I. COURSE DOMAIN AND BOUNDARIES
The purpose of this course is for students to develop an understanding of transdisciplinary perspectives and apply systematic problem solving approaches to the prevention of child maltreatment. We will consider both primary prevention as well as prevention of recurring maltreatment. Answers to complex questions about child maltreatment requires a transdisciplinary problem-solving approach with public health, social work, and medical practitioners analyzing perspectives from diverse fields, and coming together to integrate knowledge across these disciplines. Application of this learning through a systematic problem solving process will lead to improved prevention strategies to this complex social problem.

IIA. MPH FOUNDATIONAL KNOWLEDGE AND COMPETENCIES ADDRESSED IN THIS COURSE:

A. Foundational Knowledge:
3. Explain the role of quantitative and qualitative methods and sciences in describing and assessing a population’s health.
4. List major causes and trends of morbidity and mortality in the US or other community relevant to the school or program.
5. Discuss the science of primary, secondary and tertiary prevention in population health, including health promotion, screening, etc.
6. Explain the critical importance of evidence in advancing public health knowledge.
7. Explain effects of environmental factors on a population’s health.
8. Explain biological and genetic factors that affect a population’s health.
9. Explain behavioral and psychological factors that affect a population’s health.
10. Explain the social, political, economic determinants of health and how they contribute to population health and health inequities.

B. Foundational Competencies
1. Apply epidemiological methods to the breadth of settings and situations in public health.
4. Interpret results of data analysis for public health research, policy or practice.
5. Compare the organization, structure and function of health care, public health and regulatory systems across national and international settings.
6. Discuss the means by which structural bias, social inequities and racism undermine health and create challenges to achieving health equity at organizational, community and societal levels.
7. Assess population needs, assets and capacities that affect communities’ health.
8. Apply awareness of cultural values and practices to the design or implementation of public health policies or programs.
12. Discuss multiple dimensions of the policy-making process, including the roles of ethics and evidence.
13. Propose strategies to identify stakeholders and build coalitions and partnerships for influencing public health outcomes.
15. Evaluate policies for their impact on public health and health equity.
18. Select communication strategies for different audiences and sectors.
19. Communicate audience-appropriate public health content, both in writing and through oral presentation.
20. Describe the importance of cultural competence in communicating public health content.
21. Perform effectively on interprofessional teams.
22. Apply systems thinking tools to a public health issue.

C. Other Competencies (If your course covers other important competencies not covered in the CEPH competencies, you may also list them here).

- Develop and apply processes that integrate and promote transdisciplinary perspectives, contributions, and collaboration.
- Define problems in a transdisciplinary way and develop shared conceptual frameworks from discipline specific theories and models.
- Apply transdisciplinary solutions to public health problem using appropriate analytical tools drawn from public health or other disciplines.
II B. MSW COMPETENCIES ADDRESSED IN THIS COURSE

<table>
<thead>
<tr>
<th>Competency</th>
<th>Code</th>
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<tbody>
<tr>
<td>Demonstrate Ethical and Professional Behavior</td>
<td>C1</td>
</tr>
<tr>
<td>Engage diversity and difference in practice.</td>
<td>C2</td>
</tr>
<tr>
<td>Advance human rights and social and economic and environmental justice.</td>
<td>C3</td>
</tr>
<tr>
<td>Engage in practice-informed research and research-informed practice.</td>
<td>C4</td>
</tr>
<tr>
<td>Engage with individuals, families, groups, organizations, and communities</td>
<td>C6</td>
</tr>
<tr>
<td>Assess individuals, families, groups, organizations, and communities</td>
<td>C7</td>
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<tr>
<td>Intervene with individuals, families, groups, organizations, and communities</td>
<td>C8</td>
</tr>
<tr>
<td>Evaluate individuals, families, groups, organizations, and communities</td>
<td>C9</td>
</tr>
</tbody>
</table>

