



ROSEMONT COLLEGE
1400 MONTGOMERY AVENUE
ROSEMONT, PA 19010

Course Title: Trauma Studies
Course Number: CNS-6089
Course Date: Fall 2020
Course Meeting Times: Thursdays, 5:15 P.M. – 7:15 P.M.
Course Location: Lawrence Hall – Room 202
Course Designation: Level II Course (Required for the Clinical Mental Health Counseling Program and School Counseling Program)
Semester Hours: 3
Prerequisites: Level I Courses
Limitation on Enrollment: 18

Instructor: Dr. Leslie Smith, LPC
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Office Hours: T (4:00 P.M. – 5:00 P.M.)
• By appointment

Course Description: This course is an in-depth examination of current theory and research on the development, assessment, and treatment of psychological trauma. Attention will be given to the identification of risk and protective factors in the development of trauma responses for

individuals across the lifespan with various mental health needs. Evidence-based assessment and treatment techniques are reviewed, including utilization of DSM criteria and early warning signs and symptoms.

Rosemont Mission Statement: Rosemont College is a community of lifelong learners dedicated to academic excellence and fostering joy in the pursuit of knowledge. Rosemont College seeks to develop in all members of the community open and critical minds, the ability to make reasoned moral decisions, and a sense of responsibility to serve others in our global society. Rooted in Catholicism, Rosemont welcomes all faiths and is guided by the educational principles of Cornelia Connelly and the Society of the Holy Child Jesus to meet the needs of the time. Rosemont College values trust in and reverence for the dignity of each person, diversity with a commitment to building an intercultural community, persistence and courage in promoting justice with compassion, and care for the Earth as our common home.

Professional Performance Evaluation: Rosemont College has identified five professional dispositions that relate to the goals of the Graduate Counseling program. Faculty members will evaluate each student on their professional dispositions during each course at the conclusion of the semester using the Professional Performance Evaluation Form.

1. **Flexibility/Openness:** Open willingness to different perspectives; Flexible to new demands, the environment, and accept necessary changes; Search for peer opinions, accept constructive feedback, and incorporate feedback from peers
2. **Collaboration:** Accept mistakes, avoid blame, apply feedback toward growth, and monitor self for professionalism; Reach consensus, initiate compromise, and show concern for group goals; Invite feedback, incorporate supervisory feedback, and give feedback
3. **Awareness:** Awareness of own impact on others; Ability to deal with conflict; ability to express feelings effectively and appropriately; Understand and demonstrate multicultural concerns and social justice. Identification of biases and prejudices of self and society.
4. **Initiative and Motivation:** Met or exceed all of the class requirements, showed creativity; Adhere to school and SPGS policies; Proficient graduate level oral and written skills
5. **Responsibility:** Maintain professional boundaries, sensitive to diversity, safeguard confidentiality, Dedication to Counseling Profession; Attend and adhere to Ethical Standards

This syllabus is provided to you as a means of conveying what you should expect from this course. It outlines the responsibilities of the instructor in conducting the class – the course content, planned scheduled of classes and assignments, grade components, and method(s) of

grading. It also outlines your responsibilities as a part of this class. By remaining in this class, you indicate your acceptance of your responsibilities as a student and agree to the terms specified in the syllabus.

Note: The instructor reserves the right to adjust the course schedule and content during the semester in order to accurately reflect the progress being made by the class. This may result in modifications to assignment and exam due dates and/or course content.

I. Student Learning Outcomes

Upon completion of this course, students will be able to:

- A. Develop foundational knowledge of trauma informed care including prevention, intervention, and postvention.
- B. Identify the impact of trauma on co-morbid diagnoses to appropriately assess the needs of individuals and implement an effective treatment plan.
- C. Understand the scope of trauma and its impact on the individual, the family unit, and the outstanding community across diverse populations.
- D. Comprehend how trauma manifests in individuals across the lifespan to employ appropriate strategies and techniques specific to each developmental stage.
- E. Differentiate between counselor traits and behaviors that impede and foster the counseling process with individuals who experience trauma through counselor self-care and supervision.
- F. Analyze research supported therapeutic approaches for the treatment of trauma for initial intervention and on-going therapeutic care.

