Required Objectives:

**Entry-Level Specialty: Clinical Mental Health Counseling (CACREP 2016 Standards)**

- C2b. etiology, nomenclature, treatment, referral, and prevention of mental and emotional disorders
- C2d. diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the *Diagnostic and Statistical Manual of Mental Disorders (DSM)* and the International Classification of Diseases (ICD)
- C2l. legal and ethical considerations specific to clinical mental health counseling

Additional Objectives:

- Students will learn the history of the DSM and the how changes have been tied to context and power.
- Students will explore their own agreement or disagreement with DSM-5 categories of diagnosis and make a case as to why they agree or disagree, looking at societal and cultural influence of these approaches to understanding diagnosis.
- Students will understand diagnosis as a shared language spoken among mental health practitioners and will explore the various influences and consequences to using this language.

**Key Required Assignments/Student Learning Outcomes**

These assignments are required for the course, but **will not be the only requirements/expectations**. The chart below lists the assignment, method of submission, and benchmark score/grade. These assignments are set up for upload to Taskstream and/or instructor provides rating for assignment. See syllabus for details.

<table>
<thead>
<tr>
<th>Theory and Research into Practice</th>
<th>Proficient (A)</th>
<th>Benchmark (B)</th>
<th>Emerging (C)</th>
<th>Inadequate/Fail</th>
<th>As evidenced by:</th>
<th>Evaluation and Remediatio n</th>
</tr>
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<tbody>
<tr>
<td><strong>Goal 3 of 6</strong></td>
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<td>Understands and applies diagnosis</td>
<td>Early program</td>
<td>Understand s, critiques and begins to implement the DSM diagnostic system Grade: A 90% or higher on case study</td>
<td>Can understand and critique the DSM V Grade B 80% or higher on case study</td>
<td>Demonstrates inadequate understanding of the DSM diagnostic system Grade: C or below</td>
<td>CPSY 522: Diagnosis Final Grade AND Case application assignment Min. 80% case application</td>
<td>First year portfolio/advisor review; referral to Benchmark Review Committee</td>
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CPSY 522 - Diagnosis of Mental and Emotional Disorders – Spring 2017

Stella Beatriz Kerl-McClain, Ph. D.
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503-841-0333 (cell)
sbk@lclark.edu

Office hours:
Tuesday and
Thursday afternoons
and other times as arranged by email

Office hour appointments must be scheduled with me in advance and confirmed. Appointments are confirmed when I have sent you an invitation Google calendar and you have replied in the affirmative.

Please email me to make appointments for office hours! If I have no appointments scheduled during office hours, I may schedule meetings, site visits or other appointments during those times.

Catalog description: Introduction to the structure and uses of the DSM 5 for diagnosing mental and emotional disorders. Limits and weaknesses of these approaches—especially with regard to cultural differences—and alternatives to them. How to use these systems effectively in the context of person-centered, psychosocial, and systemic interventions, and in culturally diverse environments. Current knowledge, theory, and issues regarding selected disorders. Use of technology-based research tools to secure and evaluate contemporary knowledge.

Required Texts:


Additional required reading links/citations will be posted to Moodle

Note: If you have a disability that may impact your academic performance, you may request accommodations by submitting documentation to the Student Support Services Office in the Albany Quadrangle (x7156). After you have submitted documentation and filled out paperwork there for the current semester requesting accommodations, staff in that office will notify me of the accommodations for which you are eligible.

Departmental Attendance Policy: Class attendance is expected and required. Any missed class time will be made up by completing extra assignments designed by the instructor. Missing more than ten percent of class time may result in failure to complete the class. This would be 4.5 hours of a 45 hour class (3 credits), 3.0 hours for a 30 hour class (2 credits) or 1.5 hours for a 15 hour class (1 credit.) In case of extreme hardship and also at the discretion of the instructor, a grade of incomplete may be given for an assignment or the entire course.
In such cases, the work to be submitted in order to remove the incomplete must be documented appropriately and stated deadlines met. Students are expected to be on time to class and tardiness may be seen as an absence that requires make-up work.