III. BROWN SCHOOL ACADEMIC POLICIES

**Academic Integrity:** If a faculty member or student suspects that academic or professional integrity has been violated, they are required to submit an Academic Integrity or Professional Integrity Violation form found on Inside Brown for review by the Assistant Dean of the program. The Assistant Dean or designated representative will aid in the investigation of the violation, which includes but is not limited to gathering relevant evidence; conversations with the instructor, student(s) involved, witnesses, and others as necessary. Depending on the seriousness of the case, the Assistant Dean may choose to refer the matter directly to the University Student Conduct Board. This referral procedure will generally be followed if it is believed that the penalty is likely to involve suspension or expulsion from the University. The Assistant Dean for the program or designated representative will offer to meet privately with the student(s) against whom the complaint has been made. It is the student’s responsibility to familiarize themselves with the behaviors that constitute an academic integrity violation requiring referral.

**Student Handbook 2019**

**Accommodations:** If you have a learning, sensory, or physical disability or any other diagnosis that requires accommodations and/or assistance in lectures, reading, written assignments, and/or exam taking, please work with the [Disability Resource Center](#), a University-wide resource that provides academic accommodations support and referrals. After requesting academic accommodations by providing appropriate documentation, students approved for accommodations will provide an Accommodation Letter to the instructor and are encouraged to work directly with the instructor to discuss specific course needs. The student’s Academic Advisor and/or the Assistant Dean for Academic Affairs can support a student through this process.

**Pronouns:** The Brown School embraces and promotes gender expansiveness as reflective of the lived experiences of many students, staff, faculty and members of our expanded community. The correct use of an individual’s pronouns is a critical part of an individual’s identity and of building an inclusive community. Students, faculty and staff are encouraged to use pronouns during introductions, are expected to use expressed pronouns of all Brown School community members,
and are encouraged to apologize when mistakes are made. Educational resources are available at: https://campuslife.wustl.edu/lgbtqia/lgbt-resources/gender-pronouns/

**English Language Proficiency:** If your English language proficiency is such that you may need special assistance in lectures, reading, written assignments, and/or exam taking, please communicate these needs to your instructor who may refer you to the Brown Communications Lab. If you would like help seeking additional English language resources, please visit the Global Programs Suite in Brown 309. You may also find the Academic Assistance resources available through the Office for International Students and Scholars to be helpful.

**Professional Use of Electronic Devices in the Classroom:** Computers or other electronic devices, including “smart pens” (devices with an embedded computer and digital audio recorder that records the classroom lecture/discussion and links that recording to the notes taken by the student), may be used by students at the discretion of the faculty member to support the learning activities in the classroom. These activities include taking notes and accessing course readings under discussion. If a student wishes to use a smart-pen or other electronic device to audio record lectures or class discussions, they must notify the instructor in advance of doing so. Permission to use recording devices is at the discretion of the instructor, unless this use is an accommodation approved by Disability Resources.

Nonacademic use of laptops and other devices and use of laptops or other devices for other coursework is distracting and seriously disrupts the learning process for other people in the classroom. Neither computers nor other electronic devices are to be used in the classroom during class for nonacademic reasons or for work on other coursework. Nonacademic use includes emailing, texting, social networking, playing games, instant messaging, and use of the Internet. Work on other coursework may include, but is not limited to, use of the Internet, writing papers, using statistical software, analyzing data, and working on quizzes or exams. The nonacademic use of cell phones during class time is prohibited, and they should be set on silent before class begins. In the case of an emergency, please step out of the room to take the call. The instructor has the right to hold students accountable for meeting these expectations, and failure to do so may result in a loss of participation or attendance points, a loss of the privilege of device use in the classroom, or being asked to leave the classroom.

**Religious Holidays:** The Brown School recognizes the individual student’s choice in observing religious holidays that occur during periods when classes are scheduled. Students are encouraged to arrange with their instructors to make up work missed as a result of religious observance, and instructors are asked to make every reasonable effort to accommodate such requests.

