

LOYOLA UNIVERSITY

School of Education

Spring 2011

Abnormal Psychology of Childhood and Adolescence

CIEP 413

Instructor: David Shriberg, Ph.D.

Instructor's Work Phone: (312) 915-7087

Instructor's Cell Phone: (224) 456-9450

Instructor's E-mail: dshribe@luc.edu

Instructor's Office: LT 1147

Instructor's Office hours: Th 1-3 and by appointment

Classroom: School of CMUN- Room 223

Time: Thursdays, 10-12:30

The purpose of this course is to develop a working knowledge of childhood/adolescent psychopathology from multiple theoretical perspectives. In addition, the interactions of individual diversity, families, communities, schools and mental health providers in either etiology and/or treatment planning will be considered. Set within an ecological framework, emphasis will be placed on understanding the relationship between various nosologic systems, e.g. DSM-IV-TR and IDEA04, and their impact on societal conceptualizations of mental health/illness.

PRIMARY GOALS OF COURSE

This class has two primary goals. The first goal is to provide an introduction to school-based mental health, with a particular emphasis placed on the ethics of school mental health service provision (see assignment #2), as well as the provision of a social justice framework for considering how popular culture defines "abnormal." Assignment #3 fits in with this goal by providing students with the opportunity to observe directly how school-based mental health is being provided (or, in some cases, perhaps not being provided) in actual school settings.

The second goal of this course is for students to obtain a working knowledge of child/adolescent psychopathology, both in terms of diagnosis (including obtaining a working knowledge of the DSM-IV-TR) and, critically, in terms of prevention and intervention. Assignment #4 facilitates this goal by providing students with the opportunity to display how knowledge of child/adolescent psychopathology can inform problem-solving and intervention planning around mental health concerns. Assignment #5 also facilitates this goal by providing students with the opportunity to go into depth on a topic of interest related to child/adolescent psychopathology.

SPECIFIC COURSE OBJECTIVES

1. The concept of the normal/typical range of emotional development will be discussed.

NASP/ISBE STANDARD 7;

2. Ethical issues related to mental health counseling, reporting, and service provision in schools will be explored. **NASP/ISBE STANDARD 7;**
3. School-based mental health and its contribution to prevention and treatment of mental health issues will be explored **NASP/ISBE STANDARD 7;**
4. Specific school factors that contribute to mental health services and disorders including: school climate, population, cultural values, and community resources will be explored. **NASP/ISBE STANDARDS 4, 7;**
5. Theoretical perspectives of mental disorder including: biological, psychological, social psychological, behavioral, and family systems will be explored. **NASP/ISBE STANDARD 7;**
6. Specific disorders commonly having child or adolescent onset will be studied including: pervasive development disorders, mood disorders, conduct disorders, ADHD, eating disorders, child abuse and neglect, and health related disorders. **NASP/ISBE STANDARD 7;**
7. Theoretical perspective on evaluation using both interviewing and behavioral ratings scales will be introduced. **NASP/ISBE STANDARD 7;**
8. Theories of family interaction and contribution to childhood disorders/resilience will be considered. **NASP/ISBE STANDARD 8;**
9. The concept of collaborating with families specifically around mental health issues will be discussed. **NASP/ISBE STANDARD 8;**
10. The DSM-IV-TR Diagnostic system will be related to the objectives above. **NASP/ISBE STANDARD 7;**
11. Classification procedures included in IDEA04 will be compared to the DSM-IV-TR system and legal and ethical implications of both systems will be considered. **NASP/ISBE STANDARD 7**

SCHOOL OF EDUCATION CONCEPTUAL FRAMEWORK

The School of Education, as part of a Catholic, Jesuit University, espouses social justice as a unifying conceptual framework that is designed to prepare teachers and other school personnel to practice “professionalism in the service of social justice” (see below). In concert with the rest of Loyola University Chicago and with the precepts of the Society of Jesus, an effort is made to prepare professionals who understand and seek to advance distributive justice. We prepare individuals to strive toward equity and fairness in their future professional roles. CIEP 413 maintains this focus on social justice with regard to providing services to all individuals. The four components of the conceptual framework of the School of Education are addressed within the context of four areas of study:

1. **Knowledge:** candidates pursue justice by being knowledgeable in their specialized disciplines and well educated in general so that they can offer the highest quality of service
2. **Skills:** candidates pursue justice by being competent professionals and offering their well developed skills in the service of others-particularly the sick, the poor, and the young.
3. **Ethics:** candidates know and practice the ethical standards of their professions.
4. **Service:** from whatever faith tradition they may come, candidates strive to be "persons for others."