II. Course Content

- A. Understanding Trauma Informed Care
 - a. Stigma and Mental Health
 - b. Trauma-Related illness
- B. Understanding types of trauma
 - a. Personal trauma
 - b. Political violence and trauma
 - c. Refuges and trauma
 - d. Terrorism
 - e. Environmental disasters and trauma recovery

- C.** Neurobiology and the impact of trauma
 - a. The function of the stress-response in the brain
 - b. The impact of chronic stress
 - c. What makes us human
 - d. Implications for direct practice
 - e. Fear Extinction
 - f. Emotion regulation
 - g. Attentional bias and cognitive distortions
 - h. Relationships and trauma
- D.** Resilience and trauma recovery
 - a. Resilience: origins and definitions
 - b. Hardiness and coping
 - c. Developmental maturity
 - d. Hope
 - e. Attachment
 - f. Posttraumatic Growth
- E.** Children and trauma
 - a. Trauma, fear, and the developing brain
 - b. Fear extinction and safety
 - c. Emotion regulation and trauma
 - d. Attentional bias and cognitive distortions
 - e. Relational challenges
 - f. Helping children recover from trauma
 - g. Trauma -Focused Childhood Traumatic Grief
 - h. Cognitive Behavioral Therapy
 - i. Play Therapy
 - j. Child-Parent Psychotherapy (CPP)
 - k. Group treatment with child services of trauma
 - l. SPARCS: Structured psychotherapy for adolescents responding to chronic stress
 - m. STAIR: Skills training in affect and interpersonal regulation
 - n. Hope for the future
- F.** Adult survivors of childhood trauma
 - a. Fear extinction in adults
 - b. Emotion regulation

- c. Attentional bias and cognitive distortions
 - d. Relationships and adult survivors of childhood trauma
 - e. Treatment for adult survivors of childhood trauma
 - f. Cognitive Behavioral Therapy (CBT)
 - g. STAIR
 - h. Creative therapies
 - i. Narrative Therapy
 - j. EMDR: Eye Movement Desensitization and Reprocessing
 - k. Dialectical Behavior Therapy (DBT)
- G.** Military veterans and trauma
- a. Treatment for military veterans
 - b. Psychopharmacology
 - c. Cognitive Processing Therapy
 - d. Virtual Reality Exposure
 - e. Group Treatment
 - f. EMDR
- H.** Trauma experienced in adulthood
- a. Adult survivors of rape and sexual violence
 - b. Interpersonal violence
 - c. Trauma and violent crime
 - d. Survivors of extreme natural disasters
- I.** Understanding compassion fatigue
- a. Warning signs of compassion fatigue
 - b. Personal and professional consequences of compassion fatigue
 - c. Trauma practitioners and self-care
- J.** Future directions in Trauma -Informed care
- a. Culture and trauma-informed care
 - b. F.E.A.R.: A rubric to understand trauma

III. Methods of Instruction

- A.** Lecture and discussion
- B.** Course readings
- C.** Role play
- D.** Case studies

IV. Methods of Assessment

Assessment	Points
A. Class Participation	1 X 10 = 10-Points
B. Trauma Informed Facilities	25-Points
C. Reflection Paper	25-Points
D. Trauma Informed Presentation	40-Points
Total	100-Points

- A. **Class Participation:** Students will be provided 5-minutes at the conclusion of each class session to communicate one aspect of the specific class topic in 1-2 sentences that he/she feels is significant to trauma-informed care. Students will submit each response to the instructor before leaving class.
- Establishing one's baseline about his/her own lived experiences with trauma as well as what he/she has learned from introductory reading and videos about theories and history of trauma informed care;
 - Trends of political movements in response to trauma and the nature of counselor's roles working with diverse groups of people impacted;
 - The impact of trauma on neurobiology (brain), across developmental lifespans (children, adolescents, adults), including addiction and mental health components.
 - Safety, Strength and Resilience. Students will identify how to support and empower individuals to develop personal safety/coping strategies as well as how the practitioner can utilize community resources to help in this process.;
 - The impact of trauma among diverse groups as per the reading and materials in the module. This also includes identifying cultural and other challenges the student could anticipate when supporting certain groups or types of trauma.