**IV. WASHINGTON UNIVERSITY ACADEMIC SUPPORT POLICIES**

**Accommodations based upon relationship or sexual violence, including sexual harassment and stalking:** The University is committed to offering reasonable accommodations to students who are victims of relationship or sexual violence. Students are eligible for accommodations
regardless of whether they seek criminal or disciplinary action. Depending on the specific nature of the allegation, such accommodations may include but are not limited to implementation of a no-contact order, emergency housing, course/classroom assignment changes, assignment extensions and other academic support services. If you need to request such accommodations, please direct your requests to rsvpcenter@wustl.edu or call directly to 314-935-3445. There are four licensed RSVP counselors who serve as confidential resources. However, to implement requests for accommodations, limited information will be shared with the appropriate university administrator and/or faculty. The University will maintain as confidential any accommodations or protective measures provided to an individual student so long as it does not impair the ability to provide such measures.

If a student comes to me to discuss or disclose an instance of sexual assault, sex discrimination, sexual harassment, dating violence, domestic violence or stalking, or if I otherwise observe or become aware of such an allegation, I will keep the information as private as I can, but as a faculty member of Washington University, I am required to immediately report it to my Department Chair or Dean or directly to Ms. Jessica Kennedy, the University’s Title IX Director. If you would like to speak with directly Ms. Kennedy directly, she can be reached at (314) 935-3118, jwkennedy@wustl.edu, or by visiting the Title IX office in Umrah Hall. Additionally, you can report incidents or complaints to the Office of Student Conduct and Community Standards or by contacting WUPD at (314) 935-5555 or your local law enforcement agency. See: Title IX

You can also speak confidentially and learn more about available resources at the Relationship and Sexual Violence Prevention Center by calling (314) 935-3445 for an appointment or visiting the 4th floor of Seigle Hall. See: RSVP Center

Bias Reporting: The University has a process through which students, faculty, staff and community members who have experienced or witnessed incidents of bias, prejudice or discrimination against a student can report their experiences to the University’s Bias Report and Support System (BRSS) team. See: brss.wustl.edu.

Mental Health: Mental Health Services’ professional staff members work with students to resolve personal and interpersonal difficulties, many of which can affect the academic experience. These include conflicts with or worry about friends or family, concerns about eating or drinking patterns, and feelings of anxiety and depression. See Mental Health Resources.

Center for Diversity and Inclusion (CDI): The Center of Diversity and Inclusion (CDI) supports and advocates for undergraduate, graduate, and professional school students from underrepresented and/or marginalized populations, creates collaborative partnerships with campus and community partners, and promotes dialogue and social change. One of the CDI’s strategic priorities is to cultivate and foster a supportive campus climate for students of all backgrounds, cultures and identities. See: diversityinclusion.wustl.edu/
Additional Issues or Concerns: If you feel that you need additional supports in order to be successful in your time at Brown, beyond the mentioned accommodations, please contact your Academic Advisor or Danielle Bristow, Assistant Dean for Academic Affairs. They can assist you in navigating a myriad of concerns.

V. REQUIRED READINGS

The class includes required and recommended readings derived from the scientific and field literature. We do use one text in this course but all other readings are available electronically via CANVAS. Chapters are drawn from a book by the instructors and used to illustrate various points about forms of maltreatment, context and response: Jonson-Reid & Drake (2018) After the Cradle Falls: What Child Abuse Is, How We Respond to it and What You Can Do About It. Oxford University Press [ISBN 978-0-19-065302-6]. This is available from the campus bookstore, Target online, Oxford University Press online, and Amazon.com.

There will be a heavy emphasis on non-traditional readings and electronic sources including annual reports from federal and state agencies, state policy briefs and interactive databases or search engines—particularly in the completion of assignments.

VI. ORGANIZATION OF THE COURSE

Course content will be covered through didactic presentations, a seminar approach, thorough class discussion of readings and group exercises and presentations. Guest speakers are included in some weeks to enhance the transdisciplinary perspective and provide insight into real world application of prevention, and intervention approaches. Beginning Week 6 some class time will be provided for groups to meet and be able to consult with the instructors regarding progress.

