TEXAS A&M UNIVERSITY-CENTRAL TEXAS SOCIAL WORK DEPARTMENT SOWK 3305 110: Biological Foundations of Social Work Practice		
Mondays and Wednesdays, 6:00 to 7:15 PM, Room Warrior Hall		
Semester:	Spring 2022	
Instructor's Name:	Claudia Rappaport, PhD, ACSW, MSSW	
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Office Phone:	(254) 519-5432	
E-Mail:	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. Emails on Saturday are answered late because I volunteer at	
	hospice all day. PLEASE USE THIS EMAIL ADDRESS RATHER THAN	
	EMAILING ME THROUGH CANVAS.	

OFFICE HOURS: Mondays and Wednesdays 3:30 to 5:00 PM Tuesdays and Thursdays 5:00 to 7:00 PM

To get an advising appointment call Lauren at 254-519-5406

A note about the COVID-19 pandemic: For the most recent campus information about COViD-19, see the Texas A&M University-Central Texas Fall 2021 Return to Campus Plan: (<u>https://www.tamuct.edu/covid19/</u>). See the current protocols described later in this syllabus.

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.)

<u>*Teaching Method:*</u> This course meets face-to-face, and the primary teaching approaches are collaborative and active learning. Material in the course will be presented through interactive class discussions on readings and on additional material presented by the professor in handouts, class activities, videotapes, and written psychosocial assessments.

<u>Grading</u>: As much as possible, Dr. Rappaport tries to return graded assignments the class after they were due. For longer assignments it may be the second class after they were due. Two times during the semester (after the mid-term exam and before the final exam) Dr. Rappaport will complete grade sheets to show each student where their course grade stands at that time. In the interim, grading can be seen in Gradebook on Canvas, though that will not also reflect the grades for attendance and for class participation, so your final grade will be different than what the Gradebook reflects.

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:

A. Objectives (By the completion of the course, it is expected that you will be able to)	B. CSWE- Related Practice Behaviors (This is the behavior that objective supports)	C. Course Assignments (<i>The assignment is used to assess your ability to fulfill the objective related to the practice behavior</i>)
 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

Required Texts: Falvo, Donna R., and Holland, Beverley E. (2018). Medical and psychosocial aspects of chronic illness and disability (6th ed.). 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. 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* (17th ed.). Merck Research Laboratories.

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

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

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

Tsiaras, Alexander (2004). The Architecture and Design of Man and Woman. 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 $\div 100 = \text{final grade}$)

Final Class Grades are based on the following:

- A: 90 to 100 (9,000 to 10,000 points) C: 79 to 70 (7,900 to 7,000 points)
- B: 89 to 80 (8,900 to 8,000 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 ($88 \times 15 = 1,320$).

Final Class Grades are based on the following:

- A: 90 to 100 (9,000 to 10,000 points) B: 89 to 80 (8,90
- C: 79 to 70 (7,900 to 7,000 points)
- F: 59 or less (5,900 points or less)

- B: 89 to 80 (8,900 to 8,000 points)
- D: 69 to 60 (6,900 to 6,000 points)

C. Course Assignments

The following activities will be completed during the semester.

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

A number of the class periods will include a quiz and/or case scenario to help students solidify their understanding of the concepts presented in the course material and to learn how to apply them. The days on which quizzes will be given will not be announced ahead of time. Some quizzes will be given as "pop" quizzes to test whether students did the day's reading – those will be given at the beginning of the class and will ask 2-3 questions from the assignment. The full-length quizzes will be given at the end of class as a take-home quiz, and it is due at the beginning of the next regularly scheduled class period. A student who misses class or who arrives late will not be allowed to make up a "pop" quiz and will receive a zero; the student will be allowed to complete a make-up quiz on the other assignments; however, it is the student's responsibility to receive the quiz from Dr. Rappaport and to turn it in by the class period in which it is due (typically the next scheduled class period). If the student does not do this, then a make-up quiz will not be accepted. DO NOT ASK FOR A COPY OF THE QUIZ AFTER STUDENTS HAVE ALREADY TURNED IT IN!

At the end of the course, the student's average numerical grade on all quizzes (including any zeros) will represent 15% 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: Take-home 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. <u>Case scenario assignments (20% of final grade)</u>

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. <u>Movie Assignment (15% of final grade)</u>

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. <u>Individual Interview Paper (15% of final grade)</u>

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 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. 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. <u>Mid-Term and Final Exams: 20% of final grade total (10% each)</u>

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. <u>Class Attendance (5% of final grade)</u>

Students are expected to be present for every scheduled class session – and when I say present, I mean being in class the entire period, not using your telephone during class, not sleeping in class, not working on something for another class while you are in my class - in other words, being HERE and being ENGAGED IN LEARNING. If any of those things end up not being true for you in a given day, then you will be marked absent. 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 or a funeral of a family member is an excused absence; the professor also allows one day's absence if a deployed significant other returns home. However, routine doctor's appointments are expected to be scheduled for days and times when you do NOT have class, unless you can verify that the appointment was for a medical emergency and not for a routine visit. Any student who repeatedly asks for excused absences for doctor's appointments can be told that those will not be able to be excused. 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 will not permit you to attend this class on a predictable basis, you should not be enrolled in the class. Students must be present when class begins and are expected to remain until class is dismissed; students are not allowed to arrive late or leave early. (See the Code of Conduct for further details.)

The following shows the degree to which unexcused absences will impact your attendance grade.

Number of Unexcused Absences	Attendance Grade
1	A-

2	В
3	В-
4	С
5	D
6 or more	F
Coming to class late twice	counts as one absence

7. <u>Class Participation (5% of grade)</u>

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.

While we cannot require that students wear a mask to class, each student who does wear a face covering will be given an extra participation point for that class session.

VI. CODE OF CONDUCT FOR CLASSROOMS

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

- 1. Students are not permitted to enter class more than ten (10) minutes late. Exceptions will be made with *prior discussion and approval by the professor only*.
- 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. AT THE BEGINNING OF EACH CLASS, ALL TELEPHONES MUST BE PUT AWAY FOR THE DURATION OF THE CLASS. THIS INCLUDES NOT PUTTING IT ON THE STUDENT'S DESK WHERE IT IS VISIBLE. IF DR. RAPPAPORT SEES A TELEPHONE ON A DESK OR SEES A STUDENT TRY TO ANSWER ONE, SHE RESERVES THE RIGHT TO CONFISCATE IT FOR THE REMAINDER OF THE CLASS.

IN ADDITION, USE OF LAPTOP COMPUTERS IS PROHIBITED DURING CLASS EXCEPT FOR ACCESSING THE TEXTBOOK OR CLASS HANDOUTS. IF A STUDENT IS SEEN DOING A LOT OF TYPING, DR. RAPPAPORT RESERVES THE RIGHT TO SEE WHAT IS BEING WRITTEN, AND IF NECESSARY SHE WILL REMOVE THE STUDENT'S RIGHT TO USE THE LAPTOP DURING CLASS. UNDER NO CIRCUMSTANCES CAN A STUDENT USE THIS CLASS PERIOD TO WORK ON ASSIGNMENTS FROM THIS OR ANY OTHER CLASS.

IN OTHER WORDS, STUDENTS NEED TO PAY CLOSE ATTENTION TO EACH CLASS IN ITS ENTIRETY, INCLUDING ANY VIDEOTAPES BEING SHOWN, AND TO USE THEIR INTEGRITY AND RESPECTFULNESS IN HOW THEY BEHAVE DURING CLASS.

- 4. Students are expected to display professional decorum at all times. This includes, but is not limited to, respecting classmates and the instructor. It is expected that students will not speak to/hold conversations with/pass notes to other students, use cell phones, or engage in other types of unprofessional behaviors after class has begun. 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 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.
- 5. 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.
- 6. Students are <u>NOT</u> permitted to work collaboratively (together) on *any* assignment in this class. All work turned in must be the student's own product. This includes take-home 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.
- 7. <u>All assignments must be turned in at the beginning of class on the day they are due.</u> <u>Being absent</u> 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.
- 8. All papers submitted for grading MUST adhere to APA 7th edition standards unless otherwise stated by the professor. This means that all papers must, *minimally*, be: 1) typed, 2) double- spaced, 3) use one consistent font (I prefer Times New Roman since it is easiest to read), 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, 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 GO TO THE WRITING CENTER AND ASK FOR SOME TUTORING ON HOW TO USE IT.

- 9. 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.
- 10. 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.
- 11. 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. Emergency Warning System for Texas A&M University-Central Texas

SAFEZONE. SafeZone provides a public safety application that gives you the ability to call for help with the push of a button. It also provides Texas A&M University-Central Texas the ability to communicate emergency information quickly via push notifications, email, and text messages. All students automatically receive email and text messages via their myCT accounts. Downloading SafeZone allows access to push notifications and enables you to connect directly for help through the app. You can download SafeZone from the app store and use your myCT credentials

to log in. If you would like more information, you can visit the <u>SafeZone</u> website [www.safezoneapp.com]. To register SafeZone on your phone, please follow these 3 easy steps:

a. Download the SafeZone App from your phone store using the link below: <u>iPhone/iPad</u>: [https://apps.apple.com/app/safezone/id533054756]

<u>Android Phone / Tablet</u> [https://play.google.com/store/apps/details?id=com.criticalarc.safezoneapp]

- b. Launch the app and enter your myCT email address (e.g. {name}@tamuct.edu)
- c. Complete your profile and accept the terms of service

2. COVID-19 Protocols:

- Students and employees must check for symptoms every day before coming on campus. Do NOT come to campus if you suspect that you have COVID-19 or another infectious illness.
- You must complete the COVID-19 Reporting Form if you believe you have been exposed to or have tested positive for COVID-19. Find this reporting form on the TAMUCT website: https://redcap.tamhsc.edu/surveys/?s=N38DRD4EMK If you do contract COVID-19 and must stay home, contact the professor to see about remaining current with the course while you have to remain at home. If ill, you can contact the office of Student Success, Equity and Inclusion to see about requesting accommodations to be able to succeed in the course.
- Free COVID-19 testing will be available on campus
- The university does not require face coverings (masks). However, it is strongly recommended according to the US Centers for Disease Control and Prevention (CDC) for both vaccinated and unvaccinated people. We encourage students to wear a face covering, to continue social distancing when possible, to wash their hands often, to cough and sneeze into your arm/elbow junction, to disinfect your area that needs to be touched, and to monitor your health daily. The University also strongly encourges people to get vaccinated to prevent further spread of COVID-19.

3. Technology Requirements

This course will use the A&M-Central Texas Instructure Canvas learning management system. We strongly recommend the latest versions of Chrome or Firefox browsers. Canvas no longer supports any version of Internet Explorer. Logon to A&M-Central Texas Canvas [https://tamuct.instructure.com/] or access Canvas through the TAMUCT Online link in myCT [https://tamuct.onecampus.com/]. You will log in through our Microsoft portal. Username: Your MyCT email address. Password: Your MyCT password.

For log-in problems, students should contact Help Desk Central, 24 hours a day, 7 days a week

Email: helpdesk@tamu.eduPhone: (254) 519-5466Web Chat: [http://hdc.tamu.edu]Please let the support technician know you are an A&M-Central Texas student.