Total Points: 10 X 1 = 10-Points

Student Learning Outcomes: A - F

B. Trauma-Informed Facilities: Students will form groups of 2-3 and identify a state to review and research 3 different trauma-informed facilities. Students will communicate their findings on all three facilities within a discussion board. Key point will include the following:

- (1.) Name and location of each facility
- (2.) Mission statement of each facility
- (3.) Trauma-informed techniques utilized within each facility, including forms of assessment
- (4.) Services offered by each facility
- (5.) Appropriate referral procedures

Total Points: 25-Points

Student Learning Outcomes: A, C, D, E, F

C. Reflection Paper: Students will reflect on an incident that created some degree of trauma in their lives and its impact on their development as a counselor within a 6-8 page paper. The paper will encompass the following points:

- (1.) Description of the incident
- (2.) Developmental stage of the incident
- (3.) Individual and family response to the incident
- (4.) Potential for counseling intervention
- (5.) Impact on counseling identity

Note: Students are encouraged to be as open as possible for the purpose of this paper. However, if this paper creates any anxiety for you that would necessitate potential counseling intervention, please communicate this to your instructor before moving forward with the assignment. You and your instructor will determine the best possible solution.

Total Points: 25-Points

Student Learning Outcomes: A, C, D, E, F

D. Trauma-Informed Presentation: Students will conduct an oral presentation in groups of 2-3 on an event within the recent past that created some degree of trauma for the victims of the incident. Students will review key aspects of the incident and develop a trauma-informed response for the victims, first responders, as well as the perpetrator(s). Students will be assigned one of the following options: (1) Charlottesville Protest, (2) Pittsburgh Synagogue Shooting, (3) United States Women's National Gymnastics Team Sexual Abuse Scandal, and (4) Orlando Nightclub Shooting. Other events will be communicated as needed to fulfill group responsibilities. The student presentation should encompass the following information:

- (1.) Key information related to the incident such as multicultural considerations of the perpetrator and victims, numbers of individuals harmed emotionally and physically, etc.
- (2.) Appropriate counseling intervention to victims of the incident (individuals directly involved and extended community), including consideration of evidenced-based practices
- (3.) Appropriate counseling intervention to the perpetrator(s) of the incident, including consideration of evidenced-based practices and ethical considerations, i.e. personal biases
- (4.) Appropriate of counseling interventions to first responders of the incident including consideration of evidenced based practices.
- (5.) Analysis of potential diagnoses that could be assigned to the victims, first responders as well as the perpetrator(s), including DSM symptomatology
- (6.) Need for postvention for the victims, first responders as well as the perpetrator(s) with appropriate goals and objectives
- (7.) Communicate practices to manage counselor self-care
- (8.) Scholarly articles should be used to document your discussion with appropriate APA Formatting

Total Points: 40-Points

Student Learning Outcomes: A - F

V. Final Grade Scale

Note: All students in the Graduate Counseling Program MUST receive a grade of **“B” or higher**. If a student fails to do so, **he or she must repeat the course before continuing in the program**.

Please see the SGPS Academic Catalog or Graduate Counseling Student Handbook for additional information about course grades and academic integrity:

[SGPS Academic Catalog](#)

[Graduate Counseling Student Handbook](#)

A	100 – 93
A-	90 – 92
B+	87 – 89
B	83 – 86
*B-	80 – 82
*C+	77 – 79
*C	73 – 76
*C-	70 – 72
*F	70 and Below

Students are responsible for understanding and will be held accountable for the information on the following topics that can be found within the Academic Catalog.

Attendance Policy: Timely, consistent attendance in class has been shown to have a direct correlation to student performance. Missing classes causes students to fall behind in the course material. The policy for this class is that undocumented absences and tardy attendance are unacceptable. Absences are permitted only in cases of illness or other legitimate causes (family emergency, death in the family, etc.). In cases of a documented absence from a class, the student will have both the opportunity and responsibility to make up all class work missed.