VII. ROLE OF FACULTY AND STUDENTS

Students are expected to complete assigned readings prior to class (unless otherwise noted), attend regularly and participate actively in discussion and exercises. Please note that our guest speakers are donating their time to provide important insights into the class topics. We ask that students make special efforts to arrive on time for these presentations. Professors will be available both during the lecture/discussion, during the group meeting times starting week 6, and by appointment outside class hours.

VIII. ASSIGNMENTS AND GRADING CRITERIA

Students will work independently and in groups to integrate transdisciplinary perspectives into a richer understanding of child maltreatment. The individual assignments are designed to help students be familiar with and be able to critique information about current policy and evidence-
based practices. In the group projects, students will propose new solutions to existing real world issues which draw upon the contributions of a range of appropriate disciplines.

Grading Scale:

<table>
<thead>
<tr>
<th>Score Range</th>
<th>Grade</th>
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<tbody>
<tr>
<td>94-100</td>
<td>A</td>
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<tr>
<td>90-93</td>
<td>A-</td>
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<tr>
<td>88-89</td>
<td>B+</td>
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<tr>
<td>84-87</td>
<td>B</td>
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<tr>
<td>80-83</td>
<td>B-</td>
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<tr>
<td>78-79</td>
<td>C+</td>
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<tr>
<td>74-77</td>
<td>C</td>
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<tr>
<td>70-73</td>
<td>C-</td>
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<tr>
<td>&lt;70</td>
<td>F</td>
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Students will complete the following required assignments:

**Individual Components (50%):**
- Two problem solving briefs: 20% each = 40%
- Weekly reading summary/questions = 5%

**Group Component of Grade (50%)**
- Team problem solving paper = 30%
- Team presentation of project = 20%
- Evaluation of project learning = 5% (full credit given if turned in)

**Problem Solving Brief #1:**
**Epidemiology of Child Maltreatment and Policy.** Understanding the incidence and prevalence of a public health issue requires clear operationalization of that issue, but child abuse and neglect is not a disease like cancer. For example, breast cancer has common diagnostic categories so that any physician or public health or social-behavioral service provider would be able to clearly quantify the issue. By contrast the definition of child abuse and neglect is set in policy which is somewhat idiosyncratic by region and even by discipline. Just to make things more complicated, sometimes a given issue (like exposing a child to a particular drug, either through the child taking the drug or being present during sales or manufacture) might be categorized as child maltreatment and/or may be a criminal issue (misdemeanor or felony) depending on the state. In some places, definitions of what is and what is not child maltreatment are just plain different. Some states regard witnessing Domestic Violence as maltreatment and others don’t.

Understanding how to develop a state level policy response to maltreatment requires understanding how states define and respond to maltreatment and some basics on a state’s financial situation (Is your state flush with resources to fund new ventures? Or is your state struggling?). Additionally, there is a need to consider the unique context of a state—is your state largely rural like Montana or mostly urban/suburban like California? Are there particularly large ethnic/cultural groups to consider that may require different approaches?

This assignment will help you think critically about what it might be like to be a policy maker or state administrator trying to sort through the issues that are involved in addressing the prevalence of maltreatment in your state. You will also have the opportunity to raise questions or discuss this work in Week 4 when we focus on the child protection system.
How it will work: On the first day of class students will be assigned 4 states. You will collect a range of kinds of data about your states.

(1) Definitions of CM and Reporting practices:
Go to: [https://www.childwelfare.gov/topics/systemwide/laws-policies/state/](https://www.childwelfare.gov/topics/systemwide/laws-policies/state/)

This website will allow you to retrieve and compare the state policies for definitions of child maltreatment, child witnesses to domestic violence and parental drug use as child abuse. This website will allow you to generate short reports for each of your states. This will let you see both definitions of child maltreatment from the child protective system and legal statutes from the criminal justice system. Don’t get them confused!