4. Canvas Support

Use the Canvas Help link, located at the bottom of the left-hand menu, for issues with Canvas. You can select "Chat with Canvas Support," submit a support request through "Report a Problem," or call the Canvas support line: 1-844-757-0953.

5. Drop Policy

If you discover that you need to drop this class, you must complete the <u>Drop Request</u> Dynamic Form through Warrior Web:

https://dynamicforms.ngwebsolutions.com/casAuthentication.ashx?InstID=eaed95b9-f2be-45f3-a37d-46928168bc10&targetUrl=https%3A%2F%2Fdynamicforms.ngwebsolutions.com%2FSubmit%2FForm %2FStart%2F53b8369e-0502-4f36-be43-f02a4202f612].

Faculty cannot drop students; this is always the responsibility of the student. The Registrar's Office will provide a deadline on the Academic Calendar for which the form must be completed. Once you submit the completed form to the Registrar's Office, you must go into Warrior Web and confirm that you are no longer enrolled. If you still show as enrolled, FOLLOW-UP with the Registrar's Office immediately. You are to attend class until the procedure is complete to avoid penalty for absence. Should you miss the drop deadline or fail to follow the procedure, you will receive an F in the course, which may affect your financial aid and/or VA educational benefits.

6. Academic Integrity

Texas A&M University-Central Texas values the integrity of the academic enterprise and strives for the highest standards of academic conduct. A&M-Central Texas 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. Any deviation by students from this expectation may result in a failing grade for the assignment and potentially a failing grade for the course. All academic misconduct concerns will be referred to the Office of Student Conduct. When in doubt on collaboration, citation, or any issue, please contact your instructor before taking a course of action. For more information regarding the Student Conduct process, [https://www.tamuct.edu/student-affairs/student-conduct.html]. If you know of potential honor violations by other students, you may submit a report, [https://cm.maxient.com/reportingform.php?TAMUCentralTexas&layout_id=0].

7. For Pregnant and/or Parenting Students:

Texas A&M University-Central Texas supports students who are pregnant and/or parenting. In accordance with requirements of Title IX and related guidance from US Department of Education's Office of Civil Rights, the Dean of Student Affairs' Office can assist students who are pregnant and/or parenting in seeking accommodations related to pregnancy and/or parenting. Students should seek out assistance as early in the pregnancy as possible. For more information, please visit <u>Student Affairs</u> [https://www.tamuct.edu/student-affairs/pregnant-and-parenting-students.html]. Students may also contact the institution's Title IX Coordinator. If you would like to read more about these <u>requirements and guidelines</u> online, please visit the website [http://www2.ed.gov/about/offices/list/ocr/docs/pregnancy.pdf].

Title IX of the Education Amendments Act of 1972 prohibits discrimination on the basis of sex and genderincluding pregnancy, parenting, and all related conditions. A&M-Central Texas is able to provide flexible and individualized reasonable accommodation to pregnant and parenting students. All pregnant and parenting students should contact the Associate Dean in the Division of Student Affairs at (254) 501-5909 to seek out assistance. Students may also contact the University's Title IX Coordinator.

8. 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 a barrier-free education. The Warrior Center for Student Success, Equity 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 Office of Access and Inclusion, WH-212; or call (254) 501-5836. Any information you provide is private and confidential and will be treated as such. For more information, please visit our <u>Access & Inclusion</u> Canvas page (log-in required) [https://tamuct.instructure.com/courses/717]

9. 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 400,000 eBooks and 82,000 journals, in addition to the 96,000 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 A&M-Central Texas 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 may take place virtually through WebEx, Microsoft Teams or in-person at the library. <u>Schedule an appointment</u>

<u>here:</u> [https://tamuct.libcal.com/appointments/?g=6956]. Assistance may 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. Our 27,000-square-foot facility on the A&M-Central Texas main 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 frequently offers workshops, tours, readings, and other events. For more information, please visit our Library website: [http://tamuct.libguides.com/index].

10. Tutoring Services

Tutoring is available to all A&M-Central Texas students, both virtually and in-person. Student success coaching is available online upon request. If you have a question, are interested in becoming a tutor, or in need of success coaching contact the Warrior Center for Student Success, Equity and Inclusion at (254) 501-5836, visit the Warrior Center at 212 Warrior Hall, or by emailing <u>WarriorCenter@tamuct.edu</u>. To schedule tutoring sessions and view tutor availability, please visit <u>Tutor Matching Services</u> [https://tutormatchingservice.com/TAMUCT] or visit the Tutoring Center in 111 Warrior Hall. Chat live with a remote tutor 24/7 for almost any subject from on your computer! Tutor.com is an online tutoring platform that enables A&M-Central Texas students to log in and receive online tutoring support at no additional cost. This tool provides tutoring in over 40 subject areas except writing support. Access Tutor.com through Canvas.

11. University Writing Center

University Writing Center: Located in Warrior Hall 416, the University Writing Center (UWC) at Texas A&M University–Central Texas (A&M–Central Texas) is a free service open to all A&M–Central Texas students. For the Spring 2022 semester, the hours of operation are from 10:00 a.m.-5:00 p.m. Monday thru Thursday in Warrior Hall 416 (with online tutoring available every hour as well) with satellite hours available online only Monday thru Thursday from 6:00-9:00 p.m. and Saturday 12:00-3:00 p.m. 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, our 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 may 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 of the relevant style guides. Whether you need help brainstorming ideas, organizing an essay, proofreading, understanding proper citation practices, or just want a quiet place to work, the UWC is here to help!

Students may arrange a one-to-one session with a trained and experienced writing tutor by making an appointment via <u>WCOnline</u> [https://tamuct.mywconline.com/]. In addition, you can email Dr. Bruce Bowles Jr. at bruce.bowles@tamuct.edu if you have any questions about the UWC, need any assistance with scheduling, or would like to schedule a recurring appointment with your favorite tutor by making an appointment via <u>WCOnline</u> [https://tamuct.mywconline.com/]. In addition, you can email Dr. Bruce Bowles Jr. at bruce.bowles@tamuct.edu if you have any questions about the UWC, need any assistance with scheduling, or would like to schedule a recurring appointment with you can email Dr. Bruce Bowles Jr. at bruce.bowles@tamuct.edu if you have any questions about the UWC, need any assistance with scheduling, or would like to schedule a recurring appointment with scheduling, or would like to schedule a recurring appointment with your favorite tutor.

12. Sexual Violence

Sexual violence is a serious safety, social justice, and public health issue. The university 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/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 Wellness and Counseling (254-501-5955) located on the second floor of Warrior Hall (207L). Sexual violence can occur on our campus because predators often feel emboldened, and victims often feel silenced or shamed. It is incumbent on ALL of us to find ways to actively create environments that tell predators we don't agree with their behaviors and tell survivors we will support them. Your actions matter. Don't be a bystander; be an agent of change. For additional information on campus policy and resources visit the <u>Title IX webpage</u> [https://www.tamuct.edu/compliance/titleix.html].

13. Behavioral Intervention:

Texas A&M University-Central Texas 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, please make a referral to the Behavioral Intervention Team. Referring your concern shows you care. You can complete the <u>referral</u> online [https://cm.maxient.com/reportingform.php?TAMUCentralTexas&layout_id=2]. Anonymous referrals are accepted. Please see the <u>Behavioral Intervention Team</u> website for more information [https://www.tamuct.edu/bit]. If a person's behavior poses an imminent threat to you or another, contact 911 or A&M-Central Texas University Police at 254-501-5805.

14. 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		
Wednesday	Review Syllabus		
1/19/22	Handout: Why Do Social Workers Need to Study Human Biology?		
	Human BiologyAlternative TreatmentsEvolution, Natural Selection, Eugenics, InvoluntarySterilizationEcologyNature vs. Nurture DebateEthical Dilemmas andBiologyWellness and Preventive Health CarePlacebo, Nocebo		
	Handout: Human Biology and Scientific Method Characteristics of Living Things		
	Levels of Biological Organization Scientific Method FDA/Clinical Trials Pompe Disease		
Monday	FDA and Clinical Trials, continued		
1/24/22	Video: Excerpts from "Extraordinary Measures" (1:46)		
Wednesday	Text: Falvo, pp. 1-9 (Chapter 1) – Conceptualizing Functioning, Health, and Disability		
1/26/22	Medical ModelSocial ModelBiopsychosocial ModelExperience ofDisabilityInternational Classification of Functioning, Disability, and HealthOptimum versus Maximum Function, Capacity, and Performance		
	Text: Falvo, pp. 11-32 (Chapter 2) – Psychosocial and Functional Aspects of Health Conditions		
	Experience of Health Conditions and Altered FunctionDisease, Illness, Health ConditionsStress & Coping StrategiesEmotional ReactionsDevelopmental StagesSelf-Concept, Self-EsteemInvisible ConditionsFamily AdaptationQuality of LifeAdherence to Management RecommendationsHealth informationStages ofAdaptation and AdjustmentFunctional AspectsVocational Issues		
	Handout: Perceptions/Coping with Chronic Illness Handout: The Cell, Organelles, Metabolic & Mitochondrial Diseases		
	Video: "Conjoined at the Head: Medical Mysteries, Series 1" (0:53) (Films on Demand)		

Date	Description	
Monday	The Experience of Disability, Human Genetics	
1/31/22	The Experience of Disability, Human GeneticsHandout: Genetics and Human Inheritance, Genetic DisordersChromosomes & Cell Division Mitosis, Meiosis Genetic variabilityDominant/Recessive genes/alleles Detecting genetic disorders Gene testingPrader-Willi Down Syndrome Trisomy 18 and 13 Cri du ChatWolf-Hirschhorn Syndrome X-linked disorders X-chromosome disordersIntersex conditions Genetics worksheet DNA and Biotechnology MutationsGene activity Genetic engineering Human Genome Project Gene TherapyEpigenetics Genetic Information Disclosure Genetic Information Non-Discrimination ActHandout: "Common Resource Referrals for Pediatric Clients"Video: "Against the Odds: Inspiring Stories of Disability – Erica Takes Control" (two siblings with Miller syndrome) (0:28) (Films on Demand)Receive sample case scenario on an infant with Down syndrome	
Wednesday 2/2/22	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 	
Monday	Handout: The Integumentary System, Skin Problems	
2/7/22	Parasitic Skin Infections Skin Diseases: Seborrheic dermatitis, Impetigo, Vitiligo Decubitus ulcers, skin cancers Xeroderma Pigmentosa Phototoxicity	
	Video: "Uncovering Skin" (0:51) (library video)	