Students are allowed documented absences equivalent to one week of classes for any course in which they are enrolled. This course meets for 13-class sessions. Therefore, you will only be permitted to miss 1-class session over the semester without absences impacting your final grade. Absences are counted from the first day of class.

Entering the class late or leaving the room during class interrupts the classwork in progress and is disruptive to the learning process for students who are trying to learn. Serious tardiness or leaving class sessions frequently may impact your final grade for the course.

Academic Integrity: Academic integrity is important to the intellectual climate at Rosemont College. Violations of academic integrity cannot be tolerated and may result in the student’s failure in a course and/or suspension or expulsion from Rosemont College. Academic dishonesty

includes but is not limited to: plagiarism; fabrication of data, information, or citations; multiple submissions of the same work in different courses; and cheating on exams or assignments. Cheating of any kind WILL result in a zero on the work in question and a letter grade reduction in the course grade after the student's grade is calculated using the zero on the work in question. At the instructor's discretion, it may also result in failing the course and/or reporting of the incident to the administration for further action.

Class Assignments: Assignments that are not completed by the stated deadline will not be accepted. The submission of assignments that are late due to legitimate medical reasons or other extraordinary circumstances will be considered. Such circumstances must be supported by written documentation from an acceptable third party.

Communications: Changes in schedules, assignments, guidance, etc. will be communicated only to your Rosemont e-mail address. E-mail is the preferred way to communicate with the instructor and must be sent to the e-mail address listed on the front of this syllabus.

Disability Statement: If you have been approved for accommodations under ADA/504, please speak with the professor outside of class so that it is certain that all accommodations are provided promptly and completely. If you have not yet been approved for accommodations under ADA/504, but believe you might be entitled to them, please contact the Dean of Students in the Student Life Office at extension 2400 immediately. It would also be wise to speak with your professor, since temporary arrangements may be made under certain circumstances.

Student Concerns: Students who have any course-related concerns should talk directly with their faculty member prior to the next class meeting. If a mutually acceptable resolution cannot be achieved, the student is advised to follow the procedures outlined in the appropriate Student Handbook.

Cell Phone Use: In order to be able to receive campus-wide safety or weather alerts, cell phones may be left on vibrate only during class. Absent prior permission from the instructor, students may not acknowledge other messages or phone calls nor may they ever send or receive text messages during class. Please keep your phone hidden from the class and on vibrate only. Cell phones should not be used for Internet purposes unless related to class assignments and instruction.

Use of Laptops or Other Electronic Devices: The use of personal laptops and other electronic devices during class sessions is strongly encouraged for the purposes of researching course material and engaging in classroom discussion. Students should not use their personal laptops for any other purposes during any class session. Failure to abide by this policy may impact your final grade.

The use of personal cell phones during class session is strongly discouraged. If you experience an emergency situation please communicate the potential to receive a phone call during the class session at the start of class. You will be permitted to step outside the classroom to receive your call. Please do your best not to disturb the learning process in the classroom.

Recording Lectures: Neither video nor audio recording may be made of any lecture in this course without the express consent of the instructor.

Inclement Weather: The Rosemont “snow number” is Montgomery County 342. Announcements of closings are also posted on the website and placed on the main college number, 610-527-0200. Students are encouraged to register their cell phone or email address to e2Campus on the iWay for cancellation notices.

Course Website: Information for this course, including, but not limited to, an electronic copy of this syllabus, is available through the course website located in the Rosemont College online learning portal (Canvas) located at <https://rosemont.instructure.com/login/canvas>. See your instructor if you have questions about accessing the course website.

Submitting Papers Electronically: Writing assignments for this course are to be submitted electronically via the course website.

Rosemont College 2018-2019 Graduate Academic Calendar:

https://rosemont.edu/_resources/site-pdfs/registrar/2018-2019_sgps_academic_calendar.pdf

VI. Required Textbooks

Evans, A. & Coccoma, P. (2014). *Trauma-informed care: How neuroscience influences practice*. Routledge: New York City, New York.

