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Office Hours: By appointment
Preferred Course Communications: Email

PURPOSE AND OUTCOME

Course Overview

The purpose of this course is to introduce you to evidence-based practice in the area of child and family therapy for a variety of childhood psychological disorders and family difficulties. Concepts of case conceptualization, assessment, measurement of treatment outcomes, cultural diversity, and ethics will be woven throughout the course. We will discuss and practice general clinician skills that are integral in child and family treatment and review in detail evidence-based approaches for the most common childhood psychological disorders. In addition, process issues, caveats in using manualized treatments, modular treatment, and other relevant topics will be reviewed.

Course Objectives and/or Goals

Upon successful completion of this course, students will be able to incorporate evidence-based practice into child and family assessment and treatment for a variety of childhood psychological disorders and family difficulties. Students will utilize a high level of clinical skill to assess presenting concerns, engage in ongoing case conceptualization and treatment planning, and accurately prescribe an empirically supported treatment. Students will be able to appraise individual, family, environmental, social, and situation factors that impact presenting concerns, case formulation, treatment planning, and treatment efficacy.

Students will be able to:

1.0 Apply knowledge of childhood psychological disorders, including prevalence, course, and etiology, to case conceptualization, treatment planning, and selection of empirically supported treatment approaches.

1.1 Evaluate empirically supported treatments for a variety of childhood psychological disorders
   1.1.1 Compare and contrast empirically supported treatments
   1.1.2 Discuss establishment of empirically supported treatments
   1.1.3 Identify potential difficulties in dissemination of empirically supported treatments

2.0 Integrate knowledge of empirically supported treatments and evidence-based practice, including empirical bases of assessment, intervention, and other psychological applications, clinical expertise, and client preferences to inform treatment for a variety of childhood psychological disorders.

2.1 Differentiate between childhood psychological disorders based upon data gathered in a clinical interview, observations, and assessments

2.2 Adjust data gathering, conceptualization, and treatment methods based upon presented concerns and ongoing data received
3.0 Appraise individual, family, environmental, social, and situational factors that may influence the presence of childhood psychological disorders, case conceptualization, treatment planning, and treatment efficacy.

3.1 Assess individual, family, environmental, social, and situational factors in a clinical interview
3.2 Discuss how individual, family, environmental, social, and situational may impact treatment progress and efficacy.

**Instructional Methods**

**Introduction to Blended Learning**
A Blended Learning class uses a mixture of technology and face-to-face instruction to help students maximize their learning. Blended learning typically involves multiple technologies such as E-Learning systems, online video, and web assignments for the communication of information. Knowledge content that would have traditionally been presented during a live class lecture is instead provided online before the live class takes place. This allows more of the face-to-face time to focus on the higher levels of learning. These rich interactions with the instructor can be used to help students think critically, obtain expertise, and practice clinical reasoning.

**Why Blended Learning?**
Because health professions highly value the professionals’ clinical skills and ability to interpret information in addition to what they know, passive engagement with presentations and rote learning do not adequately prepare students for their respective professions. Blended Learning prepares students for the rigorous requirements of health professions by creating meaningful student/teacher and peer interactions centered in problems and skill sets that resemble those likely to be experienced in the student’s chosen field.

**What Does It Mean for Students?**
Students are expected to come to class prepared by completing all out-of-class readings and assignments. The coursework outside of class typically lays a foundation of knowledge or gives students practice needed to engage in higher levels of learning during live class sessions. During the face-to-face class time, students practice critical skills used by health professionals – critical thinking, problem solving, collaborating, and/or applying concepts gained from the out-of-class assignments to real-world examples. If students are not prepared for the face-to-face sessions, they will likely struggle to reach the higher learning goals of the course. When students come prepared, they can be active participants throughout the blended learning course experience, which will help them master course material and maintain what they have learned beyond the end of the course.