Date	Description
Wednesday	Text: Falvo, pp. 397-417 (Chapter 24) – Structure, Function, and Common Conditions of
2/9/22	Musculoskeletal SystemSkeletal systemBonesConnective tissueJointsMuscular SystemFractures,dislocations, strainsSprainsBursitisTendonitisTenosynovitisCarpal TunnelOsteoporosisOsteoarthritisBack painDisk InjuriesBack painSpondylolisthesisScoliosisOsteomyelitisFibromyalgiaMedicationsHyperbaric OxygenTherapyPhysical TherapyAssistive DevicesOrthosisTractionSurgeryFunctionalImplicationsVocational Implications
	Text: Falvo, pp. 431-438 (Chapter 26) – AmputationCauses of amputation, levels, managementSurgery, ReplantationProsthesesComplicationsPhantom PainFunctional implicationsVocational issuesVocational issues
	Handout: The Skeletal and Muscular SystemsOsteoarthritisDisk problemsOsteoporosisScoliosisMuscle actions, toneBuilding MuscleExercisingTennis ElbowMuscular DystrophyFibromyalgiaBursitisTendonitisFibromyalgiaBursitis
	Video: "Against the Odds: Inspiring Stories of Disability – Lilly's Legs" (a child with arthrogryposis) (0:29) (Films on Demand)
Monday	Text: Falvo, pp. 33-41 (Chapter 3) – Introduction to Structure and Function of Nervous
2/14/22	SystemStructure & function of nervous systemNerve cellsCentral nervous systemThe brainSpinal cord and peripheral nervous system
	Text: Falvo, pp. 111-120 (Chapter 8) – Multiple SclerosisRole of myelinTypes of multiple sclerosis, manifestations, managementFunctional implicationsVocational issues
	Video: "The Multiple Sclerosis Revolution" (0:24) (Films on Demand)
	Client Scenario #2 given

Date	Description
Wednesday	Text: Falvo, pp. 121-134 (Chapter 9) – Neurodegenerative and Neuromuscular Conditions
2/16/22	Parkinsonism, Secondary, Parkinson's diseaseHuntington's choreaAlzheimer's diseaseAmyotrophic Lateral SclerosisMuscular DystrophyMyasthenia GravisManagement, Functional implications, Vocational issues
	Text: Falvo, pp. 135-143 (Chapter 10) – Post-Polio Syndrome and Other Conditions ofNervous SystemPoliomyelitis and Post-Polio SyndromeGuillain-Barré SyndromeMeningitis
	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: "Parkinson's Disease: An Update" (0:28) (Films on Demand)
Monday	Neurodegenerative conditions, Alzheimer's Disease, continued
2/21/22	Video: "Alzheimer's Project: Momentum in Science" (0:54)
Wednesday	Text: Falvo, pp. 43-69 (Chapter 4) – Traumatic Brain Injury
2/23/22	Closed head injury Open head injury Glasgow coma scale & other scales to measure severity Categorization: Mild, moderate, severe brain injury Manifestations of traumatic brain injury Post-traumatic epilepsy 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
	Text: Falvo, pp. 7184 (Chapter 5) – StrokeClassification: Ischemic, HemorrhagicManifestationsLeft- versus right-sided damageComplicationsManagementFunctional implicationsVocational Issues
	Handout: Sports Concussions, Traumatic Brain Injury
	Video: "The Hidden Epidemic: Post-Concussion Syndrome" (0:39) (Films on Demand)

Monday 2/28/22	Text: Falvo, pp. 85-93 (Chapter 6) – Epilepsy and other Conditions of the Nervous System
2/28/22	
2,20,22	Epilepsy and seizures, manifestations, management, functional implications, activitiesMeningitisEncephalitisSleep apneaNarcolepsy
	Text: Falvo, pp. 95-110 (Chapter 7) – Traumatic Spinal Cord Injury
	Spinal cordManifestations of injuryPhysical implicationsAreas of spinal cord injuryManagementComplicatons (pressure sores, spasticity, contractures, osteoporosis, chronic pain, cardiovascular, autonomic dysreflexia, sweating, pneumonia, urinary and bowel problems)Functional implicationsActivitiesVocational issues
	Handout: Neurological Problems
	Brain Disorders Headaches Aphasia Young adult strokes Coma
	Video: See part of "Christopher Reeve: Hope in Motion" (1:42)
Wednesday 3/2/22	Text: Falvo, pp. 145-162 (Chapter 11) – Developmental Conditions: Cerebral Palsy and Spina Bifida
51 21 22	Cerebral Palsy, classification, causes, types, manifestations, complications, management, functional implications, activities, vocational issues Spina Bifida, Types, manifestations, management, functional implications, activities, vocational issues
	Handout: Intelligence, Cerebral Palsy, Autism
	Text: Falvo, pp. 163-191 (Chapter 12) – Neurodevelopmental Disorders
	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
	Video: "Against the Odds: Inspiring Stories of Disability – Unlocking Autism" (0:27) (Films on Demand)
Monday	Neurodevelopmental disorders, Developmental Disabilies, continued
3/7/22	Video: Excerpts from "I Am Sam" (2:00)
	Client Scenario #3 given

Date	Description
Wednesday	Handout: The Reproductive System Circumcision Puberty Obesity & Contraception
3/9/22	Contraception MythsPMSDysmennorheaAdenomyosisPIDMenopauseCervical Cancer, HPV Vaccine
	Prostate problems Prostate Cancer
	Handout: Pregnancy
	GPAb StatusHyperemesis GravidarumPre-eclampsiaAbruptio PlacentaePlacentaPreviaErythroblastosis FetalisPremature birthsHealth risks and IVFEndometriosis
	Handout: Human SexualitySexual DysfunctionsParaphiliasRape/Sexual AssaultInfertilityRetrograde EjaculationSexual Orientation
	Handout: Sexually Transmitted DiseasesGonorrheaChlamydiaSyphilisTrichomoniasisGardasilHIV/AIDS
	Video: See part of "Life's Greatest Miracle" (0:55) (Films on Demand)
Monday	
3/14/22 and Wednesday	NO CLASS – ENJOY YOUR SPRING BREAK!
3/16/22	
Monday	Handout: Gender Identity and Reassignment
3/21/22	Gender Reassignment Surgery David Reimer and Jennifer Boylan stories Chaz Bono O'Donnabhain Lawsuit
	Video: "XX-XY" (0:13) (library video) Video: "Becoming Me: The Gender Within" (0:40) (Films on Demand
	Client Scenario #4 given

Description			
Text: Falvo, pp. 193-214 (Chapter 13) – Diagnosis and Treatment of Psychiatric Conditions:			
Functional and Vocational ImplicationsHistoryDSM-5Diagnostic CategoriesPsychological testingManagementMedicationsPsychiatric Rehabilitation, Clubhouse Model, Social Skills Training, Group, etc.Electro-Convulsive TherapyFunctional ImplicationsVocational Issues			
Text: Falvo, pp. 215-235 (Chapter 14) – Functional Implications of Selected Psychiatric DiagnosesAnxiety Disorders, OCD, PTSD, Depressive Disorders, Bipolar DisordersSchizophreniaSomatic disordersFactitious disordersDissociative disordersPersonality disordersDissociative disordersPersonality disordersDelirium, dementiaManifestations, management, functional implications, activities, vocational issues			
Handout: Mental Health Disorders Staying SanePTSDA pill to forgetPsychotropic DrugsVideo: "Shadow Voices: Finding Hope in Mental Illness" (0:58)			
Text: Falvo, pp. 237-262 (Chapter 15) – Substance-Related and Addictive DisordersHistory, PrevalenceSubstance-related and addictive disordersIntoxication, Withdrawal,Addiction, ToleranceDetoxificationSubstance usePhysical effects of alcoholNervous system conditions (Korsakoff's, Wernicke's, Peripheral Neuropathy, Cardiovascularconditions, musculoskeletal conditions, GI conditions, Management)CaffeineSedativesOpioidsStimulantsCannabisHallucinogensInhalantsHealth implications, complications, identification, management, functional implications, vocationalimplications			
Handout:Substance DisordersEffects on fetal development Pharmacogenetics"Tobacco: The Smoking Addiction and Cognition Medical marijuanaGun"Genetics and AlcoholismPharmacogenetics PharmacogeneticsAddiction and Cognition Medical marijuanaDrugs and neurotransmissionLegalizing marijuanaMedical marijuanaVideo:'Fetal Abuse: The Effects of Drugs and Alcohol" (0:17)(0:17) (Films on Demand)			
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Date	Description
Wednesday	Text: Van der Kolk, pp. 7-170 (Chapters 1-7)
3/30/22	 1ext: Van der Kolk, pp. 7-10 (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 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

 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; Armusic, 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 traum 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 	Date	Description		
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(continued on next page)		• Restructuring inner maps; Revising the past; Rescripting your life: Daring to tell truth;		
		(continued on next page)		

Date	Description			
Monday 4/4/22 continued	 Text: Van der Kolk, Chapter 19, pp. 311-331: Applied Neuroscience: Rewiring the Fear- Driven Mind with Brain/ Computer Interface Technology 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 			
	 Van der Kolk, Chapter 20, pp. 332-348: Finding Your Voice: Communal Rhythms and Theater 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 Van der Kolk, Epilogue, pp. 349-358: Choices to Be Made 			
Wednesday	Receive Mid-term examayText: Falvo, pp. 263-279 (Chapter 16) – Conditions of the Eye and Blindness			
4/6/22	The eye Visual conditions Nystagmus Cataracts Injuries Glaucoma Retinopathy Retinal detachment Retinitis Pigmentosa Macular Degeneration Identification, management, functional implications, vocational issues			
	Text: Falvo, pp. 281-307 (Chapter 17) – Hearing Loss and DeafnessAuditory and vestibular systemsConditions of vestibular system (vertigo, neuritis, Meniere'sdisease)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 implantFunctionalimplications, deaf culture			
	Deafness and Cochlear Implants			
	Video: "The Living Body: Eyes and Ears" (0:26) (Films on Demand) "Cochlear Implants: Bringing Back the Joy of Sound" (0:24) (Films on Demand)			
Monday	Cochlear Implants, continued			
4/11/22	Video: "Hear and Now" (1:23)			
	Client Scenario #6			
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Date	Description
Wednesday	Text: Falvo, pp. 309-326 (Chapter 18) – Sickle Cell Disease, Hemophilia, and Conditions of the
4/13/22	BloodStructure and function of bloodSickle cell disease, crisis, complicationsHemophilia,complicationsAnemiaThalassemiasPolycythemiaAgranulocytosisPurpuraTransfusionsBone Marrow transplantManagementFunctionalimplications, vocational issues
	Text: Falvo, pp. 447-473 (Chapter 28) – Cardiovascular ConditionsStructure and function of cardiovascular systemAtherosclerosisHypertensionAneurysmCoronary artery diseaseAngina pectorisMyocardial infarctionHeart failureArrhythmiasValvular conditionsCongenital heart conditionsInflammatory conditionsVascular conditionsTransplantsManagement, 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 Commotio CordisCPRCholesterolWomen and heart disease Eligibility criteria for heart transplant
	Video: "The Living Body: Two Hearts" (0:27) (Films on Demand) "Sickle Cell Anemia" (0:29) (Films on Demand)
	Mid-term exam is due today
Monday 4/18/22	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 InfectionHIV infectionsPhasesTransmissionPreventionIdentificationManifestations & complicationsManagementFunctional implications
	Text: Falvo, pp. 419-430 (Chapter 25) – Rheumatoid Arthritis, Lupus, and other Rheumatic ConditionsRheumatoid arthritisSystemic lupus erythematosusGoutAnkylosing Spondylitis Vocational implicationsManagementFunctional implicationsActivitiesVocational implications
	Handout: The Immunological SystemInfectious diseasesPathogens (bacteria, viruses, protozoans, fungi, parasites, prions)ColdsLupusLeprosy/Hansen's diseaseRheumatoid arthritisSmoke exposure and allergies
	Video: "The Living Body: Internal Defenses" (0:28) (Films on Demand)

