

THE UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL



SCHOOL OF SOCIAL WORK

**Course Number:** SOWO 505  
**Course Title:** Human Development in Context II: Adulthood  
**Semester and Year:** Spring 2009  
**Time and Location:** Fridays 9:00 to 11:50am  
**Instructor:** Deborah Barrett, PhD, MSW  
**Office Phone:** 919-843-5818  
**Email Address:** dbarrett@unc.edu  
**Office Hours:** Room 417; Friday 12 – 2pm or by appointment

**Course Web Site:** <http://blackboard.unc.edu>

**Course Description**

This course reviews typical and divergent adult development in context, surveys major theoretical frameworks, and highlights the impact of social injustices on adult development.

**Course Objectives**

At the conclusion of this course, students will be able to:

1. Analyze and evaluate major theoretical frameworks (e.g., bioecological, psychosocial, life span, life course, risk and resilience, person-in-environment, systems) for examining adult development in context;
2. Describe the development of individuals from early adulthood to old age, as well as divergent developmental trajectories that may occur in response to a range of socio-cultural-historical influences, personal decisions, biopsychosocial problems and social injustices (e.g., illness, disability, deprivation, discrimination);
3. Explain the impact of gender, sexual orientation, culture/heritage, spirituality, race-ethnicity, and socioeconomic status on typical and divergent trajectories of adult development;
4. Articulate how the family serves as the primary social context for adult development, including the implications of variations in family structure, development, and process in both the family of origin and the family of choice.
5. Recognize and describe major health and mental health disorders and the comorbidity among these disorders that occurs during adulthood;
6. Articulate key ethical issues for social workers related to adult health and mental health (e.g., access to treatment based on diagnosis, health disparities, end of life decisions)

**Expanded Description**

This course provides students with an overview of typical and divergent adult developmental trajectories, including how biological, psychological, spiritual, interpersonal, family, community, socio-cultural, historical, and economic factors shape these trajectories. In this course, families

are considered a primary social context for adult development. The course surveys major theoretical frameworks for explaining typical and divergent adult development in environmental context. Additionally, the course will emphasize risk and protective factors and resiliency as well as the impact of social injustices, deprivation, and discrimination on adult and family development, functioning, and health.

## Readings

### **Required Text**

1. Hutchison, E. (2007). *Dimensions of Human Behavior: The Changing Life Course* (3<sup>rd</sup> Ed.) Thousand Oaks, CA; Sage Publications, Inc.
2. Corcoran, J., & Walsh, J. (2006). *Clinical assessment and diagnosis in social work practice*. New York: Oxford University Press.

**Articles and book chapters:** You are responsible for the articles and chapters listed under required reading. Further readings are included for those seeking additional information.

**Web Sites:** You will be investigating health and mental health topics through a variety of Web resources.

## Assignments

- 1. Class Participation.** Students are expected to participate in class discussion. Full credit is given to students who have attended all classes and who have demonstrated engagement with the material (based on their quality rather than quantity of participation in class discussion).
- 2. Health Disparities Presentation (Health Disorder in Context) – Group Project**  
Students will form in groups of four or five and present on a particular health or mental health disorder or environmental condition that differentially affects the experiences of a specific subpopulation (e.g., persons of a particular race, ethnicity, gender, age, or sexual orientation). Presentations will be scheduled during classes on atypical development that best fit your topic and should be between 20-25 minutes (including discussion). The instructor will provide a sign-up sheet to facilitate this process and ensure that topics span the adult life course.

Your task is to analyze the research literature on a particular disorder or environmental condition in which there is significant disparity by race, culture, age, gender, or other salient categories. There is much evidence of disparities among subgroups in the United States in the causes, diagnosis, treatment, and outcomes for particular disorders as well as the distribution of environmental conditions that affect wellbeing. According to the National Institutes of Medicine's 2002 Report on the Unequal Treatment Confronting Racial and Ethnic Disparities in Health Care, persons of racial and ethnic minorities receive inferior medical diagnoses and treatment compared with their Caucasian counterparts. The 1999 Mental Health Report by the Surgeon General reveals that disparities are even greater for those with mental illness. Topic examples include the disproportionately high rates of obesity among low-SES women, poorer outcomes among women of cardiovascular disease and diabetes, the

under-diagnosis of HIV/AIDS among heterosexual males, the disproportionately high rates of arrest and incarceration for African American males; the relatively high incidence of major depressive disorder among middle aged adults; and the differing diagnosis patterns of schizophrenia in African Americans compared to other groups.

