

**School of Graduate and Professional Studies
Washington Adventist University CPSY520**

COURSE SYLLABUS

Course Title: **PSYCHOPATHOLOGY**

Session: Fall Session, August 25-October 13, 2014

Monday: 6:00-9:10 P.M.

Professor: Gladstone Gurubatham, M.A.; M.S.; M.A.; Ph.D.; A.B.E.C.I;
C.A.S.; L.P.C.. Diplomate of American Academy of Pain
Management; Fellow of the American Academy of Behavioral
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Course Description:

This course focuses on the scientific and methodological diagnosis of mental disorders. It explores the etiology, dynamics, and diagnosis of the range of physiological, interpersonal, family systems and larger systems of pathologies affecting individuals and group living. Attention is also given to specific disorders of childhood and adulthood. The DSM-5™ system of diagnosis provides a framework for the course.

Course Goals and Objectives:

1. To provide a strong foundation of knowledge on psychopathology in order to formulate appropriate intervention strategies in the treatment of psychopathological conditions. [CACREP Standard 5C.2.b]
2. To develop an understanding of the process of diagnosis including initial interview, symptoms associated with the major diagnostic categories, culture, family, and biological issues that may affect this process. [CACREP Standards 5C.2.d, 5C.2.f, 5C.2.j, 5C.3.a]
3. To complete a case diagnosis including a clinical structured interview by applying diagnostic process. [CACREP Standard 5C.2.d]
4. To provide each student an experience in creating a case and analyze its diagnoses and etiology.
[CACREP Standard 5C.3.b, 5C.3.d]

5. To familiarize with different theoretical perspectives in the field of Psychopathology and the empirical support for these theories. [CACREP Standard 5C.1.a, 5C.1.b]
6. To be able to apply these theoretical perspectives in reviewing each of the psychopathological conditions covered in this course. [CACREP Standard 5C.2.d]
7. To provide knowledge essential to the utilization of DSM-5™ to diagnose mental disorders and determine appropriate diagnosis of clinical cases. [CACREP Standards 5C.2.d]
8. To introduce assessment techniques, intervention, ethical issues, and current explanations involved in diagnosis. [CACREP Standards 5C.3.a, 5C.3.b]
9. To understand current practices for treatment and prevention of childhood and adolescent psychopathology. [CACREP Standards 5C.3.a, 5C.3.b]
10. Describe a biblically based world view to understand psychopathology and counseling

Clinical Mental Health Counseling Program Objectives:

1. Students develop knowledge in the eight common core curricular experiences identified in CACREP standards. These include: professional orientation and ethical practice, social and cultural diversity, human growth and development, group work, assessment, helping relationships, research and program evaluation, and career development.
2. Theory and Research to Practice
Students develop an understanding of a range of counseling theories consistent with a developmental perspective. Students develop treatment plans and interventions consistent with their own theoretical orientation, a critical evaluation of the literature, client mental health needs and goals in counseling, diagnosis, and best practices in the profession.
3. Clinical Skill (Helping Relationships)
Students develop therapeutic communications skills, emphasize the client-counselor relationship, and facilitate and manage the counseling process with individuals, families, and groups.
4. Self as Counselor (Reflective Practitioners)
Students develop a strong awareness of their own values and worldviews, recognize their own competencies and limitations, maintain openness to supervision, and

5. Multicultural Competence

Students develop awareness of power, privilege, and difference and their own cultural attitudes, beliefs, and effects of social location, and learn strategies for working with gender and gender spectrum issues, diverse populations, ethnic and other non-dominant groups.

6. Professional Counseling Identity

Students develop understanding of the history of professional counseling, knowledge of the philosophical foundations of the profession, knowledge of the roles and functions of counselors, professional pride/professional engagement, and knowledge and understanding of professional ethics. Students recognize the importance of career counseling as unique to the counseling profession, and recognize the value of career work in all counseling settings.

7. Ethical Practice

Students commit to and follow professional ethics consistent with the American Counseling Association ethical guidelines. They seek supervision/consultation to resolve ethical dilemmas and take personal responsibility in the event an ethical error is committed.

8. Mental Health Advocacy and Community Involvement

Students develop an ability to recognize the critical issues that affect physical, academic, career, economic, and mental well-being of individuals and learn skill sets to help clients resolve personal and family problems that have an impact on the society.

9. Research and Assessment

Students develop an understanding and skills in the use of research, assessment and program evaluation to inform and improve clinical practice.