Date Description			
Wednesday	Text: Falvo, pp. 475-499 (Chapter 29) – COPD, Asthma, and Other Conditions of the		
4/20/22	Pulmonary SystemStructure and function of pulmonary systemChronic obstructive pulmonary diseaseChronic bronchitisEmphysemaSmokingAsthmaCystic FibrosisOccupational lung conditionsPharyngitisLaryngitisPneumoniaBronchiectasisObstructive sleep apneaChest injuriesManagement, functional implications, activities, vocational implicationsStatementStatement		
	Handout: The Respiratory System Cystic Fibrosis		
	Video: "No Ordinary Lives: Living with Cystic Fibrosis" (0:28) (Films on Demand)		
	MOVIE ASSIGNMENT PAPER IS DUE TODAY		
Monday 4/25/22	Client Scenario: Extra #1 (optional assignment) givenText: Falvo, pp. 501-520 (Chapter 30) – Chronic Kidney Disease and Other Conditions of the Urinary SystemStructure and function of kidneys and urinary tractUrinary tract infectionsStructure and function of kidneys and urinary tractUrinary tract infectionsKidneystonesHydronephrosisGlomerulonephritisPolycystic kidney diseaseRenal failure (acute, chronic)Hemodialysis, peritoneal dialysis, transplantFunctionalimplications, activities, vocational implications		
	Handout: The Urinary System Drinking water after exercising Transplant drugs Video "The Urinary Data Urinary System" (Water)" (0.27) (Filescen Data Urinary		
	Video: "The Living Body: Urinary System (Water)" (0:27) (Films on Demand)		
Wednesday 4/27/22	Text: Falvo, pp. 521-541 (Chapter 31) – Conditions of Gastrointestinal SystemStructure and function of GI systemConditions 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) 		
	Handout: The Digestive System Appetite Food & health Diets Diet sodas Food Safety		
	Text: Falvo, pp. 373-395 (Chapter 23) – Diabetes and Other Conditions of the Endocrine SystemStructure and function of endocrine systemHormonesDiabetes mellitus, types 1, 2, gestationalIdentification, management, complications, functional implications, activities, vocational issuesHyperthyroidism, hypothyroidismCushing's syndromeAddison's diseaseDiabetes insipidusManagement, complications, functional implications, activities, vocational issues		
	Handout: The Endocrine System Stress/stress relief, stress and memory Melatonin		
	Video: "The Living Body: Messengers" (Hormones) (0:26) (Films on Demand) "The Living Body: Digestion – Eating to live" (0:27) (Films on Demand)		
	27		

Date	Description			
Monday	Text: Falvo, pp. 439-446 (Chapter 27) – Chronic Pain			
5/2/22	Experience of pain Classification: Acute, chronic, nociceptive, and neuropathic pain			
0, 1, 11	Management techniques Functional implications, activities, vocational implications			
	Handout: Pain			
	Venting frustration reduces pain Chronic Pain Management Social Worker's Role Using			
	Pain Meds Safely Alternative Treatment for Pain			
	Video: "The Anatomy of Pain" (0:49) (Films on Demand)			
Wednesday	Text: Falvo, pp. 345-354 (Chapter 21), Introduction to Cancers: General Methods of			
5/4/22	Identification and Management			
07 17 22	The cellDevelopment of cancerCausesTypesStaging/gradingDiagnostic proceduresTreatment (surgery, chemotherapy, radiation therapy, immunotherapy,			
	hormone therapy, monoclonal antibodies, bone marrow and stem cell transplants)			
Text: Falvo, pp. 355-371 (Chapter 22), Specific Cancers and Their Management Cancer of mouth, esophagus, stomach, intestines, liver, larynx, lung, bone, urinary syste spinal cord, lymphomas, myeloma, leukemias, breast, gynecological, prostate, testicular Functional implications, activities, vocational issues				
	Handout: CancerBreast cancerPancreatic cancerBrain TumorLeukemiaChemo brainCost of CA drugsSurvivors of childhood cancerTarget: Cancer series of articlesAngelina JoliePerception of cancer as a death sentence			
	Video: "What is Cancer?" (0:60)			
	INDIVIDUAL INTERVIEW PAPER IS DUE TODAY			
	Client Scenario Extra #2 (optional assignment) given			
Monday	Handout: Stem Cells			
5/9/22	Stem cells from human skin, fat, cord blood More patients seek stem cell treatment			
519122	The Quest ResumesThe science of stem cellsBlindness, Parkinson's disease curesThe Tiniest TransplantDonating fetal tissue after abortion			
	Video: "Fetal Fix" (0:52)			
	RECEIVE THE TAKE-HOME FINAL EXAM			

Date	Description
Wednesday	Text: Falvo, pp. 573-579 (Chapter 34), Aging with Disability
5/11/22	Aging with chronic conditionsNatural changes in body systems with agingPrevention of age-related complications
	Handout: Aging Girl who does not age How to live 100 years Alzheimer's disease/dementia
	Text: Falvo, pp. 561-571 (Chapter 33) – Assistive TechnologyDefining assistive technologyTypes and uses of assistive technologySupports and barriers to using assistive technologyPsychosocial issuesThe future
	Video: "The Living Body: Aging" (0:27) (Films on Demand)
	TAKE-HOME FINAL EXAM IS DUE

MOVIE ASSIGNMENT GRADING RUBRIC

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

INDIVIDUAL INTERVIEW PROJECT ASSIGNMENT GRADING RUBRIC

	Possible Points	Earned Points
Paper is 8-10 pages in length (not counting face page or reference page)	5	
Demographics of person and that you are using a false name	3	
Person's story is told in a coherent, interesting, creative way	12	
Course material is used to explain person's story in a comprehensive way	13	
Every term used is accompanied by a biological explanation of what that term means	5	
Story is told in a body systems perspective (what systems are being affected and how they are being affected)	5	
Discussion of medical/psychological care received and whether it has helped	5	
Discussion of any use of alternative treatment approaches that have been used, or statement that they have not been used	2	
Explanation of condition's effects on daily life and on ability to function	5	
Explanation of how condition has affected family	5	
Explanation of kinds of adaptations used by person	5	
Explanation of person's perception of their condition	5	
Discussion of Falvo & Holland's definitions of chronic illness vs. disability and explanation of which the person identifies as describing their situation	5	
Discussion of person's view of the future with this condition	5	
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	10	
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	5	
No reference material was used that was not included in course reading material	5	
Total points earned	100	

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

Abramowitz, Jonathan S. (2012). The Stress Less Workbook: Simple Strategies to Relieve Pressure, Manage Commitments, and Minimize Conflicts. Guilford.

Adeyemo; Bamidele O.; Joseph Biederman; Ross Zafonte; Elana Kagan; Thomas J. Spencer; Mai Uchida; Tara Kenworthy; Andrea E. Spencer; and Stephen V. Faraone (2014). "Mild Traumatic Brain Injury and ADHD: A Systematic Review of the Literature and Meta-Analysis." *Journal of Attention Disorders, 18 (7),* 576-584.

American Legacy Foundation (2007). "Tobacco: The Smoking Gun." National Center on Addiction and Substance Abuse, Columbia University, October.

American Psychiatric Association (2013). *Diagnostic and Statistical Manual of Mental Disorders* (5th edition). Washington DC: American Psychiatric Association.

Ault, Amber; and Stephanie Brzuzy (2009). "Removing Gender Identity Disorder from the Diagnostic and Statistical Manual of Mental Disorders: A Call for Action." *Social Work*, 54 (2) April, 187-189.

Austrian, Sonia (2002). Developmental Theories Through the Life Cycle. New York: Columbia University Press.

Avadian, Brenda, MA (1999). "Where's My Shoes?" My Father's Walk Through Alzheimer's. Lancaster: North Star Books.

Baggaley, Ann (2001). Human Body. New York: Dorling Kindersley Publishing.

Bahrer-Kohler, Sabine (2012). Social Determinants and Mental Health. New York: Nova Science Publishers.

Banks, Carol; and Karen Mackrodt (2005). Chronic Pain Management. London: Whurr.

Barcott, Bruce; and Michael Scherer (2015). "The Great Pot Experiment." Time Magazine, May 25, 39-44.

Basler, Barbara (2008). "Million Dollar Medicines." AARP Bulletin, October, 12-16.

Batty, Richard; Laura McGrath; and Paula Reavey (2014). "Embodying Limb Absence in the Negotiation of Sexual Intimacy." *Sexualities*, 17 (5/6), 686-706.

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

Bell, Karen (2013). "Constructions of Infertility and Some Lived Experiences of Involuntary Childlessness." *Affilia*, 28 (3), 284-295.

Bevans, Margaret; Leslie Wehrlen; Kathleen Castro; Patricia Prince; Nonniekaye Shelburne; Karen Soeken; James Zabora; and Gwenyth R. Wallen (2013). "A Problem-Solving Education Intervention in Caregivers and Patients during Allogeneic Hematopoietic Stem Cell Transplantation." *Journal of Health Psychology*, 19 (5), 602-617.

Bishop, F. Michler (2001). *Managing Addictions: Cognitive, Emotive, and Behavioral Techniques*. Northvale: Jason Aronson.

Bochenek, Michael; and Kyle Knight (2012). "Nepal's Third Gender and the Recognition of Gender Identity." *Jurist-Hotline*, April 23.

Bonsaksen, Tore; Anners Lerdal; and May S. Fagermoen (2015). "Trajectories of Illness Perceptions in Persons with Chronic Illness: An Explorative Longitudinal Study." *Journal of Health Psychology*, 20 (7), 942-953.

Bosk, Charles (1992). All God's Mistakes: Genetic Counseling in a Pediatric Hospital. Chicago: University of Chicago Press.

Bowes, Lucy; and Sara R. Jaffee (2013). "Biology, Genes, and Resilience: Toward a Multidisciplinary Approach." *Trauma, Violence, and Abuse,* 14 (3), 195-208.

Breedlove, S. Marc; and Neil V. Watson (2013). *Biological Psychology: An Introduction to Behavioral, Cognitive, and Clinical Neuroscience,* 7th edition. Sinauer Associates.

Brion, John M.; Mark R. Leary; and Anya S. Drabkin (2013). "Self-Compassion and Reactions to Serious Illness: The Case of HIV." *Journal of Health Psychology*, 19 (2), 218-229.

Broom, Alex F.; Emma R. Kirby; Jon Adams; and Kathryn M. Refshauge (2015). "On Illegitimacy, Suffering and Recognition: A Diary Study of Women Living with Chronic Pain." *Sociology*, 49 (4), 712-731.

Bryant-Davis, Thema; Sarah E. Ullman; Yuying Tsong; and Robyn Gobin (2011). "Surviving the Storm: The Role of Social Support and Religious Coping in Sexual Assault Recovery of African American Women." *Violence against Women*, 17 (2), 1601-1618.