United States Department of Health and Human Services. (2014). *A treatment improvement protocol: Trauma-informed care in behavioral health services*. HHS Publication No. (SMA) 14-4816. Retrieved from <https://store.samhsa.gov/system/files/sma14-4816.pdf>.

VII. Tentative Course Schedule

Date	Topics/Activities	Assignments Due
Week 1: 09/06/18	Evans Ch. 1: Understanding Trauma-Informed Care	
Week 2: 09/13/2018	HHS Ch. 1: Trauma-Informed Care: A Sociological Perspective	

Week 3: 09/20/2018	Evans Ch. 2: Types of Trauma HHS Ch. 2: Trauma Awareness	
Week 4: 09/27/2018	HHS Ch. 3: Understanding the Impact of Trauma	Trauma Informed Facilities
Week 5: 10/04/2018	HHS Ch. 4: Screening and Assessment	
Week 6: 10/11/2018	Evans Ch. 4: Resilience and Trauma Recovery HHS Ch. 5: Clinical Issues Across Services	
Week 7: 10/18/2018	Evans Ch. 5: Children and Trauma	Reflection Paper
Week 8: 10/25/2018	Evans Ch. 8 : Trauma Experience in Adulthood	
Week 9: 11/01/2018	Evans Ch. 7: Military Veterans and Trauma	
Week 10: 11/08/2018	HHS Ch. 6: Trauma-Specific Services	
Week 11: 11/15/2018	Evans Ch. 9: Understanding Compassion Fatigue	
Week 12: 11/22/2018	No Class: Thanksgiving Holiday	
Week 13: 11/29/2018	HHS Ch. 1 (Part 2): Trauma-Informed Organization	Trauma Informed Presentations

Week 14: 12/06/2018	Course Conclusion	Trauma Informed Presentations
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VIII. Bibliography

A. Print Resources

- American Counseling Association. (2014). 2015 Code of Ethics. Retrieved from <https://www.counseling.org/resources/aca-code-of-ethics.pdf>
- Bell, C. H. & Robinson III, E. H. (2013). Shared trauma in counseling: Information and implications for counselors. *Journal of Mental Health Counseling, 35*(4), 310-323. doi:10.17744/mehc.35.4.7v33258020948502.
- Goodman, R. D. & Calderon, A. M. (2012). The use of mindfulness in trauma counseling. *Journal of Mental Health Counseling, 34*(3), 254-268. doi:10.17744/mehc.34.3.9300020422n168322.
- Hemmings, C. & Evans, A. M. (2018). Identifying and treating race-based trauma in counseling. *Journal of Multicultural Counseling and Development, 46*(1), 20-39. doi:10.1002/jmcd.12090.
- Hetzel-Riggin, M. D. (2015). Review of trauma counseling: Trauma and interventions. *Journal of Trauma & Dissociation, 16*(1), 129-131. doi:10.1080/15299732.2015.970110.
- Jacobson, L. & Butler, S. K. (2013). Grief counseling and crisis intervention in hospital trauma units: Counseling families affected by traumatic brain injury. *The Family Journal, 21*(4), 417-424. doi:10.1177/1066480713488530.
- Jordan, K. (2018). Trauma-informed counseling supervision: Something every counselor should know about. *Asia Pacific Journal of Counseling and Psychotherapy*. doi:10.1080/21507686.2018.1450274.
- Kira, I. A., Ashby, J. S., Omidy, A. Z., & Lewandowski, L. (2015). Current, continuous, and cumulative trauma-focused cognitive behaviors therapy: A new model for trauma counseling. *Journal of Mental Health Counseling, 37*(4), 323-340. doi:10.17744/mehc.37.4.04.

Pottinger, A. M. (2015). The use of counseling for children with Attention-Deficit Hyperactivity Disorder. *International Journal for the Advancement of Counselling*, 37(1), 17-27. Doi:10.1007/s10446-014-9222-3.

