# SPECIAL TOPICS SEMINAR: TRAUMA AND PTSD (PSYC 679) SYLLABUS

SPRING 2021, MONDAY, 6:00-8:40 P.M., ZOOM

# **INSTRUCTOR INFORMATION**

Instructor Email Office Hours & Office Hours Location

Christina "Tina" Dardis, Ph.D. <u>cdardis@towson.edu</u> M 12-2 pm, 4-5 pm

Tu 10:45-11:45 am, 3:30-4:30 pm, or by

appointment

https://towson-edu.zoom.us/my/tu.cdardis

# **GENERAL INFORMATION**

# OVERALL STRUCTURE OF CLASS AND ZOOM MEETING ROOM

In general, the class will be synchronous, meeting on Mondays from 6-8:40 pm. It is expected that you will arrive to class having completed all readings for that week (with the exception of the first week).

To attend class via Zoom, go to the Blackboard navigational pane on the left and scroll down to "Zoom." Find the week's meeting and click to attend.

Note: Classes will be recorded. By remaining in this course and attending lectures, you are consenting to this recording.

#### WHAT YOU MIGHT WANT TO KNOW ABOUT PTSD

Welcome to Trauma and PTSD! Since you have chosen to take this course, you have likely determined that understanding Trauma and PTSD is important to effective clinical practice. In reality, there is so much to cover in these areas that there could probably be several classes on the subject taught by experts from across a range of interdisciplinary fields. For example, a student interested in trauma would want to learn about:

- (1) Risk factors for <u>exposure</u> to traumatic events (with large influences from sociology, epidemiology, public health, etc.),
- (2) Pretrauma and peritraumatic risk factors for developing <u>PTSD following trauma exposure</u> (with influences from physiological psychology, cognitive psychology, clinical and counseling psychology, developmental psychology, social psychology, etc.),
- (3) Clinical assessment of trauma exposure and trauma-related sequelae (with influences from clinical and counseling psychology, neuropsychology, physiological psychology, etc.)
- (4) Treatment of PTSD and trauma-related disorders (with influences from clinical and counseling psychology, social work, etc.)
- (5) Prevention of trauma exposure (with influences from public health, epidemiology, sociology, economics, etc.)
- (6) Specific recommendations for culturally competent trauma-related care for individuals from a range of diverse/intersectional identities.

Unfortunately, I am just one person (without expertise in all of these fields) and we have just one class to try to address all of the above. Let's now turn to the objectives we will try to meet.

# SINCE WE CAN'T DO THAT, THE OBJECTIVES OF THIS CLASS.

My objectives for this course are based on the APA Guidelines on Trauma Competencies for Education and Training, found here: https://www.apa.org/ed/resources/trauma-competencies-training.pdf .

- Consistent with Scientific Knowledge Competencies, students will demonstrate ability to recognize the
  epidemiology of trauma exposure and outcomes, show basic knowledge of mechanisms and
  interactions among social, neurobiological, and psychological factors, and demonstrate abilities to
  critically read and communicate the results of published literature on trauma and PTSD.
- Consistent with *Psychological Assessment* competencies, students will demonstrate increasing comfort and willingness to assess trauma exposure and PTSD symptoms using comprehensive and appropriate screening measures, and with sensitivity to issues related to social contexts and cultural beliefs and practices.
- Consistent with *Psychological Intervention* competencies, students will develop a working knowledge of some empirically-supported treatments for PTSD and other trauma-related disorders and will be able to discuss pacing and personalization based on client presentations and needs. Students will have a working knowledge of the theories and mechanisms of change undergirding these therapies.
- Consistent with *Professionalism* competencies, students will be aware of ethical issues as they relate to trauma work (e.g., child abuse, boundary maintenance, confidentiality), and will increase awareness of issues related to vicarious traumatization and burnout.
- Consistent with Relational and Systems competencies, students will have an understanding of the
  individual and system-level operations that affect individual experiences of trauma and recovery,
  demonstrate understanding of the importance of interdisciplinary collaboration in response to
  traumatized individuals, and demonstrate understanding of the importance of using the relationship as
  an effective opportunity for healing.
- Consistent with *Cross-Cutting Competencies*, students will demonstrate the ability to identify and understand intersecting identities as related to trauma, and consideration of complexities of trauma-related exposure (e.g., comorbidities, person-environment interactions)

To this end, we will roughly divide the class up into two sections: (1) Diagnostic and assessment-related issues, epidemiology, theory, and predictors of trauma exposure and outcomes, and (2) treatment of trauma and trauma-related disorders.

