively? What is their perception of their condition, and how does it illustrate Falvo's descriptions of chronic illness and disability? What is their view of the future with this condition?

At the beginning of the essay, be sure you give the person's age and a description of the environment in which you did the observations and interview (were you in the person's home? Your own home? On the phone? On your computer? etc.). You need to make up a name for the person, using a fictional name for purposes of confidentiality, **AND YOU NEED TO STATE THAT YOU ARE USING A FICTIONAL NAME.** Papers must be typed and double-spaced (if they are not, they will not be graded and you will receive a zero on the assignment) and must use APA format. **STUDENTS ARE NOT ALLOWED TO USE ANY REFERENCE MATERIALS OTHER THAN THE COURSE READING ASSIGNMENTS AND THE CODE OF ETHICS, BUT YOU STILL NEED TO CITE CORRECTLY ANY USE OF READING ASSIGNMENTS IN YOUR ESSAY, along with using personal communication citations when discussing your interview of the person. (See the APA section of this syllabus if you do not know how to do that.) IF YOU USE OTHER OUTSIDE MATERIALS, EVEN IF CITED, YOUR GRADE WILL BE REDUCED SIGNIFICANTLY BECAUSE YOU DID NOT FOLLOW INSTRUCTIONS.** Creativity and thoroughness are significant aspects of the grading of this essay; if it is shorter than 8 pages, it is not in depth enough in terms of telling the person's story and comparing their story to class materials, and your grade will be reduced significantly.

**See the rubric for grading this paper later in this syllabus.**

**Note: On both of the written paper assignments (the movie paper and the interview/observation essay), 75% of the essay grade will be based on content, and 25% of the grade will be based on punctuation, spelling, grammar, APA format, organization, etc., as follows:**

0-3 errors = A+	4-6 errors = A
7-9 errors = A-	10-12 errors = B+
13-15 errors = B	16-18 errors = B-
19-21 errors = C+	22-24 errors = C
25-27 errors = C-	28-30 errors = D+
31-33 errors = D	34-36 errors = D-
37 errors or more = F	

5. *Mid-Term and Final Exams: 20% of final grade total (10% each)*

There will be two take-home examinations given in this course, a mid-term and a final. See the Course Schedule in this syllabus for exam dates. Examinations will not be the type of exams students might be used to (such as multiple choice, true-false, matching, and short essay questions). That type of examination merely expects students to repeat back facts and definitions, and the concept mastery quizzes will be verifying your ability to answer those kinds of questions. Instead, the exam may ask one or two large questions that expect the student to demonstrate his/her ability to integrate the learning they have done in the class (from reading, class discussions, watching videos in class, etc.) and show how they can APPLY that knowledge in performing social work functions. **THESE EXAMS MUST BE TYPED AND DOUBLE-SPACED.**

6. Class Attendance (5% of final grade)

Students are expected to be present for every scheduled class session. If you are unable to avoid missing a class, you must **email** the professor **within one week of the class period** to explain the absence if you want it to be considered an excused absence. Every unexcused (or unexplained) absence will affect this portion of your grade. For example, an illness, doctor appointment, or funeral of a family member is an excused absence; the professor also allows one day's absence if a deployed significant other returns home. You need to email about **every** absence from class; for example, if you were sick both days of the week, one email for the first day will not suffice as the professor will not assume that you were still sick on the second day. The professor will review other types of absences to determine how unavoidable they were; not being able to leave work is NOT an excused absence. **If your work schedule or your health will not permit you to attend this class on a predictable basis, you should not try to take the class. NOTE: if you do not email the professor within one week of the absence to get it excused, this will NOT be changed later to an excused absence.**

**Students must be present when class begins and are expected to remain until class is dismissed. I EXPECT STUDENTS TO HAVE THEIR CAMERA ON THROUGHOUT THE CLASS SESSION SO I CAN SEE THAT EACH OF YOU IS PRESENT AND IS ENGAGED IN THE CLASS DISCUSSION OR ACTIVITIES. IF YOU DO NOT HAVE YOUR CAMERA ON, YOU WILL BE CONSIDERED ABSENT FROM CLASS.**

The following shows the degree to which unexcused absences will impact your attendance grade. Since this is a summer course, each absence counts more heavily than during a long semester.

<i>Number of Unexcused Absences</i>	<i>Attendance Grade</i>
1	B
2	C
3	D
4 or more	F
Coming to class late twice counts as one absence	

Class Participation (5% of grade)

Dr. Rappaport has an interactive teaching style and expects every student to be an active participant in class. An old Chinese proverb says, “Tell me and I will forget—Show me and I may remember—But involve me and I will understand.” You will learn more from this class if you talk and participate. Ask questions, remembering that there is no such thing as a stupid question. Share your reactions to what is being discussed. Reflect on implications of what we are studying. If you are a student who has never before chosen to talk in classes, this will be a good opportunity for you to start developing a new life skill that will serve you well in the profession of social work. (Students are encouraged not to divulge any personal information they will not be comfortable having their fellow students know about them.) Being an active participant increases understanding of the material for your fellow students as well.

Your class participation grade will be determined by whether you talked during class discussions **and by whether your contributions added to the quality of the class sessions.** Dr. Rappaport also reserves the right to call on students in class if they are not participating regularly in the discussions. Each day a student will earn between 0 and 3 participation points; the points will be totaled at the end of the semester, and grades will be determined based on the student's total number of points compared to the points of all the other students in the class. Participation is defined as vocally talking during the class; typing “chat” comments while other people are talking does not count as participation.

## VI. CODE OF CONDUCT FOR CLASSROOMS

The following policies apply to all students enrolled in this course:

1. Students are encouraged to enter class within ten (10) minutes of it beginning. However, understanding that there can be technology problems with signing into the class, do the best you can to be “on time.”
2. After class has begun, students are expected to remain for the duration of the class. It is expected that all students will take care of personal affairs (i.e., get beverages, take care of phone calls, meet with students and other professors, use the restroom, etc.) before class begins and that they WILL NOT leave class after it has begun.
3. Students are expected to pay close attention to each class in its entirety, including to any videotapes being shown, and to use their integrity and respectfulness in how they behave during class.
3. Students are expected to display professional decorum at all times. This includes, but is not limited to, respecting classmates and the instructor. Talking during class discussions out of turn or while other students are talking is disruptive to the learning environment, disrespectful to peers, and unprofessional in demeanor. Students are strongly encouraged to engage in discussion in a respectful and appropriate manner; hence, it is expected that students apply classroom etiquette and raise a hand in front of your camera if there is something you want to share or you want to answer a question. It is also expected that students will display patience in raising a hand and recognize that the professor may be trying to call on other students who have not yet participated. Please mute your camera temporarily if some kind of noise occurs in the background that would be disruptive.
4. To support the academic learning environment, students are asked to refrain from sharing personal information in class that will not support/add significantly to the class discussion. Sharing of personal stories and/or issues that are not directly related to the topic can distract class learning and limit knowledge-sharing by the professor and other students. The professor reserves the right to redirect/limit such conversations in class as needed.
5. Students are NOT permitted to work collaboratively (together) on *any* assignment in this class. All work turned in must be the student’s own product. This includes quizzes, papers, etc. Failure to adhere to this policy can result in a zero (0) on the assignment and referral to Student Affairs for academic integrity concerns.
6. **All assignments must be turned in at the beginning of class on the day they are due.** *Being absent from class on a day when an assignment is due does NOT grant a student an extension to the due date;* the student must still arrange to get that assignment turned in to the professor before class starts. Allowing students to turn in assignments late for a grade is not fair to other

students who get their work done on time, disrupts the grading process for the professor, and sends a message that such behavior is professionally “okay,” which it is not.