Burbeck, Rachel; and Carla Willig (2014). "The Personal Experience of Dysmenorrhoea: An Interpretive Phenomenological Analysis." *Journal of Health Psychology*, 19 (10), 1334-1344.

Butler, Alexandra (2015). *Walking the Night Road: Coming of Age in Grief.* Columbia University Press. (Mother had brain cancer)

Byers, David S.; and Joel Coburn (2015). "Do the New APA Guidelines for Transgender-Affirmative Care Go Far Enough?" August 28.

Calabresi, Massimo; and Alice Park (2010). "Is the FDA on Drugs?" Time Magazine, August 23, 25-28.

Calabresi, Massimo (2015). "The Price of Relief." Time Magazine, June 15, 27-33.

Cantisano, Nicole; Bernard Rime; and Maria T. Munoz-Sastre (2012). "The Social Sharing of Emotions in HIV/AIDS: A Comparative Study of HIV/AIDS, Diabetic and Cancer Patients." *Journal of Health Psychology*, 18 (10), 1255-1267.

Carr, Coeli (2011). "The ABC's of Aphasia." Neurology Now, June/July, 35-38, 14.

Caudill, Margaret A. (2008). Managing Pain Before It Manages You, 3rd edition. Guilford Press.

Chen, Chen H.; Siew T. Tang; and Chien H. Chen (2011). "Meta-analysis of Cultural Differences in Western and Asian Patient-Perceived Barriers to Managing Cancer Pain." *Palliative Medicine*, 26 (3), 206-221.

Cloud, John (2011). "Beyond Drugs: How Alternative Treatments Can Ease Pain." Time Magazine, March 7, 81-88.

Cloud, John (2009). "Staying Sane May be Easier Than you Think." Time Magazine, June 22, 72-78.

Cloud, John (2010). "Why Genes Aren't Destiny." Time Magazine, January 18, 49-53.

Cohen, Donna; and Carl Eisdorfer (2001). *The Loss of Self: A Family Resource for the Care of Alzheimer's Disease and Related Disorders, revised edition.* New York: W. W. Norton and Company.

Cole, Portia L.; and Dale M. Cecka (2014). "Traumatic Brain Injury and the Americans with Disabilities Act: Implications for the social Work Profession." *Social Work, 59 (3),* July, 261-269.

Coles, Jan; Jill Astbury; Elizabeth Dartnall; and Shazneen Limjerwala (2014). "A Qualitative Exploration of Researcher Trauma and Researchers' Responses to Investigating Sexual Violence." *Violence against Women*, 20 (1), 95-117.

Combs-Orme, Terri (2012). "Epigenetics and the Social Work Imperative." Social Work, 58 (1), January, 23-30.

Coppock, V.; and B. Dunn (2009). *Understanding Social Work Practice in Mental Health*. Thousand Oaks: Sage Publications.

Cox, Elizabeth (1990). Thanksgiving: An AIDS Journal. New York: Harper and Row.

Cox, Harold (2001). Later Life: The Realities of Aging, 5th edition. Upper Saddle River: Prentice-Hall.

Crawford, Cassandra S. (2015). "Body Image, Prostheses, Phantom Limbs." Body and Society, 21 (2), 221-244.

Cuellar, Israel; and Freddy Paniagua (2000). Handbook of Multicultural Mental Health: Assessment and Treatment of Diverse Populations. San Diego: Academic Press.

Daimon, A.; and D. Amso (2008). "Contributions of Neuroscience to Our Understanding of Cognitive Development." *Current Directions in Psychological Science*, 15 (3), 118-120.

Decker, Sheila; Diane W. Wardell; and Stanley G. Cron (2012). "Using a Healing Touch Intervention in Older Adults with Persistent Pain." *Journal of Holistic Nursing*, 30 (3), 205-213.

DeSantis, Joseph P.; Aubrey Florom-Smith; Amber Vermeesch; Susana Barroso; and Diego A. DeLeon (2013). "Motivation, Management, and Mastery: A Theory of Resilience in the Context of HIV Infection." *Journal of the American Psychiatric Nursing Association*, 19 (1), 36-46.

Dibb, Bridget; Caroline Ellis-Hill; Margaret Donovan-Hall; Jane Burridge; and David Rushton (2014). "Exploring Positive Adjustment in People with Spinal Cord Injury." *Journal of Health Psychology*, 19 (8), 1043-1054.

DiClemente, C. (2006). *Addiction and Change: How Addictions Develop and Addicted People Recover*. New York: Guilford Press.

Diesel, Holly J., RN, PhD; and Patrick M. Ercole, MPH, PhD (2012). "Soothability and Growth in Preterm Infants." *Journal of Holistic Nursing*, 30 (1) March, 38-47.

DiMillo, Julia; Andre Samson; Anne Theriault; Sandra Lowry; Linda Corsini; Shailendra Verma; and Eva Tomiak (2015). "Genetic testing: When Prediction Generates Stigmatization." *Journal of Health Psychology*, 20 (4), 393-400.

Dolan, Darrach (2015). "Seizure Decisions." Neurology Now, June/July, 10-11.

Dorris, Michael (1989). The Broken Cord. New York: Harper and Row. (Fetal Alcohol Syndrome)

Dwivedi, Yogesh (2012). The Neurobiological Basis of Suicide. CRC Press.

Elliott, Marta (2013). "Gender Differences in the Determinants of Distress, Alcohol Misuse, and Related Psychiatric Disorders." *Society and Mental Health*, 3 (2), 96-113.

Ellis, Carolyn (1995). *Final Negotiations: A Story of Love, Loss, and Chronic Illness*. Philadelphia: Temple University Press.

England, Mary J.; Joan K. Austin; Vicki Beck; Cam Escoffery; and Dale C. Hesdorffer (2014). "Erasing Epilepsy Stigma: Eight Key Messages." *Health Promotion Practice*, 15 (3), May, 313-318.

Fadiman, Anne (1997). *The Spirit Catches You and You Fall Down: A Hmong Child, Her American Doctors, and the Collision of Two Cultures.* New York: Farrar, Straus, and Giroux. (Epilepsy)

Fairburn, Christopher; and Kelly Brownell (2002). *Eating Disorders and Obesity: A Comprehensive Handbook, 2nd edition.* New York: Guilford.

Fauser, B.; and P. DeVroey (2011). *Baby-making: What the New Reproductive Treatments Mean for Families and Society.* New York: Oxford University Press.

Ferreira, Vitor S. (2011). "Becoming a Heavily Tattooed Young Body: From a Bodily Experience to a Body Project." *Youth and Society*, 46 (3), 303-337.

Fetterman, Tammy C.; and Patrick Ying (2011). "Informed Consent and Electroconvulsive Therapy." *Journal of the American Psychiatric Nurses Association*, 17 (3), 219-222.

Feuille, Margaret; and Ken Pargament (2015). "Pain, Mindfulness, and Spirituality: A Randomized Controlled Trial Comparing Effects of Mindfulness and Relaxation on Pain-Related Outcomes in Migraineurs." *Journal of Health Psychology*, 20 (8), 1090-1106.

Fields, Helen (2010). "Misery in the Genes." The Chronicle of Higher Education, May 2.

Finkelstein, Eric; and Laurie Zuckerman (2008). *The Fattening of America: How the Economy Makes Us Fat, If It Matters, and What To Do About It.* Hoboken: John Wiley and Sons.

Firth, Nick (2014). "Effectiveness of Psychologically Focused Group Interventions for Multiple Sclerosis: A Review of the Experimental Literature." *Journal of Health Psychology*, 19 (6), 789-801.

Fitzpatrick, Laura (2007). "The Gender Conundrum." Time Magazine, November 19, 59.

Fleming, Peggy; and Peter Kaminsky (1999). *The Long Department: Skating Toward Life's Victories*. New York: Pocket Books. (Breast cancer)

Flynn, Sandra; Cathryn Rodway; Louis Appleby; and Jenny Shaw (2013). "Serious Violence by People with Mental Illness: National Clinical Survey." *Journal of Interpersonal Violence*, 29 (8), 1438-1458.

Frosdal, Marian B. (2015). "Perception of Pain among Pediatric Patients with Sickle Cell Pain Crisis." *Journal of Pediatric Oncology Nursing*, 32 (1), 5-20.

Frame, Kathleen O.; and Ivy M. Alexander (2013). "Mind-Body Therapies for Sleep Disturbances in Women at Midlife." *Journal of Holistic Nursing*, 31(4), December, 276-284.

Frances, Allen. (2013). *Essentials of Psychiatric Diagnosis: Responding to the Challenge of DSM-5*. New York: Guilford Press.

Frances, Allen; and K. Dayle Jones (2014). "Should Social Workers Use Diagnostic and Statistical Manual of Mental Disorders-5?" *Research on Social Work Practice*, 24 (1), 11-12.

Friedman, Matthew J. (2011). Treating PTSD in Military Personnel: A Clinical Handbook. Guilford Press.

Friedman, Matthew J.; Terence M. Keane; and Patricia A. Resick (2014). *Handbook of PTSD: Science and Practice*, 2nd *edition*. New York: Guilford Press.

Gambrill, Eileen (2014). "The Diagnostic and Statistical Manual of Mental Disorders as a Major Form of Dehumanization in the Modern World." *Research on Social Work Practice*, 24 (1), 13-36.

Gibbs, Nancy (2010). "Love, Sex, Freedom, and the Paradox of the Pill." Time Magazine, May 3, 41-47.

Giles, James (2012). The Nature of Sexual Desire. Lanham: University Press of America.

Gillsjo, Catharina; Donna Schwartz-Barcott; Ingrid Bergh; and Lars O. Dahlgren (2012). "Older Adults' Ways of Dealing with Daily Life while Living with Long-Term Musculoskeletal Pain at Home." *Journal of Applied Gerontology*, 31 (5), 685-705.

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

Glattacker, Manuela; Katja Heyduck; and Cornelia Meffert (2012). "Illness Beliefs and Treatment Beliefs as Predictors of Short and Middle Term Outcome in Depression." *Journal of Health Psychology*, 18 (1), 139-152.

Goldsmith, Connie, MPA, RN (2000). "Sickle Cell Anemia: No System is Spared." Healthweek, October 16, 22-24.

Goldstein, Avram (2001). Addiction: From Biology to Drug Policy. New York: Oxford University Press.

Goleman, Daniel (1995). Emotional Intelligence: Why It Can Matter More Than IQ. New York: Bantam Books.

Golla, Heidrun; Maren Galushko; Holger Pfaff; and Raymond Voltz (2011). "Unmet Needs of Severely Affected Multiple Sclerosis Patients: The Health Professionals' View." *Palliative Medicine*, 26 (2) 139-151.

Good, Mary-Jo D. (2013). "Perspectives on Trauma and Healing from Anthropology and Social and Affective Neuroscience." *Transcultural Psychiatry*, 50 (5), 744-752.

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

Goodley, Dan (2016). Disability Studies: An Interdisciplinary Approach (2nd ed.). Sage Publishing.