# **COURSE MATERIALS**

# REQUIRED COURSE MATERIALS

None. Please see Blackboard Course Reserves and the Blackboard Content folder for readings.

### OPTIONAL COURSE MATERIALS

For students interested in practicing Cognitive Processing Therapy:

Resick, P.A., Monson, C.M., & Chard, K.M. (2017). *Cognitive Processing Therapy for PTSD: A comprehensive manual.* New York, NY: Guilford. ISBN: 9781462528646

#### THIS IS AVAILABLE AS A TU EBOOK!!!! http://proxy-

tu.researchport.umd.edu/login?ins=tu&url=http://search.ebscohost.com/login.aspx?direct=true&db=cat01451a&AN=towson.004889448&site=eds-live&scope=site

#### For an exceptional reference text:

M.J. Friedman, T.M. Keane, & P.A. Resick (2014). Handbook of PTSD: Science and practice (2<sup>nd</sup> ed.). New York, NY: Guilford. ISBN: 9781462516179

# Other well-regarded works in Trauma and PTSD:

Herman, J. (1992). Trauma and recovery. New York, NY: Basic Books. ISBN: 978-0-465-06171-6

van der Kolk, B. (2014). *The body keeps the score: Brain, mind, and body in the healing of trauma.*New York, NY: Penguin Books. ISBN: 978-0143127741

For students with interest in free online training of empirically-supported psychological treatments of PTSD, consider the 75-minute trainings offered by the Medical University of South Carolina (MUSC):

Cognitive Processing Therapy: https://cpt.musc.edu/

Prolonged Exposure: https://pe.musc.edu

Trauma-Focused CBT for children: https://tfcbt2.musc.edu

GRADING			
Weekly Work	In-Class A	Activities	
Perusall Annotations	27 pts	Discussion Leader	20 pts
	(3 pts x 10 weeks, but drop 1)		
Reflection Assignments	55 pts	Course Participation	45 pts
	(5 pts x 12 weeks, but drop 1)		(3 pts x 16 lectures, but drop 1)
Case Report or Research Pa	per		
Proposal	20 pts		
Final Paper	100 pts		
Peer Review	20 pts		

#### Total possible points= 287 pts

At the end of the semester, your points will be added and grades will be assigned according to the following point system.

Α	94-100%	270+	В	80-85.9%	230-246
A-	90-93.9%	258-269.5	С	70-79.9%	200-229.5
B+	86-89.9%	246.5-257.5	F	Below 70%	Below 200

*Note:* Additional rounding is not guaranteed.

# PERUSALL ANNOTATIONS

What is the point of this assignment? You have no tests in this class, so I want to ensure you are at least doing the reading and preparing ahead of class. I will *not* be teaching/lecturing everything to you, so you must consume some of it on your own. An assignment related to the reading keeps you accountable. This serves

as a discussion board without (I'm hoping) some of the annoyance of a discussion board because you can comment in-line in a reading and interact more easily as you might if you were doing a shared Word/Google Doc. Annotating is a GREAT SKILL as you read to remind yourself of questions and ideas you are having! I highly encourage you do something like this in all classes, even when it isn't graded.

What is the format? I realize this will be new for many of you (and for me!). You will need to set up a profile in Perusall. I will give you separate instructions on Blackboard for how to do this. Your annotations will be **due** by class time of that week.

How is it graded? Well, as long as you are providing thoughtful comments somewhere on each of the readings and/or reading and replying to others' comments, I plan to give full credit for this. Upvoting others' comments is also great. If you just seem totally disengaged/checked out or aren't contributing much, I may take off points. I don't aim to take off points here if I don't have to. You can think of it as 3= engages with each article with thoughtful comments and/or replies, 2= some engagement and commenting, but either at a more shallow level (reiterating what is there) or not addressing all of the week's articles, 1= very shallow or vague comments and low engagement; addressing few of the week's readings, 0= not done. These should be easy points for you if you are doing a little bit of thought/reflection as you read. They are worth 3 pts each and there are 12; but you can drop/not do one, for a total of 33 points.

### REFLECTIONS

What is the point of this assignment? Often, after a class is done for the week, we drop it and move on. The goal of these assignments is to encourage you to reflect on what we did in class that week, after the class to consolidate your learning. There will be specific prompts for you to answer; sometimes this is a reflective assignment, and other times it is more of an application assignment (e.g., given a case example and having to apply something from class). The hope is that this will help you to use what you have learned to ensure concepts "stuck" or to think critically about your response to what was learned.