7. All papers submitted for grading **MUST** adhere to APA standards unless otherwise stated by the professor. This means that all papers must, *minimally*, be: 1) typed, 2) double- spaced, 3) use Times New Roman font, 4) use 12 point font, 5) include an APA style cover page, and 6) include in-text citations **AND** a reference page for **ANY SOURCED INFORMATION** (this includes information learned in current or previous classes, read online, learned during a personal communication, reviewed over email, read in a textbook, etc.). Further, all typed papers submitted in class **MUST** be stapled. **IF A PAPER IS NOT WRITTEN IN APA FORMAT, DR. RAPPAPORT RESERVES THE RIGHT TO RETURN IT TO THE STUDENT WITH A GRADE OF ZERO. USING APA IS NOT OPTIONAL! IF YOU DO NOT KNOW HOW TO USE APA, READ THROUGH THE INSTRUCTIONS LATER IN THIS SYLLABUS OR CONTACT THE WRITING CENTER AND ASK FOR SOME TUTORING ON HOW TO USE IT.**
8. TAMUCT expects all students to maintain high standards of personal and scholarly conduct and to avoid any form of academic dishonesty. Academic dishonesty includes, but is not limited to, plagiarism (intentional or unintentional), copying another person's work (**INCLUDING THE TEXTBOOK OR OTHER COURSE MATERIALS**), turning in someone else's work as your own, downloading material from the internet and inserting it into a paper as if it were your own work, taking ideas from classes or readings and putting them in a paper without citations/references, cheating on an examination or other academic work, collusion, and the abuse of resource materials. Any idea, even paraphrased ideas, used or borrowed must be given credit by showing the source with an appropriate citation and reference. **Any student who violates class and/or university policies regarding Academic Honesty will be sanctioned.** More information on university policies can be found at [tamuct.edu/studentconduct](http://tamuct.edu/studentconduct).
9. Class discussions, oral presentations, and written materials must adhere to professional standards of expression and conform to the style described by the American Psychological Association (APA). This includes avoidance of the use of language that degrades women; people of color; people who are gay, lesbian, bisexual, or transgender; and other diverse and at-risk populations. All students are expected to display the utmost respect for all people, regardless of differences.
10. *An assessment of each student's behavior as it relates to class policies and overall decorum required by the TAMUCT Social Work Department and the university is provided via the “Rubric for Assessing Professional Behaviors” that is given to students at the New Social Work Student Orientation. All social work majors receive a RAPB when they apply to the social work major and again when they apply for a field placement. Failure to obtain scores of 3 or 4 in any of the 15 professional behavior areas listed in the rubric will limit a student's ability to be admitted to the social work major or assigned to a field placement and/or can result in removal from a field placement. These behaviors, which align with the National Association of Social Workers (NASW) core values and ethics, the TAMUCT Code of Conduct, and the Social Work Department class policies, are considered the expected*

*professional behaviors of social work interns and future generalist social workers and, therefore, are held to the strictest code.*

## **VII. University Policies**

### **1. Warrior Shield:**

Warrior Shield is an emergency notification service that gives TAMUCT the ability to communicate health and safety emergency information quickly via email, text message, and social media. All students are automatically enrolled in it through their myCT email account. Connect at [portal.publicsafetycloud.net/Account/Login](http://portal.publicsafetycloud.net/Account/Login) to change where you receive your alerts or to opt out. By staying enrolled in Warrior Shield, university officials can quickly pass on safety-related information, regardless of your location.

### **2. Technology Requirements:**

This course will use the TAMUCT Instructure Canvas learning management system to deliver handouts as supplemental reading assignments and all written assignments. We strongly recommend using the latest versions of Chrome or Firefox browsers, not Internet Explorer.

### **3. Drop Policy**

If you discover that you need to drop this class, you must contact the Records Office and ask for the necessary paperwork. Professors cannot drop students; this is always the responsibility of the student. The records office will give a deadline for when the form must be completed, signed, and returned. After you return the signed form to the records office and wait 24 hours, you must go into Warrior Web and confirm that you are no longer enrolled. If you are still enrolled, FOLLOW-UP with the records office immediately. You are to attend class until the procedure is complete to avoid penalties for absences. Should you miss the deadline or fail to follow the procedure, you will receive an F in the course if you stopped attending and doing the assignments.

### **4. Academic Integrity**

Texas A&M University - Central Texas values the integrity of the academic enterprise and strives for the highest standards of academic conduct. TAMUCT expects its students, faculty, and staff to support the adherence to high standards of personal and scholarly conduct to preserve the honor and integrity of the creative community. Academic integrity is defined as a commitment to honesty, trust, fairness, respect, and responsibility. Any deviation by students from this expectation may result in a failing grade for the assignment and potentially a failing grade for the course. Academic misconduct is any act that improperly affects a true and honest evaluation of a student's academic performance and includes, but is not limited to, cheating on an examination or other academic work, plagiarism and improper citation of sources, using another student's work, collusion, and the abuse of resource materials. All academic misconduct concerns will be reported to the university's Office of Student Conduct. Ignorance of the university's standards and expectations is never an excuse to act with a lack of integrity. When in doubt on collaboration, citation, or any issue, please contact your professor before taking a course of action.

### **5. For Pregnant and/or Parenting Students:**

TAMUCT supports students who are pregnant and/or parenting. In accordance with requirements of Title IX and related guidance from the US Department of Education's Office of Civil Rights, the Dean of Student Affairs office can assist students in seeking appropriate accommodations. Students should seek assistance as early in the semester as possible. Visit Student Affairs ([tamuct.edu/student-affairs/index.html](http://tamuct.edu/student-affairs/index.html)) or contact the Title IX Coordinator. Title IX prohibits discrimination on the basis of

sex and gender, including pregnancy, parenting, and all related conditions. Contact the Associate Dean in Student Affairs at 254-501-5908.

#### 6. **Academic Accommodations**

At Texas A&M University – Central Texas, we value an inclusive learning environment where every student has an equal chance to succeed and has the right to an education that is barrier-free. The Dept. of Access and Inclusion is responsible for ensuring that students with a disability receive equal access to the University's programs, services and activities. If you believe you have a disability requiring reasonable accommodations, please contact the Department of Access and Inclusion at (254) 501-5831. Any information you provide is private and confidential and will be treated as such. For more information, please visit our webpage: <http://www.tamuct.edu/student-affairs/access-inclusion>.

#### 7. **Library Services**

The university library provides many services in support of research across campus and at a distance. We offer over 200 electronic databases containing approximately 250,000 ebooks and 82,000 journals, in addition to the 72,000 items in our print collection, which can be mailed to students who live more than 50 miles from campus. Research guides for each subject taught at TAMUCT are available through our website to help students navigate these resources. On campus, the library offers technology including cameras, laptops, microphones, webcams, and digital sound recorders. Research assistance from a librarian is also available 24 hours a day through our online chat service and at the reference desk when the library is open. Research sessions can be scheduled for more comprehensive assistance and can take place on Skype or in person at the library. Assistance can cover many topics, including how to find articles in peer-reviewed journals, how to cite resources, and how to piece together research for written assignments. The library facility on campus includes student lounges, private study rooms, group work spaces, computer labs, family areas suitable for all ages, and many other features. Services such as interlibrary loan, TexShare, binding, and laminating are available. The library offers workshops tours, readings, and other events. For more information, visit the webpage: <http://tamuct.libguides.com/>

#### 8. **Tutoring Services**

Tutoring is available to all TAMUCT student, both on-campus and online. On-campus subjects tutored include Accounting, Advanced Math, Biology, Finance, Statistics, Mathematics, and Study Skills. Tutors are available at the Tutoring Center in Warrior Hall, Suite 111. If you have a question regarding tutor schedules, need to schedule a tutoring session, are interested in becoming a tutor, or any other question, contact Academic Support Programs at 254-519-5836, visit Student Success in 212F Warrior Hall, or email [studentsuccess@tamuct.edu](mailto:studentsuccess@tamuct.edu). Chat live with a tutor 24/7 for almost any subject on your computer through tutor.com, an online tutoring platform that enables TAMUCT students to log in and receive FREE online tutoring. This tool provides tutoring in over 40 subject areas, **but it no longer offers writing support as of 8/1/19**. To access tutor.com, go to the “My Courses” tab in Blackboard.

#### 9. **University Writing Center**

Located in 416 Warrior Hall, the University Writing Center is a free workspace open to all TAMUCT students from 10 AM to 5 PM Monday thru Thursday. Students can arrange a one-on-one session with a trained and experienced writing tutor by visiting the UWC during normal operating hours (both half-hour and hour sessions are available). Tutors are prepared to help writers of all levels and abilities at any stage of the writing process. While tutors will not write, edit, or grade papers, they will assist students in developing more effective composing practices. By providing a practice audience for students' ideas and writing, tutors highlight the ways in which they read and interpret students' texts, offering guidance and support throughout the various stages of the writing process. In addition, students can work independently in the UWC by checking out a laptop that runs the Microsoft Office suite and connects to WIFI, or by consulting our resources on writing, including all the relevant style guides (such

as APA). Whether you need help brainstorming ideas, organizing an essay, proof-reading, understanding proper citation practices, or just want a quiet place to work, the University Writing Center is available for help. If you have any questions about it, contact Dr. Bruce Bowles, Jr., at [bruce.bowles@tamuct.edu](mailto:bruce.bowles@tamuct.edu).

#### 10. **Sexual Violence**

Sexual violence is a serious safety, social justice, and public health issue. TAMUCT offers support for anyone struggling with these issues. University faculty are mandated reporters, so if someone discloses that they were sexually assaulted (or a victim of domestic or dating violence or stalking) while a student at TAMUCT, faculty members are required to inform the Title IX office. If you want to discuss any of these issues confidentially, you can do so through Student Counseling (254-501-5955), located on the second floor of Warrior Hall (207L). It is incumbent on all of us to find ways to create environments that tell predators that we do not agree with their behaviors and to tell survivors that we will support them. Your actions matter; do not be a bystander. Be an agent of change. For additional information visit the Title IX webpage at [www.tamuct.edu/departments/compliance/titleix.php](http://www.tamuct.edu/departments/compliance/titleix.php).

