WMU's School of Social Work has instituted a specialization in trauma practice across the lifespan, for interpersonal practice (IP) concentration MSW students, to begin Fall 2014.

Rationale

The National Child Traumatic Stress Network (NCTSN) is a nationwide network of research and treatment centers (including WMU’s Children’s Trauma Assessment Center/CTAC). The NCTSN is in a unique position to collect extensive data on child trauma, and reports that 25% of children have been exposed to trauma before the age of 16 (NCTSN, 2003). The NCTSN defines trauma as ranging from interpersonal trauma (e.g., sexual abuse, physical abuse, witnessing violence within the home or community), to experiencing war, traumatic loss, and terrorism. Nationwide analyses of existing data for the year 2008 indicate that there were 3.3 million reports of children who were maltreated (abuse and/or neglect) (USDHHS, 2010). A recent CDC analysis of existing data (Fang, Brown, Florence, & Mercy, 2012) concludes that the “estimated average lifetime cost per victim of nonfatal child maltreatment is $210,012 in 2010 dollars (including childhood healthcare costs, adult medical costs, productivity losses, child welfare costs, criminal justice costs, and special education costs)” (p. 1), for a total lifetime cost for new cases in one year, of $124 billion (Fang et al.p. 10). There is also growing recognition that children witness domestic violence in their homes, and that this exposure has ongoing effects. The National Child Traumatic Stress Network (NCTSN) reports that 44% of children served by NCTSN-member trauma centers had been exposed to domestic violence (NCTSN, 2009). Meltzer et al. (2009) report that, “approximately 10 million children witness domestic violence” (p. 491, citing McFarlane et al., 2003; Maxwell & Maxwell 2003; Sullivan et al., 2004). They conducted a meta-analysis of existing studies, and conclude that there is increased risk of conduct disorder (three-fold) for children who witness severe domestic violence (Meltzer et al.).

The trauma specialization will prepare students to provide evidence-based clinical services to those with a history of trauma across the lifespan (including children, adolescents, adults, survivors, and perpetrators; and those who have experienced a wide range of traumas, such as child abuse, sexual assault, domestic violence, community violence, combat, witnessing violence, human trafficking, natural disasters and/or traumatic accidents).
**Trauma Specialization Courses**

Students who wish to complete the Trauma Specialization will need to complete nine elective credits in courses focused on trauma across the lifespan. These elective credits will meet expectations for the nine credits of electives required for the MSW degree. The specialization will not create any additional credit-hour requirements for students. The proposed specialization also does not extend the time required to complete the MSW degree.

SWRK 6500 (formerly SWRK 6640), Core Concepts of Child Trauma (3 credits) is a required course for the Trauma Specialization, and is offered during Summer I at the Kalamazoo and Grand Rapids campuses; and during the Fall semester, rotating between GR and Kalamazoo (beginning in GR in 2014).

In addition to SWRK 6500: Core Concepts of Child Trauma (3 credits), students will select six additional elective credits by choosing courses, 5000 level or above, that have a trauma focus in terms of assessment and/or treatment. Three of these credits need to be taken in the School of Social Work. The following courses currently offered at WMU meet this requirement:

- CECP 5830: Brain-Behavior Relationships (1 credit)
- CECP 5830: Forensic Psychology (1 credit)
- CECP 5830: PTSD (1 credit)
- CECP 5830: Self-Harming Behavior (1 credit)
- HSV 6350: Assessment and Treatment of Child Trauma (3 credits)

**Trauma Specialization Field Placement**

Students also need to complete their MSW Interpersonal Practice concentration field (practicum) work in a field placement that meets established trauma specialization criteria (to be developed during fall 2014).

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References