Gordon, Debra, MS (2011). "Fragile X Syndrome." Neurology Now, October/November, 37-49.

Gottlieb, Lori (2000). Stick Figure: A Diary of My Former Self. New York: Simon and Schuster. (Anorexia)

Gould, Thomas J., PhD (2010). "Addiction and Cognition." Addiction Science and Clinical Practice, December, 4-13.

Gray, Barbara B. (2015). "Moving Science Forward." Neurology Now, June/July, 42-45.

Gray, Richard M.; and Richard F. Liotta (2012). "PTSD: Extinction, Reconsolidation,, and the Visual-Kinesthetic Dissociation Protocol." *Traumatology*, 18 (2), 3-16.

Gray, Steven (2011). "Recipe for Food Safety." Time Magazine, May.

Halpern, Sue (2008). "Forgetting is the New Normal." Time Magazine, May 19, 42-45.

Hanson, Bridget L.; and Joelle C. Ruthig (2012). "The Unique Role of Sleep Quality in Older Adults' Psychological Well-Being." *Journal of Applied Gerontology*, 31 (5), 587-607.

Hargrove, Anne (1988). *Getting Better: Conversations with Myself and Other Friends While Healing From Breast Cancer*. Minneapolis: CompCare.

Harrell, Eben (2011). "A Flicker of Consciousness" (Vegetative State). Time Magazine, November 28, 42-47.

Haupt, Jennifer (2008). "Healing Touch." Neurology Now, May/June, 26-30.

Hillman, Jennifer (2000). Clinical Perspectives on Elderly Sexuality. New York: Kluwer Academic/ Plenum Publishers.

Hiscott, Rebecca (2015). "Rethink Chronic Pain." Neurology Now, August/September, 10-11.

Honel, Rosalie (1988). *Journey with Grandpa: Our Family's Struggle with Alzheimer's* Disease. Baltimore: Johns Hopkins University Press.

Hornbacher, Marya (2008). Madness: A Bipolar Life.

Horowitz, A. V.; and J. C. Wakefield (2012). *All We Have to Fear: Psychiatry's Transformation of Natural Anxieties into Mental Disorders.* New York: Oxford University Press.

Howe, Herbert (1981). Do Not Go Gentle. New York: W. W. Norton and Company.

Humphreys, Janice; Bruce A. Cooper; and Christine Miaskowski (2011). "Occurrence, Characteristics, and Impact of Chronic Pain in Formerly Abused women." *Violence against Women*, 17 (10), 1327-1343.

Hurt, Catherine S.; John Weinman; Rachael Lee; and Richard G. Brown (2011). "The Relationship of Depression and Disease Stage to Patient Perceptions of Parkinson's Disease." *Journal of Health Psychology*, 17 (7), 1076-1088.

Iannelli, Vincent, MD (2011). "Commotio Cordis." About.com Pediatrics, June 4.

Igier, Valerie; Paul C. Sorum; and Etienne Mullet (2014). "Judging Patients' Pain from External Cues." *Journal of Health Psychology*, 19 (4), 570-573.

Jack, Dana (1991). Silencing the Self: Women and Depression. Cambridge: Harvard University Press.

Jacobson, Lamerial; and S. Kent Butler (2013). "Grief Counseling and Crisis Intervention in Hospital Trauma Units: Counseling Families Affected by Traumatic Brain Injury." *The Family Journal*, 21 (4), 417-424.

Jahani, Ali; Nahid Rejeh; Majideh Heravi-Karimooi; Mojtaba Vaismoradi; and Melanie Jasper (2014). "Spiritual Wellbeing of Iranian Patients with Acute coronary Syndromes: A Cross-Sectional Descriptive study." *Journal of Research in Nursing*, *19(6)*, 518-527.

Jensen, Mary E.; Elizabeth A. Pease; Kris Lambert; Diane R. Hickman; Ora Robinson; Kathleen T. McCoy; Jennifer K. Barut; Kathleen M. Musker; Dana Olive; Connie Noll; Jeffery Ramirez; Dawn Coglliser; and Joan K. King (2013). "Championing People-First Language: A Call to Psychiatric Mental Health Nurses." *Journal of the American Psychiatric Nurses Association*, 19 (3), 146-151.

Johnson-Powell, Gloria; and Joe Yamamoto (1997). *Transcultural Child Development: Psychological Assessment and Treatment*. New York: John Wiley and Sons.

Kagan, Jerome (2013). The Human Spark: The Science of Human Development. Perseus Academic.

Keigher, Sharon; Anne Fortune; and Stanley Witkin (2000). Aging and Social Work: The Changing Landscapes.

Washington DC: National Association of Social Workers Press.

Kelly, Catherine G., BSN, RN; Shirley Cudney, RN; Clarann Weinert, PhD, RN (2012). "Use of Creative Arts as a Complementary Therapy by Rural Women Coping with Chronic Illness." *Journal of Holistic Nursing*, 30 (1) March, 48-54.

Kennedy, Gary (2000). *Geriatric Mental Health Care: A Treatment Guide for Health Professionals*. New York: Guilford Press.

Kluepfel, Lisa; Terry Ward; Rachel Yehuda; Eleni Dimoulas; Ann Smith; and Kelly Daly (2013). "The Evaluation of Mindfulness-Based Stress Reduction for Veterans with Mental Health Conditions." *Journal of Holistic Nursing*, 31 (4), December, 248-255.

Kluger, Jeffrey (2009). "Dealing with Brain Injuries." Time Magazine, April 6, 57.

Kluger, Jeffrey (2007). "Rewiring the Brain." Time Magazine, September 10, 46-47.

Kluger, Jeffrey (2007). "The Science of Appetite." Time Magazine, June 11, 49-61.

Knox, David (1985). Portrait of Aphasia. Detroit: Wayne State University Press.

Kolesinska, Zofia; S. Faisal-Ahmed; Marek Niedziela; Jillian Bryce; Marta Molinska-Glura; Martina Rodie; Jipu Jiang; et.al. (20 more authors) (2014). "Changes Over Time in Sex Assignment for Disorders of Sex Development." *Pediatrics*, 134 (3), September 1, 710-715.

Kondracke, Morton (2001). Saving Milly: Love, Politics, and Parkinson's Disease. New York: Public Affairs.

Krok, Jessica L.; and Tamara A. Baker (2014). "The Influence of Personality on Reported Pain and Self-Efficacy for Pain Management in Older Cancer Patients." *Journal of Health Psychology*, 19 (10), 1261-1270.

Lagana, Luciana; and Christina M. Hassija (2011). "Bodily Pain and Coping Styles among Four Geriatric Age Groups of Women." *Journal of Health Psychology*, 17 (4), 545-555.

Landale, N. S.; S. M. McHale; and A. Booth (2013). Families and Child Health. New York: Springer.

LaPan, Amy; and Tony Platt (2005). "To Stem the Tide of Degeneracy: The Eugenic Impulse in Social Work." In *Mental Disorders in the Social Environment: Critical Perspectives,* ed. Stuart A. Kirk. New York: Columbia University Press, 139-164.

Larkin, M. (1994). When Someone You Love Has Alzheimer's. New York: Lynn Sonberg.

Lavin, Robert; and Juyoung Park (2014). "A Characterization of Pain in Racially and Ethnically Diverse Older Adults: A Review of the Literature." *Journal of Applied Gerontology*, 33 (3), 258-290.

LeDoux, Joseph (2002). Synaptic Self: How Our Brains Become Who We Are. New York: Penguin Putnam.

Lerner, Gerda (1985). A Death of One's Own. Madison: University of Wisconsin Press.

Lerner, Max (1990). Wrestling with the Angel: A Memoir of My Triumph Over Illness. New York: W. W. Norton and Company.

Lester, Rebecca (2013). "Back from the Edge of Existence: A Critical Anthropology of Trauma." *Transcultural Psychiatry*, 50 (5), 753-762.

Lewis, Celine; Heather Skirton; and Ray Jones (2011). "Reproductive Empowerment: The Main Motivator and Outcome of Carrier Testing." *Journal of Health Psychology*, 17 (4), 567-578.

Linton, Kristen F.; Taylor E. Krcek; Leonard M. Sensui; and Jessica L. H. Spillers (2014). "Opinions of People who Self-Identify with Autism and Asperger's on DSM-5 Criteria." *Research on Social Work Practice*, 24 (1), 67-77.

Longest, Kyle C.; and Peggy A. Thoits (2012). "Gender, the Stress Process, and Health: A Configurational Approach." *Society and Mental Health*, 2 (3), 187-206.

Luhrmann, Tanya M. (2013). "Making God Real and Making God Good: Some Mechanisms through which Prayer may Contribute to Healing." *Transcultural Psychiatry*, 50 (5), 707-725.

Maddux, J. E.; and B. A. Winstead (2008). *Psychopathology: Foundations for a Contemporary Understanding*. New York: Routledge.

Manhas, Coral (2014). "Self-Esteem and Quality of Life of People Living with HIV/AIDS." *Journal of Health Psychology*, 19 (11), 1471-1479.

Martin, Kathryn R.; Britta Schoster; Janice Woodard; and Leigh F. Callahan (2012). "What Community Resources do Older Community-Dwelling Adults Use to Manage their Osteoarthritis? A Formative Examination." *Journal of Applied Gerontology*, 31 (5), 661-684.

Matto, Holly; Jessica Strolin-Goltzman; and Michelle Ballan (2013). *Neuroscience for Social Work: Current Research and Practice.* New York: Springer.

Mazzoni, Davide; and Elvira Cicognani (2013). "Sharing Experiences and Social Support Requests in an Internet Forum for Patients with Systemic Lupus Erythematosus." *Journal of Health Psychology*, 19 (5), 689-696.

McClintock, Shawn M.; and Mustafa M. Husain (2011). "Electroconvulsive Therapy Does Not Damage the Brain." *Journal of the American Psychiatric Nurses Association*, (17 (3), 212-213.

McCullough, James, Jr. (2001). Skills Training Manual for Diagnosing and Treating Chronic Depression: Cognitive Behavioral Analysis System of Psychotherapy. New York: Guilford Press.

McGirk, Tim (2009). "The Hell of PTSD." Time Magazine, November 30, 41-43.

McGlasson, Terencio D.; James D. Christian; Mandy M. Johnson; Stacey L. Nelson; Mary E. Roe; Lindsey C. Saukko; Sarah E. Sawinski; Joseph E. Stensland; and Robin L. Wheaton (2014). "Dancing with the Elephant in the Room: Empowering Future Counselors to Address Sexual Issues in Counseling." *The Family Journal*, 22 (2), 245-250.

McGowin, Diana (1993). *Living in the Labyrinth: A Personal Journey through the Maze of Alzheimer's*. New York: Delacorte Press.

McLeod, Jane D. (2012). "The Meanings of Stress: Expanding the Stress Process Model." *Society and Mental Health*, 2 (3), 172-186.

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

Meyer, Donald (1997). *Views from Our Shoes: Growing up with a Brother or Sister with Special Needs*. Bethesda: Woodbine House.

Miller, Jennifer (2001). The Day I Went Missing: A True Story. New York: St. Martin's Press.