(2) Current rates of Maltreatment Reported in Your States?
Go to: [https://www.acf.hhs.gov/sites/default/files/cb/cm2017.pdf#page=4](https://www.acf.hhs.gov/sites/default/files/cb/cm2017.pdf#page=4)

This is “the go to” for child abuse reporting summary numbers in the United States – the yearly report from the National Data Archive on Child Abuse and Neglect (NDACAN). Retrieve and compare data on number of cases screened in versus screened out; and investigation dispositions

(3) Contextual Issues in Your States?
Students will the obtain and report on the profile of children in each state (e.g., race/ethnicity, % English as Second language, poverty, % children ages 3-5 enrolled in preschool/kindergarten, % children in immigrant families, % health insurance) – sources?: Kids Count or the Statistical Abstract of the United States, or NVSS or American Fact Finder or Social Explorer or your favorite similar source or some combination of the above.

(4) Financial Constraints in Your States
Students will reference the following document and obtain information on the status of the state budget deficit, unemployment and other factors that will help you understand the realistic or unrealistic nature of increased spending in your states. Economic health of your state? Various
sources like the Henry Kaiser Family Foundation report on budget shortfalls
https://www.kff.org/other/state-indicator/state-budget-shortfalls/?currentTimeframe=0&sortModel=%7B%22collId%22:%22Location%22,%22sort%22:%22asc%22%7D

or the Center for Budget and Policy Priorities http://statepriorities.org/ which provides information on state priorities…

What do your states tend to spend money on? National Association of State Budget Officers publishes several reports on these types of issues- the most current projections can be found in:
https://www.nasbo.org/reports-data/fiscal-survey-of-states

**What Do You Do With All Those Data?**

We want you to put it together. This is one of those “you get to be creative and use your skills to integrate different kinds of knowledge” types of assignments. The basic question is “tell us about the child maltreatment definitions and laws in your states, and relate them to maltreatment rates (e.g. child maltreatment reports). Then consider how context (child demographics, family poverty…) might impact the policy or program response.

1. **Introduction**-comparative summary of child maltreatment definitions, reporting and screen out approaches across the states.

2. **How** might differences in the policies you discuss in section 1 impact who is reported for what across states. So, for example, you might notice that one state has a much more restrictive definition of child maltreatment. Does this seem to manifest in lower report rates for that state compared to others?

3. **How** are demographics similar or different across states in regard to racial/ethnic group, immigrant populations, child poverty rates… How might this impact policy planning (e.g., language, culture, higher risk of maltreatment if poverty rates much higher…)

4. **Conclusion & Policy recommendation**: So considering all three of these factors, what would your policy suggestion be to the governor of one of these states. You have to think about $$$ so you don’t create what is called an “unfunded mandate”. What is each state’s political and/ or economic situation (i.e., how easy or difficult might it be to make big prevention changes based on how things are going in one state’s budget compared to another???).

You probably want to create and include some tables to help you understand and talk about what you find. Think about policy makers as an audience for this brief—what would they need to understand to weigh your recommendation appropriately? The entire paper should be no more than 5 pages--excluding references and tables. Why? Because policymakers won’t consume long papers so learning to synthesize information is a critical skill! **The assignment is due week 5.**
Problem Solving Brief #2:
Evidence-based Prevention Practices. For this brief, students choose one of the evidence-based child abuse prevention practices from the listing below. Imagine you are making a recommendation to fund a particular intervention or prevention approach. Pick one state or local area (you can use one from the first brief or your own town, or St Louis….). Could this be easily transported for use in that area? Why or why not?

