

## Primary Mental Health Care for Children: Setting and Methods (H002096)

**Course size** *(nominal values; actual values may depend on programme)*

**Credits 3.0**                      **Study time 90 h**

**Course offerings and teaching methods in academic year 2026-2027**

A (semester 2)	Dutch	Gent	lecture
			seminar

**Lecturers in academic year 2026-2027**

De Clercq, Barbara	PP07	lecturer-in-charge
Goossens, Lien	PP07	co-lecturer
Peters, Lien	PP05	co-lecturer
Roeyers, Herbert	PP05	co-lecturer
Van Beveren, Marie-Lotte	PP07	co-lecturer

**Offered in the following programmes in 2026-2027**

	<b>crdts</b>	<b>offering</b>
<a href="#">Master of Science in Teaching in Behavioural Sciences(main subject Psychology)</a>	3	A
<a href="#">Master of Science in Psychology(main subject Clinical Psychology)</a>	3	A

**Teaching languages**

Dutch

**Keywords**

Primary health care, children, adolescents, assessment, short-term interventions

**Position of the course**

This course belongs to a group of courses in clinical psychology with a specific focus on first line care. It is connected with both block 3 (assessment) and block 4 (intervention)

**Contents**

This course covers the following topics:

- Positioning of the primary mental health care and support network for children, with specific attention for the role of the pupil guidance centre (CLB) and the broader school context
- Core tasks of the primary clinical psychologist in settings for youth
- Principles, guidelines and ethical issues with regard to screening and referral of primary mental health problems in youth
- Methods and skills to communicate with children and adolescents in primary mental health care
- Interventions in primary mental health care for youth from transdiagnostic factors (child x context)

**Initial competences**

This course unit builds on certain course competencies of Assessment developmental disorders, Assessment of developmental psychopathological processes

**Final competences**

- 1 To apply development-oriented models in primary health care cases.
- 2 To make evidence-based decisions of referral towards relevant youth health care services.
- 3 To substantiate decision making processes regarding child and youth mental health problems from a developmentally oriented assessment perspective.

- 4 To implement a short term intervention in order to obtain stabilization and recovery.
- 5 To reflect upon intercultural aspects and diversity in case studies and to adapt psychological acting in function thereof
- 6 To translate the awareness on cultural diversity and culture-specific manifestations of psychopathology into professional functioning.
- 7 To reflect upon how one is influenced as future psychologist by client, organisation and society and on how one can take proper care of oneself within this role.

#### **Conditions for credit contract**

This course unit cannot be taken via a credit contract

#### **Conditions for exam contract**

This course unit cannot be taken via an exam contract

#### **Teaching methods**

Seminar, Lecture

#### **Extra information on the teaching methods**

This course assumes the responsible use of generative artificial intelligence (GAI). During the lessons, what this means will be explained.

#### **Study material**

Type: Slides

Name: Slides and background articles are provided via Ufora

Indicative price: Free or paid by faculty

Optional: no

Language : Dutch

Available on Ufora : Yes

Online Available : Yes

Available in the Library : No

Available through Student Association : No

#### **References**

- Brown, R. (2004). *Handbook of Pediatric Psychology in School Settings*. Mahwah, New Jersey: Lawrence Erlbaum Associates Inc.
- Stancin, T., & Perrin, E. (2014). Psychologists and pediatricians: Opportunities for collaboration in primary care. *American Psychologist*, 69, 332-343.
- Agentschap Zorg en Gezondheid (2017). Een geïntegreerde zorgverlening in de eerste lijn.

#### **Course content-related study coaching**

Interactive support using Ufora

By appointment

#### **Assessment moments**

end-of-term and continuous assessment

#### **Examination methods in case of periodic assessment during the first examination period**

Written assessment with open-ended questions

#### **Examination methods in case of periodic assessment during the second examination period**

Written assessment with open-ended questions

#### **Examination methods in case of permanent assessment**

Written assessment

#### **Possibilities of retake in case of permanent assessment**

examination during the second examination period is possible in modified form

#### **Extra information on the examination methods**

Permanent evaluation (4 p):

- Form: written assessment
- Frequency: evaluation linked to the seminars
- Feedback: Global oral feedback, individual feedback during feedback moment

Periodic evaluation (16 p): open questions, including case elaboration

#### **Calculation of the examination mark**

A combination of periodic evaluation (80 %) and permanent evaluation (20 %). Partial results for which the student scored at least half of the points, can be transferred to the next examination period within the same academic year. Partial results will never be rounded.

Students who eschew one or more parts of the evaluation can no longer pass the course. Final scores will be reduced to the highest non-deliberative quotation (7/20) in case the final score is higher.

The final score is the weighted average of the components of the evaluation.

Students can only pass for this course if they achieve a minimum of 10/20 for each component. When students obtain less than 10/20 for at least one of the components, the following rules apply:

- 8/20 or 9/20 for at least one of the components: the student can no longer pass the entire course unit: if the total score is a mark of ten or more out of twenty, then this is reduced to the highest failing mark (9/20).
- less than 8/20 for at least one of the components, the student can no longer pass the entire course unit: if the total score is a mark of eight or more out of twenty, then this is reduced to the highest non-deliberative mark (7/20)