Moniz, Cynthia; and Stephen Gorin (2013). *Health Care Policy and Practice: A Biopsychosocial Perspective, 4th edition.* Routledge.

Monsivais, Diane B.; and Joan C. Engebretson (2012). "I'm Just Not That Sick: Pain Medication and Identity in Mexican American Women with Chronic Pain." *Journal of Holistic Nursing*, 30 (3), September, 188-194.

Moore, David (2001). *The Dependent Gene: The Fallacy of "Nature vs. Nurture."* New York: Henry Holt and Company.

Morgan, Stephanie, MSN, RN; and Linda H. Yoder, PhD, RN (2012). "A Concept Analysis of Person-Centered Care." *Journal of Holistic Nursing*, 30 (1) March, 6-15.

Morton, Patricia M.; Markus H. Schafer; and Kenneth F. Ferraro (2012). "Does Childhood Misfortune Increase Cancer Risk in Adulthood?" *Journal of Aging and Health*, 24 (6), 948-984.

Moser, Richard P.; Jamie Arndt; Paul K. Han; Erika A. Waters; Marni Amsellem; and Bradford W. Hesse (2014). "Perceptions of Cancer as a Death Sentence: Prevalence and Consequences." *Journal of Health Psychology*, 19 (12), 1518-1524.

Mossakowski, Krysia N.; Lauren M. Kaplan; and Terrence D. Hill (2011). "Americans' Attitudes toward Mental Illness and Involuntary Psychiatric Medication." *Society and Mental Health*, 1 (3), 200-216.

Mroziewicz, Margaret, MSc.; and Rachel F. Tyndale, PhD (2010). "Pharmacogenetics: A Tool for Identifying Genetic Factors in Drug Dependence and Response to Treatment." *Addiction Science and Clinical Practice*, December, 17-29.

Munshi, Neil (2008). "More Patients Seek Experimental Stem Cell Therapy." The Boston Globe, June 13.

Mukherjee, Siddhartha (2011). The Emperor of all Maladies: A Biography of Cancer. Scribner.

Murcia, Andy; and Bob Stewart (1989). *Man to Man: When the Woman You Love Has Breast Cancer*. New York: St. Martin's Press.

Nachar, Nadim; Stephane Guay; Dominic Beaulieu-Prevost; and Andre Marchand (2012). "Assessment of the Psychosocial Predictors of Health-Related Quality of Life in a PTSD Clinical Sample." *Traumatology*, 19 (1), 20-27.

Newton, Danielle; Christine Bayly; Christopher K. Fairley; Marcus Chen; Louise Keogh; Meredith Temple-Smith; Henrietta Williams; Kathleen McNamee; Jane Fisher; Dorothy Henning; Arthur Hsueh; and Jane Hocking (2013).

"Women's Experiences of Pelvic Inflammatory Disease: Implications for Health-Care Professionals." *Journal of Health Psychology*, 19 (5), 618-628.

O'Brien, Gerald V.; and Meghan E. Bundy (2009). "Reaching Beyond the Moron: Eugenic Control of Secondary Disability Groups." *Journal of Sociology and Social Welfare*, 36 (4) December, 153-171.

Ocha, Witchayanee; and Barbara Earth (2012). "Identity Diversification among Tansgender Sex Workers in Thailand's Sex Tourism Industry." *Sexualities*, 16 (1/2), 195-216.

Orchowski, Lindsay M.; Amy S. Untied; and Christine A. Gidycz (2013). "Social Reactions to Disclosure of Sexual Victimization and Adjustment among Survivors of Sexual Assault." *Journal of Interpersonal Violence*, 28 (10), 2005-2023.

Osborn, Claudia (1998). Over My Head: A Doctor's Own Story of Head Injury from the Inside Looking Out. Kansas City: Andrews McMeel Publishing.

Pack, Margaret (2014). "Vicarious Resilience: A Multilayered Model of Stress and Trauma." Affilia, 29 (1), 18-29.

Paget, Marianne (1993). A Complex Sorrow: Reflections on Cancer and an Abbreviated Life. Philadelphia: Temple University Press.

Pagnini, Francesco; Gian M. Manzoni; Aurora Tagliaferri; and Chris J. Gibbons (2015). "Depression and Disease Progression in Amyotrophic Lateral Sclerosis: A Comprehensive Meta-Regression Analysis." *Journal of Health Psychology*, 20 (8), 1107-1128.

Pahwa, Rajesh; and Kelly E. Lyons (2013). Handbook of Parkinson's Disease, 5th edition. CRC Press.

- Park, Alice (2010). "Alzheimer's Unlocked." Time Magazine, 53-59.
- Park, Alice (2008). "America's Health Check-Up." Time Magazine, December 1, 41-48.
- Park, Alice (2011). "Cracking Cancer's (DNA) Code." Time Magazine, June 13, 68-71.
- Park, Alice (2011). "Decoding Cancer." Time Magazine, April 18.
- Park, Alice (2011). "Healing the Hurt: Finding New Ways to Treat Pain." Time Magazine, March 7, 64-71.
- Park, Alice (2010). "Helping Hearts." Time Magazine, April 26, 41-42.
- Park, Alice (2010). "How to Live 100 Years." Time Magazine, February 22, 57-74.
- Park, Alice (2011). "How to Stop the Superbugs" (E coli). Time Magazine, June 20, 34-36.
- Park, Alice (2008). "Organ Transplants without the Drugs." Time Magazine, February 11, 57.
- Park, Alice3 (2015). "The Cancer Gap." Time Magazine, March 30, 43-47.
- Park, Alice (2007). "The Problem with Transfusions." Time Magazine, October 22, 56.
- Park, Alice (2009). "The Quest Resumes" (stem cells). Time Magazine, February 9, 39-43.
- Park, Alice (2011). "The Tiniest Transplant" (stem cells). Time Magazine, June 27, 46-47.
- Park, Alice (2009). "This Doctor Does Not Want to See You." Time Magazine, June 22, 61-67.
- Park, Alice (2011). "What Drives Autism?" Time Magazine, July 18, 17.
- Park, Alice (2007). "Young Survivors" (of cancer). Time Magazine, July 30, 35-36.

Park, D.; and A. Gutchess (2006). "The Cognitive Neuroscience of Aging and Culture." *Current Directions in Psychological Science*, 15 (3), 105-108.

Parmelee, Patricia A.; Tina L. Harralson; Jesse A. McPherron; Jamie DeCoster; and H. Ralph Schumacher (2012). "Pain, Disability, and Depression in Osteoarthritis: Effects of Race and Sex." *Journal of Aging and Health*, 24 (1), 168-187.

Paturel, Amy (2015). "Heads First" (sports concussions). Neurology Now, August/September, 14-19.

Paturel, Amy (2014). "Sleep Well: Could Getting More High-Quality Sleep Protect the Brain?" *Neurology Now*, 10 (1), February/March, 34-37.

Paul, Annie Murphy (2010). "The Womb. Your Mother. Yourself." Time Magazine, October 4, 49-55.

Pedersen, Eric R.; Debra L. Kaysen; Kristen P. Lindgren; Jessica Blayney; and Tracy L. Simpson (2014). "Impact of Daily Assessments on Distress and PTSD Symptoms in Trauma-Exposed Women." *Journal of Interpersonal Violence*, 29 (5), 824-845.

Picardie, Ruth (1997). *Before I Say Goodbye: Recollections and Observations from One Woman's Final Year.* New York: Henry Holt and Company.

Pickert, Kate (2011). "The Screening Dilemma: Are Some Cancers Better Left Undiscovered?" *Time Magazine*, June 13, 60-67.

Pinker, Steven (2009). How the Mind Works. W. W. Norton & Company.

Pinto-Gouveia, Jose; Jeana Costa; and Joao Maroco (2015). "The First Two Years of Rheumatoid Arthritis: The Influence of Acceptance on Pain, Physical Limitation and Depression." *Journal of Health Psychology*, 20 (1), 102-112.

Pollack, Andrew (2005). "Parkinson's Patients Suing Amgen Over Drug." The New York Times, April 27.

Porter, Kristen E. "Chemo Brain: Is Cancer Survivorship Related to Later-Life Cognition? Findings from the Health and Retirement Study." *Journal of Aging and Health*, 25 (6), 960-981.

Preston, Lydia (2004). Breaking Out: A Woman's Guide to Coping with Acne at Any Age. New York: Fireside.

Probst, Barbara (2014). "The Life and Death of Axis IV: Caught in the Quest for a Theory of Mental Disorder." *Research on Social Work Practice*, 24 (1), 123-131.

Prowe, Garry (2010). Successfully Surviving a Brain Injury: A Family Guidebook, from the Emergency Room to Selecting a Rehabilitation Facility. Brain Injury Association of America.

Puri, Basant; Robert Brown; Heather McKee; and Ian Treasaden (2012). *Mental Health Law: A Practical Guide, 2nd edition.* CRC Press.

Quandt, Sara A.; Joseph G. Grzywacz; Rebecca H. Neiberg; Wei Lang; Kathryn Altizer; Ronny A. Bell; and Thomas A. Arcury (2012). "Daily Symptom Management Practices for Arthritis Used by Older Adults." *Journal of Aging and Health*, 24 (4), 598-615.

Rabins, Peter; Constantine Lyketsos; and Cynthia Steeler (1999). *Practical Dementia Care*. New York: Oxford University Press.

Reich, Jennifer, MA, RN; and Cathy Michaels, PhD, RN (2012). "Becoming Whole: The Role of Story for Healing." *Journal of Holistic Nursing*, 30 (1) March, 16-23.

Rich, Katherine (1999). The Red Devil: To Hell with Cancer - And Back. New York: Crown Publishers.

Rochman, Bonnie (2010). "This Cord Could Save a Life" (stem cells). Time Magazine, July 26, 51-52.

Rose, Nikolas (2013). Neuro: The New Brain Sciences and the Management of the Mind Princeton University Press.

Rose, Nikolas (2013). "The Human Sciences in a Biological Age." Theory, Culture and Society, 30 (1), 3-34.

Rosedale, Mary (2011). "Our Patients' Lives are Worth Fighting for and electroconvulsive Therapy (ECT) Saves Lives: A Compendium of the Evidence." *Journal of the American Psychiatric Nurses Association*, 17 (3), 209-211.

Rosenberg, Jessie; and Samuel Rosenberg (2013). Community Mental Health. New York: routledge.

Rubenson, Ellen (2000). *When Aging Parents Can't Live Alone: A Practical Family Guide*. Los Angeles: Lowell House.

Rytwinski, Nina K.; Jennifer S. Avena; Aileen M. Achiverri-Cohen; Lori A. Zoellner; and Norah C. Feeny (2013). "The Relationships between Posttraumatic Stress Disorder Severity, Depression Severity and Physical Health." *Journal of Health Psychology*, 19 (4), 509-520.

Sajatovic, Martha, MD; and Luis Ramirez, MD (2001). Rating Scales in Mental Health. Hudson: Lexi-Comp.

Sapey, Bob; and Peter Bullimore (2013). "Listening to Voice Hearers." Journal of Social Work, 13 (6), 616-632.