10. Practice & Spirituality

Students develop a sensitivity to the client's emotional, spiritual, and physical health in order to facilitate the healing process

.CACREP Standards:

| Course Objectives | Program Objectives | Institutional Learning Outcomes | CACREP & CMHC Standards | Assessments |
|--|--------------------|---------------------------------|-------------------------------|-------------|
| 1. To provide a strong foundation of knowledge on psychopathology in order to formulate appropriate intervention strategies in the treatment of psychopathological conditions. | 10 | 7 | 5C.2.b | |
| 2. To develop an understanding of the process of diagnosis | 2 | 3 | 5C.2.d,5C.2.f, 5C.2.j, 5C.3.a | |

| | | | | |
|---|---|-------|-------------------|--|
| interview, symptoms associated with the major diagnostic categories, culture, family, and biological issues that may affect this process. | | | | |
| 3. To complete a case diagnosis including a clinical structured interview by applying diagnostic process. | 3 | 3,7 | 5C.2.d | |
| 4. To provide each student an experience in creating a case and analyze its diagnoses and etiology. | 2 | 2,3,7 | 5C.3.b 5.C.3.d | |
| 5. To familiarize with different theoretical perspectives in the field of Psychopathology and the empirical support for these theories | 2 | 7 | 5C.1.a, 5C.1.b | |
| 6. To provide knowledge essential to the utilization of DSM-5TM to diagnose mental disorders and determine appropriate diagnosis of clinical cases. | 2 | 3,7 | 5C.2.d | |
| 7. To introduce assessment techniques, intervention, ethical issues, and current explanations involved in diagnosis | 9 | 7 | 5C.3.a, 5C.3.b | |

| | | | | |
|--|----|-----|---------------------|--|
| | | | | |
| 8. To understand current practices for treatment and prevention of childhood and adolescent psychopathology. | 2 | 3,7 | 5.C.3.a, 5.C.3.b | |
| 9. Describe a biblically based world view to understand psychopathology and counseling | 10 | 1 | | |

Required Textbooks:

American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders. (DSM -5™)*. Washington D. C.: Author. ISBN: 978-0-89402-554-1

American Counseling Association code of ethics: Section -E. (2014). American Counseling Association. Alexandria, VA. Retrieved from: <http://www.counseling.org/docs/ethics/2014-aca-code-of-ethics.pdf?sfvrsn=4%20>

Craighead, W. E., Miklowitz, D. J., & Craighead, L. W. (Eds.). (2013). *Psychopathology: History, theory, and diagnosis for clinicians.* (2nd ed.) New York: John Wiley & Sons. ISBN: 978-1-118-10677-8

Maddux, J. E., & Winstead, B. A., (Eds.). (2012). *Psychopathology: Foundations, for a contemporary understanding.* (3rd ed). New York: Taylor & Francis Group. ISBN: 978-0-415-88790

Instructional Methods:

This course will use variety of methods including lecture, interactive participation, group projects, case analyses, and role-playing exercises will also be followed. In addition, the course is highly experiential; students will have opportunities to practice and improve the skills learned.

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As a student in this course, you will be expected to complete projects/or assignments that will require you to interact with and or collect data from other people, including perhaps from your colleagues in this class. Whenever we gather data from the lives and experiences of other people, we must be especially sensitive to the professional and

ethical implications of what we are pursuing. Keep in mind that the information you do collect—whether it is collected orally, in writing, through observation, or through existing records—is research data. We must adhere to the highest level of professionalism and make every effort to handle data in an ethical manner. Disclosure of confidential information outside class is a violation of ethical standards in psychology education.

Plagiarism and Academic Dishonesty:

Plagiarism is a serious issue both in academia and workplace. It is totally unacceptable. Always give credits to the sources that you use when writing. Plagiarism, copying someone else's work, or cheating will be liable for automatic dismissal and failure of the course. (See University Bulletin for further information on cheating).

Attendance:

Graduate work demands a personal, academic, and professional commitment beyond that made in undergraduate studies. The commitment begins with punctual attendance at class and attending the entire class. If a student is more than 20 minutes tardy, the tardiness can be considered an unexcused absence. This class limits a student to ONE absence. A graduate student is expected to attend the entire class. If a student leaves class before it concludes and the professor dismisses it, that student's attendance for that class defaults to "UNEXCUSED." The student's final grade will be reduced by 10 percent for the course. All Graduate students are expected to be responsible persons.

