



I. COUNS 5840.51 Advanced Psychopathology
Counseling Graduate Program - Department of Psychology
Online - Three (3) Credit Hours

II. Instructor:

Professor: Karen McCurtis Witherspoon, Ph.D.
Office Hours: Tuesday 2 pm - 5 pm, Wednesday 1pm to 3pm & by appointment
Office Location: HWH 245, Phone (773) 995-3879
EMAIL: Kmccurti@csu.edu
Main Office: Graduate Counseling Office, HWH311, (773) 995-2359

III. Attendance Policy

You are required to log into the Moodle Course a minimum of twice a week in order to read announcements, post responses to discussion questions, and take online chapter quizzes. You are expected to participate actively in class discussions and experiential exercises. All assigned readings should be read in preparation for the class meeting for which they have been scheduled. Un-excused absences are not acceptable and will adversely affect your participation grade. If you miss more than the equivalent of 2 weeks of class time, you may be dropped by the professor (see Graduate Student Catalogue). If you receive an administrative withdrawal, you will not be eligible for a tuition refund. If you must be absent from class notify the instructor before the class meeting time. Points will be taken from work turned in late. This class is highly interactive. Note: Although a student may be administratively withdrawn from a class, students should initiate withdrawal when unable to successfully complete a course.

IV. ADA policy

Students with diagnosed learning disabilities, or physical disabilities that interfere with learning, are strongly urged to register each semester with the CSU abilities office (SUB 190, x4410). Services may be requested at any time but are not retroactive. The College of Arts and Sciences and the Department of Psychology are strongly committed to taking all reasonable steps to ensure that our students are able to work to their fullest potential. The Abilities Office provides services for all students in attendance at Chicago State University with verified disabilities. Please direct all requests for accommodations due to a disability to the Abilities Office: (773) 995-4401. The Office is located in the Student Union Building, Room 198.

V. Course Prerequisites: COUN 5600 or 5611 or concurrent enrollment in the same and admission to the Master's Degree Program.

VI. Conceptual Framework:

Department Mission

The mission of the Counseling Graduate Program is to produce highly qualified graduates equipped to serve the complex counseling needs in the urban setting with specific emphasis on addressing the needs of urban youth and their families. This mission is generated from the belief that counselors equipped to deal with the more difficult problems in large cities will also be effective in other, less challenging settings.

The College of Education's conceptual framework serves as the model for preparing all candidates to succeed in helping all urban children learn. This preparation is characterized and distinguished by five core themes: (1) **partnerships** with the education community; (2) **assessments** of teaching and learning that are consistent and frequent; (3) **contextualized** teaching experiences; (4) **technology**-integrated curricula and instructional delivery and (5) **standards**-based teaching and learning. This course provides a basic foundation upon which an understanding of counseling theory can promote the learning process for youth.

VII. Course Description: (From Graduate Catalog)

The assessment, etiology, description, understanding, and treatment of psychological disorders. Included in the study are schizophrenia, affective and anxiety disorders, substance abuse/dependency, personality disorders, disorders of childhood and adolescence as well as other disorders in the DSM 5 and issues related to diagnosis and treatment in multicultural populations.

VIII. Method of Instruction:

Course will include: didactic lectures, course discussion, review of videotaped examples of psychopathology, review of documents and films posted on Moodle, role play exercises and “Guess the Diagnosis” to both role play and correctly identify diagnostic criteria for specific disorders, research paper instruction and review of integration of evidence-based practice in paper and clinical work

Use of Technology:

Students are required to have computer proficiency, including the ability to access the internet, send and retrieve email, turn in assignments via Moodle (the CSU online learning system located at www.csu.edu), open attachments, and conduct a library search online. The CSU Moodle will be used to make announcements, post lecture notes, course documents, videos, and assignments. Email will be used to send messages to the class and to individual students. As such, it is your responsibility to ensure that you have access to Moodle and your email account as messages will be sent to the account on file with the university. In the event that you have problems with accessing either Moodle or your email account, contact Academic Computing as soon as possible. If you do not utilize your university email account, Academic Computing can assist you in having your messages forwarded to the address of your preference.

IX. Program Objectives met in this Course (*italicized*):

1. Integrate knowledge of human growth and development into the diagnostic and counseling process.
2. Appropriately use counseling assessment, research, and evaluation protocols.
3. Use the analysis of the dynamics of the helping relationship in the counseling process.
4. Prepare and utilize effective educational and career planning in school/clinical mental health counseling settings, including settings with the complex challenges of urban youth, families and communities.
5. Effectively respond to professional and ethical issues.
6. *Implement an appropriate plan of intervention to use in effectively teaching and counseling clients, including urban youth.*
7. *Appropriately respond to social and cultural issues in school/clinical mental health counseling settings.*
8. Integrate counseling knowledge and skills into effective performance as a school/clinical mental health counselor.
9. Effectively coordinate services with other professionals in the school/clinical mental health counseling setting.

X. Course Objectives and Assessments/Student Outcome Measures

Course Objectives	Measures of Objectives	Standards CACREP = Council for Accreditation of Counseling and Related Educational Programs SC – School CMH – Clinical Mental Health
1. To understand the biological, neurological, and physiological factors that affect human development, functioning,	Reading, exams	CACREP = 3e
2. To identify and understand evidence-based counseling strategies and techniques for prevention and intervention.	Reading, discussions, assignments, exams	CACREP = 5j, 8b
3. To understand suicide prevention models and strategies	Reading, discussions, exams	CACREP = 5l
4. To identify correct specific psychopathology/mental disorders by symptom criteria through the use of clinical vignettes and videos, including differential diagnosis and the use of current diagnostic classifications systems, including the DSM and ICD	Reading, assignments, exams	CACREP = 3e CMH = 2d
5. To identify crisis intervention, trauma-informed, and community-based strategies, such as Psychology First Aid	Reading, discussions, exams	CACREP = 5m
6. To understand procedures for assessing risk for aggression or danger to others, self-inflicted harm, or suicide as well as identifying characteristics, risk factors, and warning signs of students at risk for mental health and behavioral disorders	Reading, discussions, assignments, exams	CACREP = 7c SC = 2g
7. To examine procedures for identifying trauma and abuse and for reporting abuse.	Reading, exams	CACREP = 7d
8. To understand factors including biological and neurological mechanisms on mental health.	Reading, discussions, assignments, exams	CMH = 2g
9. To examine the effects of crises, disasters, and all trauma on diverse individuals across the lifespan	Reading, discussions, exams	CACREP = 3g CMH = 2f
10. To understand a general framework for understanding differing abilities and strategies for differentiated interventions	Reading, discussions, assignments, exams	CACREP = 3h
11. To understand theories and etiology and family impact of addictions and addictive behaviors including strategies for prevention, intervention, and treatment.	Reading, discussions, assignments, exams	CACREP = 3d

12. To know the etiology, diagnostic process, nomenclature, treatment (i.e., initiation, maintenance, and termination of counseling), referral, and prevention of emotional and mental disorders.	Reading, discussions, assignments, exams	CMH = 2b
13. To understand mental health service delivery modalities within the continuum of care, such as inpatient, outpatient, partial treatment and aftercare, and the mental health counseling services network.	Reading, discussions, assignments, exams	CMH = 2c
14. To identify the classifications, indications, and contraindications of commonly prescribed psychopharmacological medications for appropriate medical referral and consultation	Reading, discussions, assignments, exams	CMH = 2h
15. Understand how to complete and intake interview, mental status exam, biopsychosocial history, mental health history, and psychological assessment for treatment	Reading, discussions, assignments, exams	CMH = 3a
16. Understand the techniques and interventions for prevention and treatment of a broad range of mental health issues	Reading, discussions, assignments, exams	CMH = 3b
17. To recognize the importance of research in advancing the counseling profession, including how to critique research to inform counseling practice	Reading, discussions, assignments, exams	CACREP = 8a
18. To recognize the signs and symptoms of substance abuse in children and adolescents as well as the signs and symptoms of living in a home where substance use occurs	Reading, discussions, assignments, exams	SC = 2i
19. To identify common medications that affect learning, behavior, and mood in children and adolescents	Reading, discussions, assignments, exams	SC = 2h
20. To know the principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning.	Reading, discussions, assignments, exams	CMH = 1c

21. Understand the importance of research in advancing the counseling profession, including how to critique research to inform counseling practice	comprehensive discussions, readings written papers, exams	CACREP = 7a
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Professional Standard Sets

Council for Accreditation for Counseling and Related Educational Programs (CACREP)
 <<http://www.cacrep.org>>

XI. Grading Policy

- A = 90-100%
- B = 80-89
- C = 70-79
- F = 69-below

Evaluation Criteria

Students are expected to read the weekly assigned readings and regularly participate in Discussion Board. Weekly quizzes should be completed and the results e-mailed to the professor. All students are expected to contribute questions, comments, observations, personal views, and relevant experiences to the discussions. The depth and evidence of familiarity of readings will be assessed for the class participation grade. Your overall grade for the course is determined by the following criteria:

1. Attendance and Class Participation	50 points
2. Research Paper	100 points
3. Midterm Exam	50 points
4. Final Exam	50 points
Total	250 points

Research Paper:

Student scholars are required to complete a review of literature on a disorder of their choice. The topic must be specific in nature and approved by your professor. The paper should be at least 10 pages in length (12 point font), typed, doubled-space, and in APA format. The paper must reference literature from refereed journals dating 1995 or later and include current outcome data related to the chosen disorder. At least twelve references must be used for the paper. Copies of the 12 article references must be handed in with the paper and may not be returned. In addition to at least 12 journal articles, other references may be cited as noted below. References should address the symptoms of the disorder as well as evidence-based strategies/interventions, demographics of clinical populations, and data relating to relevance of gender, culture, and age to diagnosis and treatment. **5% will be deducted each day the paper is late. You may NOT submit a paper that has been or will be submitted for another course.**

Topic: Have a very specifically defined **topic approved by the professor by week 4 of the semester.**

Outline and References: Develop an outline and locate at least five appropriate references for the paper. For the final paper, you will need a total of at least 12 references. At least 10 of these must be from psychological journals. Talk to the CSU reference librarian about how to identify journals and access full-text journals from a computer. You may NOT use web sites for references unless they represent a journal, psychological association, NIMH, or similar reputable sites. All sources used in the paper must include references citations for the information presented. When in doubt, have your instructor approve anything from a website. **The outline and first five references are due by week 8 of the semester.**

Recommended Generic Paper Outline (individualize to your disorder)

I. Introduction (Overview of paper topics)

II. Description of the symptoms of the disorder as well as any theories explaining what may cause the disorder

III. Research on demographics of the clinical population with the disorder – including data relating to gender, race, culture, age of diagnosis, etc.

IV. Strategies used to treat the disorder

IV. Outcome Research - (Does research support the use of these strategies? What are the evidence-based strategies/interventions for treatment of this disorder? What are the results of any meta-analysis studies? Are these treatments found to be effective with specific populations (if so, which ones)? Are there populations for which any treatment is not recommended?)

V. Summary

Note: Parts II. and III. can come from books or book chapters. Part IV. must come from journal articles or chapters from books on evidence-based strategies (HINT – your text is a great starting point and includes references that may also be helpful.) Don't use websites unless pre-approved by instructor.

What this paper is NOT –

- A limited application to one population – make sure you include an overview of the disorder across all populations/ages/cultures
- A personal story or story of someone else with a disorder

Style: The paper should be written and documented in the style of the American Psychological Association Publication Manual, 6th Ed. A copy of this is available in the reference section of our campus library. All parts of the paper should be double-spaced. Websites with information about APA style are:

<http://webster.commnet.edu/apa/index.htm>

<http://www.uwsp.edu/psych/apa4b.htm>

<http://www.wooster.edu.psychology/apa-crob.html>

The following website describes the changes in the latest edition (6th) of the Publication Style Manual, which was recently published:

<http://www.apastyle.org/learn/tutorials/brief-guide.aspx>

Plagiarism: One significant misconception that students have is that rewriting something is not plagiarism, because “they are putting it in their own words.” However, if the source is not officially acknowledged, IT IS PLAGIARISM. Copying and pasting actually only accounts for small percentage of plagiarism. The majority of plagiarism is a result of text manipulation. Simply stated, plagiarism is using someone’s work without giving the appropriate credit. This can mean several things.

For examples, all of the following are considered plagiarism:

Copying and pasting text from on-line media, such as encyclopedias.

Copying and pasting text from any web site.

Transcribing text from any printed material, such as books, magazines, journals, encyclopedia, and newspapers.

Simply modifying text from any of the sources is plagiarism. For example, replacing a few words, using a thesaurus does not constitute original work.

Using another students’ work and claiming it as your own, even with permission, is academically unethical and is treated as plagiarism.

Any time you quote, summarize, or paraphrase; you must acknowledge the original source. Even if you summarize or paraphrase, you must acknowledge the original source, if you so not directly credit your sources through a citation you are plagiarizing.

The above information on plagiarism was taken from the following website. Please refer to this website for more information on plagiarism.

<http://www.hamilton.edu/academics/resource/wc/AvoidingPlagiarism.html>

Cheating/Plagiarism:

A grade of F will be given on any exam or assignments in which a student cheats. A student who is guilty of copying will receive a grade of “F” on that assignment by the instructor. The university policy for plagiarism will be enforced.

NOTE: To assist in the identification of plagiarism, the research papers will be submitted to Turn-it-in through the CSU Moodle section for this class. Turn-it-in identifies sections of papers that are taken directly from sources. Appropriate citations are needed for all such sections or the paper will be considered plagiarized.

Rough Draft Review:

The professor will review all typed **rough drafts that are appropriately referenced and submitted to turnitin** Early submission allows you to receive feedback to improve your paper and grade.

The final paper is due by week 13 and must be submitted to turnitin . NO late papers will be accepted.

Examples of Acceptable Journal Titles:

Adultspan Journal

Counselor Education and Supervision

Journal of Abnormal Psychology

Journal of Abnormal Child Psychology

Journal of Clinical Psychology

Journal of College Counseling

Journal of Counseling and Development

Journal of Behavior

Journal of Counseling Psychology

Journal of Multicultural Counseling and Development

Journal of Substance Abuse
Journal of Addiction
The Journal of Addictions and Offender Counseling
Measurement and Evaluation in Counseling and Development

Midterm/Final Exam: The format of the midterm and final exam will be matching, multiple choice and short essay questions, which focus on topics and material presented in class and from required readings. Although the lecture and textbook may overlap to a great extent, some material presented in the lecture is not covered in the required readings.

XII. Required Texts:

- Woo, S. M., & Keatinge, C. (2016). *Diagnosis and treatment of mental disorders across the lifespan, 2nd Ed.* New Jersey: Wiley.
- American Psychiatric Association. (2013). *Desk reference to the diagnostic criteria from DSM 5.* Arlington, VA: American Psychiatric Association.

Supplemental Readings:

- American Counseling Association (ACA). (2014). *ACA code of ethics.* Alexandria, VA: Author.
- American Counseling Association (ACA). (2016). *What is counseling?* Retrieved from www.counseling.org/about-us/about-aca
- American Mental Health Counselors Association (ANHCA). (2015). *Code of ethics of the American Mental Health Counselors Association – 2015 revision.* Alexandria, VA: Author.
- American Psychological Association. (2009). *Publication Manual for the American Psychological Association*, 6th Ed. DC: APA Press.
- American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorder (5th ed.)*. Arlington, VA: American Psychiatric Publishing.
- Ametrano, I. M. (2014). Teaching ethical decision making : Helping students reconcile personal and professional values. *Journal of Counseling and Development*, 92, 154-162.
- Association for Assessment in Counseling and education. (2012, May). *Standards for multicultural assessment (4th Ed.)*. Retrieved from <http://aarc-counseling.org/assets/cms/uploads/files/AACE-AMCD.pdf>
- Barden, S.M., Conley, A. H., & Young, M. E. (2015). Integrated health and wellness in mental health counseling: Clinical, educational, and policy implications. *Journal of Mental health Counseling*, 37, 152-163.
- Barlow, D. H. (2008). *Clinical handbook of psychological disorders: A step-by-step treatment manual (4th Ed.)*. New York: Guilford Press.
- Barnett, J. E., & Johnson, W. B. (2015). *Ethics desk reference for counsellors (2nd ed.)*. Alexandria, VA: American Counseling Association.
- Bicknell-Hentges, L. & Lynch, J. (2006). Educational interventions for Post Traumatic Stress Disorder (PTSD) in urban students: Differentiating Attention Deficit Disorder (ADD) and other disorders from PTSD. *Illinois Schools Journal*, 85 (1), 35-52.
- Bicknell-Hentges, L. (2004). Teach me your world: Lessons in culture from a family in crisis. In LeCroy, C. & Daley, J. (Eds), *Child and adolescent case studies*. Brooks-Cole/Wadsworth.
- Bicknell-Hentges, L. & Lynch, J. (2004). Helping families with Reunification: Returning a child to a less than perfect family. In LeCroy, C. & Daley, J. (Eds.) *Child and adolescent case studies*. Pacific Grove, California: Brooks-Cole/Wadsworth Publishing.
- Cooper, J. (2014). Essential crisis intervention skills. In L. R. Jackson-Cherry & B. T. Erford (Eds.), *Crisis assessment, intervention, and prevention (2nd ed.)*, pp. 67-84). Upper Saddle River, NJ: Pearson.
- Corey, G. & Corey, M. (2003). *6TH Edition. Issues and Ethics in the Helping Professions*.
- Kazdin, A. E. & Weisz, J. R. (2003). *Evidence-based psychotherapies for children and adolescents*. New York: Guilford Press.
- Landreth, G.L. (2002). *Play therapy: The art of the relationship (2nd Ed.)*. New York: Brunner Routledge.
- Lawson, D. M. (2009). Understanding and treating children who experience interpersonal maltreatment: Empirical findings. *Journal of Counseling and Development*, 87, (2), 204 –215.

- Patterson, A., Alcala, A., McCahill, M., & Edwards, T. (2006). *The therapist's guide to psychopharmacology: Working with patients, families and physicians to optimize care*. New York: Guilford.
- Pearce, J. W., & Pezzot-Pearce, T. D. (2007). *Psychotherapy of abused and neglected children*. New York: Guilford.
- Reichenberg, L. W., & Seligman, L. (2016). *Selecting effective treatments: A comprehensive, systematic guide to treating mental disorders (5th ed.)*. Hoboken, NJ: Wiley.
- Roberts, A. R., & Yeager, K. R. (Eds.). (2004). *Evidence-based practice manual: Research and outcome measures in health and human services*. New York: Oxford Press.
- Sheperis, C. J., Young, J. S., & Daniels, M. H. (Eds.). (2017). *Counseling research: Quantitative, qualitative, and mixed methods*. Hoboken, NJ: Pearson.
- Somner, C. A. (2008). Vicarious traumatization, trauma-sensitive supervision, and counselor preparation. *Counselor Education and Supervision, 48*, (1), 61 – 71.
- Stout, C. E., & Hayes, R.A. (Eds.). (2005). *The evidence-based practice methods, models, and tools for mental health professionals*. Hoboken, NJ: Wiley.
- Sue, D. W., & Sue, D. (2016). *Counseling the culturally diverse: Theory and practice (7th ed.)*. Hoboken, NJ: Wiley.
- Weisz, J.R. (2004). *Psychotherapy for children and adolescents: Evidenced-based treatments and case examples*. Cambridge, UK: Cambridge University Press.
- Werth, J., L., & Crow, L. (2009). End-of-life care: An overview for professional counselors. *Journal of Counseling and Development, 87*, (2), 194 – 203.
- Wheeler, A. M., & Bertram, B. (2015). *The counselor and the Law: A guide to legal and ethical practice (7th ed.)*. Alexandria, VA: American Counseling Association.

XIII. Required Reading: Various articles posted on the www.csu.edu website.

XIV. Bibliography

- Franklin, N. B. (1989). *Black families in therapy: A multisystems approach*. New York, NY: Guilford Press.
- Hackney, H.L. & Corimier, L.S. (2001). *The professional counselor, a process guide to helping, 4th edition*. Boston, MA: Allen & Bacon.
- Howatt, W.A. (2000). *The human services toolbox*. Pacific Grove, CA: Brooks/Cole.
- Jacobs, E. (1992). *Creative Counseling techniques: An illustrated guide*. Odessa, FL: Psychological Assessment Resources, Inc.
- MacCluskie, K.C. & Ingersoll, R. E. (2000). *Becoming a 21st century counselor: personal and professional explorations*. Pacific Grove, CA: Brooks/Cole.
- Murphy, B.C. & Dillon C. (1998). *Interviewing in action: process and practice*. Pacific Grove, CA: Brooks/Cole.
- Robinson, T.L. & Howard-Hamilton, M.F. (2000). *The convergence of race, ethnicity and gender: Multiple identities in counseling*. Upper Saddle River, N.J: Prentice-Hall.
- Seligman, L. (1999). *Diagnosis and treatment planning in counseling, second edition*. New York, NY: Human Resources Press.
- Tyber, E. (1997). *Interpersonal process in psychotherapy: A relational approach. Third Edition*. Pacific Grove, CA: Brooks/Cole.
- Young, M.E. (1998). *Learning the art of helping: Building blocks and techniques*. Columbus, OH: Merrill/Prentice Hall.

XV. Course Calendar

Week	Topic: Readings and Other Assignments	Assignment/Assessment with Due Date/Session
1	<p>Course Orientation and Overview of DSM 5</p> <p>Appropriate assessment of abnormal behavior (formal tests, symptom inventories, MSE, behavioral observations, etc.)</p> <p>Multicultural implications and biases for diagnosing</p> <p>Diagnostic grouping of the DSM 5</p> <p>The etiology, differential diagnostic process, and nomenclature of psychopathology</p> <p>Principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning</p> <p>Importance/use of research and evidence-based practice and need to stay current</p>	<p>Obtain text and review the Axes and diagnostic classifications in first few sections of DSM 5 and chapter 1 in Craighead et al..</p> <p>Review documents in Moodle on Mental Status Exams and Biopsychosocial case conceptualization</p>
2	<p><u>Neurodevelopmental Disorders</u></p> <p><u>Intellectual Disabilities</u></p> <p><u>Communication Disorders</u></p> <p><u>Autism Spectrum Disorder</u></p> <p><u>Attention-Deficit/Hyperactivity Disorder</u></p> <p><u>Specific Learning Disorder</u></p> <p><u>Motor Disorders</u></p> <p><u>Other Neurodevelopmental Disorders</u></p> <p>Factors impacting development and learning</p> <p>Prevention of psychopathology</p> <p>Evidence-based practice for these disorders</p>	<p>Read section in DSM 5</p>
3	<p><u>Disruptive, Impulse-Control, and Conduct Disorders</u></p> <p>Strategies for differentiated interventions for those with exceptional abilities</p> <p>Evidence-based practice for these disorders</p>	<p>Read sections in DSM 5</p> <p>Chap. 2 in Craighead et al..</p>
4	<p><u>Anxiety Disorders</u></p> <p><u>Obsessive-Compulsive and Related Disorders</u></p> <p><u>Trauma- and Stressor-Related Disorders</u></p> <p>Effect of crises, disasters and other trauma-causing events on persons of all ages and crisis intervention</p> <p>Appropriate diagnosing (vs. developmentally appropriate reactions) during a trauma-causing event</p> <p>Evidence-based practice for these disorders</p>	<p>Read sections in DSM 5 and Chap.3, 4, 5, 6 and 7 in Craighead et al. and articles posted on Moodle</p>

5	<p><u>Bipolar and Related Disorders</u> Evidence-based practice for these disorders</p>	<p>Read section in DSM 5 and Chap. 10 in Craighead et al..</p> <p>Topic for Research Paper</p>
6	<p><u>Depressive Disorders</u> Evidence-based practice for these disorders Assessing and managing suicidal risk</p>	<p>Read section in DSM 5 and Chap. 8 and 9 in Craighead et al.</p>
7	<p><u>Personality Disorders</u> Cluster A Personality Disorders Paranoid Personality Disorder Schizoid Personality Disorder Schizotypal Personality Disorder Cluster B Personality Disorders Antisocial Personality Disorder Borderline Personality Disorder Histrionic Personality Disorder Narcissistic Personality Disorder Cluster C Personality Disorders Avoidant Personality Disorder Dependent Personality Disorder Obsessive-Compulsive Personality Disorder Other Personality Disorders</p> <p>Screening for aggression or danger to others Evidence-based practice for these disorders</p>	<p>Read section in DSM 5 and Chap. 14 in Craighead et al.</p> <p>Research Paper Outline with References due</p>
8	Midterm	Info on exam TBA
9	<p><u>Schizophrenia Spectrum and Other Psychotic Disorders</u> Catatonia Neurobiology of behavior and related psychopharmacology Evidence-based practice for these disorders</p>	<p>Read section in DSM 5 and Chap. 11 in Craighead et al., and articles posted on Moodle</p>

10	<p><u>Substance-Related and Addictive Disorders</u> Substance-Related Disorders Alcohol-Related Disorders Caffeine-Related Disorders Cannabis-Related Disorders Hallucinogen-Related Disorders Inhalant-Related Disorders Opioid-Related Disorders Sedative-, Hypnotic-, or Anxiolytic-Related Disorders Stimulant-Related Disorders Tobacco-Related Disorders Other (or Unknown) Substance-Related Disorders Non-Substance-Related Disorders</p> <p>Theories and etiology of addictions and addictive behaviors</p> <p>Screening for addiction and co-existing disorders</p> <p>Signs of substance abuse or living with substance abuse in youth</p> <p>Impact of substance abuse on medical and psychological disorders</p> <p>Evidence-based practice for these disorders: Strategies for prevention, intervention, and treatment</p> <p>How substance abuse can coexist with and mimic medical and psychological disorders</p>	<p>Read section in DSM 5 and Chap. 15 in Craighead et al.</p>
11	<p><u>Feeding and Eating Disorders</u></p> <p><u>Elimination Disorders</u></p> <p><u>Sleep-Wake Disorders</u></p> <p>Breathing-Related Sleep Disorders</p> <p>Parasomnias</p> <p><u>Gender Dysphoria</u></p> <p>Evidence-based practice for these disorders</p>	<p>Read section in DSM 5 and Chaps. 18 in Craighead et al.</p> <p>Paper Draft through turnitin due</p>
12	<p><u>Dissociative Disorders</u></p> <p><u>Somatic Symptom and Related Disorders</u></p> <p>Evidence-based practice for these disorders</p>	<p>Read section in DSM 5 and paper on Moodle</p> <p>Chap. 14 in Craighead et al.</p>

13	<p><u>Neurocognitive Disorders</u> Major and Mild Neurocognitive Disorders <u>Other Mental Disorders</u> Other Specified Mental Disorder Due to Another Medical Condition Unspecified Mental Disorder Due to Another Medical Condition Other Specified Mental Disorder Unspecified Mental Disorder <u>Sexual Dysfunctions</u></p> <p><u>Paraphilic Disorders</u> Evidence-based practice for these disorders</p>	Read section in DSM 5. and paper on Moodle and Chap. 17 in Craighead et al., Research Paper due
14	<p>Therapeutic Interventions: Evidence-based practice <u>Medication-Induced Movement Disorders and Other Adverse Effects of Medication</u> <u>Other Conditions That May Be a Focus of Clinical Attention</u></p> <p>Evaluating counseling outcomes Treatment (initiation, maintenance, and termination of counseling) and referral Assessing client's stage of dependency, change or recovery to determine appropriate treatment modality and placement criteria within a continuum of care Appropriate use of theories and case conceptualization to develop treatment plans Classifications, indications, side effects and contraindications of common psychopharmacological drugs as needed for referral and identification of side effects Collaboration with multidisciplinary team and other professionals</p>	Read sections in DSM 5, Craighead et al. Chap. 16 and paper on Moodle
16	Final Exam	Final Exam due

Educational Policies: Classroom expectations and procedures will be governed by the policies of Chicago State University

A. *Disclaimer:* Information contained in this syllabus was, to the best knowledge of the instructor, considered correct and complete when distributed for use at the beginning of the semester. However, this syllabus should not be considered a contract between Chicago State University and any student. The instructor reserves the right, acting within the policies and procedures of CSU, to make changes in course content or instructional techniques without notice or obligation.

B. *Academic Honesty:* Students are encouraged and expected, with the assistance of faculty, to conduct themselves in conformance with the highest standards in regard to academic honesty...It is recommended that students seek the advice of instructors as to the proper procedure to avoid such violations.

Statement from Abilities Office: Students with a disability who require reasonable accommodations to fully participate in this course should notify the instructor within the first two weeks of the semester. Such students must be registered with the Abilities Office which is located in the Cordell Reed Student Union Building, Room 198. The telephone number is 773.995.4401. Accommodations may be requested at any time, but they are not retroactive.

Emergency Procedure Request: In order to maximize preparedness in the case of an emergency, students who may need assistance should an evacuation be necessary are asked to inform their instructors at the beginning of each semester. This request is made to improve the safety of all members of the CSU Community.

Plagiarism and Academic Misconduct : ‘Academic misconduct includes but is not limited to cheating, encouraging academic dishonesty, fabrication, plagiarism, bribes, favors, threats, grade tampering, non-original work, and examination by proxy. Procedures regarding academic misconduct are delineated in “Student Policies and Procedures” article X, section 2. If an incident of academic misconduct occurs, the instructor has the option to notify the student and adjust grades downward, award a failing grade for the semester, or seek further sanctions against the student.’

Academic Warnings: Student progress is monitored throughout each semester, and progress indicators are posted to Moodle / CSU X-Press during the 5th, 9th, and 13th weeks of the semester, as listed in the Academic Calendar. Instructors and academic advisors usually communicate with students if problems arise, but it is the responsibility of the student to check, and to take immediate action when necessary to improve the grade. If you receive “SP” (satisfactory progress), you are on track to successfully complete the course. Otherwise, if there are issues related to attendance, missing assignments and exams, and/or limited progress, please contact the instructor and your academic advisor as soon as possible.

CSU Credit Hour Definition: For every credit hour of direct instruction in any format (face-to-face, hybrid, online), it is expected that the student will spend a minimum of two additional hours on out-of class student work assignments (homework, reports, essays, critical analysis of readings, etc.); this is in addition to studying.