It's not just about going to a listing of evidence-based practices….its about finding the one that works with your population and has a large enough effect to make it worth the costs…. Students should conduct a thorough critique of the practice chosen based on available literature. Questions to consider are: Who is the target population? What is the effect size or other measure of how powerful the intervention is (e.g NNT, Cohen’s d, Odds Ratio, etc… not p values!) reported? How often has this effect been replicated and with what populations? How long is the program (how many weeks, months does it take for a child/family to complete) and how expensive is this to implement? Based on all of this information, is this the program you would recommend? The entire paper should be no more than 5 pages excluding references and tables. Please put citations in APA format- do not just site the summary on an evidence-based practice list –look at the actual studies that led to the ratings! Due week 10

Evidence-Supported child maltreatment or child well-being primary or secondary Practices (rating of at least supported): Attachment and Biobehavioral Catch-Up (ABC), AVANCE Parent-Child Education Program, Chicago Parent Program, Child Parent Psychotherapy, Childhaven Childhood Trauma Treatment, Early Head Start, Family Connects, Guiding Good Choices, Family Spirit, Home Instruction of Parents of Preschool Youngsters, Incredible Years, Nurse Family Partnership, Triple P, Family and Schools Together, Parent Child Interaction Therapy, Parent Management Training, Oregon Model, Healthy Families America, Safecare, Safe Environment for Every Kid (SEEK), Parents as Teachers, Minding the Baby, Perry Preschool Project, Strong African American Families Program. -Note other programs may be chosen with permission of instructors but there must be more than one study of outcomes available.

Resources for EBPs:
http://www.cebc4cw.org/
http://www.nctsn.org/resources/topics/treatments-that-work/promising-practices

Weekly Reading Responses:

Reading Responses: Beginning week 2 and continuing through week 10, students will turn in a brief (just a few sentences/paragraph) summary of their “take home message” or “questions raised” from the readings. You do not have to cover ALL of the readings in your response, but should refer to at least two. These are due at the BEGINNING OF CLASS because students are encouraged to use this preparation to participate in class discussion. Responses are not graded
but are given points. Full credit (5 points) if on time with 1 point deducted per week late unless excused due to illness or other excused absence— reasons for missing need to be made clear prior to or on the day of (in the case of illness). Responses can be emailed or turned in at class. We do read them and respond to your comments and questions! Total points from all 10 reading responses are weighted to equal 5% of final grade as a measure of class participation.

**Team Problem Solving Paper/Presentation and reflection: Due end of class final week!**

Students will be assigned to groups of 3 or 4 depending on final class size and project choices. Prior to each class local, state and national agencies provide us with real world projects that they need help with—on occasion these also include projects that may be of import to research. We will supply a final list by the end of the first week. Students will rank order their top three choices and we will do our best to group in your first or second choice. The nature of the project, of course, will vary between groups. Students will be given a contact from the agency that will answer any clarifying questions by phone at the beginning and be the person that the final product is delivered to. Students will not be required to travel to an agency site.

Time is provided beginning week four during class so that the instructors can answer questions and students can meet to assure project components are coming along throughout the semester. The final product includes a group paper, a team oral presentation in class and a 1 page reflection on learning.

The paper should include the following:

1) A clearly operationalized question or issue. “Operationalized” means that the terms used specifically describe the project. For example, “Improving client attendance” is not operationalized, while “increasing the rate of clients who complete at least 5 sessions” is operationalized.

2) Identification and presentation of empirical data/research relevant to the purpose of the project- including population information as well as background information needed. These data may include prior studies or may include generated data such as census or MICA (http://health.mo.gov/data/mica/MICA/) data.

3) A synthesis of the information specific to the agency’s need.

4) As appropriate, a ‘logic model’ or similar means to illustrate how your research linked to the issue/need and/or any recommendations for the agency relative to their initial request. Wikipedia has a nice overview of logic models if you want to check that.

5) A description of how you might measure outcomes related to the organization’s use of your information.

The complete paper should not exceed 20 pages. The paper should include a 1 page executive summary designed for a non-academic audience. The paper should be properly cited using APA format. This is due by the final class!

**Team Presentation of Project**

Each team will prepare a power point presentation that presents the final product. Everyone in the team must speak during the presentation. Students will receive individual scores for presentation skills and a group score for content. These two scores are combined in the final score. An electronic copy of the power point must be turned in.
**Evaluation of Learning.**
This is a one page (ungraded) reflection on the group project where you can highlight your role in the project and what you learned. Citations are not necessary for this and it should be turned in the same day as the group paper. While ungraded the points given count for 5% of final grade.