#### 11. **Behavioral Intervention:**

TAMUCT cares about the safety, health, and well-being of its students, faculty, staff, and community. If you are aware of individuals for whom you have a concern, those who are exhibiting concerning behaviors, or individuals causing a significant disruption to our community, please make a referral to the Behavioral Intervention Team. Referring your concern shows you care. Complete the referral online ([cm.maxient.com/reportingform.php?TAMUCentralTexas&layout\\_id=2](http://cm.maxient.com/reportingform.php?TAMUCentralTexas&layout_id=2)). Anonymous referrals are accepted. Please see the BIT website ([tamuct.edu/student-affairs/bit.html](http://tamuct.edu/student-affairs/bit.html)). If a person's behavior poses an imminent threat to you or another, contact 911 or TAMUCT police at 254-501-5800.

#### 12. **Copyright Notice**

Students should assume that all course material is copyrighted by the respective author(s). Reproduction of course material is prohibited without consent by the author and/or course instructor. Violation of copyright is against the law and against TAMUCT's Code of Academic Honesty. All alleged violations will be reported to the Office of Student Conduct.

### **VIII. The professor teaching this class**

Dr. Rappaport has a life-long interest in (really, fascination with) issues related to human biological functioning, owing to the fact that her social work career focused on medical social work (working with infants, children, and adolescents who had congenital defects, physical and mental disabilities, chronic illnesses, or life-shortening medical conditions). She actually selected this field of social work practice because she, herself, was born with some congenital defects that required ongoing medical care, major surgeries, and rehabilitation services, and she continues dealing with chronic conditions now. She has also seen the effects of illnesses and disabilities in her family members, including having a mother who died of breast cancer, a grandmother who died of a series of strokes, and a grandfather who became paralyzed by spinal arthritis. Dr. Rappaport provided caregiving to several family members in their last months and years of life. In her 25 years of practice as a social worker before coming to Killeen to teach social work in August 2000, Dr. Rappaport has seen direct evidence of how important it is for all social workers to have at least a basic understanding of biological human functioning and of some of the major medical conditions and disabilities that are commonly experienced by people who turn to social workers for assistance with their ability to continue functioning and maintaining quality of life.

Dr. Rappaport takes teaching very seriously. She wants students to enjoy this class and to feel like they learned a great deal from it. She is committed to coming to class prepared, to sharing her professional knowledge and experiences with students, and to encouraging everyone to participate actively in the discussions. In return, she expects students to

come to class prepared, having read the day’s assignment ahead of time and being ready to ask any questions they might have about things they did not understand in the reading. She responds to emails as soon as possible, and she tries to get all written assignments graded and returned to students within the following one to two class periods. Twice during the semester she will also give a grade sheet to each student, showing them where their grade in the class stands as of that point.

## IX. Course Schedule

Date	Description
Tuesday 6/8/21	<p>Review Syllabus</p> <p><b>Handout: Why Do Social Workers Need to Study Human Biology?</b></p> <p>Human Biology    Alternative Treatments    Evolution, Natural Selection, Eugenics, Involuntary Sterilization    Ecology    Nature vs. Nurture Debate    Ethical Dilemmas and Biology    Wellness and Preventive Health Care    Placebo, Nocebo</p> <p><b>Handout: Human Biology and Scientific Method</b>    Characteristics of Living Things</p> <p><b>Handout: Transcript of “Extraordinary Measures” movie</b></p> <p>Levels of Biological Organization    Scientific Method    FDA/Clinical Trials Pompe Disease</p> <p>Impact on Patients and Families of the FDA Processes</p> <p>CMQ #1 given</p>
Thursday 6/10/21	<p><b>Text: Falvo, pp. 1-9 (Chapter 1) – Conceptualizing Functioning, Health, and Disability</b></p> <p>Medical Model    Social Model    Biopsychosocial Model    Experience of Disability    International Classification of Functioning, Disability, and Health Optimum versus Maximum Function, Capacity, and Performance</p> <p><b>Text: Falvo, pp. 11-32 (Chapter 2) – Psychosocial and Functional Aspects of Health Conditions</b></p> <p>Experience of Health Conditions and Altered Function    Disease, Illness, Health Conditions    Stress &amp; Coping Strategies    Emotional Reactions Developmental Stages    Self-Concept, Self-Esteem    Invisible Conditions    Family Adaptation    Quality of Life    Adherence to Management Recommendations    Health information    Stages of Adaptation and Adjustment    Functional Aspects Vocational Issues</p> <p><b>Handout: Perceptions/Coping with Chronic Illness</b></p> <p><b>Handout: The Cell, Organelles, Metabolic &amp; Mitochondrial Diseases</b></p> <p>Video: “Conjoined at the Head: Medical Mysteries, Series 1” (0:53) (Films on Demand) CMQ #2 given</p>

**Date****Description**

Tuesday  
6/15/21

**The Experience of Disability, Human Genetics**
**Handout: Genetics and Human Inheritance, Genetic Disorders**

Chromosomes & Cell Division      Mitosis, Meiosis      Genetic variability  
 Dominant/Recessive genes/alleles      Detecting genetic disorders      Gene testing  
 Prader-Willi      Down Syndrome      Trisomy 18 and 13      Cri du Chat  
 Wolf-Hirschhorn Syndrome      X-linked disorders      X-chromosome disorders  
 Intersex conditions      Genetics worksheet      DNA and Biotechnology      Mutations  
 Gene activity      Genetic engineering      Human Genome Project      Gene Therapy  
 Epigenetics      Genetic Information Disclosure      Genetic Information Non-Discrimination Act

Handout: “Common Resource Referrals for Pediatric Clients”

Video: “Genetics and Evolution” (0:24) (Films on Demand)

“Genetic Discoveries, Disorders and Mutations” (0:25) (Films on Demand)

“Against the Odds: Inspiring Stories of Disability – Erica Takes Control” (two siblings with Miller syndrome) (0:28) (Films on Demand)

“Against the Odds: Inspiring Stories of Disability – Beyond Thalidomide” (0:28) (Films on Demand)

**Receive sample case scenario on an infant with Down syndrome**

**CMQ #3 given**

**Date****Description**

Thursday  
6/17/21

**Text: Falvo, pp. 543-559 (Chapter 32) – Burn Injury and Other Conditions of the Skin**  
 Structure & Function of Skin      Burn Injury      Types of burns, severity, depth, location

Phases of Burn management      Burn rehabilitation and Wound Remodeling  
 Functional implications of burn injury      General skin conditions – dermatitis, allergic reactions, psoriasis, infections, acne, herpes zoster (shingles), skin cancers  
 Management of skin conditions      Functional implications      Vocational Implications

**Handout: Body Organization and Homeostasis**

Tissues, glands, organs, organ systems      Homeostasis

**Handout: The Integumentary System, Skin Problems**

Parasitic Skin Infections      Skin Diseases: Seborrheic dermatitis, Impetigo, Vitiligo  
 Decubitus ulcers, skin cancers      Xeroderma Pigmentosa      Phototoxicity

**Text: Falvo, pp. 397-417 (Chapter 24) – Structure, Function, and Common Conditions of Musculoskeletal System**

Skeletal system      Bones      Connective tissue      Joints      Muscular System  
 Fractures, dislocations, strains      Sprains      Bursitis      Tendonitis      Tenosynovitis      Carpal Tunnel  
 Osteoporosis      Osteoarthritis      Back pain      Disk Injuries      Back pain  
 Spondylolisthesis      Scoliosis      Osteomyelitis      Fibromyalgia      Medications  
 Hyperbaric Oxygen Therapy      Physical Therapy      Assistive Devices      Orthosis  
 Traction      Surgery      Functional Implications      Vocational Implications

**Text: Falvo, pp. 431-438 (Chapter 26) – Amputation**

Causes of amputation, levels, management      Surgery, Replantation      Prostheses  
 Complications      Phantom Pain      Functional implications      Vocational issues

**Handout: The Skeletal and Muscular Systems**

Osteoarthritis      Disk problems  
 Osteoporosis      Scoliosis      Muscle actions, tone      Building Muscle  
 Exercising      Tennis Elbow      Muscular Dystrophy      Fibromyalgia  
 Bursitis      Tendonitis

Video: “Against the Odds: Inspiring Stories of Disability – Lilly’s Legs” (a child with arthrogyposis) (0:29) (Films on Demand)

“More than Skin Deep: Skin Cancer in America” (0:57) (Films on Demand)

**Client Scenario #1** given

**Date****Description**

Tuesday  
6/22/21

**Text: Falvo, pp. 33-41 (Chapter 3) – Introduction to Structure and Function of Nervous System**

Structure & function of nervous system      Nerve cells      Central nervous system  
The brain      Spinal cord and peripheral nervous system