**DESCRIPTION OF COURSE CONTENT**

**Topical Outline/Course Schedule**

<table>
<thead>
<tr>
<th>Week</th>
<th>Date(s)</th>
<th>Topic(s)</th>
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| 1    | 8/22    | **Evidence-based Treatments**  
• Empirically Supported Treatments (ESTs)  
• Evidence-based Practice  
• How do ESTs compare to other treatments?  
• When and why do ESTs falter?  
**Canvas Assignment**  
• Canvas Community Building  
• Canvas Discussion - Problems (and hopefully solutions) with ESTs? |
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<tr>
<th>Week</th>
<th>Date(s)</th>
<th>Topic(s)</th>
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| 2    | 8/29    | **Clinical Interviewing**  
• Clinical interviewing for children and families  
• Confidentiality  
• Therapeutic alliance  
**Treatment Planning**  
• Assessment  
• Case conceptualization  
• Presenting a treatment plan |
| 3    | 9/5     | **Labor Day – No Class!**  |
| 4    | 9/12    | **CBT Basics for Children & Adolescents**  
• CBT 101  
• Identifying and Connecting Thoughts, Feelings, & Behavior  
• Socratic Questioning  
**Canvas Assignment**  
• CBT Homework Exercise |
| 5    | 9/19    | **Behavioral Activation and 3rd Wave Cognitive Behavioral Treatments**  
• Behavioral activation  
• Mindfulness-based approaches  
• Acceptance and commitment therapy |
| 6    | 9/26    | **Disruptive and Conduct Disorders**  
• ADHD & ODD  
• Parent management training  
• Medication, therapy, or both?  
**Student Presentations**  
• Parent-child interaction therapy  
• Multisystemic Therapy |
| 7    | 10/3    | **Anxiety Disorders**  
• Types of Anxiety Disorders  
• Anxiety Psychoeducation  
• Core Treatment Components  
  o Fear Hierarchy  
  o Exposure  
  o Relaxation  
  o Cognitive Restructuring |
| 8    | 10/10   | **Student Presentations**  
• Tics  
• Selective Mutism  
• Social Anxiety Disorder  
• Separation Anxiety Disorder |
| 9    | 10/17   | **Depression**  
• Treatment strategies  
• Suicidality/risk assessment  
• Antidepressant medication  
• Strategies for treatment resistant patients  
**Student Presentation**  
• Interpersonal therapy |
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<tr>
<th>Week</th>
<th>Date(s)</th>
<th>Topic(s)</th>
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| 10   | 10/24    | **Guest Lecture – Dr. Cara Lusby**  
- Self-harm  
- Dialectical behavior therapy  
**Student Presentation**  
- Pediatric bipolar |
| 11   | 10/31    | **Guest Lecture – Dr. Brenda Wiens**  
- School accommodations  
- School consultation  
**Canvas Assignment**  
- Engaging Schools in Treatment |
| 12   | 11/7     | **Guest Lecture – Dr. Cynthia Johnson**  
- Autism spectrum disorders |
| 13   | 11/14    | **Posttraumatic Stress Disorder**  
- Trauma focused CBT  
  - Training discussion  
  - CBT exercises  
**Student Presentation**  
- Reactive attachment disorder  
**Canvas Assignment**  
- Trauma focused CBT training certificate |
| 14   | 11/21    | **Child & Family Treatment Basics**  
- Commonly used strategies  
  - Communication skills  
  - Problem solving skills  
- Common difficult situations  
  - Divorce/separation  
  - Low engagement in treatment  
- Ethics  
**Canvas Assignment**  
- Reengaging parents in treatment |
| 15   | 11/28    | **Student Presentations**  
- Eating disorders  
- Enuresis/Encopresis  
- Somatic Symptom/Conversion Disorder |
| 16   | 12/5     | **Diversity in Child & Family Treatment**  
- Efficacious treatments for minority youth  
- Cultural tailoring in Treatments  
- Future directions  
- Class feedback |
| Exam Week | 12/12 | **Final Exam**  
- Oral Case Study |

**Course Materials and Technology**

**Text book (optional):**


**Canvas:**
Weekly course readings will be posted on Canvas, the learning management system supported by the University of Florida. Students are expected to check Canvas on a daily basis for readings, announcements, course modifications, and other relevant materials.