A portion of class time will be used in a small group setting. Therefore each one has a responsibility not only for his/her own learning but also of others in the group. Should it be **absolutely** necessary to be tardy or miss a class, please inform the professor **prior** to the class by a phone call. The professor will request a documentation of any situation such as illness, serious family situations, i.e. death, injury, etc.

A good way to determine if an absence could be classified as excused would be to ask this question: "If I were a counselor in practice, would the reason I am missing class justify my unexpectedly canceling appointments with a client?"

Course Procedure:

1. All written assignments should be done in a professional manner with emphasis on **proper grammar, spelling, and word usage in the English language.**
2. All written assignments must be **proofread** prior to submission.
3. No E-Mail submission of assignments will be accepted.

4. Papers and assignments are due on time. Late papers will not be accepted or subject to a lower grade of -5.
5. All written assignments must be double spaced with 12-font format, following: Perrin, R. (2012). *Pocket guide to APA manual*. New York: Houghton. This is a pocket edition and easy to carry with. For an unabridged edition, please use *APA manual*, published by American Psychological Association.

Course Requirements:

1. The field of psychopathology is very broad and complex. Therefore, the reading for this course is quite extensive. To save time from reading all outside sources such as journals, books, and internet sources and for convenience' sake, students are required to read from all three textbooks as assigned. (See the *Course Schedule and Assignments*).
2. Active participation in class discussion is required. Each student will be asked to facilitate discussion by summarizing and leading class in discussion on chapters from Craighead, Maddux, and *DSM-5*. Each student will be required to provide a two-page long summary and reaction of the chapters to the professor for grading purposes on the day of presentation and also to the class members. (See the *Guidelines for Class Discussion*). All presentations must be presented on their designated dates. Grade will not be given for presentations not delivered. Due Dates: Sept. 8, Sept.15, and Sept. 22, 2014.
3. Review and consult the relevant and appropriate sections of the *DSM-5*TM in relation to the material for each class.
4. Completion of a case diagnosis including the Structured Clinical Interview. Each student will be given a case by your professor to apply the diagnostic process learned in the class and submit it in a five-page long paper. (See the *Guidelines for Case Diagnosis*). Due Date: Sept 29, 2014.
5. You will be given a take-home exam a week before the last class. The exam will consist of class discussions, class readings, and mental disorders discussed throughout the Session. The answers must be typewritten. It must be turned in on the last day of the class. There is a penalty of 10 percent for a DAY late submission. Thereafter, the test will not be accepted. Due Date: Oct. 13.
6. Creation of a case by each student must be distributed to the class. Students will discuss diagnostic and etiological issues in class in simulated treatment

teams. *Brainstorming with peers and seeking feedback on ideas is a major part of becoming a responsible counseling psychologist.* (See the *Guidelines for Case History Creation*). Due Date: Oct. 6 & Oct. 13 (20 minutes for each student).

Evaluation Procedure:

The final grade will be based on performance only-not on either effort or improvement. However, class attendance and participation are required as stated previously, You will be evaluated both by your Professor and peers on your presentations in the class.

The final grade for the course is based on a maximum possible total of 400 points and will be composed of four graded items; the worth of each is as follows:

| | |
|---|------------|
| Class Presentation, Discussion, and Two-page Summary: | 100 Points |
| Five-page Assignment: | 125 Points |
| Take-Home Exam: | 125 Points |
| Case Creation: | 50 Points |

For the final grade and for each item or component, letter grades are based on percentage of maximum possible points.

Grading Scale:

Grading will be based on the following scale:

| | | | | | |
|------|-----------|-----|-----------|-----|--------|
| A--= | 90-- 95%; | A= | 96-- 100% | | |
| B--= | 80-- 83%; | B = | 84-86%; | B+= | 87-89% |
| C--= | 70-- 73%; | C= | 74-76%; | C+= | 77-79% |
| D--= | 60-- 69%; | F | | | |
| = | below 60% | | | | |

Course Schedule and Assignments:

Use **DSM-STM** in conjunction with your weekly READING topics on various disorders. Abbreviations MW stands for *Psychopathology: Foundations*, while CMC stands for *Psychopathology: History, theory*.

