

Request for Graduate Course Addition

1. Prepare one paper copy with all signatures and supporting material and forward to the Graduate Council Chair.
2. E-mail one identical PDF copy to the Graduate Council Chair. If attachments included, please merge into a single file.
3. **The Graduate Council cannot process this application until it has received both the PDF copy and the signed hard copy.**

College: COHP Dept/Division: SOCIAL WORK Alpha Designator/Number: 655 ☒ Graded ☐ CR/NC

Contact Person: PEGGY PROUDFOOT HARMAN

Phone: 304-696-3146

NEW COURSE DATA:

New Course Title: COMORBIDITY OF MENTAL AND PHYSICAL DISORDERS

Alpha Designator/Number: SWK

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Title Abbreviation:

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(Limit of 25 characters and spaces)

Course Catalog Description:
(Limit of 30 words)

THE COURSE FOCUSES ON BEHAVIORAL HEALTH ISSUES AS RELATED TO PREVENTION, ASSESSMENT, TREATMENT, AND EVALUATION, AND THE EFFECTIVE IMPLEMENTATION WITH ALL INDIVIDUALS TO INCLUDE MILITARY AND MILITARY AFFILIATED INDIVIDUALS, INCLUDING VETERANS AND THEIR FAMILIES

Co-requisite(s): NONE

First Term to be Offered: FALL 2016

Prerequisite(s): SWK 634
500 LEVEL COURSES 613 & 617 Credit Hours: 3

Course(s) being deleted in place of this addition (must submit course deletion form): NONE

Signatures: if disapproved at any level, do not sign. Return to previous signer with recommendation attached.

Dept. Chair/Division Head

[Signature]

Date

3/25/15

Registrar

[Signature] 440701

Date

3/26/15

College Curriculum Chair

[Signature]

Date

4/3/15

Graduate Council Chair

Date

Request for Graduate Course Addition - Page 2

College: COHP Department/Division: Social Work

Alpha Designator/Number: 655

Provide complete information regarding the new course addition for each topic listed below. Before routing this form, a complete syllabus also must be attached addressing the items listed on the first page of this form.

1.FACULTY: Identify by name the faculty in your department/division who may teach this course.

Future faculty and such as the Dean and Program Director shall designate

2.DUPLICATION: If a question of possible duplication occurs, attach a copy of the correspondence sent to the appropriate department(s) describing the proposal. Enter "***Not Applicable***" if not applicable.

Not Applicable

3.REQUIRED COURSE: If this course will be required by another department(s), identify it/them by name. Enter "***Not Applicable***" if not applicable.

Not Applicable

4.AGREEMENTS: If there are any agreements required to provide clinical experiences, attach the details and the signed agreement. Enter "***Not Applicable***" if not applicable.

Not Applicable

5.ADDITIONAL RESOURCE REQUIREMENTS: If your department requires additional faculty, equipment, or specialized materials to teach this course, attach an estimate of the time and money required to secure these items. (Note: Approval of this form does not imply approval for additional resources.) Enter "***Not Applicable***" if not applicable.

Not Applicable

6. COURSE OBJECTIVES: (May be submitted as a separate document)

Identify and assess the neurobiological factors related to traumatic stress and subsequent behavioral and affective responses within socio-cultural context.

Identify and assess the residual effects of combat and deployment stressors in relational and attachment patterns.

Identify the role of diversity, ethics and use of “professional self” with all clinical modalities.

Develop beginning knowledge and skills in individual, couple/family, group and clinical case management methods with clients coping with the aftermath of combat and deployment stressors.

Identify explicit and implicit ideological, policy and value assumptions inherent in the clinical work with combat veterans and their families.

Evaluate and critically assess the relationship between social welfare policy and clinical social work practice and how it impacts combat veterans and their families.

Recognize the historical context for psychological responses and treatment methods for combat veterans and their families throughout the deployment cycle.

Identify and critically assess the risk and protective factors in coping with traumatic stress.