**Text: Falvo, pp. 111-120 (Chapter 8) – Multiple Sclerosis**

Role of myelin      Types of multiple sclerosis, manifestations, management  
Functional implications      Vocational issues

**Text: Falvo, pp. 121-134 (Chapter 9) – Neurodegenerative and Neuromuscular Conditions**

Parkinsonism, Secondary, Parkinson’s disease      Huntington’s chorea  
Alzheimer’s disease      Amyotrophic Lateral Sclerosis      Muscular Dystrophy  
Myasthenia Gravis      Management, Functional implications, Vocational issues

**Text: Falvo, pp. 135-143 (Chapter 10) – Post-Polio Syndrome and Other Conditions of Nervous System**

Poliomyelitis and Post-Polio Syndrome      Guillain-Barré Syndrome      Meningitis  
Encephalitis      Lyme Disease      Bell’s Palsy      Central Sleep Apnea      Narcolepsy  
Functional implications      Vocational issues

**Handout: Brain and Nervous System, Neurological Problems**

Brain functioning      Sleep Apnea      Sleep Deprivation      Video Games

Video: “The Multiple Sclerosis Revolution” (0:24) (Films on Demand)

“Parkinson’s Disease: An Update” (0:28) (Films on Demand)

“Living with Alzheimer’s” (0:17) (Films on Demand)

**Client Scenario #2**

Date	Description
Thursday 6/24/21	<p><b>Text: Falvo, pp. 43-69 (Chapter 4) – Traumatic Brain Injury</b></p> <p>Closed head injury      Open head injury      Glasgow coma scale &amp; other scales to measure severity      Categorization: Mild, moderate, severe brain injury</p> <p>Manifestations of traumatic brain injury      Post-traumatic epilepsy</p> <p>Post-traumatic hydrocephalus      Motor control, movement, coordination, balance, fatigue, visual-spatial reactions, perception, vision, hearing, touch, taste, smell, eating and swallowing, fatigue, bowel and bladder, communication, memory, attention and concentration, self-awareness, problem-solving, decision-making, information processing, judgment, personality changes      Management, Rehabilitation, Functional implications, vocational issues</p> <p><b>Text: Falvo, pp. 71--84 (Chapter 5) – Stroke</b></p> <p>Classification: Ischemic, Hemorrhagic      Manifestations      Left- versus right-sided damage</p> <p>Complications      Management      Functional implications      Vocational Issues</p> <p><b>Handout: Sports Concussions, Traumatic Brain Injury</b></p> <p><b>Text: Falvo, pp. 85-93 (Chapter 6) – Epilepsy and other Conditions of the Nervous System</b></p> <p>Epilepsy and seizures, manifestations, management, functional implications, activities</p> <p>Meningitis      Encephalitis      Sleep apnea      Narcolepsy</p> <p><b>Text: Falvo, pp. 95-110 (Chapter 7) – Traumatic Spinal Cord Injury</b></p> <p>Spinal cord      Manifestations of injury      Physical implications      Areas of spinal cord injury      Management      Complications (pressure sores, spasticity, contractures, osteoporosis, chronic pain, cardiovascular, autonomic dysreflexia, sweating, pneumonia, urinary and bowel problems)      Functional implications      Activities      Vocational issues</p> <p><b>Handout: Neurological Problems</b></p> <p>Brain Disorders      Headaches      Aphasia      Young adult strokes      Coma</p> <p>Video: “The Hidden Epidemic: Post-Concussion Syndrome” (0:39) (Films on Demand)</p> <p>          “The Toughest Break: Christopher Reeve on Spinal Cord Injury” (0:57) (Films on Demand)</p> <p>CMQ #4 given</p>

Date	Description
Tuesday 6/29/21	<p><b>Text: Falvo, pp. 145-162 (Chapter 11) – Developmental Conditions: Cerebral Palsy and Spina Bifida</b></p> <p>Cerebral Palsy, classification, causes, types, manifestations, complications, management, functional implications, activities, vocational issues    Spina Bifida, Types, manifestations, management, functional implications, activities, vocational issues</p> <p><b>Handout: Intelligence, Cerebral Palsy, Autism</b></p> <p><b>Text: Falvo, pp. 163-191 (Chapter 12) – Neurodevelopmental Disorders</b></p> <p>Developmental disability, Intellectual disability, causes, types, manifestations, interventions, functional implications, activities, vocational issues    Autism Spectrum Disorder, ADHD, Specific Learning Disabilities, Psychosocial issues, Activities, Vocational issues</p> <p>Video: “Against the Odds: Inspiring Stories of Disability – The World According to Gary” (cerebral palsy) (0:28) (Films on Demand)</p> <p>                  “Against the Odds: Inspiring Stories of Disability – Unlocking Autism” (0:27) (Films on Demand)</p> <p><b>Client Scenario #3 given</b></p>
Thursday 7/1/21	<p><b>Handout: The Reproductive System</b>    Circumcision    Puberty    Obesity &amp; Contraception    Contraception Myths    PMS    Dysmenorrhea</p> <p>Adenomyosis    PID    Menopause    Cervical Cancer, HPV Vaccine</p> <p>Prostate problems    Prostate Cancer</p> <p><b>Handout: Pregnancy</b></p> <p>GPAb Status    Hyperemesis Gravidarum    Pre-eclampsia    Abruption Placentae</p> <p>Placenta Previa    Erythroblastosis Fetalis    Premature births    Health risks and IVF    Endometriosis</p> <p><b>Handout: Human Sexuality</b></p> <p>Sexual Dysfunctions    Paraphilias    Rape/Sexual Assault    Infertility</p> <p>Retrograde Ejaculation    Sexual Orientation</p> <p><b>Handout: Sexually Transmitted Diseases</b></p> <p>Gonorrhea    Chlamydia    Syphilis    Trichomoniasis    Genital Herpes    Genital Warts    Gardasil    HIV/AIDS</p> <p>Video: “Life’s Greatest Miracle” (0:55) (Films on Demand)</p> <p>                  “Twice Born: Stories from the Special Delivery Unit, Part 2” (0:54) (Films on Demand)</p> <p>CMQ #5 given</p>

**Date****Description**

Tuesday

7/6/21

**Handout: Gender Identity and Reassignment**Gender Reassignment Surgery    David Reimer and Jennifer Boylan stories    Chaz Bono  
O'Donnabhain Lawsuit**Text: Falvo, pp. 193-214 (Chapter 13) – Diagnosis and Treatment of Psychiatric Conditions: Functional and Vocational Implications**History    DSM-5    Diagnostic Categories    Psychological testing  
Management    Medications    Psychiatric Rehabilitation, Clubhouse Model, Social  
Skills Training, Group, etc. Electro-Convulsive Therapy    Functional Implications  
Vocational Issues**Text: Falvo, pp. 215-235 (Chapter 14) – Functional Implications of Selected Psychiatric Diagnoses**

Anxiety Disorders, OCD, PTSD, Depressive Disorders, Bipolar Disorders

Schizophrenia

Somatic disorders    Factitious disorders    Dissociative disorders    Personality  
disorders    Delirium, dementia    Manifestations, management, functional  
implications, activities, vocational issues**Handout: Mental Health Disorders**    PTSD    A pill to forget    Psychotropic Drugs  
Staying Sane    Misery in the genes**Text: Falvo, pp. 237-262 (Chapter 15) – Substance-Related and Addictive Disorders**History, Prevalence    Substance-related and addictive disorders    Intoxication,  
Withdrawal, Addiction, Tolerance    Detoxification    Substance use    Physical  
effects of alcohol    Nervous system conditions (Korsakoff's, Wernicke's, Peripheral  
Neuropathy, Cardiovascular conditions, musculoskeletal conditions, GI conditions,  
Management)    Caffeine    Tobacco    Sedatives    Opioids    Stimulants  
Cannabis    Hallucinogens    Inhalants    Health implications, complications,  
identification, management, functional implications, vocational implications**Handout: Substance Disorders**    Effects on fetal development    "Tobacco: The  
Smoking Gun"    Genetics and Alcoholism    Pharmacogenetics    Addiction and  
Cognition

Drugs and neurotransmission    Legalizing marijuana    Medical marijuana

Video: "Becoming Me: The Gender Within" (0:40) (Films on Demand)

"Inside My Mind: Inside Mental Illness" (1:17) (Films on Demand)

"Real Life Teens: Drug Abuse Beyond Marijuana and Alcohol" (0:19) (Films on  
Demand)

"Fetal Abuse: The Effects of Drugs and Alcohol" (0:17) (Films on Demand)