| Week of: | Lecture/Discussion Topic | Reading/Activity |
|-----------------|---|--|
| Aug. 25 | Introduction to Psychopathology Syllabus & handouts Lecture: Concepts, Assessments, Diagnosis, Research, DSM-5TM | MW: Ch. 1-7 CMC: Ch.2 & 16 DSM-5TM: Intro. & Sec. 1 |
| Sept. 1 | Anxiety disorders, Social anxiety disorders, Panic disorders; mood disorders | MW:Ch. 8 CMC: Ch.4, 5&6 DSM:Anxiety,etc |
| Sept. 8 | PTSD, trauma, dissociative disorder, & obsessive compulsive disorder | MW: 13 CMC: Ch.3&7 DSM:Trauma-Stress <i>"oral presentation" due</i> |
| Sept. 15 | Bulimia nervosa, binge eating, anorexia nervosa, alcohol use disorders | MW:Ch,12,13,14,20 CMC:Ch.12,13,14,&15 DSM:Somatoform,etc <i>"oral presentation" due</i> |
| Sept. 22 | Depressive disorders, depression, bi-polar, & sleep disorders | MW:Ch.9 CMC:Ch. 8,9,10&18 DSM: depressive diso. <i>"oral presentation" due</i> |
| Sept. 29 | Personality disorders, borderline, Schizophrenia, & across life span (aging) "Case Creation" & Feedback Due | DSM. MW:Ch.11,10, 1 CMC:Ch.14,11,&10 |
| Oct. 6 | Sexual dysfunction, disorders of childhood, adolescents & cognitive disorders | MW:Ch.12,16,17,18, 19 CMC. Ch.17 DSM:sexual dys., etc |
| Oct. 13 | Closing Lecture & Brainstorming | TAKE-HOME EXAM Due |

GUIDELINES FOR CLASS DISCUSSION

1. During the first class meeting, each student will pick an area in psychopathology that he/she is interested in leading a class discussion. Students may focus on any disorders found in the textbooks.
2. Select a chapter that a student is really interested in exploring further and sharing the findings with colleagues.
3. Provide a two-page long, **single-spaced**, summary and reaction to the class members in typed form.
4. Include in the discussion the following: empirical studies on a theory used in the treatment of the disorder, biological theories, cultural consideration, lifespan perspectives, etiology, assessment, and treatment procedures.
5. Video presentation to augment the discussion is encouraged.
6. Each one is allowed approximately 20 minutes.

GUIDELINES FOR CASE DIAGNOSIS

This assignment is designed as an exercise in differential diagnosis to develop a student's skill in assessing an actual clinical case. Each student will be assigned a case vignette which provides clinical data from which a diagnostic formulation can be developed. The main task is to present a comprehensive diagnostic formulation which incorporates etiology, theory, and research as they apply to the specific case. In addition, identify clearly your rationale for ruling-out other disorders as possible diagnoses, as you rule-in your final diagnosis.

The case formulation should include a brief description of :

1. the environmental factors that might be relevant in the etiology and maintenance of the client's presenting problems.
2. the internal factors such as biological, affective, and cognitive that might be relevant in the etiology and maintenance of the client's problems.
3. the theoretical perspectives which might be applicable to this particular case and how they apply.
4. the complete DSM-5 TM diagnosis you would assign for this particular case.

The above items must be integrated in the paper. The paper must be typewritten, using APA format as defined in the APA Publication Manual, latest edition, with a minimum of **five pages**. **If there are any questions, please consult your professor for assistance.** **A minimum of FIVE references is required.**

This paper is evaluated on the following basis for a total point of 125:

Environmental Factors (20 points)

Internal Factors (20 points)

Theoretical perspectives (20 points)

Complete DSM-5, diagnosis (with severity levels & ICD Codes) (40 points)

APA Format (25 points)

GUIDELINES FOR CASE HISTORY CREATION

Each student is required to develop a case history to be used in simulated treatment teams during the class. The case should be as realistic as possible and can be based on a well disguised client or based on a compilation of real and other information. The case description should include the following information, but in narrative form. Tell a very rich story about the person and their problem or problems. It can be told in first person or a description of another person. Talk about the person as a human being. Please **do not** interpret the events. All the rest will be done in the class.

Please use the following information to build your case history:

Demographic information (sex, age, ethnic background, physical characteristics, disability, etc)

Developmental milestones

Social context(s) in which they grew up

Significant events in infancy, childhood, adolescence, adulthood

What they were like as a child, adolescent, adult

Relationships with parents and any siblings, past and present

Peer relationship, past and present

Significant others/partners

Sexuality

Favorite memories/most unpleasant memories

Educational history

Spirituality

Vocational history

Family history in reference to health, including mental health

Date of onset of each symptom

How they describe themselves

Mental status type information

Presenting complaint

Hobbies, priorities, habits, how they spend their time

Anything else that you think is important to know in order to understand one's frame of reference

Please type the case in 12 point font, single spaced. No limit to number of pages, but brief. Make enough copies to the entire class. Be sure to turn in a neat, well-typed copy with your NAME to your professor for grading purposes. This assignment carries **50 points**.