What is the format? There will be a prompt for you to respond to as a Blackboard assignment. You will upload your Word document (I know this is sort of a pain, but it makes it so that I can give direct feedback on the document). It should be 1-2 pages, and will be due on 11:59 p.m. of Friday of that week. (That is, for week 1, it is due on 11:59 p.m. on the final day of Week 1).

How is it graded? Again, I'm really not looking to take off points here. I don't have specific rubrics for this because each week's activity will be so different, but if you do not seem to be engaging with the prompt or answering the questions, I may take off points. They are worth **5 pts each** and there are 12; but you can drop/not do one, for a total of **55 points**.

#### DISCUSSION LEADER

What is the point of this assignment? I do not intend to lecture at you for 3 hours per week! To (a) keep things interesting, (b) expand critical thinking, and (c) begin to flex your presentation skills, we will have discussion leaders sign up for topics. You will be responsible for facilitating discussion in the class, for about 60 minutes of class time. I will start us out with facilitating discussion in the first few meetings to give you an idea of how I expect this to go.

What is the format? You sign up for a week. You and your partner come up with questions and facilitate a class discussion.

How is it graded? I will provide you with a rubric for how I will score your participation in a separate document. This will be worth **20 points** for you.

# **PARTICIPATION**

What is the point of this assignment? Remote learning stinks. It stinks more when people just sit there in awkward silence. Let's not.

What is the format? Come to class and engage! Participate in the discussion, ask questions if you have them, be thoughtful and respectful of others.

How is it graded? We will meet for class 16 times. Participation will be out of 3 points for each meeting; however, you are permitted to miss once without penalty (i.e.,  $15 \times 3 = 45$  points), with 0 for missing class or low participation, and an increasing number of points depending on your level of thoughtful engagement in class discussion. It will not be enough to simply attend and offer broad input that is disconnected from the readings. To get all 3 points, you should have thoughtful responses to other students' comments and the discussion leaders' questions, demonstrate adequate understanding of topics assigned in readings for that day, and not show evidence of distraction.

# **PAPER**

What is the point of this assignment? This takes the place of your exams. It is a summative assignment across the semester. It also allows you to *tailor the class to your own interests*. That is, some of you are interested more in research and others in practice. This gives you an option to dive in deep on a topic relevant to your goals.

What is the format? You have two paper options. For either, you will (1) complete a proposal due earlier in the semester, then (2) have a draft due later in the semester to a peer, for peer review. You will conduct a peer review yourself, and then (3) turn in your final paper. So there are three components: proposal, peer review of another, and final paper.

**Option #1: Literature Review.** This paper is an opportunity to expand your knowledge in a particular area of traumatic stress. The paper is to be 12-15 pages (excluding title page and references). You are welcome to choose a topic of your choice, but you may NOT use portions of previously written theses or materials for other courses. Please let me know if you have any questions about this. Think creatively, and identify a reasonable project that will be of interest and, if possible, useful to you in your development. You will submit a brief proposal (1-2 pages) to outline the proposed content of the paper, and which should include some references as well as questions that you might have for me. The final paper should be in APA style (including an abstract, references, etc.). Further details will be provided in class.

Option #2: Clinical Case Paper. This paper will require you to integrate information from the course to discuss the etiology and treatment of a hypothetical clinical case. The case can be completely fabricated, based on a character, or based on an actual client (however, please remove all identifying information; see this link: <a href="https://privacyruleandresearch.nih.gov/pr\_08.asp#8a">https://privacyruleandresearch.nih.gov/pr\_08.asp#8a</a> for information on what qualifies as identifying information). For this paper, you will present the case, have a case formulation/etiology section, and a section on assessment and treatment with your recommendations. Within these sections you should also be sure to address relevant sociocultural variables (e.g., gender identity, sexual identity, race/ethnicity, religion/spirituality, physical ability, etc). I expect that this paper will also be between 12-15 pages (excluding

title page and references) to adequately address all of the above. You will submit a brief proposal (2-3 pages), which should include a description of the case that you plan to discuss and an initial (brief) outline of the case formulation. Further details will be provided in class.

How is it graded? You will complete a **proposal** of the paper **worth 20 points**. Your peer review is also **worth 20 points**. The **final paper** is **worth 100 points**. Rubrics for these assignments will be forthcoming on Blackboard.

# ADDITIONAL DETAILS AND COURSE POLICIES

# **ATTENDANCE**

I strongly encourage regular attendance and participation in my class, and your final grade will be based in part upon these factors (see above). You can miss one lecture without losing participation points. I will require documentation for dates on which major assignments (e.g., paper proposal or final paper) are due if you cannot turn them in for some reason. You are required to attend the final class meeting.

