Part II

Paper guide for the academic year 2017-2018

PBS 6 –Development and Psychopathology

Paper Contacts

Course Organiser: Sarah Foley (Michaelmas) / Professor Claire Hughes (Lent and Easter)

Lecturers:

Professor Marinus van IJzendoorn
Dr Marisol Basilio (Education): mb773@cam.ac.uk
Dr Wendy Browne (CFR): wvb20@cam.ac.uk
Dr Paul Wilkinson (Child Psychiatry): pow2@cam.ac.uk
Dr Sophie Landa (Tavistock): sophie.landa@gmail.com
Dr Rebecca Lawson (UCL) Rebecca.lawson@ucl.ac.uk
Dr Aja Murray (Criminology): ajalouisemurray@gmail.com
Dr Keri Wong (CFR): kkyw3@cam.ac.uk
Dr Caroline Lanskey (Criminology): cml29@cam.ac.uk
Dr Judi Walsh (UEA): Judi.Walsh@uea.ac.uk
Dr Elian Fink (Education): ef364@cam.ac.uk
Helen Beckwith (Public Health): hlb52@cam.ac.uk

Supervisors:

Prof. Claire Hughes: ch288@cam.ac.uk
Dr Sarah Griffiths: slg68@medschl.cam.ac.uk
Dr Sophie Reijman: sr774@cam.ac.uk
Dr Sophie Landa: sophie.landa@gmail.com
Dr Aja Muray: ajalouisemurray@gmail.com
Dr Amber Ruigrok: ar560@medschl.cam.ac.uk
Dr Helen Beckwith: hlb52@cam.ac.uk
Dr Keri Wong: kkyw3@cam.ac.uk
Sarah Foley: sf412@cam.ac.uk
Anja McConnachie: alm89@cam.ac.uk
Kitty Jones: cmj44@cam.ac.uk
Gabby McHarg: ggm25@cam.ac.uk
Hayden Henderson: h mh45@cam.ac.uk
Luca Villa: lmv31@cam.ac.uk
Alejandro Ezquerrro: ae392@cam.ac.uk
Outline of the Course

Student Learning Objectives
- To develop intellectual skills in the critical analysis and evaluation of empirical research.
- To understand advanced contemporary developmental and clinical research and theories.
- To develop oral and written communication skills.
In particular, supervision and exam questions will provide students with opportunities to examine topics at hand with at least five different kinds of ‘voice’:

i) Historical changes in ideas;
ii) Methodological challenges and solutions;
iii) Developmental Perspectives
iv) Dialogue between research with typical and atypical groups
v) Implications for policy or intervention.

Course content
This paper aims to provide students with a sound knowledge of contemporary and clinically salient topics in developmental psychology and the main areas of debate within this field. It builds on the foundation established in PBS 3. The clinically focused lectures are given by a variety of guest speakers to ensure expertise on the clinical content.

Mode of teaching
In Michaelmas, most of the lectures will be given by the paper co-ordinator, Sarah Foley (Centre for Family Research (CFR), sf412@cam.ac.uk), but the paper also includes an exciting mix of lectures given by other academic staff within and outside the university as well as by a practising clinical psychologist. The first week includes an introductory session that will include both practical arrangements (e.g., supervisions) and a general overview of the paper and its organization.

Mode of assessment
The paper is examined by one three-hour unseen examination that consists of 3 one-hour essays. Please note that in response to feedback from external examiners, the overall number of questions will be reduced, to ensure that there are a sufficient number of answers to each question to enable a reliable distribution of marks. As a result, the lectures have been re-organized into six modules that each consist of 4-6 lectures; the exam will include a minimum of one question per module (with around 12 questions overall).

Lecture Locations and Time

When: Most of the lectures for this paper will take place at 2 – 3 on Mondays and 11 – 12 on Fridays, some of the teaching from guest lecturers will be delivered in 2-hour slots: Friday 11 – 1 or Monday 1 – 3 (please feel free to bring lunch if needed!).