**Attendance policy modification for this course:**

- Students may miss one class without a make-up assignment.
- Any missed classes beyond the single class will require make-up work including any of the following; written work including research and literature review, professional reading with written review, special projects, etc.
- Any “planned absences” must be discussed with and approved by the course professor at least two weeks in advance of the absence.
- In case of illness and true emergencies, please notify your instructor as soon as possible.
- More than one absence a semester could result in a failure to complete the class.
- Late to class: More than 20 minutes will require make-up work at the discretion of the professor. Arriving late impacts the work of your classmates and may communicate disrespect for your instructor and your peers.

**Course requirements:**

1. Participation in and documentation of in-class diagnostic process role-plays: 5%

2. Group project/presentations – 15%
   Students will work in groups of 3 and give a 15 minute presentation of a proposed new diagnosis that your group will construct. You need to describe the diagnosis thoroughly using DSM type language, qualifiers, and symptoms and using visual aids. Do whatever you need to do to convince us that the diagnosis really exists; grading is based on the quality of your idea and the case/rationale that you give to back-up the idea. Give at least one believable case study of a person who had this proposed diagnosis; the person in your case study should also be given a DSM-type diagnosis using your constructed diagnosis along with differential diagnoses. The presentation should NOT be read; it should engage the audience and keep/hold their interest: grading will also be reflective of the quality of the presentation itself.

3. Yes Paper - 40% (roughly 20% for overview/lit review, 20% for persuasive argument/critical analysis): Students will choose a diagnosis that is currently represented in the DSM-5. It should be a diagnosis that you would like to know more about and that you believe is accurately represented in your current experience. Give a general overview of this diagnosis (about 4 pages, graded on accuracy of relevant information and citation of broad, credible, academic sources), why you believe it is accurately represented (about 3 pages, graded on the credibility and persuasiveness of your argument), and give examples/descriptions of a person who has had this diagnosis (about 2 pages). Clarity of writing, flow of paper, and correct use of references and citations are valued highly. Suggested length = 10 pages

4. No Paper – 40% (roughly 20% for overview/lit review, 20% for persuasive argument/critical analysis): Students will choose a diagnosis currently represented in the DSM-5 that you think should be changed; one that you believe is not accurately represented or that is problematic. Give a general overview of this diagnosis (about 4 pages, graded on accuracy of relevant information
and citation of broad, credible, academic sources), why you believe it is problematic (about 3 pages, graded on the credibility and persuasiveness of your argument), and give examples/descriptions of a person who had a problematic experience with the diagnosis (about 2 pages). Clarity of writing, flow of paper, and correct use of references and citations are valued highly. Suggested length = 10 pages

Students must also meet standards for program level on the Professional Qualities Evaluation (no 0s and minimal 1s) as applicable. Failure to do so will result in referral to an Academic Review Committee. See PMHC program handbook for more details.

**Grading:** This course is graded in accordance with the grading policy of the Graduate School of Education and Counseling, available for viewing in the Navigator Student Handbook (http://www.lclark.edu/graduate/student_life/handbook/registration_policies/index.php#system). Assignments will be given letter grades that are weighted by grade point and then back into a total grade (A = 4.0   A- = 3.7   B+= 3.3   B = 3.0   B- = 2.7   C+ = 2.3   C = 2.0   C- = 1.7   D+ = 1.3   D = 1.0   F = 0.0). Total grade points that fall in-between grades will be assigned to the closest available final grade, e.g., 3.49 would be a B+

ASSIGNMENTS TURNED IN LATE WILL HAVE ONE GRADE FOR EACH LATE DAY SUBTRACTED FROM THE GRADE OF THE ASSIGNMENT.

**COURSE CALENDAR:**
Check Moodle page daily for topics, activities, readings and links to additional reading.