At the same time, I understand it is a pandemic and there is just so much going on that might make following the dates/guidelines difficult. Please speak to me as soon as possible when you know that you cannot make a deadline/attend so that we can accommodate that.

# **CLASS CANCELLATIONS**

<u>In the event of a cancellation</u> (e.g., inclement weather, etc.), I may make changes to the course requirements, deadlines and grading schemes. If so, you will receive a class email via Blackboard. Please also check the University home page for announcements of University-wide closures or emergencies.

<u>Note</u>: The TU Text Alert System is a service designed to alert the Towson University community via text messages to cell phones when situations arise on campus that affect the ability of the campus to function normally. Sign up at: <a href="http://www.towson.edu/adminfinance/facilities/police/campusemergency/">http://www.towson.edu/adminfinance/facilities/police/campusemergency/</a>

# RESPECTFUL AND PROFESSIONAL ENVIRONMENT

- Please make every effort to limit distractions for yourself and others by:
  - o Arriving on-time
  - Refraining from side conversations
  - Limiting computer use to classroom topics; putting cell phones on "silent" (see "Cell Phones and Computers")
- It takes courage to speak up in class and provide answers; please listen and respond respectfully, even if you disagree.

In particular, listen and respond respectfully to sensitive topics, and be mindful of assumptions you have that may be inaccurate or potentially harmful to others. Some topics to be mindful of, specifically, concern differences of race/ethnicity, language, culture, religion and creed, sexual orientation, gender, and gender identity/expression, socioeconomic status (SES), age, physical differ-abilities, and veteran status.

<u>IMPORTANT</u>: **CONFIDENTIALITY** is a cornerstone of psychological practice, which protects the privacy of those with mental health conditions. Start to practice this now by **NOT sharing information about a person that may be private** (e.g., discussing another person's mental health diagnoses or treatment using his/her name or other potentially identifying information).

# **SELF-CARE**

Given the nature of this course, almost anything we do could come with a trigger warning. Class lectures, discussions and activities may include **topics that you may find controversial**, **or which may be upsetting to you**. We all come in with varying background experiences, beliefs, and values, and each topic will affect different students in different ways, based on those experiences. My goal will always be to provide a safe atmosphere for these topics (see "Respectful and Professional Environment"), but if you have any concerns about how this content was presented, I encourage you to set up a meeting with me and inform me of this.

In addition, while I cannot serve in the role of therapist to my students, I do encourage students to contact campus counseling services if they find that they would like additional support around concerns that come up as a result of personal stressors related to course materials or which are independent of this class (Ward West, 2<sup>nd</sup> floor; towson.edu/counseling; 410-704-2512). **This issue of self-care is** *critically important* **to effective trauma-informed practice; it is never too early to implement effective self-care.** 

# CONFIDENTIALITY AND DISCLOSURES

As a licensed clinical psychologist in Maryland and a faculty member at TU, I am bound by Maryland law and TU policy to protect individuals' confidentiality surrounding disclosures they make, with a few exceptions. If you disclose any of the following to me, I will have to report that information to the proper authorities, individuals or university officials. These include:

- Disclosures of child or elder abuse (physical, sexual, emotional) and neglect, regardless of when they occurred, and whether you or someone else is/was the victim or perpetrator
- Disclosures of sexual violence, sexual harassment, sexual assault, intimate partner violence, or stalking, at any point in life, but particularly those that occurred at TU or perpetrated by a member of the TU community (i.e., faculty, staff, other students)
- If you express intention to harm or kill yourself or someone else
- If you require emergency medical assistance
- If you disclose a sexual relationship with a former/current therapist or university faculty member

If you do not want this information reported, you should not disclose it to me. However, please know that there are many appropriate places to disclose these events to get help! For more information, see <a href="http://towson.edu/titleix">http://towson.edu/titleix</a> or the Counseling Center's website: <a href="http://towson.edu/counseling">http://towson.edu/counseling</a>.

### ACADEMIC INTEGRITY

Each student should make an effort to familiarize him/herself with Towson's Student Academic Integrity Policy, including definitions of what constitutes a violation of the code as well as subsequent penalties. Violations of the Policy include any form of cheating or plagiarism, and will be punished with a failure of the assessment at a minimum and possibly failure of the course. Plagiarism constitutes any form of copying information from published and unpublished sources without due citation of the source (including internet sources), as well as any sort of copying from other students.