For issues with technical difficulties for E-learning please contact the UF Help Desk at:
- Learning-support@ufl.edu
- (352) 392-HELP - select option 2
- https://lss.at.ufl.edu/help.shtml

ACADEMIC REQUIREMENTS AND GRADING

1. **Quizzes (100 total points)**

   There will be 10 quizzes during the semester to assess your understanding of the assigned reading materials. Each quiz is worth 10 points. Students will have at least 24 hours before class to take a quiz.

2. **Canvas Discussions (75 total points)**

   **Problems (and hopefully solutions) with ESTs? (25 points)**

   We have reviewed how treatments are classified as empirically supported and the movement of psychology towards evidence-based practice. As indicated in our class discussion and readings, although this movement has numerous benefits, it is not without some challenges. Several criticisms or qualifications of the evidence-based practice movement were discussed in class. Additionally, Lambert (2011) discussed a number of barriers to implementing ESTs. Taking into account the pros and cons of empirically supported treatments and evidence-based practice and potential implementation barriers, please answer the following questions.

   **Initial Post**
   - Which con or barrier to further advancing ESTs or evidence-based practice initiative was the most interesting or surprising to you? Why?
   - What are some potential solutions for the barriers to empirically supported treatments and the advancement of evidence-based practice? Indicating that additional research is needed is fine, however, please be specific. What types of studies? With what population? At what location? Also, think outside a research-limited framework. What are potential solutions on a more macro or societal level?
   - In a related vein, if the field of psychology is interested in further dissemination of empirically supported treatments how do you suggest we do so?

   **Response Post**
   - Please respond to a peer's post with your thoughts about their response. How is their solution or method for dissemination of ESTs similar or different from yours? Do you agree or disagree with their potential solutions? Why or why not?

   **Engaging Schools in Treatment (25 points)**

   Multisystemic Therapy and the Incredible Years program have proven to be effective for children and adolescents with aggressive behavior and conduct disorder. A shared component across both empirically supported treatments is their engagement of multiple systems, especially the school system. With that information in mind, please answer the following questions.

   **Initial Post**
   - Have you had the opportunity to try to engage teachers in treatment? If so, briefly describe your experience (e.g., level of difficulty, responsiveness of teacher).
   - What barriers did you encounter in engaging teachers in treatment? If you have not had these opportunities yet, what barriers do you anticipate encountering in these situations?
What do you think are some helpful ways to attempt to engage teachers in treatment? In other words, how do you think you would go about having a teacher more involved in treatment?

Response Post
Please respond to a peer's post with your thoughts about their response. What did you learn from their post? Do you have any constructive thoughts on their methods to engage teachers? Have your experiences been similar to theirs?

Reengaging Families in Treatment (25 points)
Chorpita (2007) reviews several reasons why families may become disengaged in treatment including encountering obstacles and balancing treatment with other competing demands. This chapter also mentions several possible solutions to reengaging families in treatment. Please answer the following questions:

Initial Post
• Have you had parents or families become disengaged from treatment? If so, briefly describe your experience.
• Using Chorpita (2007) as a guide, what barriers have encountered in engaging families in treatment? If you have not had these opportunities yet, what barriers do you anticipate encountering with families and why?
• Of the listed solutions in the Chorpita (2007) chapter, what do you think is the most helpful ways to attempt to engage parents?

Response Post
Please respond to a peer's post with your thoughts about their response. What did you learn from their post? Have your experiences been similar to theirs? Have you tried the solution they picked from the chapter and had good (or bad) results?

3. Assignments (50 total points)

CBT Homework Exercise (25 points)
Cognitive behavioral therapy (CBT) often includes a homework component. Over the course of your training career you will ask patients to complete a variety of homework tasks including monitoring forms and behavioral exercises. A commonly used homework assignment in CBT is mood and relaxation (or pleasurable event) tracking. This assignment will entail you completing this form self-monitoring form from a stress management protocol (Link). You can select what sort of relaxation practice you want to engage in (e.g., PMR, diaphragmatic breathing). You should make your best effort to keep as accurate of a log as possible by completing the log each day.