Where: Department of Psychology lecture theatre, Downing site. Note on 19th January the double lecture will take place in the Plant Sciences Lecture Theatre.
### Michaelmas Lecture timetable

<table>
<thead>
<tr>
<th>Week</th>
<th>Date</th>
<th>Time</th>
<th>Topic</th>
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<tr>
<td>W1</td>
<td>Fri 6th Oct</td>
<td>11 – 12</td>
<td>Introduction and Overview</td>
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<td><strong>Michaelmas Module 1: New Parents, New Babies</strong></td>
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<td>W1</td>
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<td>Researching Developmental Change</td>
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<td>W2</td>
<td>Fri 13th Oct</td>
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<td>Differential Susceptibility Theory</td>
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<td>W2</td>
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<td>W3</td>
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<td>W3</td>
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<td>W4</td>
<td>Fri 27th Oct</td>
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<td>W5</td>
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<td>Anxiety: Developmental theories</td>
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<td><em>W5</em></td>
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<td>1 – 3</td>
<td>Clinical perspectives: Depression in adolescence &amp; Self Harm</td>
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<td><em>W6</em></td>
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<td><strong>Michaelmas Module 3: Conduct problems: Developmental Cognitive and Clinical Perspectives</strong></td>
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<td>W7</td>
<td>Fri 17th Nov</td>
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<td>A life-span perspective</td>
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<td>W7</td>
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<td>W8</td>
<td>Fri 24th Nov</td>
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<td>W8</td>
<td>Mon 27th Nov</td>
<td>2 – 3</td>
<td>Links with ToM, EF and CU traits</td>
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NB: Double lectures are marked with an asterisk
## Lent Lecture Timetable

### Lent Module 1: Parenting

+ W1 Friday 19th January 11 – 11: Judi Walsh  
  Parenting: An Overview

W1 Monday 22nd January 2 – 3: Claire Hughes  
  Parenting: Current Models

W2 Friday 26th January 11 – 12: Caroline Lanskey  
  Incarceration and family life

W2 Monday 29th January 2 – 3: Caroline Lanskey  
  Incarceration and family life

### Lent Module 2: Autism

W3 Friday 2nd February 11 – 12: Simon Baron-Cohen  
  Autism II

W3 Monday 5th February 2 – 3: Simon Baron-Cohen  
  Autism II

W4 Friday 9th February 11 – 12: Simon Baron-Cohen  
  Autism III

W4 Monday 12th February 2 – 3: Simon Baron-Cohen  
  Autism IV

W5 Friday 16th February 11 – 12: Helen Beckwith  
  Autism: Interventions

W5 Monday 19th February 2 – 3: Helen Beckwith  
  Autism and Attachment

### Lent Module 3: Peer Relationships and Bullying

W6 Friday 23rd February 11 – 12: Elian Fink  
  Peers and friendship

W6 Monday 26th February 2 – 3: Keri Wong  
  Peer relationships: Cross-cultural perspectives

W7 Friday 2nd March 11 – 12: Elian Fink  
  Bullying

W7 Monday 5th March 2 – 3: Aja Murray  
  Bullying interventions

### Easter

Friday 27th April 11 – 12: Prof Claire Hughes  
Overview and Exam guidance

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NB: Double lectures are marked with an asterisk. Lecture marked with + will take place in the Plant Sciences Lecture Theatre.
Michaelmas Module 1: New Parents, New Babies

What is developmental psychology? And, how do we study development? In this first lecture, we will examine historical changes in attitudes towards childhood and discuss the methods psychologists have used to study development. In particular, we place a spot-light on longitudinal designs: what are the promises and pitfalls of this approach? Why might developmental psychologists adopt a prospective design? This lecture foreshadows later lectures in the module examining pre- and postnatal influences on child development.