Use your creativity to convey health/mental health disparities and their significance. For example, you may decide to provide the class with case vignettes to analyze, administer a “quiz” to test (and enhance) our knowledge, present information on a poster or as part of a slide show, or through demonstrative role plays, pedagogical games, or experimental exercises. Each group is required meet with the instructor at least two weeks prior to their scheduled date and must have their topic approved by the week preceding their presentation.

Each group is required to convey the following in a clear manner:

1. The etiology, symptomatology and prevalence of the disorder or condition within the specific subpopulation.
2. The meaning and significance of the disorder or condition to those within the specific subpopulation. (Many Western, DSM interpretations of disorders and conditions are not shared by all cultures. For example, the ancient Hawaiian culture believed that excess body weight signified royalty, and persons in many cultures believe that people with epilepsy are touched by the gods.)
3. Individual, family, or community traits or conditions that affect the incidence and/or course of the disorder. (For example, gun violence in low-SES urban neighborhoods may prevent community members from going outdoors to play or exercise; the resultant sedentary lifestyle may lead to obesity in children and adults.)
4. The impact of the disorder or condition and its sequelae on individuals, their family and community, if relevant. (For example, how has the incarceration of a significant portion of the male African American population in some urban neighborhoods affected life in these communities?)
5. Specific recommendations for social worker assessment and intervention with individuals and families affected by the disorder or condition.
6. Specific recommendations for macro assessment and intervention, including policy changes that affect the outcome or incidence of the condition or disorder, with an eye on issues of discrimination, inequality, and social justice.

The way that your group addresses these is up to your group. Given the time limit, you may decide to demonstrate one of these components using an experimental exercise and then provide the remaining information in a clear and concise handout. In preparing for your presentation, use current literature from professional journals. Each group must submit an APA-style reference list of scholarly articles to the instructor on the day of the presentation. You may also supplement this information with additional resources and sources.

### **3. Health Disparities Presentation (Health Disorder in Context) – Individual Paper**

Each student will also submit a scholarly paper that concisely presents the piece that you researched for your group project. For example, if your group presented on depression among the elderly, your may focus on epidemiological issues, factors of risk and resiliency,

or recommendations for assessment and intervention. As part of your group process, you will decide how to divide the topics covered. Your paper will reflect your contribution. The paper is due on the same day of the group presentation. **Two page limit (plus references).**

#### **4. Critical Thinking Papers**

Students will complete two (out of four) critical thinking papers during the semester. These papers build on the critical thinking papers from HBSE, Part I. For each paper, students will apply course material to analyze a case study, including explicit reference and incorporation of readings from the classes covered. Instructors will provide more detailed description of these assignments. Each paper will be limited to 2 pages (12pt font), not including the case description. APA format is required with one exception – please omit cover sheet.

1. **Class 4-6 Early Adulthood Development** (Due by the *beginning* of class 6)
2. **Class 7-9 Middle Adulthood Development** (Due by the *beginning* of class 9)
3. **Class 10-12 Older Adulthood Development** (Due by the *beginning* of class 12)
4. **Class 13 Death and Bereavement** (Due by the *beginning* of class 13)

#### **5. Older Adult Life Review (Counts as Final Exam)**

This assignment provides the opportunity for students to analyze and evaluate theories and information about human development to understand the developmental over the life course of an older adult. The first part of this assignment is to interview an older adult to learn about his or her life-span development. In this life review, students are to ask the older adult to reflect on the most significant actions and developmental milestones that have shaped his or her life. The second part involves using a theoretical perspective and factual information from the course to explain the individual's development within relevant contexts. Your written assessment should include how the person's life has been shaped by diversity (race, ethnicity, rurality, gender/sexual orientation, disability, and social class); health and mental health issues; family, cultural, and community context; and the roles that risk and resilience played in the person's life trajectory. **Due by the morning before the last day of class.**

#### **APA and Written Assignments**

The School of Social Work faculty has adopted APA style as the preferred format for papers and publications. The best reference is the Publication Manual of the American Psychological Association, Fifth Edition (2001) that is available at most bookstores. The following web sites provide additional information:

<http://juno.concordia.ca/help/howto/apa.php> (general information about documentation using APA style)

<http://www.apa.org/journals/webref.html> (APA Style for material in electronic formats).

