

“The mission of Tyndale Seminary is to provide Christ-centred graduate theological education for leaders in the church and society whose lives are marked by intellectual maturity, spiritual vigour and moral integrity, and whose witness will faithfully engage culture with the Gospel.”

Course	CHILD AND ADOLESCENT THERAPY COUN 0688 1B
Date, Time, and Delivery Format	SEPTEMBER 9 – DECEMBER 6, 2024 TUESDAYS 2:15 – 5:05 PM BLENDED
Instructor	HELEN K. NOH, Ph.D Email: hnoh@tyndale.ca
Class Information	The classes will be in BLENDED FORMAT on Tuesdays from 2:15 PM–5:05 PM. Several weeks throughout the semester will be live-streamed only lectures and several weeks will be in-person only. Both the in-person and synchronous online lectures require mandatory attendance. Please note that there will be NO synchronous online option for the in-person lecture days. See the course schedule below for the in-person and the synchronous online lecture days. Office Hours: By appointment.
Course Material	Access course material at classes.tyndale.ca or other services at Tyndale One . Course emails will be sent to your @MyTyndale.ca e-mail account only.

I. COURSE DESCRIPTION

Provides students with the theoretical knowledge and clinical skills necessary in the assessment and treatment of children and adolescents. Focus will be on clinical practice, diagnostic skills, play and art therapy, family systems interventions, and cognitive behavioral interventions. A review of issues and diagnoses unique to children and adolescents will be examined. Effective, evidence based clinical interventions for children and adolescents will be demonstrated and practiced. Ethical and legal issues in counseling minors will be examined.

Prerequisites: COUN 0574, COUN 0674 and COUN 0677

II. LEARNING OUTCOMES

At the end of the course, students will be able to:

- Distinguish the major approaches to psychotherapy with children and adolescents
- Demonstrate competence in the assessment and clinical treatment of commonly encountered childhood and adolescent mental health issues
- Utilize empirically validated interventions that are effective in treating childhood and adolescent disorders and clinical issues
- Examine commonly encountered mental health issues in children and adolescents, including relevant childhood psychopathologies (DSM-V)
- Identify ethical standards and guidelines involved in working clinically with minors
- Present a therapeutic model of counseling children and adolescents that critically and congruently integrates biblical and psychological paradigms in the process of assessment and treatment

III. COURSE REQUIREMENTS

A. REQUIRED READING

Landreth, G. (2024). [*Play therapy: The art of the relationship*](#). New York: NY: Routledge

Shapiro, J.P. (2015). [*Child and adolescent therapy: Science and art*](#). New Jersey: John Wiley & Sons, Inc.

B. SUPPLEMENTARY / RECOMMENDED READING AND TOOLS

Cochran, N., Nordling, W. J., Cochran, J. L. (2023). *Child-Centered Play Therapy*. New York, NY: Routledge.

Friedberg, R. D. & McClure, J. M. (2018). [*Clinical practice of cognitive therapy with children and adolescents*](#). New York: The Guilford Press.

Tyndale recommends www.stepbible.org – a free and reputable online resource developed by Tyndale House (Cambridge, England) – for word searches of original-language texts, as well as for topical searches, interlinear texts, dictionaries, etc. Refer to the library for other [online resources for Biblical Studies](#).

C. INTERACTIVE LIVESTREAM AND/OR HYBRID COURSE REQUIREMENTS

- Livestream attendance for the entire duration of the class at announced times

- Headphones (preferred), built-in microphone, and web-camera
 - Well-lit and quiet room
 - Stable high-speed internet connection, preferably using an Ethernet cable over Wi-Fi
 - Full name displayed on Zoom and Microsoft Teams for attendance purposes*
 - A commitment to having the camera on to foster community building*
- *exceptions with permission from professor

D. GUIDELINES FOR INTERACTIONS

Tyndale University prides itself in being a trans-denominational community. We anticipate our students to have varied viewpoints which will enrich the discussions in our learning community. Therefore, we ask our students to be charitable and respectful in their interactions with each other, and to remain focused on the topic of discussion, out of respect to others who have committed to being a part of this learning community. Please refer to “Guidelines for Interactions” on your course resource page at classes.tyndale.ca.