PROFESSIONALS IN SERVICE OF SOCIAL JUSTICE

Jesuit education is founded on a 400-year tradition of academic excellence emphasizing the unique bond between teachers and learners. The School of Education prepares educators, administrators and school psychologists to be competent in the exercise of professional skills, to display a respect for diversity, to embrace distributive justice as social justice, and to recognize that education is a life-long process. Loyola University's School of Education seeks to develop professionals who use their scholarship to evaluate actions and decisions in light of their ramifications and impact on students, school organizations, and the broader community. We see the professionals of the future as thoughtful persons able to analyze situations, set goals, plan and monitor actions, evaluate results, and reflect on their own professional thinking.

Professionals are responsive to the long-term social and ethical implications of their decisions and actions. The School of Education develops persons of conscience devoted to the service of others. The faculty of the School of Education seek to develop professionals able to develop and offer educational opportunities for children, adolescents, and adults that enable them to contribute to and benefit from the social, political, and economic opportunities in their lives and to promote social justice. Professional educators in service of social justice will know the subjects they teach and how to convey content of those subjects to learners; engage in disciplined inquiry based on informed reason, reflect on experiences of self and others, consider alternative perspectives, and pursue a problem-solving orientation; evidence respect for and ability to respond to differences in learners' personal, social, economic and cultural experiences; evaluate the effects of their decisions on others (learners, families, and other professionals in the learning community); provide learning opportunities to support all learners' intellectual, social, and personal development; possess the knowledge and skills to teach all learners well and with rigor; create a learning environment that promotes positive social interaction, active engagement in learning and self-motivation; and maintain standards of professional conduct.

The content of this course is consistent with this framework in that understanding school-based mental health from a prevention and social justice perspective and understanding the range of social, emotional and behavioral problems of children and adolescents helps professional school psychologists bring a more competent and therefore just approach to the services they render to diverse populations.

REQUIRED TEXTBOOK (at WTC Bookstore)

Mash, E. J. & Wolfe, D. A. (2009) *Abnormal child psychology*. 4th Ed. Belmont, CA: Wadsworth.

Also recommended: DSM-IV-TR Committee, (2000) *DSM-IV-TR*. Washington, DC: American Psychiatric Association.

Academic Honesty: Academic honesty is an expression of interpersonal justice, responsibility and care, applicable to Loyola University faculty, students, and staff, which demands that the pursuit of knowledge in the university community be carried out with sincerity and integrity. The School of Education's Policy on Academic Integrity can be found at: http://www.luc.edu/education/academics_policies_integrity.shtml. For additional academic policies and procedures refer to: http://www.luc.edu/education/academics_policies_main.shtml

Accessibility: Students who have disabilities which they believe entitle them to accommodations under the Americans with Disabilities Act should register with the Services for Students with Disabilities (SSWD) office. To request accommodations, students must schedule an appointment with an SSWD coordinator. Students should contact SSWD at least four weeks before their first semester or term at Loyola. Returning students should schedule an appointment within the first two weeks of the semester or term. The University policy on accommodations and participation in courses is available at: <http://www.luc.edu/sswd/>

Harassment (Bias Reporting): It is unacceptable and a violation of university policy to harass, discriminate against or abuse any person because of his or her race, color, national origin, gender, sexual orientation, disability, religion, age or any other characteristic protected by applicable law. Such behavior threatens to destroy the environment of tolerance and mutual respect that must prevail for this university to fulfill its educational and health care mission. For this reason, every incident of harassment, discrimination or abuse undermines the aspirations and attacks the ideals of our community. The university qualifies these incidents as incidents of bias.