The UNC School of Social Work Style Guide: A Writing Manual for Social Work Students (<http://ssw.unc.edu/currentStudent/index.html>) also contains basic APA information and a section on how to avoid misuse of the words and ideas of others in your written work. Students are strongly encouraged to review the section on plagiarism carefully. All instances of academic dishonesty will result in disciplinary measures pre-established by the School of Social Work and the University.

### **Honor Code**

The Student Honor Code is always in effect in this course. The Instrument of Student Judicial Governance (<http://instrument.unc.edu/>) requires that you vouch for your compliance on all your written work. You must write the following pledge in full on each document title page: "I have neither given nor received any unauthorized assistance on this assignment." Sign and date your statement.

### **Policy on Accommodations for Students with Disabilities**

Students with disabilities that affect their participation in the course must notify the instructor if they wish to have accommodations in instructional format, examination format, etc. The instructor will work with the Office of Disabilities and the student to make appropriate accommodations.

### **Grades**

The School of Social Work uses an evaluation system of Honors (H), Pass (P), Low Pass (L), and Fail (F). For this class, the numerical value of an H ranges from 94 - 100; a P is 80 - 93; an L is 70 - 79. A grade of P is considered entirely satisfactory. On a traditional grading scale, a P would range from B- to A-. The grade of Honors signifies that the work is clearly excellent in all respects. A student receiving nine or more Low Passing credits is ineligible to continue in graduate school. The final grading breakdown is:

<b>Assignment Percentage</b>	<b>Total 100%</b>
Class Participation	10%
Health Disparities Presentation (group)	25%
Health Disparities Paper (individual)	20%
Critical Thinking Papers (2 at 10% each)	20%
Older Adult Life Review	25%

### **Attendance and Participation**

Attendance at all class sessions is expected; it is important to be on time so as not to disrupt class. We will cover a great deal of information in each class. If you will not be able to attend a class, let the instructor know as soon as possible. It is also your responsibility to obtain handouts, information about class content, and information about announcements, etc., from your classmates. Students with more than two absences will receive an "L" unless they have made prior arrangements with the instructor. In order to fully participate in and benefit from each class session, students must complete required readings and come to class prepared to discuss them.

### **Late Papers**

Late papers are strongly discouraged. To obtain permission to submit a paper after the deadline, the student must seek approval from the instructor before the beginning of class on the day that the product is due. If permission for late submission is not granted before breaking a deadline, the grade will automatically be reduced 10%, and another 10% reduction will occur each day, including weekends. In case of an emergency, a late paper may be accepted without penalty at the discretion of the instructor. Avoid having last minute computer failures prevent you from

turning papers in on time. Plan ahead! Keep backups and don't rely on having computers, printers, servers, and email programs working perfectly a half-hour before class.

### **Cell Phone Policy**

Cell phones are a disruption to the learning process. Students are expected to turn off their cell phones during class.

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## **Schedule and Course Outline**

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### **Week 1 / January 16 / Introduction: Adult Development in Context**

#### **Topics:**

- Bridging child/adolescent development to young adult/adult/older adult development
- Life course theory of development
- Bioecological systems theory for adult and family development
- Diverse family forms in adulthood
- Risk and resilience in adulthood

#### **Required Readings:**

1. Elder, G. H., Jr. (1998). Life course theory and human development. *Sociological Analysis, 1*(2), 1-12. [Blackboard]
2. Rolland, J. (2006). Genetics, Family Systems, and Multicultural Influences. *Families, Systems & Health, 24*, 425-441. [Blackboard]

#### **Recommended:**

Bronfenbrenner, U. (1989). Ecological systems theory. In R. Vasta (Ed.), *Six theories of child development: Revised formulations and current issues* (pp. 185-249). Greenwich, CT: JAI Press.

Crosnoe, R., & Elder, G. H., Jr. (2004). From childhood to the later years: Pathways of human development. *Research on Aging, 26*, 623-654.

Wickrama, K. A. S., Conger, R. D., Wallace, L. E., & Elder, G. H., Jr. (2003). Linking early social risks to impaired physical health during the transition to adulthood. *Journal of Health and Social Behavior, 44*, 61-74.