We are excited that students will this year have the opportunity to be taught by Professor van Ijzendoorn, a prolific researcher who has expertise spanning across a range of topics within development psychology. The first lecture will discuss Differential Susceptibility Theory. Some children and adults who are exposed to adversities suffer long-term negative consequences, whereas others develop relatively unscathed. Apparently, some individuals are more vulnerable when they encounter setbacks or hardships. For the past 4 decades, developmental psychopathology theory and research used a ‘dual risk’ or ‘diathesis stress’ model. The focus on the problematic side of life has prevented attention to what happens to these ‘vulnerable’ individuals when they grow up in favorable circumstances. Differential susceptibility theory suggests that high vulnerability might in fact be susceptibility. That is, individuals who are susceptible to negative experiences, “for the worse”, may also benefit most from positive experiences, “for the better”. This theory changes the way we think of the interplay of genes and environment, of nature and nurture. The second lecture focuses upon attachment and crying. Infant crying is considered a primordial attachment behaviour. Crying alerts parents to the needs of the infant, for example when it needs food, is anxious, or when it becomes ill. But persistent infant crying has also been shown to be a major trigger of maltreatment. How do we perceive, interpret, and react to infant crying? What roles do gender, parenting experience, and hormonal levels play in listening, neural processing and responding to infant crying?

For some mothers’ and fathers’ parenthood begins unexpectedly early with the premature birth of their infant. The two lectures in this mini-module will summarize what is known of the prevalence, origins and outcomes of premature birth as well as presenting an overview of the challenges that premature birth poses to parents and the implications for policy and interventions.

Recent research has generated numerous exciting findings regarding pre-, peri- and post-natal factors that contribute to variation in children’s developmental trajectories. These range from biological risk factors (e.g., fetal exposure to alcohol, nicotine or other drugs) to more social risk factors (e.g., parental psychopathology in the postnatal period). Ideas that will be discussed in this lecture include Barker’s fetal programming hypothesis, the importance of timing as well as chronicity of gestational exposure to risk factors and the interplay between infant and environmental characteristics as predictors of child outcomes. The final lecture in this module brings together themes from the previous lectures to consider ‘mediation’ and ‘moderation’: how factors influence outcomes – what carries or ‘mediates’ this influence and who is affected by a particular risk factor, or what contextual factors amplify or attenuate a particular risk.
Michaelmas Module 2: Internalizing problems

**Anxiety:**
Lecture One: Developmental Theories

This lecture will discuss how anxiety develops across childhood and adolescence. We will look at the biological, psychological and social factors at different ages that influence anxiety, using a range of theoretical perspectives. We will consider how anxiety relates to cognitive development, and the different ways anxiety can present.

Lecture Two: Interventions

This lecture will consider the interventions commonly provided for children and families with anxiety, with a particular focus on cognitive behavioural and family therapy approaches. We will consider how anxiety is assessed, and the evidence base of the treatments currently offered.

**Adolescent Depression**

Depression is more than feeling sad. It is an illness, with emotional, biological, cognitive and physical symptoms and causes significant functional impairment. This lecture will focus on depression in adolescents, a particularly important time, as functional impairment at this crucial developmental stage leads to permanent impairments in social and educational function. The lecture will cover diagnostic issues, aetiology (biological, psychological and social) and treatment. As part of this, the lecture will discuss genetic and environmental risk factors and the interplay between genes and environment.

**Self-harm**

Self-harm is a common behaviour, especially in adolescents. People self-harm for a variety of reasons, including suicide attempts, reducing distressing affects, and to communicate distress. There is current international controversy as to whether suicidal and non-suicidal self-harm should be distinguished. This lecture will discuss the functions and epidemiology of self-harm; the relationship between self-harm and mental illness; the long-term outcomes; the similarities and differences between suicidal and non-suicidal self-harm; and the treatment of self-harm.

**Mood Disorders: Depression and Bipolar Disorder**

Depression is one of the major affective conditions, causing extreme low mood, and carries the heaviest burden of disability among mental and behavioral disorders. It is a devastating long-term disease for both patients and their families and can be fatal, carrying a strong risk of suicide. This lecture reviews the diagnosis of depression, cognitive theories and symptoms, and current understanding of the neurobiology of depression. Both psychological and pharmacological treatments are also outlined in the context of aetiological theories. In addition, we will introduce bipolar disorder, a clinical condition marked by alternating periods of depression and elation (mania). Cognitive symptoms common to both disorders, e.g. reward processing abnormalities, will be evaluated.
Michaelmas Module 3: Conduct problems: Developmental Cognitive and Clinical Perspectives

Conduct problems: A lifespan perspective

DSM 5 includes a cluster of disruptive behaviour disorders, including oppositional defiant disorder and conduct disorder, respectively characterised by difficulties with authority and extreme problem behaviour (aggression, lying, stealing etc.). In this lecture, we discuss how disruptive behaviours vary between people and across the life-course. We discuss the heterotypic continuity of disruptive behaviours from infancy to adulthood as well as the different ‘pathways’ that individuals who display disruptive behaviours may follow. In particular, we discuss the ‘dual taxonomy theory’ of conduct problems and evaluate how well the theory explains conduct problems across the lifespan.