Technology: This course acknowledges and addresses the belief that technology for school psychologists is multidimensional and helps the psychologist make informed decisions by applying this technology within the school community. We will be utilizing technology in multiple ways throughout the course, both inside and outside of the classroom.

Diversity Statement: I view a commitment to culturally responsive service delivery as part and parcel to a commitment to social justice. The way that I currently view this relationship is that social justice is the aspiration (the “why” of what school psychologists do), advocacy and the use of up-to-date practice are the typical strategies that support social justice (the “how”), and then issues of cultural diversity provide the context from which much of this work takes place. Thus, for the purposes of this course, my goal is not to discuss psychopathology and school-based mental health in a vacuum, but rather in terms of how school psychology practice takes place within the real world, with all that entails, including consideration of diversity and justice. My goal is not for you to view the world as I do—indeed there are greater opportunities for learning when we respectfully disagree, including student disagreement with the instructor—but rather that students emerge from this course with an enhanced understanding of how issues of cultural

diversity impact and provide opportunities for enhanced school psychology practice as relates to the content areas of this course.

ASSIGNMENTS

1) Class Participation- 15%

A Blackboard site has been created for this course and it is my expectation that you will be an active participant in classroom activities associated with this web site. Specifically, during the first three weeks, I will be posting discussion questions by Friday and it is my expectation that all class members will provide a lengthy response (e.g., a paragraph or more) either to our original post or to a subsequent post made either by myself or by one of your classmates by 8AM the following Wednesday morning. In addition, there will be near-weekly student presentations (see assignment #3) starting with the class that meets on Thursday, February 17, and ending with the class that meets on Thursday, April 28. Accordingly, students will be responsible for leading a Blackboard discussion on their topic in the week preceding their presentation. For example, the first student presentation will be “Behavioral Disorders: Attention Deficit/Hyperactivity Disorder” on Thursday, February 17. The students who are leading this presentation must start a discussion strand on Blackboard by Friday, February 11, and then monitor and lead this discussion. It is my expectation that every student in this class will make a substantive contribution to this conversation by 8AM on Wednesday morning.

There are also a number of planned in-class activities and discussions. In-class activities are designed to achieve various learning goals but implicit in all in-class activities is the idea that often the best way to learn new material is through active engagement. You cannot actively be engaged in classroom-based learning if you are not in class and/or are consistently late. As such, students with two or more absences and/or who frequently miss parts of classes are subject to a “0” for their class participation grade and perhaps a failing grade for the course depending on severity.

2. “What Should You Do If” Paper (20%): SOE CF 8

Culturally responsive mental health service delivery involves, among other things, a thorough knowledge of the ethics code of your profession, being clinically savvy, and having the ability to think on your feet. While some situations are relatively clear in terms of the proper ethical/legal/clinical response (e.g., teacher asks you for confidential information about a student), other situations are not quite as clear (e.g., student drops by your office many times for personal “chats” but parents do not consent to counseling). For this assignment, you are to first generate an ethical “what if” situation that could plausibly occur in your role as a school psychologist and then to write a short paper that takes the following format:

- 1) begin with a short vignette containing the “what if” situation
- 2) follow with a description of the pertinent law/ethical principles involved in this situation and a summary of at least two pertinent scholarly writings that address this topic
- 3) an analysis of how you would approach this situation if you were a school based mental health professional confronted with this “what if.” What steps would you take and why? What would be the potential risks and benefits to your approach and are there any contingencies that

would alter your course?

