

**Lewis & Clark College**  
**Professional Mental Health Counseling & Professional Mental Health Counseling – Specialization in**  
**Addictions**  
**CPSY 522**  
**Diagnosis of Mental and Emotional Disorders**  
**Syllabus Cover Sheet**

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.

Theory and Research into Practice		Proficient (A)	Benchmark (B)	Emerging (C)	Inadequate/Fail	As evidenced by:	Evaluation and Remediation
<b>Goal 3 of 6</b>							
Understands and applies diagnosis	Early program	Understands, critiques and begins to implement the DSM diagnostic system Grade: A 90% or higher on case study	Can understand and critique the DSM V Grade B 80% or higher on case study	Demonstrates inadequate understanding of the DSM diagnostic system Grade: C or below		CPSY 522: Diagnosis Final Grade AND Case application assignment Min. 80% case application	First year portfolio/advisor review; referral to Benchmark Review Committee

### Methods of Instruction for this Course

Instruction Method	Mark All That Apply
Lecture	X
Small Group Discussion	X
Large Group Discussion	X
Course Readings	X
Group Presentation	X
Individual Presentation	
DVD/Video Presentation	
Supervised Small Group Work	X
Individual/Triadic Supervision	
Group Supervision	
Case Study	
Debate	X
Class Visitor / Guest Lecturer	
Off-Campus / Field Visit	
Other:	X

# CPSY 522 - Diagnosis of Mental and Emotional Disorders – Fall 2018 Mondays 1-4, 2 credits

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**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:**

American Psychiatric Association (2013). *Diagnostic and Statistical Manual of Mental Disorders*, 5<sup>th</sup> Edition. Washington, DC: American Psychiatric Press. (SBN-10: 0890425558; ISBN-13: 978- 0890425558)

Morrison, J. (2014). *Diagnosis Made Easier: Principles and Techniques for Mental Health Clinicians*, 2<sup>nd</sup> ed. New York, NY: The Guilford Press. (ISBN: 1462513352)

*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

- 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.

Other things – cell phones, breaks, questions – remember to be respectful of each other!

### **Course requirements:**

1. Participation in and documentation of in-class diagnostic process role-plays: 5% : Through-out the class we will be practicing and learning together how to accurately diagnosis, and what assessment tools are used in practice. There are various examples on Moodle and you will be asked to use them in our role-plays in class.

2. Group project/presentations – 25% 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. Mini-quizzes - 5% each (20% total) Students will be given four short multiple-choice quizzes. Each quiz will describe a cluster of symptoms and have different choices as to the diagnosis that would be the “best” response on exams such as the CPCE and the NCE.

4. Yes and No Paper – 50% Students will choose a diagnosis currently represented in the DSM-5 that you would like to learn about in more depth and to explore the validity and/or lack of validity of the current way the diagnosis is understood. Give a general overview of this diagnosis (about 4-6 pages, see rubric for grading), ways in which it appears to be a valid diagnosis and ways in which it appears to be a problematic diagnosis (about 6-8 pages, see rubric for grading), and give examples/descriptions of a person who had an experience with the diagnosis (about 2 pages). Clarity of writing, flow of paper, and correct use of references and citations are valued highly (see rubric). Suggested length = 14-15 pages not counting reference page

5. 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.

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**Grading:** This course is graded using a 4.0 GPA 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](http://www.lclark.edu/graduate/student_life/handbook/registration_policies/index.php#system)).

Assignments will be points from 1 to 4 that are weighted by percentage and then tallied to a final GPA. The final GPA is translated into a letter 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 EACH DAY SUBTRACTED FROM THE GRADE OF THE ASSIGNMENT.*

**TENTATIVE COURSE CALENDAR: CHECK MOODLE PAGE FOR UPDATED TOPICS, READINGS AND LINKS TO ADDITIONAL READING/ONLINE RESOURCES**

### Course Schedule

9/17: Week 1- syllabus and intro activity

9/24: Week 2- social construct of diagnosis and how to diagnosis correctly

- Reading assignments for this week:
  - In Diagnosis Made Easier, read Part I and Part II
  - In DSM read Preface, Introduction, Use of Manual and Cautionary Statement
  - Francis, A. (2012, January 9). America is over diagnosed and over medicated. *The Huffington Post, Science Blog*. [http://www.huffingtonpost.com/allen-frances/america-is-over-diagnosed\\_b\\_1157898.html](http://www.huffingtonpost.com/allen-frances/america-is-over-diagnosed_b_1157898.html)
  - <https://letsqueerthingsup.com/2017/11/26/i-was-misdiagnosed-as-bipolar-for-6-years-im-only-now-getting-my-life-back/>