E. ASSIGNMENTS AND GRADING

1. Video Reflections: 20% of final grade (2 @ 10% each; Due Oct. 1/Oct. 15)

Students will be required to watch two clinical videos throughout the semester and submit a 4-5-page (double spaced) reflection that integrates thoughtful engagement of the video content with the required readings for the class. Each video reflection will be worth 10% of the total grade for a total of 30% toward the final grade. Please note the due dates for each of the video reflections on the course schedule. Detailed instructions will be given in class.

2. “Clinical” Interview Paper: 30% of final grade; Due Nov. 5

Students will spend one hour with a child OR early adolescent (age 5 to 12) during the second half of the semester.

This exercise is for skill development and not for research purposes. No data or names of individuals will be used for research. Correct ethical guidelines for minors will be followed such as meeting in a public space, with parental permission with a full explanation of what it is for and that the interview will be used in a paper with no use of names.

In preparation for the “clinical” interview, the student will put together a “play therapy kit” including items such as paper, pens, crayons, puppets, play dough, games, dollhouse colorforms, small toys, paints, magazines, scissors, paste, small box, colored paper, games, and other age appropriate items presented throughout the lectures. The items in the “play therapy kit” will be utilized in the interview to help build rapport with the child or adolescent, to gain

relevant information, and to assess its usefulness as a therapeutic tool when counseling children.

As well, students will utilize other “developmentally appropriate” items such as cognitive behavioral tools and constructivist therapy tools to gain relevant information and to assess its usefulness as therapeutic tools.

Students will then write an 8-10 page summary of the experience, including the following information:

- Family and “client” history (current living arrangements, position in the family, family background and brief genogram)
- Observation and explanation of specific developmental stages and behaviors of the child and adolescent (drawing from lectures 1-2)
- Utilization of the “play therapy kit” and “cognitive behavioral tools” and the child or adolescent’s reaction to the various “nonclinical” interactions
- The paper will include the following sections:
 - SECTION I: Developmental Framework (10 points out of 30)
 - What developmental stages, tasks, abilities, limitations did you see in the child during the interaction (draw upon the physical, cognitive, social, emotional, moral, spiritual domains from lectures 1-3 to support your answers)?
 - What are some of the limitations and the strengths of the particular age group of the “client”?
 - What are some of your strengths and limitations in engaging with the particular age group of the “client”
 - SECTION II: Application of the Tools (15 points out of 30)
 - Briefly describe the rationale behind the “therapeutic modalities” that you utilized throughout the interview and how these principles guided your engagement with the child and/or adolescent.
 - Discuss how you attempted to establish a connection with the child/adolescent, including specific examples of how you utilized the “play therapy kit.” Were these tools helpful? What were some of your rationales for utilizing the items that you did? What was the outcome on building the therapeutic connection? were some of the challenges you experience?
 - Describe how you utilized the “cognitive behavioral tools” and was it helpful? What were some of the significant responses from the child/adolescent? How did these influence the process of the interview?
 - Discuss any other “therapeutic tools” you utilized (e.g., solution focused questions, narrative therapy tools) during the session and the impact that it had on the process and content of the interview.

- **KEY: PLEASE PROVIDE TANGIBLE EXAMPLES of specific phrases, skills, tools that you utilized during the session; how the child or adolescent responded; the influence that it had on the process and relationship; and your reflections on what you believe worked well, did not work well, and what you might have done differently.**
- SECTION III: Personal Reflections (5 points out of 30)
 - What might be some potential areas of countertransference in working with children and/or adolescents?
 - What are some strengths AND areas of growth that you see in yourself in working with children and/or adolescents?
 - What are some cultural factors that may have been significant in this experience?

3. Clinical “Skills Lab” Participation and Reflection: 10% of final grade; Due Dec. 3

Students are required to attend all weeks of the “clinical skills lab” for full grade. In addition, students will write a 4-5 page reflection on their learning experience through the “Skills Lab” portion of the course. Detailed instructions will be provided for the reflection paper.