Your paper, due on March 3, will be evaluated based on several factors, including the clarity with which the “what if “ situation was presented, the thoroughness and accuracy of your review of pertinent laws/ethics and scholarly writings, and the degree to which your proposed approach fits with the above and is cognizant of variables that might affect your decisions. The scoring rubric for this assignment is appended. *Please note that this assignment has been designed to meet Loyola University Chicago’s School of Education Conceptual Framework #8- Candidates apply ethical principles in professional decision-making. Accordingly, this assignment must be turned to and will be graded through LiveText.*

3. Field Observation/Reflections- 20%

The purpose of the assignment is to sensitize you to the ways in which children could/should/do have their mental health services coordinated through schools. In some cases, provisions of IDEA are violated. In others, services that could originate within the school do not. In others, school-based services are excellent and in yet others you might judge the school-based services you observed to be inappropriate and harmful. Your task is to visit two separate school sites for one day each. One of these sites should be an educational setting that either only or primarily serves students that have been judged to fit one of more of the main topic areas of this course (e.g., a therapeutic day school) and the other should be a mental health program housed within a “regular” educational setting (e.g., a self-contained classroom for students judged to have significant emotional disturbance). Your goal in each of these sites is to try and get as clear a sense as possible of the students in these schools/programs, the treatment they are (or perhaps aren’t receiving), a sense of how these students got to that placement, and the likely future trajectory for these students and their families. In this process, it is my expectation that you will adhere to the ethical standards of our profession and not violate student confidentiality either during your visit or in your subsequent summary of this visit (e.g., do not provide any names or other identifying information). It is also expected that you dress professionally during this visit.

After each visit, you should complete a short write-up (approximately 3-4 double spaced pages) in which you describe both what you saw on your visit and your critique of what you saw (e.g., did the school seem to be doing a good job supporting the students you observed? If so, why? If not, why not?). These papers, the first of which is due at the start of class on March 17 and the second of which is due at the start of class on April 14, will be graded on a ten point scale, with half your points based on the clarity of your writing and the second on the quality of your analysis/critique.

4. Connecting the DSM-IV-TR to a Problem-Solving Framework- 20%

Like other applied professions, the field of school psychology (and the school psychology program at Loyola) embraces a problem-solving orientation. According to a recent report put out by the Surgeon General, there is a significant shortage in mental health services provided to children, a shortage only exacerbated by the country’s recent economic woes. When children do receive mental health services/support, the school is the most common setting where this takes place. Simply put, for many children, particularly children of lower socio-economic status, schools represent the most likely, and, in many cases the only, location where they may receive needed mental health support/services. While many professions have the knowledge base and

skills to contribute in this regard, school psychologists, with their knowledge of school systems combined with their expertise in assessment, problem-solving, and intervention are in a unique position to facilitate needed support/services for students. As such, it is crucial that school psychologists not only are experts in the problem-solving model, but that they are able to connect this model with knowledge of psychopathology for children who clearly meet DSM-IV-TR criteria in order to best select interventions that have research support.

In this assignment, you are asked to demonstrate this link between problem-solving and command of the DSM-IV-TR. At the first class meeting, you will be asked to rank order a minimum of three topics from the following list—ADHD, Anxiety Disorders, Mood Disorders, Intellectual Disability (Mental Retardation), Autism Spectrum Disorders, Health-Related and Substance Use Disorders, Eating Disorders, and Child Maltreatment and Non-Accidental Trauma—in terms of your preference for leading a Blackboard discussion and in-class presentation related to this topic. Students will be placed into groups of three for each of these topics and in-class presentations will be made according to the course schedule posted below. The Blackboard discussion will take place in the week prior to your in-class presentation (see above) and each group is expected to post a set of initial questions/comments and then facilitate further discussion as responses emerge from your peers (all group members must participate in this discussion). Your goal here is both to get your classmates thinking and to inform your in-class presentation.

The in-class presentation should take approximately 30 minutes (and no more than 40 minutes) and consist of three segments. In the first segment, you should report out on the results of the Blackboard discussion. Specifically, the group should report on what they took to be the major themes in the responses provided and how these themes may or may not connect with the remainder of the presentation. The second segment should contain a problem identification/analysis interview in which one group member plays the role of a school psychologist and the other group members play roles as determined by the group (e.g., student, parent, teacher, administrator, etc.). The goal of this demonstration is to present how a school psychologist might elicit information that would be consistent with a DSM-IV-TR diagnosis within a problem-solving framework. In the final part of your presentation, you will first debrief the interview in terms of what the school psychologist was thinking and how the information obtained fit within a DSM-IV-TR and a problem-solving framework. You will then present three research-supported treatment approaches that might be applicable for the scenario you just role-played. In this manner, you will demonstrate how knowledge of the DSM-IV-TR and of research-supported school mental health practice can lead to enhanced problem-solving and intervention planning.