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PEER REVIEW ON ORAL PRESENTATION

Student's Name _____

Date _ _ _ _ _

1. Was the student poised?
2. Indicate some of the communication techniques-both verbal and non-verbal and others, such as visual aids--used in the presentation.
3. Comment on the two-page summary handed out to you.
4. Comment on the overall performance.
5. What letter grade would you assign? _____

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EVALUATION OF ORAL PRESENTATION AND TOPIC SUMMARY

Student's Name: _____

Date: _____

Grade Earned: _____

Presentation _____

Verbal & Nonverbal Skills
(visual aids, charts, etc.) _____

Analytical Skills _____

Topic Summary _____

Total Points (100) _____

Professor's Signature

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EVALUATION OF CASE DIAGNOSIS

Student's Name _____

Date: _____

Grade Earned: _____

Maximum Points: 125

Environmental Factors: (20 points) _____

Internal Factors: (20 points) _____

Theoretical Perspectives: (20 points) _____

DSM-5TM diagnosis (40 points) _____

APA Format: (25 points) _____

Total Points (125)

Professor's Signature
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CPSY520
PSYCHOPATHOLOGY

EVALUATION OF CASE CREATION

Student's Name _____ Date: _____

Grade Earned" _____ Maximum Points: 50

Demographic Information: (10 points) _____

Environmental Factors: (10 points) _____

Mental Status Information: (10 points) _____

Narration: (20 points) _____

Total Points (50)

Professor's Signature

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Final Exam

Part I Fill in the blanks with appropriate answers:

Maximum: 125 points

1. Define Psychopathology _____

2. Scientific study of nature of disease, its causes, processes, development and consequences is known as _____
3. Nosology is _____.
4. The Greek philosopher who divided the human soul into two parts-the rational soul as the rightful leader and immortal. and the irrational soul as mortal-was _____
5. Case study is described as _____

6. Define reductionist theory _____

7. The demonic possession as way of explaining psychopathology in historical times was because of _____
8. Syndrome is defined as _____
9. In clinical interview, many psychologists involve mental status exam to check the client's behavior. One of five such observations is sensorium. Explain this category:

10. List the other four categories of mental status exam besides sensorium as stated above. _____

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Final Exam
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11. Choose any one of the projective tests we have learned in the class and list their main features:_____

12. The uses of A B C Chart in clinical observations are._____

13. The difference between reliability and validity of assessment methods is/are._____

14. Complete the following statements about anxiety and its causes with the following terms: (a) comorbidity (b) panic attack (c) situationallybound (d) neurotransmitter (e) brain circuits and (f) stressful

1. A _____ is an abrupt experience of intense fear or acute discomfort accompanied by physical symptoms, such as chest pain and shortness of breath.

2. A _____panic attack often occurs in certain situations but not anywhere else.

3. Anxiety is associated with specific _____and _____

4. The rates of _____ among anxiety disorders are high because they share the common features of anxiety and panic.

5. _____ life events can trigger biological and psychological vulnerabilities to anxiety.

15. Name the basic types of antidepressant medications for mood disorders._____

16.Borderline Personality Disorder is often accompanied by following symptoms:

17. Define Gender Identity Disorder _____

Part II

Essay Questions: PLEASE TYPE YOUR ANSWERS. Please use DSM 5 and other two textbooks in answering the questions where it is appropriate. Refer your lecture notes as well.

1. Describe the three main psychological models or approaches to understanding and explaining psychopathology .
2. Describe first the FOUR purposes of clinical interviews and then the nature of it.
3. What are the limitations of unstructured interviews?
4. What are the major limitations of Intelligence tests?
5. Describe the Anxiety Disorders –its definition, diagnostic features, theories of etiology, and treatment.
6. Define Dissociative and Somatic Symptom Disorders. How are they both linked? Be sure to include etiology and treatment procedures.
7. Describe in detail the symptoms of deficiency and excessive amounts of the following neurotransmitters: acetylcholine, GABA, Serotonin, Dopamine-- and discuss how you will nutritionally bring about a change in one's life.
8. Describe DSM-5 in the area of Diagnostic Criteria and Codes as best as possible.

The Impact of Bipolar Disorder of a Family Member to the Family Structure

Your Name Washington Adventist University CPSY 520

September 29, 2014

Professor: Dr. Gladstone Gurubatham