Please briefly answer the following questions after completing the monitoring form. No more than two double-spaced pages of text.
• Describe your ability to complete the self-monitoring form each day (be honest).
• What were some of the barriers you encountered to completing the log and/or engaging in relaxation practice?
• Did it make a difference when you were able to engage in a relaxation practice? Why or why not? Did you notice any patterns for times that it was effective?
• Did this assignment change your perspective on patients completing homework assignments? If so, how?

Trauma Focused CBT Training (25 points)
Each student is required to take the Trauma-Focused CBT continuing education course provided without cost online at http://tfcbt.musc.edu/. This is an extensive website; there are nine modules that you must complete on the website for this assignment. All modules (i.e., the entire course) must be completed in order to receive credit for this assignment. A Certificate of Completion is available for printing when you submit the final evaluation. Please upload that certificate into Canvas to receive credit. Students must provide this certificate by November 14th. Students are encouraged to begin the training well in advance of our discussion of TF CBT to allow adequate time to complete the training.
4. **Class Presentation (125 points)**
Each student will conduct an in-class presentation on a childhood psychological disorder or empirically supported treatment. Presentations should include the following components and last approximately 45 minutes. Students are required to post presentation material and their resources document (see below) the evening before class so that others can access material in advance.

Students will sign-up for a presentation of their choice on the first day of class. In the event that a student wishes to alter their presentation date, it is the responsibility to receive instructor approval and subsequently identify another student willing to change dates and their topic.

**Content**
The presentation should be based on a recent review of the literature (e.g., journal articles, treatment manuals) on the student’s chosen topic.

- **Disorder presentations:** Students are expected to provide an overview of the disorder, methods for assessment, and relevant information on empirically supported treatments.
- **Treatment presentations:** Students are expected to provide an overview of the treatment, core treatment components, and the state of the treatment evidence.

**Class Activity**
Students are required to include a brief class activity as part of their presentation. This can include having the class complete a common strategy used in a treatment, role-playing a particular technique, or another creative activity related to the presentation.

**Resources Document**
Students should compile a one-page handout of helpful resources to disseminate to the class. This can include organizational websites, links to videos explaining the disorder and/or treatment, therapy resources, and citations for key manuals, articles, or chapters.

5. **Oral Case Study Final Exam (150 points)**
Each student will complete an oral final examination. This examination will involve the student responding to questions pertaining to a single case scenario. To be fair, students will be randomly assigned a case scenario at the beginning of the oral exam (e.g., student will choose a number that is then tied to a specific scenario); thus you will not know the scenario before the exam. Scenarios will tap a psychological disorder and general therapeutic strategies discussed in class. Students can expect to receive questions in the broad content areas listed in the rubric. Questions will tap constructs, issues, and information that a developing clinician would be expected to understand.

Students should not discuss the content of their particular case scenario with other students until after all students have completed their oral examination.

This examination will be scheduled by appointment with the course instructor; therefore, the exam will occur only in the presence of the course instructor (not the entire class). Each appointment will last approximately 30 minutes.

**Grading**

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<th>Requirement</th>
<th>Due date</th>
<th>% of final grade</th>
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<tbody>
<tr>
<td>Discussion – Problems (and hopefully solutions) with ESTs</td>
<td>August 28</td>
<td>5%</td>
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<tr>
<td>Assignment – CBT Homework Exercise</td>
<td>September 18</td>
<td>5%</td>
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<tr>
<td>Discussion – Engaging Schools in Treatment</td>
<td>October 2</td>
<td>5%</td>
</tr>
<tr>
<td>Assignment – Trauma-Focused CBT Training</td>
<td>November 14</td>
<td>5%</td>
</tr>
<tr>
<td>Discussion – Reengaging Parents in Treatment</td>
<td>November 21</td>
<td>5%</td>
</tr>
<tr>
<td>Quizzes</td>
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Assignment – Class Presentation | TBD | 25%
Final Exam – Oral Case Study | December 12 | 30%

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<tbody>
<tr>
<td>Letter Grade</td>
<td>A</td>
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<td>B+</td>
<td>B</td>
<td>B-</td>
<td>C+</td>
<td>C</td>
<td>C-</td>
<td>D+</td>
<td>D</td>
<td>D-</td>
<td>E</td>
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Please be aware that a C- is not an acceptable grade for graduate students. A grade of C counts toward a graduate degree only if an equal number of credits in courses numbered 5000 or higher have been earned with an A.