Yoshimura, C. G. & Campbell, K. B. (2016). Interpersonal violence and sexual assault: Trauma-informed communication approaches in university counseling centers. *Journal of College Student Psychotherapy*, 30(4), 300-312. doi:10.1080/87568225.2016.1221720.

B. Non-Print Resources

American Counseling Association: <http://www.counseling.org>

American School Counselors Association: www.asca-ins.com/

CACREP: www.cacrep.org

National Board of Certified Counselors (NBCC): www.nbcc.org

National Center for Biotechnology Information:

<https://www.ncbi.nlm.nih.gov/books/NBK207198/>

National Child Traumatic Stress Network: <https://www.nctsn.org/>

National Clearinghouse for Alcohol & Drug Information (NCADI): <http://www.health.org/>

IX. CACREP Standards Assessment Crosswalk

CACREP Standard (Main Content)	Assessment	Student Learning Outcome
History and philosophy of the counseling profession and its specialty areas (1a. Professional Counseling Orientation and Ethical Practice).	Class Participation & Trauma Informed Facilities	(A)
Counselors' roles and responsibilities as members of interdisciplinary community outreach and emergency management response teams (1c. Professional Counseling Orientation and Ethical Practice).	Trauma Informed Facilities & Trauma Informed Presentation	(A) (F)
Strategies for personal and professional self-evaluation and implications for practice (1k. Professional Counseling Orientation and Ethical Practice).	Class Participation, Reflection Paper, & Trauma Informed Presentation	(E) (F)

Self-care strategies appropriate to the counselor role (1l. Professional Counseling Orientation and Ethical Practice).	Trauma Informed Presentation	(E)
Multicultural and pluralistic characteristics within and among diverse groups nationally and internationally (2a. Social and Cultural Diversity).	Reflection Paper & Trauma Informed Presentation	(C)
The impact of heritage, attitudes, beliefs, understandings, and acculturative experiences on an individual's views of others (2d. Social and Cultural Diversity).	Reflection Paper & Trauma Informed Presentation	(C) (E)
Help-seeking behaviors of diverse clients (2f. Social and Cultural Diversity).	Trauma Informed Presentation	(C) (F)
Systemic and environmental factors that affect human development, functioning, and behavior (3f. Human Growth and Development).	Reflection Paper & Trauma Informed Presentation	(C) (D)
Effects of crisis, disasters, and trauma on diverse individuals across the lifespan (3g. Human Growth and Development).	Class Participation & Reflection Paper	(B) (C) (D) (F)
Ethical and culturally relevant strategies for promoting resilience and optimum development and wellness across the lifespan (3i. Human Growth and Development).	Trauma Informed Facilities & Trauma Informed Presentation	(C) (D)
Approaches for assessing the conditions of the work environment on clients' life experiences (4d. Career Development).	Class Participation	(F)
Ethical and culturally relevant strategies for addressing career development (4j. Career Development).	Trauma Informed Facilities	(A) (C) (F)
Theories and models of counseling (5a. Counseling and Helping Relationships).	Class Participation, Trauma Informed Facilities, Trauma Informed Presentation	(A)(F)

A systems approach to conceptualizing clients (5b. Counseling and Helping Relationships).	Reflection Paper & Trauma Informed Presentation	(C) (D)
Counselor characteristics and behaviors that influence the counseling process (5f. Counseling and Helping Relationships).	Class Participation, Trauma Informed Facilities, & Trauma Informed Presentation	(E)
Developmentally relevant counseling treatment or intervention plans (5h. Counseling and Helping Relationships).	Reflection Paper & Trauma Informed Presentation	(B) (D) (F)
Development of measureable outcomes for clients (5i. Counseling and Helping Relationships).	Trauma Informed Presentation	(A) (F)
Evidenced-based counseling strategies and techniques for prevention or intervention plans (5j. Counseling and Helping Relationships).	Class Participation, Trauma Informed Facilities, & Trauma Informed Presentation	(B) (D) (F)
Suicide prevention models and strategies (5l. Counseling and Helping Relationships).	Class Participation & Trauma Informed Facilities	(A) (F)
Crisis intervention, trauma-informed, and community-based strategies, such as Psychological First Aid (5m. Counseling and Helping Relationships).	Class Participation & Trauma Informed Facilities	(A) (F)
Processes for aiding students in developing a personal model of counseling (5n. Counseling and Helping Relationships).	Trauma Informed Facilities & Reflection Paper	(E)
Types of groups and other considerations that affect conducting groups in various settings (6f. Group Counseling and Group Work).	Reflection Paper & Trauma Informed Presentation	(D)
Ethical and culturally relevant strategies for designing and facilitating groups (6g. Group Counseling and Group Work).	Class Participation & Trauma Informed Presentation	(A) (C)