4. Major Research Project and Class Presentation: 40% of final grade (35% for paper, due Nov. 13; 5% for presentation)

Students will write a 10-12 page research paper on a commonly encountered child or adolescent clinical issue or disorder (topics will be given in class). The paper will be worth 35% of final grade and must include the following:

- Description and Prevalence of the issue being presented
- Potential diagnostic criteria or symptoms of the presenting issue
 - A summary of the DSMV criteria is not sufficient
 - Please include other sources of research that provides complexity and depth to the presenting issue or disorder
- Proposed etiology of the presenting problem as presented in the research
 - provide your own critical analysis of why these etiologies may be significant or which ones might be more significant to your particular age group
- Application of course material on the Developmental Framework of Children and Adolescents and how this knowledge must be integrated when understanding the issue or disorder – examples of questions that you can use to answer:
 - What are some important developmental issues that we must keep in mind when working with this particular disorder or topic?
 - How might a particular developmental stage impact this issue differently than if the child/teen was in a different developmental stage?

- One or two Evidence-based interventions that have been empirically shown to be effective as treatment for the issue, including application with course material:
 - How might a developmental framework inform the best type of intervention for this particular presenting issue?
 - How might you integrate play therapy into the evidenced-based interventions in developmentally appropriate ways?
- Critical reflection and discussion of spiritual development and resources in the assessment and treatment process of counseling children and/or adolescents with the presenting issue

Students will also prepare a 3 page summary to be presented to the class (or small group) that will be **worth 5%** of the total grade and must include the following:

- Description and prevalence of the presenting issue
- Potential diagnostic criteria or symptoms of the presenting issue
- Proposed etiology of the presenting issue
- Succinct summary of the evidenced based interventions for treatment, including tangible and concrete clinical tools
- PLEASE NOTE: the purpose of this presentation is to help other students in the class gain working knowledge of the presenting issue as well as a strong model of intervention. Students will be marked on the creativity, clarity, and content of the presentation. The presentation will be 20 minutes in length with 5 minutes for questions and discussion.

F. EQUITY OF ACCESS

Students with permanent or temporary disabilities who need academic accommodations must [contact](#) the [Accessibility Services](#) at the [Centre for Academic Excellence](#) to [register](#) and discuss their specific needs. *New students* must self-identify and register with the Accessibility Office at the beginning of the semester or as early as possible to access appropriate services. *Current students* must renew their plans as early as possible to have active accommodations in place.

G. SUMMARY OF ASSIGNMENTS AND GRADING

Evaluation is based upon the completion of the following assignments:

Video Reflections (2@10% each)	20 %
Clinical "Skills Lab" Reflection	10%
"Clinical" Interview Paper	30 %
Major Research Paper and Presentation	40%
Total Grade	100 %

G. GENERAL GUIDELINES FOR THE SUBMISSION OF WRITTEN WORK

1. Your work should demonstrate the following characteristics:

All written work must be computer generated and turned in on time. Late assignments will be lowered one letter grade for each week they are late. All papers should be [APA style](#) (7th Edition), typed, double spaced, and include a title page and references section. Experiential papers may be written in first person and do not need a works cited page.

Academic Integrity

Integrity in academic work is required of all our students. Academic dishonesty is any breach of this integrity, and includes such practices as cheating (the use of unauthorized material on tests and examinations), submitting the same work for different classes without permission of the instructors; using false information (including false references to secondary sources) in an assignment; improper or unacknowledged collaboration with other students, and plagiarism. Tyndale University takes seriously its responsibility to uphold academic integrity, and to penalize academic dishonesty.

Students are encouraged to consult [Writing Services](#). Citation and other [tip sheets](#).

Students should also consult the current [Academic Calendar](#) for academic policies on Academic Honesty, Gender Inclusive Language in Written Assignments, Late Papers and Extensions, Return of Assignments, and Grading System.

Research Ethics

All course-based assignments involving human participants requires ethical review and may require approval by the [Tyndale Research Ethics Board \(REB\)](#). Check with the Seminary Dean's Office (aa@tyndale.ca) before proceeding.