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### **Week 2 / January 23 / Typical and Atypical Adult and Family Development**

#### **Topics:**

- Contextualizing adult and family development within the context of the family including considerations of illness, disability, deprivation, discrimination
- Video: Depression: Out of the Shadow <http://www.pbs.org/wgbh/takeonestep/depression/> Chapter 5: Trauma, Stress, Depression (nine minutes)

#### **Required Readings:**

1. Walsh, F. (2003). Changing families in a changing world: Reconstructing family normality. In F. Walsh (Ed.) *Normal family processes: Growing diversity and complexity* (3rd ed., pp. 1-26). New York: Guilford Press. [Blackboard]
2. George, L. K. (2002). What life-course perspectives offer the study of aging and health. In R. Settersten (Ed.), *Invitation to the life course: Toward new understandings of later life* (pp. 161-188). Farmingdale, NY: Baywood. [Blackboard]
3. Boss, P. G. (2002). Ch. 9, The family's external context. In *Family Stress Management* (2<sup>nd</sup>. Ed.), pp. 149-158. Thousand Oaks, CA: Sage. [Blackboard]

*Recommended:*

- Amato, P. R., & Cheadle, J. (2005). The long reach of divorce: Divorce and child well-being across three generations. *Journal of Marriage and the Family*, 67, 191-206.
- Amato, P. R., & Sobolewski, J. N. (2001). The effects of divorce and marital discord on adult children's psychological well being. *American Sociological Review*, 66, 900-921.
- Boss, P. G. (2002). Ch. 8, Family values and belief systems: Influences on family stress management. In *Family Stress Management* (2<sup>nd</sup>. Ed.), pp. 135-148. Thousand Oaks, CA: Sage.
- Collins, D., Jordan, C., & Coleman, H. (2007). Family development and the life cycle. In *An introduction to family social work* (2nd ed., pp. 178-219). Belmont, CA: Thomson Brooks/Cole.
- Rank, M. R. & Hirschl, T. A. (1999). The likelihood of poverty across the American adult life span." *Social Work*, 44, 201-216.
- Reynolds, J. (2005). Family and relational transitions across the life span. In D. Comstock (Ed.), *Diversity and development: Critical contexts that shape our lives and relationships* (pp. 269-298). Belmont, CA: Thomson Brooks/Cole.

### **Week 3 / January 30 / Influence of health and wellbeing on adult development**

Topics:

- Use of DSM framework within a social work practice context
- Frameworks for understanding health/mental health disorders in adulthood including bioecological systems, life course perspective, biopsychosocial, risk and resilience, stress and coping
- Focus on the interactions between health disorders and mental health disorders
- [The DSM: Inventing Mental Illness](#) (10 minutes)

Required Readings:

1. *Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition, Text Revision* (DSM-IV-R). <http://www.psychiatryonline.com/resourceTOC.aspx?resourceID=1> Multiaxial Assessment (9 pages). Also familiarize yourself with Content and play around with the differential diagnoses decision trees in Appendix A.
2. DSM-V: The Future Manual, American Psychiatric Association website (1page) <http://www.psych.org/MainMenu/Research/DSMIV/DSMV.aspx>

3. Corcoran and Walsh (2006) Chapter 2. Social Work and the DSM: Person-in environment versus the medical model
4. Link, B.G. & Phelan, J. (1995). Social conditions as fundamental causes of disease. *Journal of Health and Social Behavior*, 35, 80-94. [Blackboard]
5. Engstrom, M. (2006). Physical and Mental Health: Interactions, Assessment, and Intervention. In S. Gehlert & T.A. Browne (Eds.) *Handbook of health social work* (194-253). [Blackboard]

*Recommended:*

- Al-Krenawi, A. (1998). Reconciling western treatment and traditional healing: A social worker walks with the wind. *Reflections: Narratives of Professional Helping*, 4 (3), 6-21.
- Iversen, R. R., Gergen, K. J., & Fairbanks, R. P. (2005). Assessment and social construction: Conflict or co-creation? *British Journal of Social Work*, 35, 689-708.
- Kleinman, A. (1997). How is culture important for DSM-IV? In J.E. Mezzich, A. Kleinman, H. Fabrega, & D. Parron (Eds.), *Culture and psychiatric diagnosis: A DSM-IV perspective* (pp. 15-25). Washington D.C.: American Psychiatric Press.
- McQuaide, S. (1999). A social worker's use of the diagnostic and statistical manual. *Families in Society*, 80(4), 410-416.
- Mirowsky, J. & Ross, C.E. (1999). Well-being across the life course. In A.V. Horwitz & T.L. Scheid (Eds.), *A Handbook for the Study of Mental Health: Social Contexts, Theories, and Systems* (pp.328-347). Cambridge: Cambridge University Press.
- Pearlin, L.I. (1999). Stress and mental health: a conceptual overview. In A.V. Horwitz & T.L. Scheid (Eds.), *A Handbook for the Study of Mental Health: Social Contexts, Theories, and Systems* (pp. 161-175). Cambridge: Cambridge University Press.
- Poland, J. & Caplan, P. (2004). The deep structure of bias in psychiatric diagnosis. . In P. Caplan & L. Cosgrove (Eds.), *Bias in psychiatric diagnosis* (pp. 9-23). NY: Jason Aronson.
- Rolland, J.S. & Werner-Lin, A. (2006). Families, health, and illness. In S. Gehlert & T.A. Browne (Eds.) *Handbook of health social work* (pp.305-334).