**Client Scenario #4 given**

**Date****Description**

Thursday

7/8/21

**Text: Van der Kolk, pp. 7-170 (Chapters 1-7)**

- **Chapter 1 (pp. 7-21): Lessons from Vietnam Veterans**  
Trauma and the loss of self; Numbing; Reorganization of perception; Stuck in trauma; Diagnosing Post-Traumatic Stress; A new understanding
- **Chapter 2 (pp. 22-38): Revolutions in Understanding Mind and Brain**  
Trauma before dawn; Making sense of suffering; Inescapable shock; Addicted to trauma: Pain of pleasure and pleasure of pain; Soothing the brain; Triumph of pharmacology; Adaptation or disease?
- **Chapter 3 (pp. 39-47): Looking into the Brain: Neuroscience Revolution**  
Speechless horror; Shifting to one side of brain; Stuck in fight or flight
- **Chapter 4 (pp. 51-73): Running for your Life: Anatomy of Survival**  
Organized to survive; Brain from bottom to top; Mirroring each other: Interpersonal neurobiology; Identifying danger; Controlling the stress response; Brains on trauma; Dissociation and reliving; Depersonalization: Split off from self; Learning to live in the present
- **Chapter 5, pp. 74-88: Body-Brain Connections**  
Ivan Pavlov and instinct of purpose; Window into the nervous system; Neural love code; Safety and reciprocity; Three levels of safety; Fight or flight versus collapse; How we become human; Defend or relax?; New approaches to treatment
- **Chapter 6, pp. 89-104: Losing your Body, Losing Your Self**  
Losing your body; How do we know we're alive?; Self-sensing system; Self under threat; Agency: Owning your life; Alexithymia: No words for feelings; Depersonalization; Befriending the body; Connecting with yourself and others
- **Chapter 7, pp. 107-124: Getting to Same Wavelength: Attachment and Attunement**  
Men without mothers; Secure base; Dance of attunement; Becoming real; Living with parents you have; Becoming disorganized within; Long-term effects of disorganized attachment; Dissociation: Knowing and not knowing; Restoring synchrony
- **Chapter 8, pp. 125-137: Trapped in Relationships: The Cost of Abuse and Neglect**  
Terror and numbness; Torn map of the world; Learning to remember; Hating your home; Replaying the trauma
- **Chapter 9, pp. 138-150: What's Love Got to Do with It?**  
Taking a trauma history; Self-harm; Imprecision of psychiatric labels; Hidden epidemic; When problems are really solutions; Child abuse: Our nation's largest public health problem
- **Chapter 10, pp. 151-170: Developmental Trauma: Hidden Epidemic**  
Bad genes?; Nature versus nurture; National child traumatic stress network; Power of diagnosis; How relationships shape development; Long-term effects of incest; DSM-5: Smorgasbord of diagnoses; What difference would DTD make?

**Client Scenario #5 given**

**Date****Description**

Tuesday  
7/13/21

**Text: Van der Kolk, Chapter 11, pp. 173-185: Uncovering Secrets: Problem of Traumatic Memory**

- Flooded by sensations and images; Normal vs. traumatic memory; Uncovering secrets of trauma; Amnesia, dissociation, and reenactment; Origins of the talking cure; Traumatic memory on trial

**Chapter 12, pp. 186-201: Unbearable Heaviness of Remembering**

- New face of trauma; Trauma rediscovered; Science of repressed memory; Normal versus traumatic memory; Listening to survivors

**Chapter 13, pp. 205-231: Healing from Trauma: Owning Your Self**

- New focus for recovery; Limbic system therapy; Befriending the emotional brain: Dealing with hyperarousal; No mind without mindfulness; Relationships; Choosing a professional therapist; Communal rhythms and synchrony; Getting in touch, taking action; Integrating traumatic memories; Cognitive behavioral therapy; Desensitization; Drugs to safely access trauma?; What about medications?; Road of recovery is road of life

**Chapter 14, pp. 232-249: Language: Miracle and Tyranny**

- Unspeakable truth; Breaking the silence; Miracle of self-discovery; Knowing yourself or telling your story: Our dual awareness system; Body is the bridge; Writing to yourself; Art, music, and dance; Limits of language; Dealing with reality; Becoming some body

**Chapter 15, pp. 250-264: Letting Go of the Past: EMDR**

- EMDR: First exposures; Studying EMDR; Is EMDR exposure therapy?; Processing trauma with EMDR; Exploring sleep connection; Association and integration

**Chapter 16, pp. 265-278: Learning to Inhabit your Body: Yoga**

- Legacy of inescapable shock; Numbing within; Finding our way to yoga; Exploring yoga; Learning self-regulation; Getting to know me: Cultivating interoception

**Chapter 17, pp. 279-297: Putting Pieces Together: Self-Leadership**

- Desperate times require desperate measures; Mind is a mosaic; Self-leadership; Getting to know internal landscape; A life in parts; Meeting the managers; Putting out the flames; Burden of toxicity; Unlocking the past; Power of self-compassion: Rheumatoid arthritis; Liberating exiled child

**Chapter 18, pp. 298-310: Filling in Holes: Creating Structures**

- Restructuring inner maps; Revising the past; Rescripting your life: Daring to tell truth; Antidotes to painful memories

(continued on next page)

Date	Description
Tuesday 7/13/21 continued	<p><b>Text: Van der Kolk, Chapter 19, pp. 311-331: Applied Neuroscience: Rewiring the Fear-Driven Mind with Brain/ Computer Interface Technology</b></p> <ul style="list-style-type: none"> <li>• Mapping electrical circuits of brain: Seeing symphony of brain; Birth of neurofeedback; Homeless shelter to nursing station; Getting started in neurofeedback; Brainwave basics from slow to fast; Rate of brainwave firing relates to state of arousal; Helping the brain focus; How does trauma change brainwaves?; Neurofeedback and learning disabilities; Neurofeedback, PTSD, and addiction; Future of neurofeedback</li> </ul> <p><b>Van der Kolk, Chapter 20, pp. 332-348: Finding Your Voice: Communal Rhythms and Theater</b></p> <ul style="list-style-type: none"> <li>• Theater of war; Keeping together in time; Treating trauma through theater; Making it safe to engage; Urban Improv; The possibility of project; Sentenced to Shakespeare; Therapy and theater</li> </ul> <p><b>Van der Kolk, Epilogue, pp. 349-358: Choices to Be Made</b></p> <p><b>Receive Mid-term exam</b></p>
Thursday 7/15/21	<p><b>Text: Falvo, pp. 263-279 (Chapter 16) – Conditions of the Eye and Blindness</b>            The eye    Visual conditions    Nystagmus    Cataracts    Injuries    Glaucoma            Retinopathy    Retinal detachment    Retinitis Pigmentosa    Macular Degeneration            Identification, management, functional implications, vocational issues</p> <p><b>Text: Falvo, pp. 281-307 (Chapter 17) – Hearing Loss and Deafness</b>            Auditory and vestibular systems    Conditions of vestibular system (vertigo, neuritis, Meniere’s disease)    Hearing loss and deafness (congenital, acquired)    Conditions of auditory system (perforated tympanic membrane, otitis media, mastoiditis, otosclerosis, tinnitus, labyrinthitis, presbycusis)    Hearing testing, hearing aids, assistive devices, cochlear implant    Functional implications, deaf culture</p> <p><b>Deafness and Cochlear Implants</b></p> <p>Video: “The Living Body: Eyes and Ears” (0:26) (Films on Demand)            “Overcoming Problems with Speech, Hearing, and Vision” (0:40) (Films on Demand)            “Glaucoma” (0:27) (Films on Demand)            “Cochlear Implants: Bringing Back the Joy of Sound” (0:24) (Films on Demand)            “Technology and Deaf Culture” (0:13) (Films on Demand)</p> <p><b>Client Scenario #6</b></p>

**Date****Description**

Tuesday  
7/20/21

**Text: Falvo, pp. 309-326 (Chapter 18) – Sickle Cell Disease, Hemophilia, and Conditions of the Blood**

Structure and function of blood    Sickle cell disease, crisis, complications    Hemophilia, complications    Anemia    Thalassemias    Polycythemia    Agranulocytosis  
Purpura    Transfusions    Bone Marrow transplant    Management  
Functional implications, vocational issues

**Text: Falvo, pp. 447-473 (Chapter 28) – Cardiovascular Conditions**

Structure and function of cardiovascular system    Atherosclerosis  
Hypertension  
Aneurysm    Coronary artery disease    Angina pectoris    Myocardial infarction  
Heart failure    Arrhythmias    Valvular conditions    Congenital heart conditions  
Inflammatory conditions    Vascular conditions    Transplants  
Management, rehabilitation, functional implications, activities, vocational issues

**Handout: Circulatory System, Blood Types, Blood Transfusions, and Sickle Cell Anemia**

Pain perception in sickle cell disease

**Handout: The Cardiovascular System**    CPR    Cholesterol    Women and heart disease    Commotio Cordis    Diet and heart    Eligibility criteria for heart transplant

Video: “The Living Body: Two Hearts” (0:27) (Films on Demand)