Conduct Disorder and Comorbidity

Comorbidity refers to the presence of symptoms from more than one disorder in the same individual. Conduct problems are highly comorbid with ODD and ADHD symptoms; however, they are also substantially related to internalising problems such as anxiety and depression. In this lecture, we discuss the patterns of comorbidity that have been observed between conduct problems and symptoms of other mental health disorders and the developmental models that have been proposed to explain these patterns.

Lent Module 1: Parenting and the intergenerational transmission of risk

The first lecture will introduce current models which emphasize the multi-faceted nature of parenting. We will discuss the notion of domain specificity, that is that particular parenting dimensions may be important for certain child outcomes (e.g. scaffolding and executive function). We will examine different strands of evidence that support this differentiated model of parenting.

Our first guest lecturer of the year will focus on parent-child relationships and factors that can negatively affect child outcomes. The lecture will begin by outlining Baumrind’s typology of different parenting styles and move on to examine how different dimensions of parenting can have a negative (and positive) impact on children’s development. Following this, the lecture will examine factors that can have a detrimental impact on parenting by focussing on marital conflict and how different dimensions of conflict can cause risk to the child. Finally, the lecture will look at intergenerational continuity, again focusing on family processes and on factors that may break the intergenerational transmission of risk.

Our second guest lecturer focuses on family relationships in the context of parental incarceration. For many years there was little awareness of the problems many children faced as a consequence of parental imprisonment and they were referred to as ‘hidden’ or ‘silent victims’ of crime. However, in the US and the UK in parallel with the rise in incarceration rates, increasing research attention has been directed towards this group of young people and understanding the impact of having a parent in prison. This is not a straightforward task as it is difficult to disentangle the influence of parental imprisonment from other influences on children’s development. Is there a difference between maternal and paternal incarceration? Are children of different gender, ages, ethnicity affected differently? What role do prior family relationships play? Are there noticeable changes over time? This lecture reflects on these and other questions that are engaging researchers in the field and the answers they are coming up with.
Lent Module 2: Autism

Autism Spectrum Disorder (ASD) is a lifelong, neurodevelopmental condition that affects how a person communicates with and relates to other people, and how they experience the world around them. Across four lectures we will take an in-depth look at the diagnosis and presentation of ASD and thoroughly evaluate and examine the evidence for each of the major classes of cognitive theories of ASD: social, non-social and newer neurocomputational accounts. People with autism also show significant areas of strength, not just areas of disability, and cognitive theories are examined for their power to explain both the strengths and deficits in ASD. The neurobiology of ASD, from genes to neural structure and function, is also reviewed.

The final two lectures will be delivered by a local Clinical Psychologist, Helen Beckwith, concerning matters relating principally to applied clinical practice. Specifically, the first lecture will discuss the range of individual, family and systemic interventions that are recommended and implemented for therapeutic work with children with autism. The second lecture will consider autism in the context of the primary clinical task of differential diagnosis, focusing on the overlap in assessment, conceptual understandings and clinical presentations across neurodevelopment disorders and attachment.

Lent Module 3: Peer Relationships and Bullying

In PBS 3, we discussed both developmental changes and the influences upon individual differences in children’s relationships with other children. Building on this literature, this lecture examines the consequences of individual differences in these relationships. Are friendships universally protective, or can friendships with deviant peers lead one astray? If the latter, what are the mechanisms involved in this process of ‘deviancy training’? This field is complex, as closely related constructs such as friendship and popularity are often measured in very different ways, making it difficult to compare their relative salience. In the third lecture in this module we discuss contemporary research on bullying. Are bullies ‘social oafs’ or deviant social manipulators? Or is this individually-oriented perspective fundamentally inappropriate for investigating group-based interactions? In the fourth lecture we discuss contemporary research on bullying interventions. Different intervention strategies, their merits and problems will then be addressed. Should anti-bullying strategies be part of early intervention research and why?
Supervision Arrangements and Essay Titles

Supervision is essential for this paper and students should expect to cover 6 – 7 topics from across the paper. The Course Organiser will present supervision arrangements for this paper at the introductory lecture on the 6th October, which all students must attend.