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<tr>
<th>Letter Grade</th>
<th>A</th>
<th>A-</th>
<th>B+</th>
<th>B</th>
<th>B-</th>
<th>C+</th>
<th>C</th>
<th>C-</th>
<th>D+</th>
<th>D</th>
<th>D-</th>
<th>E</th>
<th>WF</th>
<th>I</th>
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For greater detail on the meaning of letter grades and university policies related to them, see the Registrar’s Grade Policy regulations at:

http://catalog.ufl.edu/ugrad/current/regulations/info/grades.aspx

Exam Policy

Each student will complete a final oral examination (worth 155 points). This examination will involve the student responding to questions pertaining to a single case scenario. Students will be randomly assigned a case scenario at the beginning of the oral exam (e.g., student will choose a number that is then tied to a specific scenario); thus you will not know the scenario before the exam. Scenarios will tap a psychological disorder and general therapeutic strategies discussed in class. Students can expect to receive questions in the broad content areas listed in the rubric. Questions will tap constructs, issues, and information that a developing clinician would be expected to understand. Students will schedule an exam time with the instructor.

Policy Related to Make up Exams or Other Work

Students who must miss an assignment or exam deadline because of conflicting professional or personal commitment must make prior arrangements with the instructor. If an examination must be missed because of illness, a doctor’s note is required.

Requirements for class attendance and make-up exams, assignments, and other work in this course are consistent with university policies that can be found in the online catalog at:

https://catalog.ufl.edu/ugrad/current/regulations/info/attendance.aspx

Any requests for make-ups due to technical issues MUST be accompanied by the ticket number received from LSS when the problem was reported to them. The ticket number will document the time and date of the problem. You MUST e-mail your instructor within 24 hours of the technical difficulty if you wish to request a make-up.

Policy Related to Required Class Attendance
Attendance is expected as a part of the student’s professional training. Students are expected to arrive for class on time and to remain for the full class period. Students needing to miss class should make prior arrangements with the instructor.

Please note all faculty are bound by the UF policy for excused absences. For information regarding the UF Attendance Policy see the Registrar website for additional details:

https://catalog.ufl.edu/ugrad/current/regulations/info/attendance.aspx

STUDENT EXPECTATIONS, ROLES, AND OPPORTUNITIES FOR INPUT

Expectations Regarding Course Behavior

Please refrain from using cell phones or any other electronic devices during class as it is distracting and inconsiderate of other students and the instructor. Laptop use is acceptable for note taking or presenting. However, do not browse other websites during class time. It is expected that students will be engaged and actively participate during class. Do not arrive late to class or disrupt the class as it is distracting and inconsiderate of other students and the instructor.

To the extent permitted by facility rules and restrictions, you may bring food and/or beverages to class as long as it does not interfere with your ability to work and/or participate in class and as long as it does not interfere with or your classmates’ ability to work and participate in class. You will be expected to clean-up after yourself and dispose of all trash before leaving the classroom.

Inclusive Learning Environment

Public health and health professions are based on the belief in human dignity and on respect for the individual. As we share our personal beliefs inside or outside of the classroom, it is always with the understanding that we value and respect diversity of background, experience, and opinion, where every individual feels valued. We believe in, and promote, openness and tolerance of differences in ethnicity and culture, and we respect differing personal, spiritual, religious and political values. We further believe that celebrating such diversity enriches the quality of the educational experiences we provide our students and enhances our own personal and professional relationships. We embrace The University of Florida’s Non-Discrimination Policy, which reads, “The University shall actively promote equal opportunity policies and practices conforming to laws against discrimination. The University is committed to non-discrimination with respect to race, creed, color, religion, age, disability, sex, sexual orientation, gender identity and expression, marital status, national origin, political opinions or affiliations, genetic information and veteran status as protected under the Vietnam Era Veterans’ Readjustment Assistance Act.” If you have questions or concerns about your rights and responsibilities for inclusive learning environment, please see your instructor or refer to the Office of Multicultural & Diversity Affairs website: www.multicultural.ufl.edu