“The Living Body: Circulatory System” (0:27) (Films on Demand)

“Sickle Cell Anemia” (0:29) (Films on Demand)

“The Human Body: How it Works – The Circulatory System” (0:22) (Films on Demand)

**Mid-term exam is due today**

**CMQ #6 given**

**Date****Description**

Thursday  
7/22/21

**Text: Falvo, pp. 327-331 (Chapter 19) – Introduction to Immune System**

Structure and function of immune system      Types of immunity      Organs of immune system  
Defense against microorganisms      Autoimmune responses

**Text: Falvo, pp. 333-343 (Chapter 20) – HIV Infection**

HIV infections      Phases      Transmission      Prevention      Identification  
Manifestations & complications      Management      Functional implications

**Text: Falvo, pp. 419-430 (Chapter 25) – Rheumatoid Arthritis, Lupus, and other Rheumatic Conditions**

Rheumatoid arthritis      Systemic lupus erythematosus      Gout      Ankylosing Spondylitis  
Management      Functional implications      Activities      Vocational implications

**Handout: The Immunological System**

Infectious diseases      Pathogens (bacteria, viruses, protozoans, fungi, parasites, prions)  
Colds      Lupus      Leprosy/Hansen’s disease      Rheumatoid arthritis  
HIV/AIDS  
Smoke exposure and allergies

Video: “The Living Body: Internal Defenses” (0:28) (Films on Demand)  
“Positive Youth: The Face of HIV” (0:42) (Films on Demand)

CMQ #7 given

**Date****Description**

Tuesday  
7/27/21

**Text: Falvo, pp. 475-499 (Chapter 29) – COPD, Asthma, and Other Conditions of the Pulmonary System**  
 Structure and function of pulmonary system                      Chronic obstructive pulmonary disease  
 Chronic bronchitis                      Emphysema                      Smoking                      Asthma  
 Tuberculosis  
 Cystic Fibrosis                      Occupational lung conditions                      Pharyngitis  
 Laryngitis                      Pneumonia                      Bronchiectasis                      Obstructive sleep apnea  
 Chest injuries                      Management, functional implications, activities, vocational implications

**Handout: The Respiratory System**                      Cystic Fibrosis

**Text: Falvo, pp. 501-520 (Chapter 30) – Chronic Kidney Disease and Other Conditions of the Urinary System**  
 Structure and function of kidneys and urinary tract                      Urinary tract infections  
 Kidney stones                      Hydronephrosis                      Glomerulonephritis                      Polycystic kidney disease  
 Renal failure (acute, chronic)                      Hemodialysis, peritoneal dialysis, transplant  
 Functional implications, activities, vocational implications

**Handout: The Urinary System**                      Drinking water after exercising                      Transplant drugs

Video: “No Ordinary Lives: Living with Cystic Fibrosis” (0:28) (Films on Demand)  
 “The Living Body: Urinary System (Water)” (0:27) (Films on Demand)  
 “End Stage Renal Disease and Hemodialysis” (0:17) (Films on Demand)

**MOVIE ASSIGNMENT PAPER IS DUE TODAY**

**Client Scenario: Extra #1 (optional assignment) given**

Date	Description
Thursday 7/29/21	<p><b>Text: Falvo, pp. 521-541 (Chapter 31) – Conditions of Gastrointestinal System</b></p> <p>Structure and function of GI system      Conditions of mouth, esophagus, stomach, intestine, colon, pancreas,      Gall bladder, liver, hiatal hernia, GERD, gastritis, ulcers, hernia, bowel diseases, Crohn’s disease, ulcerative colitis, diverticulitis, diverticulosis, irritable bowel syndrome, colon cancer, pancreatitis, pancreatic cancer, cholelithiasis and cholecystitis, hepatitis, cirrhosis)      Management, functional implications, activities, vocational implications</p> <p><b>Handout: The Digestive System</b>      Appetite      Food &amp; health      Diets      Diet sodas            Food Safety</p> <p><b>Text: Falvo, pp. 373-395 (Chapter 23) – Diabetes and Other Conditions of the Endocrine System</b></p> <p>Structure and function of endocrine system      Hormones      Diabetes mellitus, types 1, 2, gestational      Identification, management, complications, functional implications, activities, vocational issues      Hyperthyroidism, hypothyroidism      Cushing’s syndrome      Addison’s disease      Diabetes insipidus      Management, complications, functional implications, activities, vocational issues</p> <p><b>Handout: The Endocrine System</b>      Stress/stress relief, stress and memory            Melatonin</p> <p>Video: “The Living Body: Messengers” (Hormones) (0:26) (Films on Demand)            “The Living Body: Digestion – Eating to live” (0:27) (Films on Demand)            “The Science of Stress” (0:23) (Films on Demand)</p> <p>CMQ #8 given</p>
Tuesday 8/3/21	<p><b>Text: Falvo, pp. 439-446 (Chapter 27) – Chronic Pain</b></p> <p>Experience of pain      Classification: Acute, chronic, nociceptive, and neuropathic pain            Management techniques      Functional implications, activities, vocational implications</p> <p><b>Handout: Pain</b></p> <p>Venting frustration reduces pain      Chronic Pain Management      Social Worker’s Role            Using Pain Meds Safely      Alternative Treatment for Pain</p> <p>Video: “The Anatomy of Pain” (0:49) (Films on Demand)            “Current Trends in Pain Management” (0:40) (Films on Demand)</p> <p>CMQ #9 given</p>

Date	Description
Thursday 8/5/21	<p><b>Text: Falvo, pp. 345-354 (Chapter 21), Introduction to Cancers: General Methods of Identification and Management</b></p> <p>The cell                      Development of cancer                      Causes                      Types            Staging/grading                      Diagnostic procedures                      Treatment (surgery, chemotherapy, radiation therapy, immunotherapy, hormone therapy, monoclonal antibodies, bone marrow and stem cell transplants)</p> <p><b>Text: Falvo, pp. 355-371 (Chapter 22), Specific Cancers and Their Management</b></p> <p>Cancer of mouth, esophagus, stomach, intestines, liver, larynx, lung, bone, urinary system, brain, spinal cord, lymphomas, myeloma, leukemias, breast, gynecological, prostate, testicular, skin            Functional implications, activities, vocational issues</p> <p><b>Handout: Cancer</b></p> <p>Breast cancer                      Pancreatic cancer                      Brain Tumor                      Leukemia                      Chemo brain            Cost of CA drugs                      Survivors of childhood cancer                      Target: Cancer series of articles            Angelina Jolie                      Perception of cancer as a death sentence</p> <p>Video: "What is Cancer?" (0:60)</p> <p><b>INDIVIDUAL INTERVIEW PAPER IS DUE TODAY</b></p> <p><b>Client Scenario Extra #2 (optional assignment) given</b></p>
Tuesday 8/10/21	<p><b>Handout: Stem Cells</b></p> <p>Stem cells from human skin, fat, cord blood                      More patients seek stem cell treatment                      The Quest Resumes                      The science of stem cells                      Blindness,            Parkinson's disease cures                      The Tiniest Transplant                      Donating fetal tissue after abortion</p> <p>Video: "Fetal Fix" (0:52)            "Bionic Body" (Christopher Reeve and Stem Cells) (0:56) (Films on Demand)</p> <p><b>RECEIVE THE TAKE-HOME FINAL EXAM</b></p>

**Date****Description**

Thursday 8/12/21	<p><b>Text: Falvo, pp. 573-579 (Chapter 34), Aging with Disability</b>  Aging with chronic conditions                      Natural changes in body systems with aging  Prevention of age-related complications</p> <p><b>Handout: Aging</b>      Girl who does not age      How to live 100 years      Alzheimer’s disease/dementia</p> <p><b>Text: Falvo, pp. 561-571 (Chapter 33) – Assistive Technology</b>  Defining assistive technology                      Types and uses of assistive technology  Supports and barriers to using assistive technology      Psychosocial issues                      The future</p> <p>Video: “The Living Body: Aging” (0:27) (Films on Demand)</p> <p><b>TAKE-HOME FINAL EXAM IS DUE</b></p>
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**MOVIE ASSIGNMENT GRADING RUBRIC**

	<i>Possible Points</i>	<i>Earned Points</i>
<b>Summary of the movie does not exceed 3 pages in length</b>	<b>10</b>	
<b>Summary of movie is clear and understandable</b>	<b>10</b>	
<b>Summary of movie focuses on the person’s biological condition and on its effects on human functioning</b>	<b>20</b>	
<b>Summary of movie is not a scene-by-scene retelling of the story; it is a coherent narrative</b>	<b>10</b>	
<b>Explanation of whether the condition is viewed by the people in the story as a chronic illness or as a disability, including explanation of how those terms differ</b>	<b>5</b>	
<b>Clear analysis of the person’s condition, using all possible relevant course material, being sure to define all terms used</b>	<b>25</b>	
<b>Explanation of how social worker could have assisted people in the movie</b>	<b>5</b>	
<b>Explanation of possible ethical dilemmas in the movie, referencing the Social Work Code of Ethics</b>	<b>5</b>	
<b>Movie citations are done correctly with APA, both in-text citations for every paragraph in which movie is discussed and reference page entries</b>	<b>10</b>	
<b>Total points earned</b>	<b>100</b>	