 $\underline{https://www.towson.edu/about/administration/policies/documents/polices/03-01-00-student-academic-integrity-policy.pdf}$ 

Plagiarism includes using another's actual words (including Internet sites and sources), using another's ideas, opinions, work, data, or theories, even if paraphrased in one's own words, or borrowing facts and statistics. Please note that not providing proper citation to another's work is also considered plagiarism. Cheating, including plagiarism, will not be tolerated. Any first instance will result in an automatic 0 for the activity, exam, or assignment. The second instance will result in automatic course failure. Attempting to look at any information during an exam (including, but not limited to, your notes, phone, another's exam) will be interpreted as cheating. Assisting another with cheating will also be considered cheating (i.e., complicity with cheating). In all instances, a written memorandum will be sent to the Department Chairperson and to the College's Office of Student Conduct & Civility Education.

### DISABILITY ACCOMMODATIONS

This course is in compliance with Towson University policies for students with disabilities and temporary impairments. Students with disabilities and temporary impairments are encouraged to register with Accessibility and Disability Services (ADS), 7720 York Road, Suite 232, 410-704-2638 (Voice) or 410-704-4423 (TDD). Students who suspect that they have a disability but do not have documentation are encouraged to contact ADS for advice on how to obtain an appropriate evaluation. A memo from ADS authorizing your accommodation is needed before any accommodation can be made. <a href="https://www.towson.edu/accessibility-disability-services/">https://www.towson.edu/accessibility-disability-services/</a>

### COMMUNICATING WITH ME

Email is the most efficient (<u>cdardis@towson.edu</u>). If you wish to dispute a grade, I recommend speaking to me within 7 days of receiving the grade, as such timely disputes tend to be more successfully resolved.

# LATE ASSIGNMENTS AND MAKE-UPS

Why do I even have deadlines during a pandemic? Honestly, without them, we would probably all just procrastinate. Deadlines for the course are only designed to keep you on track so you can participate in the course effectively and get the most out of it. As I note in "Attendance" above, though, I understand that things will come up due to the pandemic, so just let me know what is going on and we can work something out.

Excused absences are defined in your university handbook as religious holidays, university-sponsored events, or true medical emergencies accompanies by a doctor's note. See attendance section above: if you do miss more than one class, I would appreciate advance notice, and may require documentation. This is particularly true if it is a paper due date, your discussion leader date, or for the final course meeting (i.e., final

exam time). For the papers, without documentation for an excused absence, I take away 25% of the grade for each day it is late (even 5 minutes will be considered late).

# WILL THERE BE EXTRA CREDIT? GRADING ON A CURVE?

No. If you are having difficulty in this course, please do not hesitate to contact me. I am happy to make suggestions and support you in my class. However, if you wait until the end of the semester, there will be little I can do to help, as I will not change my grading system.

#### CAMPUS EDUCATIONAL RESOURCES

<u>Tutoring and Learning Center</u>: TU provides great resources to help you improve study skills with Peer Assisted Learning Sessions (PALS), and they also offer individual tutoring services. Visit TLC on the 5<sup>th</sup> floor of the Cook Library or online: <a href="https://www.towson.edu/tutoring-learning/">https://www.towson.edu/tutoring-learning/</a>

<u>Writing Center</u>: TU provides a free service to students to aid in the practice of writing and offers confidential review of student papers with feedback BEFORE you get ready to turn in your papers for your classes. Visit the Writing Center on the 5<sup>th</sup> floor of CLA or online: <a href="https://www.towson.edu/cla/centers/writing/">https://www.towson.edu/cla/centers/writing/</a>

### OTHER NOTES

<u>Copyright:</u> My lectures and course materials, including, but not limited to power point presentations, tests, outlines, and similar materials, are protected by copyright. I am the exclusive owner of copyright in those materials they create. You may take notes and make copies of course materials for your own use; however, you may not, nor may you allow others to, reproduce or distribute lecture notes and course materials publicly whether or not a fee is charged without my express written consent. Similarly, you own copyright in your original papers and exam essays. If I am interested in posting your answers or papers on the course web site, I will ask for your written permission

<u>Assistance With Technology Needs</u>: The Office of Technology Services (OTS) has a limited number of laptops to loan to students whose personal computers are unable to run Blackboard, WebEx, Zoom or applications required by the curriculum. If you need to borrow a device, talk to your instructor; they can submit a request on your behalf.

Assistance With Financial Needs: The Towson University Foundation has created the Student Emergency Fund, which has some funds available to assist students in purchasing hotspots, upgrading home internet, and other necessary technologies. For more information, see: https://www.towson.edu/studentaffairs/care/student-emergency-fund.html.