## **Week 4 / February 6 /Early Adulthood: Typical Development**

Topics:

- Physical, cognitive, emotional and social development in young adulthood
- Issues in emerging adulthood: identity, beginning work/career, developing intimate relationships, forming family
- Video in Class: Young adulthood: the winding road from late teens through the twenties (YouTube video, six minutes)

Required Readings:

1. Hutchison, E. Chapter 7: Young Adulthood.
2. Arnett, J.J. (2000). Emerging adulthood: A theory of development from the late teens through the twenties. *American Psychologist*, 55, 469-480. ).

*Recommended:*

Barkley, R. A., Fischer, M., Smallish, L., & Fletcher, K. (2006). Young adult outcomes of hyperactive children: Adaptive functioning in major life activities. *Journal of American Academy of Child and Adolescent Psychiatry*, 45(2), 192-202.

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## **Week 5 / February 13 / Early Adulthood: Atypical Development**

### Topics:

- HIV/AIDS
- Risk-Taking Behaviors
- Violence
- Substance Abuse (including alcohol misuse and binge drinking)
- Video in Class: [Behavioral Compulsions & Causes of Drug Addiction Video PSA](#) (YouTube) 32 minutes

### Required Readings:

1. Corcoran & Walsh, Ch. 11, Substance Use Disorders, pp. 304-348.
2. HIV & AIDS, MayoClinic.Com <http://www.mayoclinic.com/health/hiv-aids/DS00005>
3. Gureje, O., Marreas, V., Vasquez-Barquero, J.L. & Janca, A. (1997). Problems related to alcohol use: A cross-cultural perspective. *Culture, Medicine and Psychiatry*, 21, 199-211.
4. Joseph, E.B. & Bhatti, R. (2004). Psychosocial problems and coping patterns of HIV seropositive wives of men with HIV/AIDS. *Social Work in Health Care*, 39(1/2), 29-47.

### Recommended:

Mahoney, C.A., Engstrom, M., & Marsh, J.C. (2006). Substance use problems in health social work practice. In S. Gehlert & T.A. Browne (Eds.) *Handbook of health social work* (367-414).

Straussner, S.L.A. (2003). Ethnocultural issues in substance abuse treatment. In S.L.A. Straussner (Ed.) *Ethnocultural factors in substance abuse treatment* (pp. 13-28). New York, NY: The Guilford Press.

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## **Week 6 / February 20 / Early Adulthood: Atypical Development**

### Topics:

- Schizophrenia
- DSM-IV Case Videos in Class: Schizophrenia

### Required Readings:

1. Corcoran & Walsh, Ch. 14, Schizophrenia and Other Psychotic Disorders, pp. 412-447.
2. Schizophrenia community website: <http://www.schizophrenia.com>
3. Poland, J. (2004). Bias and schizophrenia. In P. Caplan & L. Cosgrove (Eds.), *Bias in psychiatric diagnosis* (pp. 149-161). NY: Jason Aronson. [Blackboard]

## **Due Date for Critical Thinking Paper #1**

*Recommended:*

- Padgett, D. K., Hawkins, R. L., Abrams, C., & Davis, A. (2006). In their own words: Trauma and substance abuse in the lives of formerly homeless women with serious mental illness. *Psychological Assessment, 76*(4), 461-476.
- Poland, J. (2004). Bias and schizophrenia. In P. Caplan & L. Cosgrove (Eds.), *Bias in psychiatric diagnosis* (pp. 149-161). NY: Jason Aronson.
- van Meijel, B., van der Gaag, M., Sylvain, R., & Grypdonch, M. (2004). Recognition of early warning signs in patients with schizophrenia: A review of the literature. *International Journal of Mental Health Nursing, 13*, 107-116.
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**Week 7 / February 27 / Middle Adulthood: Typical and Atypical Development**