## INDIVIDUAL INTERVIEW PROJECT ASSIGNMENT GRADING RUBRIC

	<i>Possible Points</i>	<i>Earned Points</i>
Paper is 8-10 pages in length (not counting face page or reference page)	<b>5</b>	
Demographics of person and that you are using a false name	<b>3</b>	
Person's story is told in a coherent, interesting, creative way	<b>12</b>	
Course material is used to explain person's story in a comprehensive way	<b>13</b>	
Every term used is accompanied by a biological explanation of what that term means	<b>5</b>	
Story is told in a body systems perspective (what systems are being affected and how they are being affected)	<b>5</b>	
Discussion of medical/psychological care received and whether it has helped	<b>5</b>	
Discussion of any use of alternative treatment approaches that have been used, or statement that they have not been used	<b>2</b>	
Explanation of condition's effects on daily life and on ability to function	<b>5</b>	
Explanation of how condition has affected family	<b>5</b>	
Explanation of kinds of adaptations used by person	<b>5</b>	
Explanation of person's perception of their condition	<b>5</b>	
Discussion of Falvo & Holland's definitions of chronic illness vs. disability and explanation of which the person identifies as describing their situation	<b>5</b>	
Discussion of person's view of the future with this condition	<b>5</b>	
Citations are correctly done, including personal communication citations in every paragraph in which interview is presented; no citations were left out; if the wording was taken directly from a source, quotation marks are correctly used to indicate that paraphrasing was not used	<b>10</b>	
Paper's format is correct based on APA – margins, running head, page numbers, double spacing (and no extra space between paragraphs), reference page and citations, no contractions, numbers 1-9 spelled out in words, correct font, at least 5 sentences in every paragraph	<b>5</b>	
No reference material was used that was not included in course reading material	<b>5</b>	
<b>Total points earned</b>	<b>100</b>	

**X. Bibliography of Additional Resources (Note: This is NOT done in APA style. Do NOT use this format in your papers!)**

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## APA CHECKLIST

The following checklist is designed to serve as a guide for you when writing papers in the Social Work Department. Use of this guide will support your success when using APA and help to prevent plagiarism. All instructors in the Social Work Department will use this checklist as a guide when grading your papers for APA policy adherence, so it is advisable that you become familiar with and apply these rules to all papers.

### A. Entire document MUST HAVE

- Times New Roman Font (preferred by the professor)
- 12 font size
- 1 inch margins on all four sides
- Double spacing after periods at the end of a sentence (except in the “Reference” page)
- Double spacing *between lines* in paragraphs (remove double spacing between paragraphs)
- Numbers 1-9 spelled out (e.g. “one”, “five”, “seven”)
- Numbers 10 and above not written out (except at the beginning of a sentence)
- Introduction of acronyms (e.g. “Supplemental Security Income (SSI)”, “SSI” may be used alone thereafter)
- Paragraphs versus bullets (unless approved by professor)
- No use of “I” (unless approved by professor due to nature of the assignment)
- No contractions (won’t, can’t, don’t), lbs, %, \$ (percent signs may be used directly after numbers)
- Complete sentences
- Indented paragraphs (tab once from margin)
- Introduction, body and conclusion (unless otherwise noted by professor)
- Cover page, abstract page, reference page (unless otherwise advised by professor)

### B. Cover Page

- Page # (always starts with “1” at the top right)
- Title of work (in bold and followed by an extra space), your name, Department of Social Work and the name of the university, professor’s name, due date of assignment, all centered and not in bold. This should also be double spaced.
- Title should be no more than 12 words, first letters of words are capitalized except “and”, etc.

### C. Abstract Page

- This is page 2 (upper right corner)
- The word “Abstract” is centered, not bold at the top of the paper
- The Abstract is only 4-5 sentences (max 150-250 words)
- There is no indentation at the beginning of this paragraph
- Must be double spaced

### D. START OF YOUR BODY

- Continue page number on every page in upper right corner
- Write the title at the very top. This should be the same one used on the cover page above your name
- The title is centered and not in bold
- All paragraphs must be indented
- Paragraphs have a minimum of 5 sentences
- Using Level Headings where appropriate (refer to your professor on when to use; see APA manual for all levels of headings: 1-5)

### E. Reference Page

- The word “Reference” (or “References” if more than one) is centered and not bold
- The references must be alphabetized (by last name of author of work as listed on the work. DO NOT reorganize the authors in alphabetical order from the source).

- If there is more than one citation with the same author and year, put them in alphabetical order by title and make them 2021a, 2021b, 2021c, etc., as needed.
- Double space references
- Remove extra space between references
- Only single spacing after punctuation
- Remember that personal communication in-text citations are not listed on the reference page
- Remove hyperlinks from websites (a line should not appear under websites in your reference page)
- If the reference is long and continues on the next line, then you must indent the second line (this is called a “hanging indent”)
- All references MUST have an in-text citation to match (except in personal communication; only in-text citations are used).
- If the reference has an edition, it goes in parentheses and is not italicized. For example, Turner, F. J. (2017). *Social work treatment: Interlocking theoretical approaches* (6<sup>th</sup> ed.). Oxford University Press.

Following are explicit examples that can serve as guides for you when writing your papers.

- Boston University School of Social Work:  
<http://www.bu.edu/ssw/files/2010/10/BUSSW-style-guide-6th-ed-April-13.pdf>
- Sample APA Paper Owl Purdue:  
[http://owl.english.purdue.edu/media/pdf/20090212013008\\_560.pdf](http://owl.english.purdue.edu/media/pdf/20090212013008_560.pdf)
- Son of Citation Machine Citing Support:  
<http://citationmachine.net/index2.php?reqstyleid=2&newstyle=2&stylebox=2>

### EXAMPLES OF APA ERRORS

- ❖ Missing comma after name and before year
  - Incorrect: (Dobson & Pewter 2013)
  - Correct: (Dobson & Pewter, 2013)
- ❖ Missing parenthesis
  - Incorrect: Many children in America are diagnosed with ADHD Dobson & Pewter, 2013.
  - Correct: Many children in America are diagnosed with ADHD (Dobson & Pewter, 2013).
- ❖ Using *and* instead of & in a citation
  - Incorrect (Dobson and Pewter, 2013)
  - Correct: (Dobson & Pewter, 2013)
- ❖ Using “pp.” instead of “p.” to denote page.
  - Incorrect: “Many children in America are diagnosed with ADHD” (Dobson & Pewter, 2013, pp. 5).
  - Correct: “Many children in America are diagnosed with ADHD” (Dobson & Pewter, 2013, p. 5).
- ❖ Missing punctuation at the end of sentences when citing.
  - Incorrect: Many children in America are diagnosed with ADHD. (Dobson & Pewter, 2013)
  - Correct: Many children in America are diagnosed with ADHD (Dobson & Pewter, 2013).

### Correct Citation Example:

*In-Text:* (Dobson & Pewter, 2013)

Reference Page: Dobson, J. H. & Pewter, W. P. (2013). Understanding writing for bachelor social work students. *Journal of American Health*, 4, 24-29.

- ❖ Using quotation marks without page number/paragraph information.
  - Incorrect: “Many children in America are diagnosed with ADHD” (Dobson & Pewter, 2013).
  - Correct: “Many children in America are diagnosed with ADHD” (Dobson & Pewter, 2013, p. 5).
  
- ❖ Example of how to cite a class handout: (Be sure to use the hanging indent on your paper)
  - Rappaport, C. (2021). *The muscular system*. [Class handout]. SOWK 3305: Biological Foundations of Social Work Practice. Social Work Department, Texas A&M University-Central Texas: Killeen, TX.
  
- ❖ Example of how to cite a movie: (Be sure to use the hanging indent on your paper)
  - Cassavetes, N. (Director). (2002). *John Q*. [Motion picture]. New Line Cinema, Burg/Koules Productions, & Evolution Entertainment.
  
  - To obtain information for a movie citation, look up the movie on the internet and select the IMDb listing. Get the name of the director and the year at the beginning of the entry. Click on Full Cast and Crew, then on Company Credits to list the production companies (ignore the list of distributors, but be sure to list all of the production companies).

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### Checklist to avoid some common errors using APA in papers

Dr. Claudia Rappaport

\_\_\_\_\_ The title on the front page is repeated on the first page of the text of the paper, and both titles are exactly the same wording.