<u>Other Resources for Graduate Students:</u> This is a crowd-sourced list of resources for graduate students. It includes information/resources related to software, writing, note-taking, teaching, citations, virtual meetings, antiracism resources, podcasts, etc.: <a href="https://docs.google.com/document/u/1/d/1IFbHIN5OOAO0qz-VfCU9nEx4-x6CfArj1-d8yIA2vsU/mobilebasic">https://docs.google.com/document/u/1/d/1IFbHIN5OOAO0qz-VfCU9nEx4-x6CfArj1-d8yIA2vsU/mobilebasic</a>.

# COURSE SCHEDULE (SUBJECT TO CHANGE)

WEEK	DATE	TOPIC	READINGS	DUE MONDAY BY START OF CLASS	DUE FRIDAY BY 11:59 P.M.
1	1.25	Welcome; Introduction, Prevalence, and Assessment of Trauma and PTSD	Pai, A., Suris, A.M., & North, C.S. (2017). Posttraumatic Stress Disorder in DSM-5: Controversy, change, and conceptual considerations. <i>Behavioral Sciences (Basel), 7</i> (1), 7. doi: 10.3390/bs7010007		Reflection #1
			Bisson, J.I., Brewin, C.R., Cloitre, M., & Maercker, A. (2020). Diagnosis, Assessment, and Screening for PTSD and Complex PTSD in Adults. In Forbes et al. (Eds.), <i>Effective Treatments for PTSD</i> (3 <sup>rd</sup> edition). pp. 49-68.		
			Dutra, S. J. & Wolf, E.J. (2017). Perspectives on the conceptualization of the dissociative subtype of PTSD and implications for treatment. <i>Current Opinion in Psychology</i> , 14, 35-39.		
			Check out links on BB, this week/next.		
2	2.1	2.1 Assessment of Trauma and PTSD, with emphasis on Racial Trauma and Cultural Considerations	Asnaani, A. & Hall-Clark, B. (2017). Recent developments in understanding ethnocultural and race differences in trauma exposure and PTSD. <i>Current Opinion in Psychology, 14,</i> 96-101. doi: 10.1016/j.copsyc.2016.12.005	Annotations in Perusall	Reflection #2
			Michalopoulos, L. M., Meinhart, M., Yung, J., Barton, S. M., Wang, X., Chakrabarti, U., & Bolton, P. (2020). Global posttrauma symptoms: a systematic review of qualitative literature. Trauma, Violence, & Abuse, 21(2), 406-420.		
			Williams, M.T., Metzger, I.W., Leins, C. & DeLapp, C. (2018). Assessing racial trauma within a DSM-5 framework: The UConn Racial/Ethnic Stress & Trauma Survey. <i>Practice Innovations</i> , <i>3</i> (4), 242–260. <a href="https://doi.org/10.1037/pri0000076">https://doi.org/10.1037/pri0000076</a> . Full scale is here:		
			http://www.mentalhealthdisparities.org/docs/UnRESTS_0716_ _English.pdf		

3	2.8	Social Context of Risk and Resilience—	Grych, J., Hamby, S., & Banyard, V. (2015). The resilience portfolio model: Understanding healthy adaptation in victims of violence. <i>Psychology of Violence</i> , <i>5</i> (4), 343-354.	Annotations in Perusall	Reflection #3
	Overview and Resilience Portfolios	DiGangi, J. A., Gomez, D., Mendoza, L., Jason, L. A., Keys, C. B., & Koenen, K. C. (2013). Pretrauma risk factors for posttraumatic stress disorder: A systematic review of the literature. <i>Clinical Psychology Review, 33</i> (6), 728-744.			
			Maercker, A. & Hecker, T. (2016) Broadening perspectives on trauma and recovery: a socio-interpersonal view of PTSD. <i>European Journal of Psychotraumatology</i> , 7(1), 293-303. doi: 10.3402/ejpt.v7.29303		
4	2.15	Theories of PTSD Development: Cognitive Models	Elmwood, L.S., Hahn, K.S., Olatunji, B.O., & Williams, N.L. (2009). Cognitive vulnerabilities to the development of PTSD: A review of four vulnerabilities and the proposal of an integrative vulnerability model. <i>Clinical Psychology Review</i> , 29, 87-100.	Annotations in Perusall	Reflection #4
			Gillihan, S.J., Cahill, S.P., & Foa, E.B. (2014). Psychological theories of PTSD. In M.J. Friedman, T.M. Keane, & P.A. Resick (Eds.). Handbook of PTSD: Science and practice (2 <sup>nd</sup> ed.) (pp.166-184).		
5	2.22	Social Context of Risk and Resilience: Lifespan and Gender Considerations	<ul> <li>Felitti, V. J., Anda, R. F., Nordenberg, D., Williamson, D. F., Spitz, A. M., Edwards, V., &amp; Marks, J. S. (1998). Relationship of childhood abuse and household dysfunction to many of the leading causes of death in adults: The Adverse Childhood Experiences (ACE) Study. American journal of preventive medicine, 14(4), 245-258.</li> <li>Street, A. E. &amp; Dardis, C. M. (2018). Using a social construction of gender lens to understand gender differences in Posttraumatic Stress Disorder. Clinical Psychology Review. Advance online publication. doi: 10.1016/j.cpr.2018.03.001</li> </ul>	Annotations in Perusall	Reflection #5