7. COURSE OUTLINE (May be submitted as a separate document)

UNIT ONE & TWO: INTRODUCTION AND OVERVIEW

1. Historical context and culture of the military
2. Clinical social work practice within bio-psychosocial context
3. Demographics and risk/protective factors related to combat trauma
4. Role of diversity, ethics and use of professional self
5. Deployment cycle for US Armed Forces: Active-duty, Reserve and National Guard
6. Veterans and their families from diverse war zones

UNIT THREE: PHENOMENOLOGICAL EXPERIENCE OF COMBAT TRAUMA

1. Challenges stressors and rewards
2. Narratives of combat
3. Secondary trauma: identification and management

UNIT SIX: PRACTICE WITH INDIVIDUALS

1. Mental health responses: Acute anxiety reaction, PTSD, depression/suicidality and other anxiety disorders
2. Attachment theory and Cognitive Behavioral theory
3. Clinical case management with soldiers, veterans and their families

UNIT CLASS SEVEN: PRACTICE WITH INDIVIDUALS, continued

1. Psychoeducational approaches: Battlemind Training for Soldiers, Partners and Clinicians
2. Cognitive-behavioral approaches: Cognitive Processing Therapy, Exposure Therapy and EMDR
Cognitive Processing Therapy for Veterans and Military Personnel-Complete Online Training (150 minutes)
<http://www.essentiallearning.net/Student/content/sections/Lectora/CognitiveProcessingTherapyforPTSDinVeteransandMilitaryPersonnel/index.html>

UNIT EIGHT: PRACTICE WITH COUPLES AND FAMILIES

1. Disruptions in attachments with multiple separations/reunions, moves and combat exposure
2. Effects of PTSD related hyper arousal
3. Prevention of intimate partner violence
4. Phase oriented couple therapy treatment model
5. Anger eruptions and effects on children

UNIT NINE: PRACTICE WITH COUPLES AND FAMILIES, continued

1. Disentangling mild traumatic brain injury (concussion) from stress responses
2. Family responses and "caregiver burden" in response to brain injury.

UNIT TEN: SPECIFIC ISSUES FOR WOMEN

1. Single parenting
2. Effects of separations and deployment on children
3. Military sexual trauma
4. Gendered socialization

UNIT ELEVEN: CHILDREN & ADOLESCENTS

1. Transgenerational Effects of PTSD
2. Emotional and Behavioral Problems
3. Social Problems

UNIT TWELVE: PRACTICE WITH GROUPS

1. Role of peer support
2. Psychotherapy? Psychoeducation? Mutual support groups?
3. Role of projective identification?

UNIT THIRTEEN & FOURTEEN: SUBSTANCE ABUSE AND PTSD

1. Substance abuse and addictions
2. Seeking Safety model
3. Individual, family, group and clinical case management models

UNIT FIFTEEN: ETHICAL CONSIDERATIONS

1. Socio-political factors and moral dilemmas
2. Working with quasi-voluntary clients
3. WRAP-UP and LAUNCHING TOWARD THE NEXT STEPS!

8. SAMPLE TEXT(S) WITH AUTHOR(S) AND PUBLICATION DATES (May be submitted as a separate document)

Foa, E. B., Friedman, M. J., & Cohen, J. A. (2009). (2nd ed.). *Effective treatments for PTSD: Practice guidelines from the international society for traumatic stress studies*. New York: Guilford Press

Najavits, L. (2001). *Seeking safety: A treatment manual for PTSD and substance abuse*. New York: Guilford Press.

9. EXAMPLE OF INSTRUCTIONAL METHODS (Lecture, lab, internship)

To pursue its educational objectives, this course relies on lecture material. Format includes didactic material, clinical case discussions and analysis of videotapes.

10. EXAMPLE EVALUATION METHODS (CHAPTER, MIDTERM, FINAL, PROJECTS, ETC.)

Students will be graded on the following evaluative measures: (1) preparation and participation; (2) Online Reflection Journal; (3) Case Formulation Reviews (oral/written) and; (4) Treatment/Advocacy Plan

11. ADDITIONAL GRADUATE REQUIREMENTS IF LISTED AS AN UNDERGRADUATE/GRADUATE COURSE

Not Applicable

12. PROVIDE COMPLETE BIBLIOGRAPHY (May be submitted as a separate document)

Bernhardt, A. (2009). Rising to the challenge of treating OEF/OIF Veterans with co-occurring PTSD and substance abuse. *Smith College Studies in Social Work*, 79(3), pp. 344-367.