Topics:

- Physical, cognitive, emotional and social development in middle adulthood
- Caregiving in middle adulthood, including considerations of parenting children and caring for aging parents
- Divorce and other family transitions of middle adulthood
- Key health disorders, including cancer, diabetes, obesity
- Injury and disability
- Health disparities

Required Readings:

1. Hutchison, E. Chapter 8: Middle Adulthood.
2. Jones, A. C. (2003). Reconstructing the stepfamily: Old myths, new stories. *Social Work, 48*(2), 228-236. [Blackboard]
3. Auslander, W. & Freedenthal, S. (2006). Social work and chronic disease: Diabetes, heart disease, and HIV/AIDS. In S. Gehlert & T.A. Browne (Eds.) *Handbook of health social work* (pp. 532-567). Hoboken, NJ: John Wiley & Sons, Inc. [E-Reserves]
4. Diabetes - <http://www.diabetes.org>
5. Heart Disease - <http://www.cdc.gov/heartdisease>
6. National Cancer Institute - <http://www.cancer.gov>
7. Obesity - <http://www.cdc.gov/nccdphp/dnpa/obesity>

*Recommended readings*

- Brashler, R. (2006). Social work practice with disability issues. In S. Gehlert & T.A. Browne (Eds.) *Handbook of health social work* (448-470). Hoboken, NJ: John Wiley & Sons, Inc.
- Davis, C. (2004). Psychosocial needs of women with breast cancer: How can social workers make a difference? *Health and Social Work, 29*(4), 330-334.
- Gehlert, S. (2006). The conceptual underpinnings of social work in health care. In S. Gehlert & T.A. Browne (Eds.) *Handbook of health social work* (3-23).
- Werner-Lin, A. & Biank, N.M. (2006). Oncology social work. In S. Gehlert & T.A. Browne (Eds.) *Handbook of health social work* (pp.507-531).
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## Week 8 / March 6 / Middle Adulthood: Atypical Development

### Topics:

- Depression
- Bipolar Disorders
- Suicidality
- Dual Disorders
- DSM-IV Case Videos in Class: Depression and Bipolar Disorders

### Required Readings:

1. Corcoran & Walsh, Ch. 10, Depression, pp. 261-303.
2. Corcoran & Walsh, Ch. 13, Bipolar Disorder, pp. 381-411.
3. Depression, MayoClinic.Com <http://www.mayoclinic.com/health/depression/DN99999>
4. Depression, Mental Health America <http://www.mentalhealthamerica.net/go/depression>
5. Suicide <http://www.nimh.nih.gov/health/topics/suicide-prevention/index.shtml>
6. Suicide <http://www.suicide.org>
7. Mental Health America: Dual Diagnosis: Fact Sheet

<http://www.nmha.org/index.cfm?objectid=C7DF9405-1372-4D20-C89D7BD2CD1CA1B9>

### *Recommended:*

- Andreasen, N.C., & Black, D.W. (2006). Ch. 15. Psychiatric Emergencies. In *Introductory Textbook of Psychiatry* (4<sup>th</sup> Ed.), pp. 365-378. Washington, DC: American Psychiatric Publishing, Inc.
- Cummings, S., Neff, J., & Husaini, B. (2003). Functional impairment as a predictor of depressive symptomatology: The role of race, religiosity, and social support. *Health and Social Work, 28*(1), 23-32.
- Kennedy, N. Boydell, J. Van Os, J. & Murray, R.M. (2004). Ethnic differences in the presentation of bipolar disorder: Results from an epidemiological study. *Journal of Affective Disorders, 83*, 161-168. [Blackboard]
- Tsai, J. & Chentsova-Sutton, J. (2002). Understanding depression across cultures. In I. Gotlib & C. Hammen (Eds.), *Handbook of depression* (pp. 467-491). NY: The Guilford Press. [Blackboard]
- Video on Depression: Out of the Shadow <http://www.pbs.org/wgbh/takeonestep/depression/>  
Chapter 4: Postpartum Depression, and Chapter 6: Common Depression

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**NO CLASS / March 13 / SPRING BREAK ☺**

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## Week 9 / March 20 / Middle Adulthood: Atypical Development

Meet in Auditorium for Guest Speaker on Domestic violence from UNC Hospitals Beacon Child and Family Program <http://www.med.unc.edu/beacon/>