50 percent of your grade on this assignment will be based on your in-class interview. What I am looking for here is realism/instructional value (25 points) (e.g., don't just have your respondents describe DSM-IV-TR criteria without any prompting, but rather start with the respondents describing an unclear picture and the school psychologist asking pertinent questions that make the diagnosis clearer over time) and the quality of your questions (25 points), not how good an actor you are. 25 percent of your grade will be based on your debrief of the interview, your overview of the three possible treatment approaches, and your responses to questions from classmates and/or this instructor. Finally, 25 points will be based on your leadership of the Blackboard discussion online and your summary of this discussion in class. Please note that it is not necessary to give an overview of all of the subcomponents and diagnostic categories of the topic you have selected. For example, if you are in the “anxiety disorders” group, your inclass

role play and debrief need not cover every type of anxiety disorder, but rather should be focused on a particular diagnosis (e.g., generalized anxiety disorder), referencing other anxiety disorders only as part of explaining why the role play was represented GAD and not something else. Put another way, I will provide coverage of all of the anxiety disorders as part of the class meeting, for your presentation you can and should zoom in on a subarea (although your Blackboard discussion might be broader—e.g., a question related to gender considerations in anxiety).

5. Scholarly Review of Literature- 25%

For this assignment, students will write a scholarly review of a topic that both falls within the general framework of child/adolescent psychopathology and is applicable to school-based mental health. The purpose of this paper is to teach students how to write a well-organized and salient summary of prior knowledge on a particular topic. Developing skill in this area is important to the ability to present information professionally.

It is important to understand that in an applied field such as School Psychology that embraces a problem-solving orientation, emphasis must be placed on both theoretical concerns and treatment/practice applications. To be eligible for a grade of A, a paper must include both foci. Too often students focus on theory of etiology OR interventions but cannot integrate information from both perspectives. Please be aware of this requirement when choosing topics. Topics should be cleared with the instructor prior to beginning your review and at least two weeks before this assignment is due.

Requirements

Your paper will be scored out of 100 possible points

- Appropriate topic focus as explained above (5 points)
- A minimum of 20 relevant primary sources that have been published with the past 5-7 years (except “classics” or current research threads whose seminal article is longer than five years ago). (5 points)
- Critical thinking skills are evident. (50 points)
- Well organized; correct grammar and spelling; professional tone; avoid writing in the first person. (10 points)
- Conclusions regarding etiology and treatment are supported by the reviewed literature. (20 points)
- No new information is introduced in the Summary. (5 points)
- APA format. (5 points)
- Maximum length: 15 typed double-spaced pages (excluding references) with a font size minimum of 12 pt. and page margins of at least one inch.

As can be seen, heavy emphasis is placed on critical thinking skills. That is, it is not sufficient simply to track down a bunch of articles/book chapters and recite what each of these papers reported in isolation. The key point (and, I would argue, the critical skill needed for bringing research to practice) is to be able to make connections between the different ideas that you will be reading about. My primary suggestions for how best to do this are twofold. First, within the main body of your paper, you should use transition sentences and references to other articles/chapters that you cite as much as possible (e.g., similar to the findings of Smith (2010),

Jones and his colleagues also reported...). Second, I would strongly urge you include in your paper a section just ahead of your conclusion section in which you critique existing research as relates to your topic. If the research is clear, complete and consistent, say so and why. If, more likely, the research contains conflicting findings and is incomplete in some areas, say this and describe these inconsistencies/limitations and their implication for practice.

This paper is due at the start of class on April 28.

Grades:

A= 92.5 total points or more

A-= 89.5-92.49 total points

B+= 87.5-89.49 total points

B= 82.5-87.49 total points

Etc.

COURSE SCHEDULE

Note : All reading is to be completed by the day it is assigned. Schedule, assignments, and reading subject to change at instructor's discretion. All material that is not found in the main textbook for this course has been posted to the Blackboard site for this course in the section labeled "Class Readings" within the "Course Documents" area.