H. COURSE EVALUATION

Tyndale Seminary values quality in the courses it offers its students. End-of-course evaluations provide valuable student feedback and are one of the ways that Tyndale Seminary works towards maintaining and improving the quality of courses and the student's learning experience. Student involvement in this process is critical to enhance the general quality of teaching and learning.

Before the end of the course, students will receive a MyTyndale email with a link to the online course evaluation. The link can also be found in the left column on the course page. The evaluation period is 2 weeks; after the evaluation period has ended, it cannot be reopened.

Course Evaluation results will not be disclosed to the instructor before final grades in the course have been submitted and processed. Student names will be kept confidential and the instructor will only see the aggregated results of the class.

IV. COURSE SCHEDULE, CONTENT AND REQUIRED READINGS

Date	LECTURE FORMAT	Lecture Topic	Readings	DUE DATES
Sept 10	SYNCHRONOUS ONLINE ONLY	Developmental Framework of Child and Adolescent Therapy – Part I	Landreth: 2-4	
Sept 17	SYNCHRONOUS ONLINE ONLY	Developmental Framework of Child and Adolescent Therapy – Part II	Landreth: 5-9	
Sept 24	IN-PERSON ONLY	Play Therapy – Therapeutic Fundamentals	Landreth: 10-14	
Oct 1	IN-PERSON ONLY	Play Therapy – Skills and Intervention Tools CLINICAL SKILLS LAB 1	Landreth: 15-19	VIDEO REFLECTION #1 DUE (Person-Centered Child Therapy)
Oct 8	IN-PERSON ONLY	Behavior & Cognitive Therapy – Therapeutic Fundamentals CLINICAL SKILLS LAB 2	Shapiro 1-2 Friedberg: 1-6 (Recommended)	
Oct 15	IN-PERSON ONLY	Behavior & Cognitive Therapy – Skills and Intervention Tools CLINICAL SKILLS LAB 3	Shapiro: 3-4 Friedberg: 7-10 (Recommended)	VIDEO REFLECTION #2 DUE (Cognitive-

				Behavioral Child Therapy)
Oct 22		READING BREAK: NO CLASS		
Oct 29	IN-PERSON ONLY	Constructivist Therapies: Narrative and Solution-Focused Therapy Skills and Intervention Tools CLINICAL SKILLS LAB 4	Shapiro: 5-6	
Nov 5	IN-PERSON ONLY	Family and Group Therapy Skills and Intervention Tools CLINICAL SKILLS LAB 5	Shapiro: 7-8	"CLINICAL" INTERVIEW PAPER DUE
Nov 12	IN-PERSON ONLY	Developmental Framework of Child and Adolescent Psychopathology	Shapiro 9	
Nov 19	SYNCHRONOUS ONLINE	Externalizing Disorders in children & adolescent	Shapiro 10-12	MAJOR RESEARCH PAPER DUE GROUP PRESENTATION
Nov 26	SYNCHRONOUS ONLINE	Internalizing Disorders in children and adolescents	Shapiro 13-14	GROUP PRESENTATION
Dec 3	SYNCHRONOUS ONLINE	Developing Resilience and Post-Traumatic Growth in children and adolescents	Shapiro 15	CLINICAL "SKILLS LAB" REFLECTION PAPER GROUP PRESENTATION

V. SELECTED BIBLIOGRAPHY

([Tyndale Library](#) supports this course with [e-journals, e-books](#), and the [mail delivery of books](#) and circulating materials. See the [Library FAQ page](#).)

Carr, A. (2016). [The Handbook of Child and Adolescent Clinical Psychology](#). New York: NY: Routledge.

Cochran, N., Nordling, W. J., Cochran, J. L. (2023). *Child-Centered Play Therapy*. New York, NY: Routledge.

Friedberg, R. D. & McClure, J. M. (2018). [Clinical practice of cognitive therapy with children and adolescents](#). New York: The Guilford Press.

Smith-Adcock, S. & Tucker, C. (2023). *Counseling children and adolescents: Connecting theory, development, and diversity*. Sage Publications

Weisz, J. R., & Kazdin, A. E. (2017). *Evidence-based psychotherapies for children and adolescence (3rd ed.)*. New York, NY: Guilford Press.