Differential Susceptibility Theory

1. What is wrong with the metaphor of Orchids and Dandelions?
2. From the perspective of the Differential Susceptibility Theory how should the interplay between nature and nurture being conceptualized?

Attachment and crying

1. Does the infant cry curve exist, and what has been proposed to be the cause? Is sensitive parenting an effective remedy?
2. How does infant crying get under the skin of parents leading to harsh parenting and sometimes to child maltreatment?

Pre and Postnatal Influences

1. Why are studies of pre- and peri-natal risk factors important needed to elucidate the mechanisms that underpin individual differences in risk and resilience?
2. What conceptual and methodological challenges are faced by researchers investigating pre- and perinatal influences on child outcomes?
3. To what extent do individual differences in infancy at the neurobiological, genetic or environmental levels allow us to make predictions about outcomes for middle childhood or later developmental periods?

Prematurity

1. How should variability in outcomes associated with premature birth be explained?
2. What are the challenges facing parents of premature infants and how should these be addressed?

Anxiety

1. How does age affect the presentation of anxiety in childhood and adolescence?
2. Critically appraise the evidence base for cognitive behavioural therapy for childhood anxiety disorders.
3. How should between-child variation in levels of anxiety be explained?
4. Why does anxiety show intergenerational stability?
5. Should we worry about childhood anxiety? If so, how should we respond?

Depression

1. Which are more important in conferring risk of depression – genetic or environmental factors?
2. The 2005 UK NICE guidelines on treatment of depression in children and adolescents recommend that the first line treatment for moderate to severe depression should be a
specific psychological therapy (individual cognitive behavioural therapy [CBT], interpersonal therapy or shorter-term family therapy). What are the problems with these recommendations?

3. Are bipolar disorder and major depressive disorder two discrete diagnostic entities?
4. Do antidepressants work?
5. Is depression caused by low serotonin levels?

**Self-Harm**

1. Why do people harm themselves?
2. Should we distinguish suicidal from non-suicidal self-harm?
3. Self-harm often stops spontaneously in late adolescence/early adulthood. So why do we worry about it?
4. A teenager tells her teacher she has been self-harming. How should the teacher respond? What treatments may help the teenager?

**Conduct Disorder**

1. Compare the cognitive and social mechanisms underlying antisocial behaviour
2. Can you have a “theory of nasty minds”?
3. How does recent work on callous and unemotional traits contribute to our understanding of conduct disorder?

**Interventions**

1. Have interventions to reduce either externalizing or internalizing problems helped to elucidate the key mechanisms involved?
2. What factors influence the success of interventions to reduce either externalizing or internalizing problems?

**Parenting**

1. Is Baumrind right that “parents create their children psychologically”?
2. “When it comes to parenting, history repeats itself”. Discuss.
3. “I blame the parents”: Discuss
4. What conceptual and methodological challenges are faced by researchers investigating parental influences on child outcomes?

**Prisoners and their families**

1. What are the known effects of parental incarceration on children?
2. What are the methodological challenges faced by researchers investigating the impact of parental incarceration on children?
Autism

1. Can the social and non-social symptoms of ASD be explained by a single theory?
2. How well does the extreme male brain theory explain autism?
3. Is autism predominantly a disorder of mindblindness?
4. Evaluate the major theories of autism in terms of their capacity to explain the “islets of ability” characteristic of ASD?
5. Critically discuss the recommended interventions for children with ASD.
6. "Interventions for children with autism should be aimed at the parents not the child" Discuss.
7. How might ASD affect attachment?

Peer relationships

1. In what circumstances might a close relationship with a friend increase rather than minimise risks of poor outcomes?
2. Why is it difficult to tease apart effects of friendship and popularity on child outcomes?
3. Why might a developmental perspective be needed when considering the impact of peers on children’s development?
4. How do same-sex and cross-sex peer relations affect children's wellbeing?
5. How do cross-racial/ethnic friendships affect children's social adjustment?