Bray, R.M.; Hourani, L.L. (2007). Substance use trends among active duty military personnel: findings from the United States Department of Defense Health Related Behavior Surveys, 1980-2005.

Bride, B. & Figley, C. R. (2009). Secondary trauma and military veteran caregivers. *Smith College Studies in Social Work*, 79(3/4), 314-329.

Calhoun, P.S.; Stechuchak, K.M.; Strauss, J.; Bosworth, H.B.; Marx, C.E.; Butterfield, M.I. (2007). Interpersonal trauma, war zone exposure, and posttraumatic stress disorder among veterans with schizophrenia. *Schizophrenia Research*, 91(1), pp. 210.

Hoge, C.W., McGurk, D., Thomas, J.F. Cox, A.L., Engel, C.C. & Castro, C. (2008). Mild traumatic brain injury in U.S. soldiers returning from Iraq. *New England Journal of Medicine*, 358(5), 453-463.

In C. Figley (Ed.), *Compassion fatigue: Coping with secondary traumatic stress disorder in those who treat the traumatized* (pp. 150-177). New York: Brunner/Mazel. Tripp, E.F. (2008). *Surviving Iraq: Soldiers' stories*, pp. 183-191- *Losing another woman*; pp. 200-206- *Treating soldiers with PTSD*. Northampton, MA: Olive Branch Press.

Friedman, M. *Posttraumatic Stress Disorder: An Overview*. <http://www.ptsd.va.gov/professional/pages/ptsd-overview.asp>. United States Department of Veterans Affairs.

Feczer, D. and Bjorklund, P. (2008). *Forever Changed: Posttraumatic Stress Disorder in Female Military Veterans*, A Case Report. *Perspectives in Psychiatric Care*, 45(4), pp. 278-291.

Jaffee, M.S.; Meyer, K. S. (2009). A brief overview of Traumatic Brain Injury (TBI) and Post-Traumatic Stress Disorder (PTSD) within the Department of Defense. *The Clinical Neuropsychologist*, 23(8), pp. 1291-1298.

Jones, K.D.; Young, T., and Leppma, M. (2010). Mild Traumatic Brain Injury and Posttraumatic Stress Disorder in returning Iraq and Afghanistan war veterans: Implications for assessment and diagnosis. *Journal of Counseling & Development*, 88(3), pp. 372-376.

Nunnink, S.E.; Goldwaser, G.; Heppner, P.S. Pittman, J.O.E., Nievergelt, C.M.; Baker, D.G. (2010). Female veterans of the OEF/OIF conflict: Concordance of PTSD symptoms and substance misuse. *Addictive Behaviors*, 35, pp. 655-659.

Palmer, C. (2008). A theory of risk and resilience factors in military families. *Military Psychology*, 20, pp. 205-217.

Pearlman, L.A. & Saakvitne, K. W. (1995). *Treating therapists with vicarious traumatization and secondary traumatic*

stress disorders

Pietrzak, R.H.; Johnson, D.C.; Goldstein, M.B.; Malley, J.C., Rivers, A.J.; Morgan, C.A.;

Southwick, S.M. (2009). Psychosocial buffers of traumatic stress, depressive symptoms, and psychosocial difficulties in veterans of Operations Enduring Freedom and Iraqi Freedom: The role of resilience, unit support and post deployment social support. *Journal of Affective Disorders*, 120, pp. 188-192.

Rubin, A., Weiss, E. L., & Coll, J. E. (2013). *Handbook of military social work*. Hoboken, NJ: John Wiley & Sons, Inc., Chapter 10.

Tyson, J. (2007). Compassion fatigue in the treatment of combat-related trauma during wartime. *Clinical Social Work Journal*, 35 (3), 183-192.

Please insert in the text box below your course summary information for the Graduate Council agenda. Please enter the information exactly in this way (including headings):

Department:

Course Number and Title:

Catalog Description:

Prerequisites:

First Term Offered:

Credit Hours:

Department Social Work

Course Number and Title: SWK 655 Comorbidity of Mental and Physical Disorders

Catalog Description This course is a concentration elective course. This elective course draws from research data that explore the effects of deployment and combat stress on the physical and mental health of active duty U.S. service members and their families

Prerequisites: SWK 634

First Term Offered: Fall 2016

Credit Hours 3