Procedures for assessing risk of aggression or danger to others, self-inflicted harm, or suicide (7c. Assessment and Testing) .	Trauma Informed Facilities	(F)
Procedures for identifying trauma and abuse and for reporting abuse (7d. Assessment and Testing) .	Trauma Informed Facilities	(B) (F)
Use of assessments for diagnostic and intervention planning purposes (7e. Assessment and Testing) .	Trauma Informed Facilities	(B)
Identification of evidence-based counseling practices (8b. Research and Evaluation) .	Trauma Informed Presentation	(B) (F)

CACREP Specialty Standards (Clinical Mental Health Counseling)	Assessment	Student Learning Outcome
1. Foundations		
B. Theories and models related to clinical mental health counseling	Class Participation, Trauma Informed Facilities, Trauma Informed Presentation	(A)
D. Neurobiological and medical foundation and etiology of addiction and co-occurring disorders	Trauma Informed Presentation	(B)
E. Psychological tests and assessments specific to clinical mental health counseling	Trauma Informed Facilities	(B)
2. Contextual Dimensions		
A. Roles and settings of clinical mental health counselors	Class Participation, Trauma Informed Facilities, Trauma Informed Presentation	(A)
B. Etiology, nomenclature, treatment, referral, and prevention of mental and emotional disorders	Trauma Informed Presentation	(A)
C. Mental health service delivery modalities within the continuum of care, such as inpatient, outpatient, partial treatment and aftercare, and the mental health counseling services networks	Trauma Informed Facilities	(A) (C)
D. Diagnostic process, including differential diagnosis and the use of current diagnostic classifications systems, including the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the International Classification of Diseases (ICD)	Class Participation, Trauma Informed Presentation	(B)
E. Potential for substance use disorders to mimic and/or co-occur with a variety of neurological, medical, and psychological disorders	Class Participation, Trauma Informed Presentation	(B) (C)
F. Impact of crisis and trauma on individuals with mental health diagnoses	Reflection Paper, Trauma Informed Presentation	(B) (C)
G. Impact of biological and neurological mechanisms on mental health	Class Participation	(B) (C)
J. Cultural factors relevant to clinical mental health counseling	Reflection Paper	(C)

L. Legal and ethical considerations specific to clinical mental health counseling	Trauma Informed Presentation	(E)
3. Practice		
A. Intake interview, mental status evaluation, biopsychosocial history, mental health history, and psychological assessment for treatment planning and caseload management	Trauma Informed Facilities	(A)
B. Techniques and interventions for prevention and treatment of a broad range of mental health issues	Class Participation, Trauma Informed Facilities, Trauma Informed Presentation	(A) (B) (D)

CACREP Specialty Standards (School Counseling)	Assessment	Student Learning Outcome
2. Contextual Dimensions		
B. School counselor roles in consultation with families, P-12 and postsecondary school personnel, and community agencies	Reflection Paper, Trauma Informed Presentation	(C)
E. School counselor roles and responsibilities in relation to the school emergency management plans, and crises, disasters, and trauma	Class Participation	(A)
G. Characteristics, risk factors, and warning signs of students at risk for mental health and behavioral disorders	Trauma Informed Presentation	(D)
I. Signs and symptoms of substance abuse in children and adolescents as well as the signs and symptoms of living in a home where substance abuse occurs	Trauma Informed Presentation	(B) (C) (D)
K. Community resources and referral sources	Trauma Informed Facilities	(F)