Schoedl, Aline F.; Mariana P. Costa; Victor Fossaluza; Jair J. Mari; and Marcelo F. Mello (2014). "Specific Traumatic Events during Childhood as Risk Factors for Post-Traumatic Stress Disorder Development in Adults." *Journal of Health Psychology*, 19 (7), 847-857.

Schuster, Randi; Marina Bornovalova; and Elizabeth Hunt (2012). "The Influence of Depression on the Progression of HIV: Direct and Indirect Effects." *Behavior Modification*, 36 (2) 123-145.

Schwartz, Jeffrey; and Sharon Begley (2003). *The Mind and the Brain: Neuroplasticity and the Power of Mental Force.* Regan Books.

Sharples, Tiffany (2009). "A User's Guide to Good Health at Every Age." Time Magazine, June 22, 85-90.

Shaw, Gina (2010). "When the Nose Doesn't Know." Neurology Now, September/October, 23-29.

Sheed, Wilfrid (1995). In Love with Daylight: A Memoir of Recovery. New York: Simon and Schuster

Sherman, Carl (2007). "Vaccine May Reduce Fetal Exposure to Nicotine." NIDA Notes, 21 (3) April.

Sifferlin, Alexandra (2015). "He Snoozes, He Loses? Sleep Apnea." Time Magazine, June 15, 20.

Smith, Kevin (2008). "Taking the Fire Out of Smoking." Killeen Daily Herald, January 5, B1-B2.

Smith, Noelle B.; Chrystyna D. Kouros; and Alicia E. Meuret (2014). "The Role of Trauma Symptoms in Nonsuicidal Self-Injury." *Trauma, Violence and Abuse*, 15 (1), 41-56.

Snowdon, David (2001). Aging with Grace: What the Nun Study Teaches Us About Leading Longer, Healthier, and More Meaningful Lives. New York: Bantam Books.

Solomon, Andrew (2001). The Noonday Demon: An Atlas of Depression. New York: Scribner.

Sperry, Len (2011). "Systemic Lupus Erythematosus: The Impact of Individual, Couple, and Family Dynamics." *The Family Journal*, 19 (3), 328-332.

Stark, Marcella D.; Rosanne S. Keathley; and Judith A. Nelson (2011). "A Developmental Model for Counseling Infertile Couples." *The Family Journal*, 19 (2), 225-230.

Starzynski, Laura L.; and Sarah E. Ullman (2014). "Correlates of Perceived Helpfulness of Mental Health Professionals following Disclosure of Sexual Assault." *Violence against Women*, 20 (1), 74-94.

Stephens, Stephanie (2010). "Lupus and Your Heart." Neurology Now, July/August, 19-25.

Stephens, Stephanie (2013). "Age is Just a Number: Young Adult Stroke." Neurology Now, February/March, 19-25.

Stern, Gerald; and Andrew Lees (1982). Parkinson's Disease: The Facts. Oxford University Press.

Stryker, Susan (2008). Transgender History. Berkeley: Seal Press.

Styron, William (1990). Darkness Visible: A Memoir of Madness. New York: Random House.

Suddath, Claire (2011). "Living with Pain." Time Magazine, March 7, 73-79.

Suren, Pal; Nina Gunnes; Christine Roth; Michaeline Bresnahan; Mady Hornig; Deborah Hirtz; Kari K. Lie; W. Ian Lipkin; Per Magnus; Ted Reichborn-Kjennerud; Synnve Schjolberg; Ezra Susser; Anne-Siri Oyen; George D. Smith; and Camilla Stoltenberg (2014). "Parental Obesity and Risk of Autism Spectrum Disorder." *Pediatrics*, 13, 1128-1138.

Taleff, M. J. (2006). Critical Thinking for Addiction Professionals. New York: Springer Company.

Tanzi, Elizabeth M. (2011). "Health-Related Quality of Life of Hematopoietic Stem Cell Transplant Childhood Survivors: State of the Science." *Journal of Pediatric Oncology Nursing*, 28 (4), 191-202.

Taylor, Jill B. (2009). My Stroke of Insight: A Brain Scientist's Personal Journey. Plume.

Teagle, Sarah (2007). "Depot Naltrexone Appears Safe and Effective for Heroin Addiction." NIDA Notes, 21 (3) April.

Teasdale, Brent; Leah E. Daigle; and Ellen Ballard (2014). "Trajectories of Recurring Victimization among People with Major Mental Disorders." *Journal of Interpersonal Violence*, 29 (6), 987-1005.

Thacher, Jesse D.; Olena Gruzieva; Goran Pershagen; Asa Neuman; Magnus Wichman; Inger Kull; Erik Melen; and Anna Bergstrom (2014). "Pre- and Postnatal Exposure to Parental Smoking and Allergic Disease through Adolescence." *Pediatrics*, 134 (3), September, 428-434.

Thomas, Linda S.; Nancy Stephenson; Mel Swanson; D. Elizabeth Jesse; and Sylvia Brown (2013). "A Pilot Study: The Effect of Healing Touch on Anxiety, Stress, Pain, Pain Medication Usage, and Physiological Measures in Hospitalized Sickle Cell Disease Adults Experiencing a Vaso-Occlusive Pain Episode." *Journal of Holistic Nursing*, 31 (4), December, 234-247.

Thompson, Mark (2010). "An Rx for the Army's Wounded Minds." Time Magazine, August 16, 20-23.

Thompson, Tracy (1995). The Beast: A Reckoning with Depression. New York: G. P. Putnam's Sons.

Tibbs, Margaret (2001). Social Work and Dementia: Good Practice and Care Management. London: Jessica Kingsley Publishers.

Topp, Sarah S. (2012). "Against the Quiet Revolution: The Rhetorical Construction of Intersex Individuals as Disordered." *Sexualities*, 16 (1/2), 180-194.

Tsao, Jennie C.; Eufemia Jacob; Laura C. Seidman; Mary A. Lewis; and Lonnie K. Zeltzer (2014). "Psychological Aspects and Hospitalization for Pain Crises in Youth with Sickle Cell Disease." *Journal of Health psychology*, 19 (3), 407-416.

Tsiaras, Alexander; and Barry Werth (2002). From Conception to Birth: A Life Unfolds. New York: Doubleday.

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

Turner, R. Jay (2013). "Understanding Health Disparities: The Relevance of the Stress Process Model." *Society and Mental Health*, 3 (3), 170-186.

Valeo, Tom (2011). "How to Use Pain Meds Safely." Neurology Now, February/March, 10-11.

Valle, Ramon (1998). *Caregiving Across Cultures: Working with Dementing Illness and Ethnically Diverse Populations*. Washington DC: Taylor and Francis.

Van Wormer, K. S.; and B. A. Thyer (2010). *Evidence-Based Practice in the Field of Substance Abuse: A Book of Readings*. Washington DC: Sage Publications.

Vash, Carolyn; and Nancy Crewe (2004). Psychology of Disability, 2nd edition. New York: Springer

Vasterling, Jennifer J.; Richard A. Bryant; and Terence M. keane (2012). *PTSD and Mild Traumatic Brain Injury*. Guilford.

Verkaik, Renate; Martine Busch; Trees Koeneman; Rianny van den Berg; Peter Spreeuwenberg; and Anneke L. Francke (2014). "Guided Imagery in People with Fibromyalgia: A Randomized Controlled Trial of Effects on Pain, Functional Status and Self-Efficacy." *Journal of Health Psychology*, 19 (5), 678-688.

Volkow, Nora, MD (2007). "Genes and Smoking." NIDA Notes, 21 (3) April.

Wadler, Joyce (1992). My Breast: One Woman's Cancer Story. New York: Addison Wesley.

Wakefield, Jerome C.; and Mark F. Schmitz (2014). "Uncomplicated Depression, Suicide Attempt, and the DSM-5 Bereavement Exclusion Debate: An Empirical Evaluation." *Research on Social Work Practice*, 24 (1), 37-49.

Wall, Pamela L. H. (2012). "Posttraumatic Stress Disorder and Traumatic Brain Injury in Current Military Populations: A Critical Analysis." *Journal of the American Psychiatric Nurses Association*, 18 (5), 278-298.

Walsh, Bryan (2014). "Don't Blame Fat." Time Magazine, June 23, 29-35.

Webster, Barbara (1989). All of a Piece: A Life with Multiple Sclerosis. Baltimore: Johns Hopkins University Press.

Weiner, Richard D.; and Grace Falcone (2011). "Electroconvulsive Therapy: How Effective Is It?" *Journal of the American Psychiatric Nurses Association*, 17 (3), 217-218.

White, Erina (2013). "The Ethics of Involuntary Hospitalization." *Journal of Social Work Values and Ethics*, 10 (2), Fall, 25-35.

Whitten, Lori (2007). "Cocaine Abusers: Pre-treatment Cue Responses Predict Recovery Success." *NIDA Notes*, 21 (2) February.

Whiteen, Lori (2007). "Cocaine Craving Activates Brain Reward Structures; Cocaine High Dampens Them." *NIDA Notes*, 21 (2) February.

Widman, Laura; Carol E. Golin; and Seth M. Noar (2012). "When do Condom Use Intentions Lead to Actions? Examining the Role of Sexual Communication on Safer Sexual Behavior among People Living with HIV." *Journal of Health Psychology*, 18 (4), 507-517.

Wilber, Ken (1991). *Grace and Grit: Spirituality and Healing in the Life and Death of Treya Killam Wilber*. Boston: Shambhala. (Cancer)

Wong, Stephen E. (2014). "A Critique of the Diagnosis Construct Schizophrenia." *Research on Social Work Practice*, 24 (1), 132-141.

Yambo, Teresa; and Mary Johnson (2014). "An Integrative Review of the Mental Health of Partners of Veterans with Combat-Related Posttraumatic Stress Disorder." *Journal of the American Psychiatric Nurses Association*, 20 (1), 31-41.

Yapko, Michael (1997). Breaking the Patterns of Depression. New York: Doubleday.

Zaccaro, Antonella; and Maria F. Freda (2014). "Making Sense of Risk Diagnosis in Case of Prenatal and Reproductive Genetic Counseling for Neuromuscular Diseases." *Journal of Health Psychology*, 19 (3), 344-357.

Zakosscielna, Karolina M.; and Patricia A. Parmelee (2013). "Pain Variability and Its Predictors in Older Adults: Depression, Cognition, Functional Status, Health, and Pain." *Journal of Aging and Health*, 25 (8), 1329-1339.

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)
- \square 12 font size
- \Box 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 <u>between paragraphs</u>)
- □ 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)
- \Box 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)
- \Box There is no indention at the beginning of this paragraph
- \Box 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
- \Box The title is centered and not in bold
- □ All paragraphs must be indented
- □ 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.
- \Box 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* (6th 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: <u>http://www.bu.edu/ssw/files/2010/10/BUSSW-style-guide-6th-ed-April-13.pdf</u>
- Sample APA Paper Owl Purdue: http://owl.english.purdue.edu/media/pdf/20090212013008_560.pdf
- Son of Citation Machine Citing Support: http://citationmachine.net/index2.php?regstyleid=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.
 - o 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).
 - o 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).

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 one consistent font (professor prefers 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!!

_____ 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).