**IX. MSW COMPETENCY ALIGNMENT TO ASSIGNMENTS AND COURSE ACTIVITIES**

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<thead>
<tr>
<th>Competency(ies)</th>
<th>Dimension(s) Measured</th>
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<tr>
<td>Graded Assignments</td>
<td></td>
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<tr>
<td>Problem-solving Brief #1: Policy</td>
<td>C1, C2, C3, C5, C7</td>
</tr>
<tr>
<td>Problem-solving Brief #2: EBP</td>
<td>C1, C2, C4, C5, C8</td>
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<tr>
<td>Group problem-solving with community organizations</td>
<td>C1, C2, C4, C6, C9</td>
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<td>Course Activities</td>
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<td>Weekly reading responses</td>
<td>C1, C2, C3, C4, C5, C7</td>
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<tr>
<td>Personal Evaluation of Group Project Learning</td>
<td>C1, C4</td>
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**IX. MPH COMPETENCY ALIGNMENT TO ASSESSMENT OPPORTUNITY**

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<td>Problem-solving Brief #1 &amp; Reading responses for weeks 1-5</td>
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<td>A.6, B.5, B.8, B.13, B.14, B.18, B.19, B.21</td>
<td>Group Project and Presentation</td>
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**X. COURSE OUTLINE**

**SECTION I: PROBLEM ANALYSIS – WHAT IS CA/N, WHY IS IT A CRITICAL PUBLIC HEALTH ISSUE, AND WHAT POLICIES AND SYSTEMS ARE CHARGED WITH RESPONSE**

**Week 1: 8/27/2019 Introduction and General Orientation to Class**
This week we will overview the rationale for the course including negative sequelae of maltreatment, discuss the continuum of prevention from primary to prevention of recurrence and longer term outcomes, and present a framework for viewing this through a transdisciplinary lens.
We will also overview class expectations and do an in-class activity about what we think about the causes of maltreatment. Students are asked to keep the results and bring back on Week 10 when we will revisit.

Readings

Week 2: 9/3/2019  What is CAN / Hx of CAN
We will look at child abuse and neglect from a historical as well as different disciplinary perspectives and introduce some of the controversy in defining what we think of as maltreatment that requires intervention.

Readings:
- Jonson-Reid & Drake (2018). Parents rights and the law: Good Parenting or Physical Abuse? Our Dilemma Over Discipline. Chapter 3 RESERVE

Week 3: 9/10/2019  Epidemiology of CA/N
In this class we will overview current issues in epidemiology, incidence and prevalence and consequences of approaches to measurement. Students are invited to discuss what they are learning in the process of completing their first individual brief.

Readings:

Week 4: 9/17/2019
Child protection and child welfare
This week we will overview the major federal policies that guide child protection, how this filters to the states and critiques and controversies about the “child protection” system. Students should take this opportunity to discuss what they discovered in preparing their first briefs which are due the following week.

Readings:
• Jonson-Reid & Drake (2018). A Crash Course in Child Protection Chapter 2 RESERVE
• Jonson-Reid & Drake (2018). Protecting Women Vs. Protecting Children. Must it be either/or? Chapter 7 RESERVE

Week 5: 9/24/2019 Detection and Decision making in Child Maltreatment: Pediatric Perspectives and the Unique Issues with Sexual Abuse

Guest Speaker: Tim Kutz, MD Director Division of Child Protection, Department of Pediatrics Saint Louis University
This week focuses on detection (including mandated reporting) and views from medicine and law – including some of the unique issues with sexual abuse as compared to sexual assault

FIRST ASSIGNMENT DUE
Readings:
• Jonson-Reid & Drake (2018). Why Didn’t They Say Something? Reporters Who Don’t, Children Who Don’t, Children Who Can’t Chapter 8 RESERVE
• Jonson-Reid & Drake (2018). Child Sexual abuse: Stranger danger or danger closer to home? Chapter 5 RESERVE
• Collins (2007). Lady Madonna, Children at Your Feet… 93 Iowa L. Rev. 131
SECTION II: From Cells to Society- Factors Influencing CA/N and Our Response