Communication Guidelines

As a blended learning class, it is imperative that students check email and the Canvas website often (i.e., once daily). Students are expected to participate in graded online discussions on various topics throughout the course. Please reference the applicable assignment rubrics for online discussions for a clear outline of what is expected with regard to posts and replies. In addition, please see the following resource for guidelines on online course etiquette:


Academic Integrity
Students are expected to act in accordance with the University of Florida policy on academic integrity. As a student at the University of Florida, you have committed yourself to uphold the Honor Code, which includes the following pledge:

“We, the members of the University of Florida community, pledge to hold ourselves and our peers to the highest standards of honesty and integrity.”

You are expected to exhibit behavior consistent with this commitment to the UF academic community, and on all work submitted for credit at the University of Florida, the following pledge is either required or implied:

“On my honor, I have neither given nor received unauthorized aid in doing this assignment.”

It is your individual responsibility to know and comply with all university policies and procedures regarding academic integrity and the Student Honor Code. Violations of the Honor Code at the University of Florida will not be tolerated. Violations will be reported to the Dean of Students Office for consideration of disciplinary action. For additional information regarding Academic Integrity, please see Student Conduct and Honor Code or the Graduate Student Website for additional details:

https://www.dso.ufl.edu/seccr/process/student-conduct-honor-code/
http://gradschool.ufl.edu/students/introduction.html

Please remember cheating, lying, misrepresentation, or plagiarism in any form is unacceptable and inexcusable behavior.

**Online Faculty Course Evaluation Process optional in UF Template**

Students are expected to provide feedback on the quality of instruction in this course by completing online evaluations at https://evaluations.ufl.edu so make sure you include a statement regarding the value and expectation for student participation in course evaluations. We suggest you include a comment regarding how you will use the evaluations (e.g. to make specific improvements to the course and teaching style, assignments, etc.). It is also important to make some statement regarding the direct influence they have on faculty tenure and promotion, so your input is valuable. Evaluations are typically open during the last two or three weeks of the semester, but students will be given specific times when they are open. Summary results of these assessments are available to students at https://evaluations.ufl.edu/results/

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**SUPPORT SERVICES**

**Accommodations for Students with Disabilities**

If you require classroom accommodation because of a disability, you must register with the Dean of Students Office http://www.dso.ufl.edu within the first week of class. The Dean of Students Office will provide documentation to you, which you then give to the instructor when requesting accommodation. The College is committed to providing reasonable accommodations to assist students in their coursework.

**Counseling and Student Health**

Students sometimes experience stress from academic expectations and/or personal and interpersonal issues that may interfere with their academic performance. If you find yourself facing issues that have the potential to or are already negatively affecting your coursework, you are encouraged to talk with an instructor and/or seek help through University resources available to you.

- The Counseling and Wellness Center 352-392-1575 offers a variety of support services such as psychological assessment and intervention and assistance for math and test anxiety. Visit their web
site for more information: http://www.counseling.ufl.edu. On line and in person assistance is available.

- You Matter We Care website: http://www.umatter.ufl.edu/. If you are feeling overwhelmed or stressed, you can reach out for help through the You Matter We Care website, which is staffed by Dean of Students and Counseling Center personnel.

- The Student Health Care Center at Shands is a satellite clinic of the main Student Health Care Center located on Fletcher Drive on campus. Student Health at Shands offers a variety of clinical services. The clinic is located on the second floor of the Dental Tower in the Health Science Center. For more information, contact the clinic at 392-0627 or check out the web site at: https://shcc.ufl.edu/

- Crisis intervention is always available 24/7 from:
  - Alachua County Crisis Center:
    (352) 264-6789

http://www.alachuacounty.us/DEPTS/CSS/CRISISCENTER/Pages/CrisisCenter.aspx

BUT – Do not wait until you reach a crisis to come in and talk with us. We have helped many students through stressful situations impacting their academic performance. You are not alone so do not be afraid to ask for assistance.