### Topics:

- Post Traumatic Stress Disorder (PTSD)
- Anxiety Disorders
- Traumatic experiences in adulthood (e.g., partner violence, disasters), with attention to family and community trauma
- DSM-IV Case Videos in Class: Anxiety Disorders

### Required Readings:

1. Corcoran & Walsh, Ch. 7, Posttraumatic Stress Disorder, pp. 164-190.
2. Corcoran & Walsh, Ch. 8, Anxiety Disorders, pp. 191-230.
3. Anxiety Disorders, NIMH /NIH <http://www.nimh.nih.gov/health/topics/anxiety-disorders/index.shtml>
4. Domestic Violence <http://www.nlm.nih.gov/medlineplus/domesticviolence.html#cat63>
5. Campbell, J. (2002). Health consequences of intimate partner violence. *The Lancet*, 359, 1331-1336.

### **Due Date for Critical Thinking Paper #2**

#### *Recommended:*

- Barlow, D. (2002). The experience of anxiety: Shadow of intelligence or specter of death? In *Anxiety and its disorders: The nature and treatment of anxiety and panic* (1-36). NY: The Guilford Press.
- Bent-Goodley, T. B. (2005). Culture and domestic violence: Transforming knowledge development. *Journal of Interpersonal Violence*, 20(2), 195-203.
- Boss, P. G. (2002). Ch. 10, Family crisis: Overcoming trauma and victimization. In *Family Stress Management* (2<sup>nd</sup>. Ed.), pp. 159-174. Thousand Oaks, CA: Sage.
- Markoff, L. S., Reed, B. G., Fallot, R. D., Elliot, D. E., Bjelajac, P. (2005). Implementing trauma-informed alcohol and other drug mental health services for women: Lessons learned in a multisite demonstration project. *American Journal of Orthopsychiatry*, 75(4), 525-539.
- Pearlin, L.I. (1999). Stress and mental health: A conceptual overview. In Horowitz, A.V. & Scheid, T.L. (Eds.), *A handbook for the study of Mental Health: Social Contexts, Theories, and Systems* (pp. 161-175).
- Stamm, B.H. & Friedman, M.J. (2000). Cultural diversity in the appraisal and expression of trauma. In A.Y. Shalev, R. Yehuda, & A.C. McFarlane (Eds.), *International handbook of human response to trauma* (pp. 69-85). Dordrecht, Netherlands: Kluwer Academic Publishers.
- van der Kolk, B. (1987). The psychological consequences of overwhelming life experiences. In *Psychological Trauma*. Washington DC: American Psychiatric Press.
- Video: The Soldiers Heart <http://www.pbs.org/wgbh/pages/frontline/shows/heart> (60 minutes)
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### **Week 10 / March 27 / Older Adulthood: Typical Development**

#### Topics:

- Physical, cognitive, emotional and social development in late adulthood

- Families in later life
- Transitions, losses and gains in older adulthood, including work, family, and friends
- Video in Class on the new science of aging

Required Readings:

1. Hutchison, E. Chapter 9: Late Adulthood
2. Hutchison, E. Chapter 10: Very Late Adulthood
3. AARP Web Site. <http://www.aarp.org> Explore the themes and messages in site. Read at least one article on brain development. (Use “search” function.)

*Recommended:*

Bengtson, V. L. (2001). Beyond the nuclear family: The increasing importance of multigenerational bonds. *Journal of Marriage and Family* 63(1), 1-16.

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**Week 11 / Friday April 3 / Older Adulthood: Atypical Development**

Topics:

- Cognitive disorders, including dementia
- Overview of how major mental health disorders manifest in older adulthood, including depression, schizophrenia, substance abuse disorders, suicidality, and eating disorders
- Video: *Complaints of a Dutiful Daughter*. (1995, by Deborah Hoffman.)

Required readings:

1. Corcoran & Walsh, Ch. 16, Cognitive Disorders, pp. 479.
2. Alzheimer’s - <http://www.alz.org>

**Due Date for Critical Thinking Paper #3**

*Recommended:*

Cox, C. & Monk, A. (1993). Hispanic culture and family care of Alzheimer’s patients. *Health and Social Work*, 18(2), 92-100.

Mahoney, D.F., Clutterbuck, J. Neary, S. & Shan, L. (2005). African American, Chinese, and Latino family caregivers’ impressions of the onset and diagnosis of dementia: Cross-cultural similarities and differences. *The Gerontologist*, 45(6), 783-792.