6	3.1	Treatment of Childhood Trauma: TF-CBT	Cohen, J.A., Mannarino, A.P., & Deblinger, E. (2017). Treating Trauma and Traumatic Grief in Chidlren and Adolescents (2nd edition). New York, NY: Guilford Press.  http://proxy- tu.researchport.umd.edu/login?ins=tu&url=http://search.ebsc ohost.com/login.aspx?direct=true&db=cat01451a&AN=tows on.004889496&site=eds-live&scope=site		PAPER PROPOSAL DUE
			Chapter 3 (pp.41-59): The TF-CBT Model: How it Works		
			Chapter 9 (pp. 138-158): Affective Expression and Modulation Skills		
			Chapter 10 (pp.159-171): Trauma Narration and Processing Part I		
			Chapter 14 (pp.213-221): Conjoint Child-Parent Sessions		
7	3.8	Theories of PTSD Development: Neurobiology, Memory, and Emotion	<ul> <li>WATCH LECTURE VIDEO on trauma and neurobiology</li> <li>Lanius, R., Rabellino, D., Boyd, J.E., Harricharan, S, Frewen, P.A., &amp; McKinnon, M.C. (2017). The innate alarm system in PTSD: conscious and subconscious processing of threat. <i>Current Opinion in Psychology, 14,</i> 109-115.</li> <li>Desmedt, A., Marighetto, A., &amp; Piazza, P. (2015). Abnormal fear memory as a model for posttraumatic stress disorder. <i>Biological Psychiatry, 78</i>(5), 290-297. doi: 10.1016/j.biopsych.2015.06.017</li> <li>McLean, C.P. &amp; Foa, E.B. (2017). Emotions and emotion regulation in posttraumatic stress disorder. <i>Current Opinion in Psychology, 14,</i> 72-77</li> </ul>	Annotations in Perusall	Reflection #6

8	3.15	SPRING BREAK- NO CLASS			
9	3.22	Treating PTSD: Overview	Chapter 8 (Safety) from Herman, J. (1992). <i>Trauma and Recovery</i> . New York, NY: Basic Books.	Annotations in Perusall	Reflection #7
			Schnurr, P.P. (2017). Focusing on trauma-focused psychotherapy for posttraumatic stress disorder. <i>Current Opinion in Psychology, 14,</i> 56-60. doi: 10.1016/j.copsyc.2016.11.005		
			Schnyder, U., Ehlers, A., Elbert, T., Foa, E., Gersons, B., Resick, P., Shapiro, F., & Cloitre, M. (2015). Psychotherapies for PTSD: what do they have in common?, <i>European Journal</i>		
			Kantor, V., Knefel, M. & Lueger-Schuster, B. (2017). Perceived barriers and facilitators of mental health service utilization in adult trauma survivors: A systematic review. <i>Clinical Psychology Review</i> , <i>52</i> , 52-68.		
10	3.29	Big C interventions: CPT-Part I	Ten Sessions. <i>This American Life</i> . (Podcast): https://www.thisamericanlife.org/682/ten-sessions  Chapters 1 (pp.7-14 only) and 4 (pp.62-78) in CPT Manual (Resick, P.A., Monson, C. M., & Chard, K. M. (2016). <i>Cognitive processing therapy for PTSD: A comprehensive manual.</i> New York, NY: Guilford)		Reflection #8
			<u> </u>		