Bullying

1. Compare and contrast cognitive and social accounts of bullying in childhood
2. Why are bully victims of such concern to educationalists and mental health professionals?
3. How might research on bullying inform interventions?
Readings

Each lecturer on the course provides readings relevant to the particular topics that he or she covers. These are presented below. Individual lecturers and supervisors may provide additional, more specialised references.

Essay Reading lists

Please note that these are very variable in length – if the list is short, it is probably just a set of introductory reviews and should be followed by independent reading of papers about specific studies. If it is very long, do NOT feel obliged to read each paper, but rather choose papers that correspond to your particular essay question / interests.

General overview:


Readings for Differential Susceptibility

_First empirical studies on various markers_


**Theoretical background**


Boyce WT: Differential susceptibility of the developing brain to contextual adversity and stress. *Neuropsychopharmacology* 2016, 41:142-162 http://dx.doi.org/10.1038/npp.2015.294

**New developments**


**Readings for the Lecture on Attachment and crying**

**Parental sensitivity and infant crying**


Bell, S M , & Ainsworth, M D S (1972) Infant crying and maternal responsiveness *Child Development, 43*, 1171-1190


Ainsworth, M D S ,& Bell, S M (1977) Infant crying and maternal responsiveness A rejoinder to Gewirtz and Boyd *Child Development 48*, 1208-1216
Gewirtz, J L , & Boyd, E F (1977b) In reply to the rejoinder to our critique of the 1972 Bell and Ainsworth report Child Development, 48, 1217-1218


Epidemiology of crying


Neurobiological studies on cry reactivity


Reading for Pre and Perinatal Risk


**Reading for Prematurity**


Treyvaud, K. (2014). Parent and family outcomes following very preterm or very low birth weight birth: A review *Seminars in Fetal and Neonatal Medicine*, 19, 131-135


**Reading for Anxiety**

Key references:


Supplemental reading:


References for lecture 2:


Timimi, S. (2015). Children and Young People’s Improving Access to Psychological Therapies: inspiring innovation or more of the same?.


**Reading for Depression**


Treatment for Adolescents With Depression Study (TADS) randomized controlled trial. 
JAMA, 292(7), 807-820.

A randomized effectiveness trial of interpersonal psychotherapy for depressed adolescents. 
Arch Gen Psychiatry, 61(6), 577-584.

NICE. (2005). Depression in children and young people. Identification and management in primary, 
community and secondary care. from www.nice.org.uk/CG028


Reading for Self harm

borderline personality disorder: a randomized controlled trial. Am J Psychiatry, 156(10), 
1563-1569.

631-638.

Cooper, J., Kapur, N., Webb, R., Lawlor, M., Guthrie, E., Mackway-Jones, K., & Appleby, L. 
297-303.


Hjelmeland, H., Hawton, K., Nordvik, H., Bille-Brahe, U., De Leo, D., Fekete, S., . . . Wasserman, 
Life Threat Behav, 32(4), 380-393.


critical frontier for suicidology research. Suicide Life Threat Behav, 44(1), 1-5.


Moran, P., Coffey, C., Romaniuk, H., Olsson, C., Borschmann, R., Carlin, J. B., & Patton, G. C. 
(2012). The natural history of self-harm from adolescence to young adulthood: a population-

and suicide attempts differ. The Prevention Researcher, 17(1), 8-10.


**Reading for depression and bipolar disorder (core starter references):**


Readings for Conduct Disorder


*Conduct Disorder and Comorbidity*


Callous and unemotional traits:


Conduct Disorder and ToM


Reading for Parent Child Relationships

General references / reviews:


Individual papers:


Prisoners and their families


Reading for autism (core starter references):


**Autism and clinical practice**


**Reading for Peer Relationships**


features of number of friendships, social network centrality, and sociometric status *Social Development, 10*, 22-40.


**Reading for Bullying**

*Review papers:*


Individual papers on bullying:


teenage mother in Finland *European Child and Adolescent Psychiatry*, 20 49- 55.


**Reading for Bullying Interventions:**