10/1: Week 3- Schizophrenia

- Reading assignments for this week:
  - In Diagnosis Made Easier, read Chapter 13: Diagnosis Psychosis.
  - In DSM-5, read Schizophrenia Spectrum and Other Psychotic Disorders
  - Levine, B. (2012, January 5). 7 Reasons America's Mental Health Industry Is a Threat to Our Sanity. *AlterNet*, p. 1-5  
[http://www.alternet.org/story/153634/7\\_reasons\\_america%27s\\_mental\\_health\\_industry\\_is\\_a\\_threat\\_to\\_our\\_sanity](http://www.alternet.org/story/153634/7_reasons_america%27s_mental_health_industry_is_a_threat_to_our_sanity)
- Look at the examples of assessments on Moodle and choose one or two that you like and bring to class

- For this class, you will be participating in your first diagnostic assessment role-play. To do this, I anticipate that you will want some guidance as to the kind of information you need to learn about your "client." The Diagnosis Made Easier book is a great resource to learn the process, but I imagine that you might want something with specific questions on it to help you.
- For this reason, I have gathered several examples of intake forms/questionnaires that you may want to use to assist you in gathering information. Among them is the intake form for the LC Community Counseling Center. There is also one from Community Services NW and one that was used for clients who were covered by the Oregon Health Plan (pre-Affordable Care Act). Several of them ask for a multi-axial diagnosis (from the DSM-IV) but you obviously don't need to do that unless you want the practice of doing it.
- Print one of these forms out and bring it to class next week so that you will have a sense of what to ask during the role-play. Let me know if you have questions!

#### 10/8: Week 4 - Bipolar and Depression

- Reading assignments for this week:
  - In Diagnosis Made Easier, read Chapter 11: Diagnosing Depression and Mania.
  - In DSM-5, read Bipolar and Related Disorders and Depressive Disorders.
- Quiz 1

#### 10/15: Week 5 - Anxiety and OCD

- Reading assignments for this week:
  - In Diagnosis Made Easier, read Chapter 12: Diagnosing Anxiety and Fear.
  - In DSM-5, read Anxiety Disorders and Obsessive-Compulsive and Related Disorders
  - Critique of GAD in DSM-5: <http://www.psychiatrytimes.com/dsm-5-0/dsm-5-will-medicalize-everyday-worries-generalized-anxiety-disorder>
- Quiz 2

#### 10/22: Week 6 - Trauma and Dissociative

*Warning: This next section looks at serious trauma in a variety of ways. Please stop listening/watching/reading if you find yourself getting triggered by what you are experiencing. If this happens to you, please talk to me about it so that I can help you figure out what you might do.*

- Reading assignments for this week:
  - In DSM-5, read Trauma and Stress related Disorders and Dissociative Disorders
  - Should adjustment disorder be conceptualized as transitional disorder? In pursuit of adjustment disorders definition. (2012). *Journal of Mental Health*, 21(6), 579-588.
    - <https://login.watzekpx.lclark.edu/login?url=http://search.ebscohost.com/login.aspx?direct=true&db=aph&AN=83880215&site=ehost-live&scope=site>
  - Competing Constructivisms: The Negotiation of PTSD and Related Stigma Among Post-9/11 Veterans in New York City Elliott, L., Bennett, A.S., Szott, K. et al. *Cult Med Psychiatry* (2018). <https://doi.org/10.1007/s11013-018-9586-7>

10/29: Week 7 - Eating disorder and Disruptive Disorders

- Reading assignments for this week:
  - In DSM-5, read Feeding and Eating Disorder chapter and Disruptive, Impulse-Control and Conduct Disorder
  - Fairburn, C. G., & Bohn, K. (2005). Eating disorder NOS (EDNOS): an example of the troublesome “not otherwise specified” (NOS) category in DSM-IV. *Behaviour Research and Therapy*, 43(6), 691–701. <http://doi.org/10.1016/j.brat.2004.06.011>  
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2785872/>
  - “How to Nip Antisocial Personality Disorder in the Bud” (2014) Daniel Freeman and Jason Freeman <https://www.theguardian.com/science/blog/2014/nov/19/antisocial-personality-disorder-conduct-disorder>
- Quiz 3

11/5: Week 8 - Personality disorder

- Reading assignments for this week:
  - In Diagnosis made Easier, read Chapter 16: Diagnosing Personality and Relationship Problems
  - In DSM 5: read Personality Disorders
  - <https://www.nytimes.com/2011/06/23/health/23lives.html>

11/12: Week 9 - Substance use disorder

- Reading assignments for this week:
  - In Diagnosis Made Easier, read Chapter 15 Diagnosing Substance Misuse and Other Addictions
  - In DSM-5, read Substance and Addictive Disorders
  - The cultural aspect: How to measure and interpret epidemiological data on alcohol-use disorders across cultures Jürgen Rehm and Robin Room *Nordic Studies on Alcohol and Drugs* Vol 34, Issue 4, pp. 330 – 341 First Published September 14, 2011  
<http://journals.sagepub.com/doi/pdf/10.1177/1455072517704795>
- Quiz 4

11/19: Week 10- final activity/last day of class/ Yes No Paper due