\_\_\_\_\_ Entire paper has to be in Times New Roman 12 font. You can't change font in title, on the front page, etc., to be decorative

\_\_\_\_\_ The front page can ONLY contain the page number, the title of the paper, your name, Department of Social Work and the name of the university, professor's name, and due date of assignment. Nothing else!!

\_\_\_\_\_ Every paragraph has at least five sentences.

\_\_\_\_\_ No contractions (isn't) are used anywhere in the paper unless quoting someone.

\_\_\_\_\_ There is no extra line space between paragraphs (to achieve this, go to page layout, then go to spacing and make sure that the spacing is set to 0").

\_\_\_\_\_ All paraphrasing from another source has an in-text citation, and the format would be like this: (Rappaport, 2021). If exact words are used from the source, then you also use quote marks and the page number is included in the in-text citation (the format would be: Rappaport, 2021, p. 2). If you are using more than one Rappaport handout for citations, you will have to use Rappaport 2021a, Rappaport 2021b, etc., and the letters will be assigned based on the titles of the handouts being in alphabetical order on your reference page.

\_\_\_\_\_ When writing a paper about an interview of a person, you use personal communication citations within the text of the paper. After every paragraph in which you summarize information given in the interview, your in-text citation will appear like this: (C. Rappaport, personal communication, August 1, 2021). THERE IS NO REFERENCE PAGE ENTRY FOR PERSONAL COMMUNICATION CITATIONS.

### USES OF COMMAS AND OTHER COMMON PUNCTUATION/GRAMMAR ERRORS

The following are some common uses of commas:

**Putting two sentences together, joined by *and*, *but*, or another linking word. Both parts have to have both a subject and a verb, or you don't need a comma.**

- Example: Martha went to the Laundromat, and she discovered that she forgot her money at home.
- Does NOT need a comma: Martha went to the Laundromat and discovered that she forgot her money at home.
  
- **Note: Two sentences can also be joined together by a semicolon without a connecting word.**
- Example: Martha went to the Laundromat; she discovered that she forgot her money at home.
- Example: I thought this was going to be complicated, but I was surprised; they listened and paid attention.
  
- **Note: Two sentences can also be joined together by a semicolon and a connecting word such as *however*, followed by a comma.**
- Example: Martha went to the Laundromat; however, she discovered that she forgot her money at home and had to make a return trip.

**Writing a list of objects, when no item of the list requires a comma within the item. If one item requires a comma, then the items have to be separated with semicolons instead of commas.**

- Example: Martha went to the store and bought apples, plums, oranges, and nectarines to make a fruit salad.
- Need to use semicolons instead: Martha went to the store and bought golden, delicious apples; purple, juicy plums; plump, navel oranges; and nectarines to make a fruit salad.

**Note: The above example with semicolons also illustrates another use of commas: When you are using more than one adjective to describe a noun (such as golden, delicious apples), the two adjectives need to be separated with a comma.**

**Separating the name of a city and the state in which it is located.**

- Example: I was born in San Antonio, Texas, in the year 1950.

**Separating a person's name and their relationship to another person, the name of a book and its author, etc.**

- Example: Her father, Burton Rappaport, was born in New York City in 1921.
- Example: Burton Rappaport, the father of Claudia Rappaport, was born in New York City in 1921.
- Example: Harper Lee's novel, *To Kill a Mockingbird*, is required reading in many schools.

**Separating a prepositional phrase at the beginning of a sentence from the remainder of the sentence.**

- Example: In case of a fire, you need to move quickly to the nearest exit.
  - **Note another grammar rule: Do not put the adverb in between *to* and *move* (i.e., do not say "you need to quickly move to the nearest exit"). Doing this is referred to as a split infinitive. Just remember Shakespeare: It is "To be or not to be," not "To be or to not be."**
- Example: From one social worker to another, you need to be on the lookout for signs of social work burnout.
- Example: During the depression of the 1930's, food was scarce and unemployment rates were high.
  - Question: Why do you not need a comma after scarce?
  
- Example: If you are not ready to calm down, I want you to go to your bedroom and think about why your behavior has not been appropriate.
- Example: Because she got paid a lot less this week, she was not able to give the landlord her rent.

**Note: If the prepositional phrase is in the middle of the sentence, it does not require commas.**

- Example: The hot air in the classroom made it very difficult to study.
- Example: She couldn't give the landlord her rent because she got paid a lot less this week.

**After using a single word to catch your attention at the beginning of a sentence; most commonly this will be done in conversation, not in formal writing.**

- Example: “Well,” she said, “I guess I need to go ahead and start fixing dinner.”
  - **Note another rule of grammar: Punctuation marks (commas, periods, exclamation points, question marks) always go INSIDE the quotation marks.**
- Example: Gosh, it is really hot today.
- Example: Hello, my name is Dr. Rappaport.
- Example: No, you can’t have a cookie right now.
- Example: Yes, I heard what you said.
- Example: Unfortunately, one of the social work professors has decided to leave Tarleton.
- Example: However, you need to remember that I expect you to study hard for my tests.
- Example: John, did you have a question you wanted to ask?

**To add additional details to clarify a sentence; if you removed those additional details, you would still have a complete sentence.**

- Example: When I started college, something I had always dreamed of doing, I decided to major in social work.
- You could remove the phrase in the middle and still have a complete sentence: When I started college, I decided to major in social work. Why do you still need a comma there?

**When getting ready to quote a sentence – but only if you are really quoting the person’s exact words, not paraphrasing.**

- Example: I wasn’t saying, “How could you?” Rather, I wanted to know, “What were you thinking when you did that?”
- Example: Dr. Rappaport always said, “Be careful of using Spell Check as your only type of proof-reading on papers.”
- Example of NOT using quotation marks: Dr. Rappaport always told us to be careful of using Spell Check as our only type of proof-reading on papers.

**Before adding a phrase starting with *which* or *whose* to add more details to the sentence.**

- Example: A major strength of the agency is the fact that each social worker uses a different approach, which allows them to complement each other’s skills.
- Example: He is a millionaire now, which only goes to show how much a person can accomplish if he really sets his mind to it.
- Example: The crowd, whose patience had worn thin, was threatening to tear down the sign and instigate a riot.
- Example: The building, whose architect had won a national award, was one of the most popular tourist attractions in the city.

**To separate out parenthetical words from the rest of the sentence.**

- Example: Expensive items, however, will not be included in the auction.
- Example: Expensive items, of course, will not be included in the auction.
- Example: Expensive items, unfortunately, will not be included in the auction.
- Example: Expensive items, therefore, will not be included in the auction.

**Before a word like *also* or *too* or *as well* at the end of a sentence.**

- Example: We should plan to have another fundraiser before the end of the month, also.
- Example: He’s quite good looking, too.

**Do not use a comma if the additional words identify the subject word and are not additional information.**

- The company rewards employees who work hard. (Do not put a comma if what you mean is that the company **ONLY** rewards employees who work hard. If **ALL** employees work hard and get rewarded, then put a comma: The company rewards its employees, who all work hard.)

**You usually do NOT use a comma before “because.”**

- Example: She was deeply ashamed because she was the only woman who failed the exam.

**You often do not need to use a comma after an introductory phrase that designates when something occurred.**

- Example: In about five minutes we are leaving for school.
- Example: In 2000 Dr. Rappaport came to teach at TAMUCT.

## **OTHER COMMON WRITING ERRORS**

**Capitalizing words that do not need capitals**

- Capital letters are used for proper nouns, people’s names, names of cities and states, etc. They are often used when they are not needed. For example:
  - I am a student in the Social Work Department at Tarleton State University-Central Texas. It is correct to capitalize social work here because it is in the name of a Department.
  - I want to be a social worker. You do not capitalize it here because it is not a proper noun.
  - My biggest supporter is Mother. You need to capitalize mother here because you are using it as a person’s name.
  - I live with my mother and my father. You do not capitalize them here because you are not using them as names.
  - I graduated from Alamo Heights High School. You capitalize high school here because it is the name of a specific high school.
  - I graduated from high school. You do not capitalize it here because it is not a proper noun. **Also note that you need the word “from”. I graduated high school is slang without the word from.**

**Confusing different forms of words that sound the same.**

- **Where:** I asked him where he was born.
- **Were:** There were 25 questions on the test.
- **Wear:** I asked him what he was going to wear to the interview.
  
- **Their:** These parents really love their children.
- **There:** There are too many students in this class.
- **They’re:** This is the contraction for “they are.” Note: You usually do not use contractions in formal written work.

**Two different forms for possessives:**

- **This is my parent’s house.** Use the apostrophe before the s only if it is **ONE** parent’s house. **Both parents do not live in the house, or you only have one parent.**
- **This is my parents’ house.** Use the apostrophe after the s if it is **BOTH** parents’ house. **Both parents live in the house.**
- **Parents are very important people.** You do not use any apostrophe because you are simply making a noun plural. **Never use an apostrophe unless you are making a noun a possessive word (meaning it belongs to someone).**