11	4.5	Big C interventions: CPT-Part II	Continue CPT manual. Chapter 3 (pp.33-52), 5 (pp.83-100) and 7 (pp.134-151)		Reflection #9
12	4.12	Big B interventions (PE)	Session 104: Prolonged Exposure Therapy. <i>Therapy for Black Girls</i> (Podcast). <a href="https://therapyforblackgirls.com/podcast">https://therapyforblackgirls.com/podcast</a> or your preferred Podcast app.	Annotations in Perusall	Reflection #10
		` '	Chapter 5 (Session 3) from Foa, E.B., Hembree, E. A., Rothbaum, B.O., & Rauch, S. (2019). <i>Prolonged Exposure Therapy for PTSD: Therapist Guide</i> . New York: Oxford University Press. (pp.77-96)		
			Zoellner et al. (2011). Teaching trauma-focused exposure therapy for PTSD: Critical clinical lessons for novice exposure therapists. <i>Psychological Trauma: Theory, Research, Practice and Policy, 3,</i> 300-308.		
			OPTIONAL (for further reading): Riggs, D.S., Cahill, S.P., & Foa, E. (2006). Prolonged Exposure Treatment of Posttraumatic Stress Disorder. In V.M. Follete & J.I. Ruzek, <i>Cognitive-Behavioral Therapies for Trauma</i> . New York: Guilford. (pp.65-95).		
13	4.19	Treating PTSD: Part III: Mindfulness and Acceptance- Based and DBT- PTSD	Engle, J. L., & Follette, V. M. (2015). Mindfulness and valued action: An acceptance and commitment therapy approach to working with trauma survivors (pp 61-74). In V. M. Follette, J. Briere, D. Rozelle, J. W. Hopper, & D. I. Rome (Eds.), Mindfulness-oriented interventions for trauma: Integrating contemplative practices.(pp.61-74)	Annotations in Perusall	FIRST DRAFT OF PAPER DUE (FOR PEER)
		interventions	Bohus, M., Schmahl, C., Fydrich, T., Steil, R., Müller-Engelmann, M., Herzog, J., & Priebe, K. (2019). A research programme to evaluate DBT-PTSD, a modular treatment approach for Complex PTSD after childhood abuse. Borderline personality disorder and emotion dysregulation, 6(1), 1-16.		

<b>14</b> 4.	4.26	Dissociation and Dissociative Disorders and Implications for	DePrince, A.P., & Freyd, J.J. (2014). Trauma-induced dissociation. In M.J. Friedman, T.M. Keane, & P.A. Resick (Eds.). Handbook of PTSD: Science and practice (2 <sup>nd</sup> ed.) (pp.219-233).	Annotations in Perusall	PEER REVIEW DUE
		Treatment	Brand, B. L., Myrick, A. C., Loewenstein, R. J., Classen, C. C., Lanius, R., McNary, S. W., & Putnam, F. W. (2012). A survey of practices and recommended treatment interventions among expert therapists treating patients with dissociative identity disorder and dissociative disorder not otherwise specified. <i>Psychological Trauma: Theory, Research, Practice, and Policy, 4</i> (5), 490.		
			Brand, B. L., Schielke, H. J., Putnam, K. T., Putnam, F. W., Loewenstein, R. J., Myrick, A., & Lanius, R. A. (2019). An online educational program for individuals with dissociative disorders and their clinicians: 1-year and 2-year follow-up. <i>Journal of traumatic stress, 32</i> (1), 156-166.		
15	5.3	Treating Comorbid SUD- PTSD and Wrap- up Treatment	Najavits, L. (2015). Trauma and substance abuse: A clinician's guide to treatment. In U. Schnyder & M. Cloitre (Eds.) (2015). Evidence based treatments for trauma-related psychological disorders: A practical guide for clinicians. Springer.		FINAL PAPER DUE
16	5.10	Vicarious Traumatization and Self-Care	<ul> <li>Dass-Brailsford (2021). Trauma, Violence, and Abuse with Ethnic Populations. (pp. 223-238).</li> <li>Bell, H., Kulkarni, S. &amp; Dalton, L. (2003). Organizational prevention of vicarious trauma. Families in Society, 84(4), 463-470.</li> </ul>	Annotations in Perusall	Reflection #11 Due
			See resources on the ISTSS website. <a href="http://www.istss.org/treating-trauma/self-care-for-providers.aspx">http://www.istss.org/treating-trauma/self-care-for-providers.aspx</a> and this handout on Indirect Trauma: <a href="http://www.istss.org/ISTSS_Main/media/Documents/ISTSSBr-Indirect_1.pdf">http://www.istss.org/ISTSS_Main/media/Documents/ISTSSBr-Indirect_1.pdf</a>		

			OPTIONAL: Training on provider burnout: <a href="https://www.ptsd.va.gov/professional/continuing_ed/provider_burnout_Strategies.asp">https://www.ptsd.va.gov/professional/continuing_ed/provider_burnout_Strategies.asp</a>	
17	5.17	FINAL—The rest 7:30-9:30 p.m.	TBD	Reflection #12 Due