January 20 Introduction to the course

January 27 Intro to School-Based Mental Health/Social Justice Perspectives

Readings:

Albee, G. W. (1986). Towards a just society: Lessons on observations from the primary prevention of psychopathology. *American Psychologist*, 41, 891-898.

Doll, B. & Cummings, J. A. (2008). Why population-based services are essential to school mental health, and how to make them happen in your school. In B. Doll & J.A. Cummings (Eds.), *Transforming school mental health services* (pp.1-19). Bethesda, MD: National Association of School Psychologists.

Shriberg, D. (2009). Social justice and school mental health: Evolution and implications for practice. In J.M. Jones (Ed.), *The psychology of multiculturalism in schools: A primer for practice, training, and research* (pp.49-66). Bethesda, MD: National Association of School Psychologists.

Stormont, M., Reinke, W. M., & Herman, K. C. (2010). Introduction to the special issue: Using prevention science to address mental health issues in schools. *Psychology in the Schools*, 47, 1-4.

February 3 Ethics and School Mental Health

Readings:

Jacob & Hartshorne (2003)- "Ethical and Legal Issues in Counseling and Therapeutic Interventions in the Schools"

Lasser, J., & Close, L. M. (2007). School psychologists' ethical decision making: Implications from selected social psychological phenomena. *School Psychology Review*, 36, 384-400.

National Association of School Psychologists (2010). *Principles for Professional Ethics*. Bethesda, MD: National Association of School Psychologists.

February 10 *Assessment, Diagnosis, and Treatment; Diagnostic Issues and the Use of the DSM-IV-TR*

Readings:
M & W Ch. 4
House Chs. 1-3

February 17 *Behavioral Disorders: Attention Deficit/Hyperactivity Disorder*

Readings:
M & W Ch. 5
BP 89: Best Practices in Classroom Interventions for Attention Problems

February 24 **NO CLASS-NASP**

March 3 *Behavioral Disorders: Conduct Problems*

Guest Lecturer: Ross Pesce, Ph.D., School Psychologist

Readings:
M & W Ch. 6
BP 79: Best Practices in Bullying Prevention
Bradshaw, C. P., Rogers, C. R. R., Ghandour, L. A., Garbarino, J. (2009). Social-cognitive mediators of the association between community violence exposure and aggressive behavior. *School Psychology Quarterly*, 24, 199-210.
Reddy, L., De Thomas, C. A., Newman, E., & Chun, V. (2009). School-based prevention and intervention programs for children with emotional disturbance: A review of treatment components and methodology. *Psychology in the Schools*, 46, 132-153.

What if? Papers due

March 10 **NO CLASS- SPRING BREAK**

March 17 *Working Effectively with Families*

Guest Lecturer: Fr. Michael Garanzini, President, Loyola University Chicago

First observation paper due

March 24 *Emotional Disorders: Anxiety Disorders*

Readings:
M & W Ch.7
BP 92: Best Practices in School-Based Interventions for Anxiety and Depression
Wood, J. J., Chiu, A. W., Hwang, W., Jacobs, J., & Ifekwunigwe, M. (2008). Adapting cognitive-behavioral therapy for Mexican-American students with anxiety disorders: Recommendations for school psychologists. *School Psychology Quarterly*, 23, 515-532.

March 31 *Emotional Disorders: Mood*

Readings:
M & W Ch. 8
BP 91: Best Practices in Suicide Intervention
Miller, D., N., Eckert, T. L., & Mazza, J. J. (2009). Suicide prevention programs in the schools: A review and public health perspective. *School Psychology Review*, 38, 168-188.
Herman, K. C., Reinke, W. M., Parkin, J., Traylor, K. B., Agarwal, G. (2009). Childhood depression: Rethinking the role of the school. *Psychology in the Schools*, 46, 433-446.

April 7 Eating Disorders

Guest Lecturer: Jessica Hoffman, Ph.D., Associate Professor, Northeastern University

Reading: M & W Ch. 13

Blom-Hoffman, J., Wilcox, K. R., Dunn, L., Leff, S. S., & Power, T. J. (2008). Family involvement in school-based health promotion: Bringing nutrition information home. *School Psychology Review*, 37, 567-577.