Week 6: 10/1/19 Genetic and Neurobiological Considerations:

Guest Speaker: John Constantino, MD Blanche F. Ittleson Professor of Psychiatry and Pediatrics and Director. In recent years increasing attention has been paid to genetic and neurobiological systems that can be both factors related to the onset of maltreatment as well as factors related to later outcomes of maltreatment. The malleability of such factors is of particular interest in prevention and early intervention efforts. Video viewed in class: http://www.albertafamilywellness.org/resources/video/brains-journey-to-resilience

Readings:


Week 7: 10/8/2019 Community, Culture, Race & Maltreatment

Guest speaker: Jisuk Seon, PhD Postdoctoral Associate

This week focuses on issues of race/ethnicity and culture. Discussion will examine our current level of understanding of key issues related to maltreatment and child welfare among diverse populations.

Readings:


NO CLASS 10/15 FALL BREAK
Week 8: 10/22/2019  Poverty and Child Maltreatment
We will discuss the strongest known correlate of child maltreatment, poverty, in some detail and with attention to current efforts to integrate anti-poverty efforts into child maltreatment research.

Readings:
- Jonson-Reid & Drake (2018). *What Neglect Is and Why it Isn’t “Just Poverty”*. Chapter 4

Our final weeks address translation at the community/societal levels as well as prevention and intervention. The final chapter in the text will be relevant across weeks (9-12):

Week 9: 10/29/2019 Primary Prevention and PH Messaging
Guest Speaker: Nancy Weaver, Associate Dean and Professor of Behavioral Science, St Louis University. In this class, we will focus on the issue of primary prevention with high risk families as well as population based approaches. As a class activity we will revisit our conceptualizations of causes and consequences of maltreatment and how we might prioritize action.

Week 10: 11/5/2019 From Evidence to Policy?
Guest Speaker: Derek Brown, Assoc. Professor of Public Health
In this class we will explore how child abuse prevention and child welfare policy is or is not informed by evidence at multiple levels. The guest speaker will help us extend this discussion to the inclusion of economic arguments and the world of cost and benefit analyses. We will use a case study approach to think about how concerns about racial disparity were and were not influenced by actual data and the implications of how the arguments continue to unfold.

**SECOND ASSIGNMENT DUE THIS WEEK**

**Readings:**

**Case study background:**

**SECTION III: Community-based STRATEGIES FOR CHANGE:**
The final weeks of class while groups are developing their plans are devoted to overviewing current practices in the community as they relate to primary prevention, secondary prevention and intervention. Guest speakers who can speak to real world implementation are invited.

**Intervention with Families, Children and Youth (1 of 3)**

**Week 11: 11/12/2019  Early Intervention/Prevention with High Risk Families with Young Children**

**Guest speaker: Cynthia Rogers Associate Professor Departments of Psychiatry and Pediatrics (2pm)**
This week will focus on early intervention approaches with parents with subsequent sessions highlighting intervention with youth.

**Guest Speaker: Melinda Monroe, CEO, Nurses for Newborns (1 or 3)**


Week 12: 11/19/2019   Trauma informed Care
Guest Speakers: Matthew Kliethermes, Associate Clinical Professor, University of Missouri, St Louis
Guest Speaker: Additional guest TBD
In this class we will highlight efforts to prevent downstream untoward outcomes for children who have experienced maltreatment by focusing on the children themselves.

Readings:
• Jonson-Reid & Drake (2018). Resilience and Treatment Chapter 9 RESERVE

Week 13: 11/26/2019   Parenting Intervention with Families with Maltreatment Histories (3 of 3)
Guest Speaker: Dr. Patricia Kohl, Associate Professor
This week we will focus on parenting interventions and evidence-informed practices working at the family level.

Readings:


Group Presentations both weeks (order and content TBD):