Harris, M., & Cumella, E.G. (2006). Eating disorders across the lifespan. *Journal of Psychosocial Nursing & Mental Health Services*, 44(4), 21-26.

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**NO CLASS / April 10 / Good Friday**

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**Week 12 / Friday, April 17 / Older Adulthood: Atypical Development**

Meet in Auditorium for Guest Speaker, Cornelia Poer, MSW, LCSW, Duke Geriatric Evaluation and Treatment Clinic

Topics:

- Heart/cardiovascular disease and stroke
- Health and physical disability in older adulthood
- Caregiving in older adulthood

Readings:

1. Diwan, S. & Balaswamy, S. (2006). Social work with older adults in health-care settings. In S. Gehlert & T.A. Browne (Eds.) *Handbook of health social work* (417-447). Hoboken, NJ: John Wiley & Sons, Inc. [E-Reserves]
  2. Plante, G. E. (2005). Depression and cardiovascular disease: A reciprocal relationship. *Metabolism Clinical and Experimental*, 54, 45-48. [Blackboard]
  3. Stroke - <http://www.stroke.org>
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**Week 13 / Friday, April 24 / Death and Dying**

Topics:

- Loss of partner
- Death and bereavement
- Death in individual life cycle and family life cycle

Readings:

1. Berk, Ch. 19: Death, dying, and bereavement, pp. 634-663. [Blackboard]
2. Hooyman, N.R., & Kramer, B. J. (2006). Resilience and meaning making. In *Living through loss: Interventions across the life span* (pp. 63-86). New York: Columbia University Press. [Blackboard]

**Due Date for Critical Thinking Paper #4**

**Due Date for Older Adult Paper (Counts as Final Exam)**

*Recommended:*

- Blackman, N., (2002). Special issue: Aging People with Intellectual Disabilities: Dealing with the Challenges of Older Age. *Journal of Gerontological Social Work*, 38, 253-263.
- Herbert, R., Schulz, R., Copeland, V&, Arnold, R. (2009). Preparing family caregivers for death and bereavement: Insights from caregivers of terminally ill patients. *Journal of Pain & Symptom Management*, 37, 3-12.
- Sanders, S., Ott, C., Kelber, S. Noonan, P. (2008). The Experience of High levels of grief in caregivers of persons with Alzheimer's disease and related dementia. *Death Studies*, 32, 495-523.

## Additional Readings for Super-Motivated Students

### Recommended:

- Boss, P. G. (2002). Ch. 2, The contextual model: Understanding family stress in science and practice. In *Family Stress Management* (2<sup>nd</sup>. Ed.), pp. 15-38. Thousand Oaks, CA: Sage.
- Boss, P. G. (2002). Ch. 3, Definitions: A guide to family stress theory. In *Family Stress Management* (2<sup>nd</sup>. Ed.), pp. 39-68. Thousand Oaks, CA: Sage.
- Boss, P. G. (2002). Ch. 4, Coping, adapting, being resilient...or is it managing? In *Family Stress Management* (2<sup>nd</sup>. Ed.), pp. 67-92. Thousand Oaks, CA: Sage.
- Collins, D., Jordan, C., & Coleman, H. (2007). Family development and the life cycle. In *An introduction to family social work* (2nd ed., pp. 178-219). Belmont, CA: Thomson Brooks/Cole.
- Reynolds, J. (2005). Family and relational transitions across the life span. In D. Comstock (Ed.), *Diversity and development: Critical contexts that shape our lives and relationships* (pp. 269-298). Belmont, CA: Thomson Brooks/Cole.
- Schilder, A. J., Kennedy, C., Goldstone, I. L., Ogden, R. D., Hogg, R. S., & O'Shaughnessy, M. V. (2001). "Being dealt with as a whole person" Care seeking and adherence: The benefits of culturally competent care. *Social Science and Medicine*, 52, 1643-1659.
- Walsh, F. (2003). Family resilience: A framework for clinical practice. *Family Process*, 42(1), 1-18. Focus on pp. 6-16.
- Walsh, F. (1998). Reconnection and reconciliation: Bridge over troubled waters. In *Strengthening family resilience* (pp. 278-313). New York: Guilford Press.
- Walsh, F. (2003). Changing families in a changing world: Reconstructing family normality. In F. Walsh (Ed.) *Normal family processes: Growing diversity and complexity* (3rd ed., pp. 1-26). New York: Guilford Press.