Cook-Cottone, C., Casey, C. M., Feeley, T. H., & Baran, J. (2009). A meta-analytic review of obesity in the schools: 1997-2008. *Psychology in the Schools*, 46, 695-719.

DeLeel, M. L., Hughes, T. L., Miller, J. A., Hipwell, A., & Theodore, L. (2009). Prevalence of eating disorders and body image dissatisfaction in young girls: An examination of the variance across racial and socioeconomic groups. *Psychology in the Schools*, 46, 767-785.

April 14 Autism Spectrum Disorders and Mental Retardation

Readings:

M & W Chs. 9, 10

Kanaya, K., Ceci, S. J., & Scullin, M. H. (2003). The rise and fall of IQ testing in special ed: Historical trends and their implications. *Journal of School Psychology*, 41, 453-465.

BP 95: Best Practices in Effective Services for Young Children with Autistic Spectrum Disorders

Second observation papers due

April 21 Health-Related and Substance Use Disorders

Readings:

M & W Ch. 12

April 28 Child Maltreatment and Non-Accidental Trauma

Reading: M & W Ch. 14

Scholarly Review Paper Due

May 5 School Mental Health Redux; Class Wrap Up

**CIEP 413- Spring 2011
“What Should You Do If” Paper?**

Student Name:

Grading Rubric

	Target	Acceptable	Unacceptable
Clarity of “What If” Vignette	Ethical conundrum is extremely clear.	Ethical conundrum is mostly clear.	Ethical conundrum is somewhat clear.
Thoroughness of Review	Literature selected provides professional level coverage of pertinent topic.	Literature selected provides average graduate level coverage of pertinent topics.	Literature selected provides coverage below the level expected in a graduate-level paper.
Accuracy of Review	All scholarship selected speaks directly to ethical conundrum.	Most scholarship selected speaks directly to ethical conundrum.	Only some or no scholarship selected speaks directly to ethical conundrum.
Fit of Suggested Approach to Literature Review	Suggested approach perfect fit to scholarship cited.	Suggested approach mostly a fit to scholarship cited.	Suggested approach not a good fit to scholarship cited.
Awareness of Key Variables	Suggested approach always takes key variables, such as application to school-based practice, into consideration.	Suggested approach mostly takes key variables, such as application to school-based practice, into consideration.	Suggested approach mostly does not take key variables, such as application to school-based practice, into consideration.
Overall Writing Quality	Writing done at a professional level (e.g., no typos, well-phrased, well-organized)	Writing done at an acceptable graduate level.	Writing done at a level below that which would be expected of a graduate student.
Overall Performance	Score of “target” in all six areas	Rating of “acceptable” or “target” in all six areas	Rating of “unacceptable” in one or more areas

Total Grade:

Comments:

Rubric for Evaluating Scholarly Review of Literature

CIEP 413- Spring 2011
Instructor- David Shriberg

Student Name:

Paper Characteristics

Appropriate topic (5 points possible)-

APA format (5 points possible)-

Minimum of 20 sources (5 points possible)-

<i>Literature Review</i>	Number	Descriptor			
Clarity of Writing (5 points)		Outstanding	Very Good	Adequate	Inadequate
Quality of Writing (10 points)		Outstanding	Very Good	Adequate	Inadequate
Critical Thinking (25 points)		Outstanding	Very Good	Adequate	Inadequate
Lit Rev Overall	X	Outstanding	Very Good	Adequate	Inadequate
<i>Best Practices</i>					
Clarity of Writing (5 points)		Outstanding	Very Good	Adequate	Inadequate
Quality of Writing (10 points)		Outstanding	Very Good	Adequate	Inadequate
Critical Thinking (25 points)		Outstanding	Very Good	Adequate	Inadequate
BP Overall	X	Outstanding	Very Good	Adequate	Inadequate
Summary (5 points)		Outstanding	Very Good	Adequate	Inadequate

Total Points Earned:

Comments: