I. Course Description

CNEP 5381, Psychodiagnosis and Treatment Strategies, covers types of human distress, as described in the Diagnostic and Statistical Manual of Mental Disorders, including the development of tools for the understanding and critical appraisal of abnormal human behavior across the life-span. Strategies and techniques for working with clients in a variety of settings are considered.

II. Rationale

Helping professionals (counselors, teachers, ministers, mental-health workers, and social workers) must be aware of a variety of counseling strategies and must be able to effectively apply these strategies to different populations of clients in a variety of different settings. Knowledge, awareness, and skills are all necessary to be able to be effective in ‘helping’ roles.

III. State Adopted Proficiencies for Teachers and/or Administrators/Counselors

Standard I: Learner-Centered Knowledge: The certified school counselor has a broad knowledge base.

Standard II: Learner-Centered Skills: The certified school counselor applies the knowledge base to promote the educational, personal, social, and career development of the learner.

Standard III: Learner-Centered Process: The certified school counselor participates in the development, monitoring, and evaluation of a developmental school guidance and counseling program that promotes learners’ knowledge, skills, motivation, and personal growth.

Standard IV: Learner-Centered Equity and Excellence for All Learners: The certified school counselor promotes academic success for all learners by acknowledging, respecting, and responding to diversity while building on similarities that bond all people.

IV. TExES Competencies

Competency 001 (Human Development): The school counselor understands processes of human development and applies this knowledge to provide a developmental guidance program, including counseling services, that meets the needs of all students.

Competency 002 (Student Diversity): The school counselor understands human diversity and applies this knowledge to ensure that the developmental guidance and counseling program is responsive to all students.

Competency 003 (Factors Affecting Students): The school counselor understands factors that may affect students' development and school achievement and applies this knowledge to promote students' ability to achieve their potential.
Competency 006 (Counseling): The school counselor understands how to provide effective counseling services to individuals and small groups.

Competency 009 (Collaboration with Others in the School and Community): The school counselor understands how to work collaboratively with other professionals and with community members to promote positive change and to facilitate student learning.

V. Course Objectives/Learning Outcomes

This course is designed to enable students to study psychological problems in people, including developing an understanding of the general principles and methods of case conceptualization, assessment and/or diagnoses of mental and emotional disorders, utilizing the DSM 5.

The following CACREP standards are covered and assessed in this course.

Core
1. CACREP Standard II G-1-c: counselors’ roles and responsibilities as members of an interdisciplinary emergency management response team during a local, regional, or national crisis, disaster or other trauma-causing event;
2. CACREP Standard II G-3-c: effects of crises, disasters, and other trauma-causing events on persons of all ages;
3. CACREP Standard II G-3-e: a general framework for understanding exceptional abilities and strategies for differentiated interventions;
4. CACREP Standard II G-3-f: human behavior, including an understanding of developmental crises, disability, psychopathology, and situational and environmental factors that affect both normal and abnormal behavior;
5. CACREP Standard II-G-3-g: theories and etiology of addictions and addictive behaviors, including strategies for prevention, intervention, and treatment;
6. CACREP Standard II-G-5-b: counselor characteristics and behaviors that influence helping processes;
7. CACREP Standard II-G-5-d: counseling theories that provide the student with models to conceptualize client presentation and that help the student select appropriate counseling interventions. Students will be exposed to models of counseling that are consistent with current professional research and practice in the field so they begin to develop a personal model of counseling;
8. CACREP Standard II-G-5-g: crisis intervention and suicide prevention models, including the use of psychological first aid.
9. CACREP Standard II-G-8-e: the use of research to inform evidence-based practice.

In addition to the objectives listed above, the student will satisfy the following objectives based on their area of emphasis:

School Counseling
As a result of completing this course, the school counseling student will be able to meet:
1. CACREP Standard A-7: understands the operation of the school emergency management plan and the roles and responsibilities of the school counselor during crises, disasters, and other trauma-causing events.
2. CACREP Standard C-6: understands the potential impact of crises, emergencies, and disasters on students, educators, and schools, and knows the skills needed for crisis intervention;
3. CACREP Standard G-1: understands the influence of multiple factors (e.g., abuse, violence, eating disorders, attention deficit hyperactivity disorder, childhood depression) that may
affect the personal, social, and academic functioning of students;
4. CACREP Standard G-2: knows 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 abuse occurs;

Marriage and Family Counseling
As a result of completing this course, the student will be able to meet:
1. CACREP Standard A-7: understands the impact of crises, disasters, and other trauma-causing events on marriages, couples, families, and households;
2. CACREP Standard C-2: recognizes specific problems (e.g., addictive behaviors, domestic violence, suicide risk, immigration) and interventions that can enhance family functioning;
3. CACREP Standard D-4: demonstrates the ability to use procedures for assessing and managing suicide risk;
4. CACREP Standard G-3: understands the impact of addiction, trauma, psychopharmacology, physical and mental health, wellness, and illness on marriage, couple, and family functioning.

Clinical Mental Health Counseling
As a result of completing this course, the student will be able to meet:
1. CACREP Standard A-6: recognizes the potential for substance abuse disorders to mimic and coexist with a variety of medical and psychological disorders;
2. CACREP Standard A-7: identifies professional issues that affect clinical mental health counselors (e.g., core provider status, expert witness status, access to and practice privileges within managed care systems);
3. CACREP Standard A-9: comprehends the impact of crises, disasters, and other trauma-causing events on people;
4. CACREP Standard C-2: knows the etiology, the diagnostic process and nomenclature, treatment, referral, and prevention of mental and emotional disorders;
5. CACREP Standard C-4: knows the disease concept and etiology of addiction and co-occurring disorders;
6. CACREP Standard C-5: understands the range of mental health service delivery – such as inpatient, outpatient, partial treatment and aftercare – and the clinical mental health counseling services network;
7. CACREP Standard C-6: understands the principles of crisis intervention for people during crises, disasters, and other trauma-causing events;
8. CACREP Standard C-7: knows the principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning;
9. CACREP Standard C-8: recognizes the importance of family, social networks, and community systems in the treatment of mental and emotional disorders;
10. CACREP Standard D-2: applies multicultural competencies to clinical mental health counseling involving case conceptualization, diagnosis, treatment, referral, and prevention of mental and emotional disorders.
11. CACREP Standard D-6: demonstrates the ability to use procedures for assessing and managing suicide risk;
12. CACREP Standard D-8: provides appropriate counseling strategies when working with clients with addiction and co-occurring disorders;
13. CACREP Standard E-3: understands current literature that outlines theories, approaches, strategies, and techniques shown to be effective when working with specific populations of clients with mental and emotional disorders;
14. CACREP Standard F-3: demonstrates the ability to modify counseling systems, theories, techniques, and interventions to make them culturally appropriate for diverse populations.
15. CACREP Standard G-1: knows the principles and models of assessment, case
conceptualization, theories of human development, and concepts of normalcy and psychopathology leading to diagnoses and appropriate counseling treatment plans;

16. CACREP Standard G-2: understands various models and approaches to clinical evaluation and their appropriate uses, including diagnostic interviews, mental status examinations, symptom inventories, and psychoeducational and personality assessments;

17. CACREP Standard G-3: understands basic classifications, indications, and contraindications of commonly prescribed psychopharmacological medications so that appropriate referrals can be made for medication evaluations and so that the side effects of such medications can be identified;

18. CACREP Standard H-1: selects appropriate comprehensive assessment interventions to assist in diagnosis and treatment planning, with an awareness of cultural bias in the implementation and interpretation of assessment protocols.

19. CACREP Standard K-1: knows the principles of the diagnostic process, including differential diagnosis, and the use of current diagnostic tools, such as the current edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM);

20. CACREP Standard K-2: understands the established diagnostic criteria for mental and emotional disorders, and describes treatment modalities and placement criteria within the continuum of care;

21. CACREP Standard K-3: knows the impact of co-occurring substance abuse disorders on medical and psychological disorders;

22. CACREP Standard K-5: understands appropriate use of diagnosing during a crisis, disaster, or other trauma-causing event;

23. CACREP Standard L-1: demonstrates appropriate use of diagnostic tools, including the current edition of the DSM, to describe the symptoms and clinical presentation of clients with mental and emotional impairments;

24. CACREP Standard L-2: able to conceptualize an accurate multi-axial diagnosis of disorders presented by a client and discuss the differential diagnosis with collaborating professionals;

25. CACREP Standard L-3: differentiates between diagnosis and developmentally appropriate reactions during crises, disasters, and other trauma-causing events.

Addictions Counseling

As a result of completing this course, the student will be able to meet:

1. CACREP Standard K-1: knows the principles of the diagnostic process, including differential diagnosis, and the use of current diagnostic tools, such as the current edition of the Diagnostic and Statistical manual of Mental Disorders (DSM).

2. CACREP Standard K-2: knows the impact of co-occurring addictive disorders on medical and psychological disorders.

Specific student learning outcomes (SLOs) for this course include the following:

1. Students will demonstrate understanding of counselor roles during a crisis, disaster, or other trauma-causing event, including impact of violence on children, by appropriately responding to a case study, including formulation of appropriate responses to multiple victim/survivor scenarios. Achievement of this SLO will be evaluated by obtaining a grade of 70 or better on the group case study project. CACREP standards II-G-1-c, II- G-3; CACREP SC Standard G-1

2. Students will differentiate between diagnosis and developmentally appropriate reactions during crises, disasters, and other trauma-causing events, and will demonstrate the ability to use
psychological first aid, by appropriately responding to a case study which includes evaluation and appropriate responses to multiple victim/survivor scenarios. Achievement of this SLO will be evaluated by obtaining a grade of 70 or above on the group case study project. CACREP Standard II-G-5-g; CACREP CMH Standards K-5 and L-3

3. Students will demonstrate understanding of the diagnostic process and treatment planning by providing accurate diagnosis; appropriate treatment objectives, planning, and intervention strategies; appropriate use of medical and adjunctive services; placement criteria and referral services within the continuum of care; and preferred clinician characteristics for multiple case studies designed to reflect a variety mental and emotional disorders as described in the DSM. Assessment will be based on responses to multiple case studies and the mid-term and final examinations. Achievement of this SLO will be evaluated based on a grade of 70 or above average on case studies and a grade of 158 or above on the mid-term and final examinations. CACREP Standard II-G-5-b; CACREP CMH Standards C-2, G-1,H-1, K-2, K-3, L-1, L-2; CACREP Addictions Standard K-1; CACREP SC Standard G-1

4. Students will differentially describe counselor characteristics and behaviors that influence helping processes across multiple case studies and the final project, which are designed to reflect a variety of DSM diagnostic categories. Achievement of this SLO will be evaluated based on a grade of 70 or above average on case studies and a grade of 158 or above on the mid-term and final examinations. CACREP Standard II-G-5-b

5. Students will demonstrate principles of biopsychosocial case conceptualization and treatment planning as assessed by evaluation of responses to multiple case studies and the final project. Achievement of this SLO will be evaluated based on a grade of 70 or above average on case studies and a grade of 158 or above on the mid-term and final examinations. CACREP CMH Standard C-7

6. Students will identify appropriate approaches to clinical evaluation, including diagnostic interviews, mental status examinations, symptom inventories, and other assessments, across a variety of DSM categories and diagnoses. Assessment will be based on selection of appropriate evaluation strategies and measures on multiple quiz case studies and the final project. Achievement of this SLO will be evaluated based on a grade of 70 or above average on case studies and a grade of 158 or above on the mid-term and final examinations. CACREP CMH Standard G-2

7. Students will identify appropriate uses of a variety of psychotropic medications, including indications and contraindications, as well as demonstrate understanding of appropriate medical referral, as related to a variety of DSM categories and diagnoses. Assessment will be based on multiple quiz case studies and the final project. Achievement of this SLO will be evaluated based on a grade of 70 or above average on case studies and a grade of 158 or above on the mid-term and final examinations. CACREP CMH Standard G-3

8. Students will demonstrate understanding of co-occurring substance abuse disorders and their impact on psychological and medical disorders through responses to multiple case studies reflecting a wide range of DSM categories and diagnoses. Achievement of this SLO will be evaluated based on a grade of 70 or above average on case studies and a grade of 158 or above on the mid-term and final examinations. CACREP CMH Standard K-3; CACREP Addictions Standard K-2; CACREP SC Standard G-1.
VI. Course Topics

The major topics to be considered are:

Knowledge, awareness, and skills in diagnosis and treatment planning, to be gained by studying the psychological problems that many people experience as categorized in the DSM, and effective counseling strategies for dealing with these concerns. In addition, psychopharmacological treatment for various disorders will be addressed. Crisis and trauma-causing events and appropriate treatments are included in the course. A detailed list is included under the Tentative Course Schedule section.

VII. Instructional Methods and Activities

Methods and activities for instruction include:

A. Traditional Experiences: discussion and application.
B. On-line Experiences: lecture, discussion, readings, and evaluation.
C. Clinical Experiences: case study homework and examinations, group project.

VIII. Evaluation and Grade Assignment

The methods of evaluation and the criteria for grade assignment are:

A. Evaluation Methods and Scoring

1. Preparation checks: This class is a blended course – meaning that most of the didactics for the course will occur in BlackBoard. Between 50% and 60% of the course will be delivered on-line. PowerPoints, videos, and other material will be posted there. In order for us to make good use of the time in class, it is critical that you prepare by reading assignments and otherwise getting yourself ready to participate in active learning within the class time. You will be able to use in-class time for application of the material, getting feedback from peers and from me, and working on case studies. Because preparation for this kind of class is so important, Preparation Checks will be used for each class. These will consist of either a brief series of objective questions that must be completed via BlackBoard prior to class or a required discussion post to a thread which must be completed prior to class. Preparation checks will generally cover broad material rather than very detailed material, and hints may be provided in the posted material for some subject matter. You will be able to earn up to 10 points for each check. Because the class is blended, you can expect to spend 50-60% less time in face-to-face classes; however, those hours will be needed to cover material that would ordinarily be covered in class. You will see on the schedule that we will meet face-to-face more heavily in the beginning of the course. The purpose of the heavier front-end loading of face-to-face meetings is to allow you to become more comfortable with the diagnostic process and to learn how to use the materials available to you. In addition, you will have the opportunity to work with your peers on various portions of the homework assignments.

2. Homework: There will be nine homework assignments during this course. Each homework assignment is due by the beginning of class on the date assigned. See separate handout for details and due dates. The first homework covers general information about the DSM, information from the psychopharmacology text, and general information from BlackBoard for the first class. All subsequent homework assignments are case studies covering material in the DSM, the psychopharmacology text, lecture, material from the Selecting Effective Treatments text, and class discussion. See separate document for details and due dates. All homework will be submitted via BlackBoard.

Homework will not be accepted late and there will be no make-up provided; however, the lowest homework grade for each student will be dropped. While not recommended, students who fail to submit up to one homework will not be penalized. Each face-to-face class will provide opportunities for active learning relevant to the next week’s homework and/or case studies and exams.
3. **Disaster/Crisis/Trauma-Causing Event Assessment and Intervention:** Students will work in groups to address a case study concerning a disaster, a crisis situation, and/or a trauma-causing event. Case studies will be provided in class and submitted via BlackBoard prior to the following class meeting.

4. **Midterm Exam and Final Examinations:** The mid-term and final examinations will consist of multiple case studies for which you will DO A CLIENT MAP using the DSM 5, pharmacology text, and the Selecting Effective Treatments text. **Both the midterm and final exams are individual projects.** Group work and consultation with peers is not allowed.

B. **Grading Scale**

<table>
<thead>
<tr>
<th>Component</th>
<th>Points</th>
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</thead>
<tbody>
<tr>
<td>Preparation Checks (10 points each)</td>
<td>100 points +</td>
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<tr>
<td>Homework 50 points each</td>
<td>400 points</td>
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<tr>
<td>Group Crisis Case Study</td>
<td>100 points</td>
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<tr>
<td>Mid-term Exam</td>
<td>150 points</td>
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<tr>
<td>Final Exam</td>
<td>150 points</td>
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<tr>
<td><strong>TOTAL</strong></td>
<td>900 points</td>
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A = 810-900; B = 720 - 809; C = 630 - 719; D = 540 - 629; F = below 540

All written assignments must reflect graduate level presentation, including APA (6th ed.) format, correct spelling, and appropriate punctuation and grammar. Point deductions will be taken for errors in writing skills and APA style.

Please talk with me if you are having problems (sooner rather than later).

IX. **Course Schedule and Policies**

A. **Tentative Course Schedule**

<table>
<thead>
<tr>
<th>Date</th>
<th>Topic &amp; Assignments Due</th>
<th>Course Reading</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sep-8</td>
<td>Introduction and Orientation to Course Healthy Human Functioning</td>
<td>Instructor material</td>
</tr>
<tr>
<td></td>
<td>Introduction to Effective Treatment Planning</td>
<td>P, O’N, &amp; T, 3-60; 235-250</td>
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<tr>
<td></td>
<td>DSM 5 and How it Should be Utilized Basics of Psychopharmacology</td>
<td>DSM 5 Sec. 1</td>
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<tr>
<td>Sep-15</td>
<td>Neurodevelopmental and Disruptive Disorders</td>
<td>DSM 31-86; 461-480</td>
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<tr>
<td></td>
<td><strong>Preparation check 1 due</strong></td>
<td>P, O’N, &amp; T 251-272</td>
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<tr>
<td></td>
<td><strong>Homework 1 due</strong></td>
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<tr>
<td>Sep-22</td>
<td>Schizophrenia Spectrum and Other Psychotic Disorders</td>
<td>DSM 5 87-122</td>
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<tr>
<td></td>
<td><strong>Preparation check 2 due</strong></td>
<td>P, O’N, &amp; T 219-230</td>
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<td></td>
<td><strong>Homework 2 due</strong></td>
<td><strong>Preparation check 2 due (Bb)</strong></td>
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<td></td>
<td><strong>Homework 2 due</strong></td>
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<tr>
<td>Date</td>
<td>Topic</td>
<td>Textbook References</td>
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<tr>
<td>Sep-29</td>
<td>Bipolar and Depressive Disorders</td>
<td>DSM 5 123-188</td>
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<td><strong>Preparation check 3 due</strong></td>
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<td><strong>Homework 3 due</strong></td>
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<td>Oct-6</td>
<td>Anxiety Disorders and Obsessive Compulsive Disorders</td>
<td>DSM 5 189-264</td>
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<td><strong>Preparation check 4 due</strong></td>
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<td></td>
<td><strong>Homework 4 due</strong></td>
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<tr>
<td>Oct-13</td>
<td>Trauma and Stressor-Related Disorders</td>
<td>DSM 5 265-290;</td>
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<td><strong>Preparation check 5 due</strong></td>
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<td><strong>Homework 5 due</strong></td>
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<tr>
<td>Oct-20</td>
<td><em>Take Home Mid-term Examination Due</em></td>
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<tr>
<td>Oct-27</td>
<td>Disaster/Crisis/Trauma-Causing Event Assessment and Intervention</td>
<td>Blackboard Material</td>
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<tr>
<td></td>
<td><strong>Preparation check 6 due</strong></td>
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<tr>
<td>Oct-27</td>
<td>Disaster/Crisis/Trauma-Causing Event A&amp;I Continued</td>
<td>Blackboard Material</td>
</tr>
<tr>
<td>Nov-3</td>
<td>Feeding and Eating Disorders; Substance Related and Addictive Disorders</td>
<td>DSM 5 329-354; 481-590</td>
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<td><strong>Preparation check 7 due</strong></td>
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<td></td>
<td><strong>Crisis Case Study Due</strong></td>
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<td>Nov-10</td>
<td>Personality Disorders</td>
<td>DSM 5 645-684; 761-781</td>
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<td><strong>Preparation check 8 due</strong></td>
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<tr>
<td>Nov-17</td>
<td>Other Conditions That May be a Focus of Clinical Attention; Conditions for Further Study</td>
<td>DSM 5 715-727, 783-806</td>
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<tr>
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<td><strong>Preparation check 9 due</strong></td>
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<tr>
<td>Oct-24</td>
<td>Dissociative Disorders; Somatic Symptom Disorders; Elimination Disorders; Sleep/Wake Disorders; Gender Dysphoria</td>
<td>DSM 5 291-328, 355-422, 451-460</td>
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<tr>
<td></td>
<td><strong>Preparation check 10 due</strong></td>
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<tr>
<td></td>
<td><strong>Homework 9 due</strong></td>
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<tr>
<td>Dec-1</td>
<td>Final Exam; Sexual Dysfunctions; Paraphilic Disorders</td>
<td>Preparation check 11 due</td>
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<td></td>
<td><em>On-Line</em></td>
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<tr>
<td>Dec-8</td>
<td><strong>Take-home final due by 11:59 p.m.</strong></td>
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</table>
B. Course Policies

Laptops
Students are encouraged to bring laptops or tablets to class if they have them as their use may shorten the amount of time needed to complete homework assignments. It is also acceptable for students to share any information developed during the face-to-face class with peers in the class by using Bb mail with attachments. This will allow those who do not have laptops or tablets available to bring to class to utilize the same information without penalty.

BlackBoard
This course uses BlackBoard for delivery of materials necessary for class. Students may contact me or class members via email. For more rapid response from me, please use my university email address listed above. However, any papers submitted must go through either BlackBoard as indicated.

Contacting Me
In addition to using BlackBoard or university email, you may also call the office or come in during office hours. Please be aware that when I supervise, I do not answer my telephone and thus, your speediest response from me is likely to be via university email. I will also be setting up individual supervision hours once the semester is underway; thus, office hours listed above may change. While I will always try to see you when you drop in, it is always a safe bet to arrange an appointment.

Electronic Device Notice
As a matter of courtesy to your classmates and the instructor, please turn off your beepers, cell phones, pagers, MP3 players, texting devices, and any other electronic except laptops/tablets. Students who, because of work, child, or other external requirements, must have pagers or cell phones turned on should place them on courtesy mode and should respond only to emergency messages. Unnecessary use of electronic devices will result in being asked to leave class. Please limit in-class use of your computer to note-taking or working on that day’s assignment.

Academic Integrity Policy
The TAMUCC (2010) Graduate Catalog and the TAMUCC Student Handbook provide definitions of academic integrity. Specifically, university students are expected to conduct themselves in a manner that reflects the highest standards of academic honesty. Academic misconduct for which a student is subject to penalty includes all forms of cheating, such as illicit possession of examinations or examination materials, plagiarism, complicity, and forgery. Students are responsible for familiarizing themselves with university academic integrity policies, procedures, and penalties. Ignorance of policy is not an acceptable defense in my class or in graduate work.

Students should make note that using materials from websites also require appropriate documentation from the specific website from which the material is obtained. Copying material from websites without appropriate attribution is a form of plagiarism and will be treated as such. Only scholarly web materials are acceptable for reference materials.
Any student who is found to have violated the academic integrity policy in this course is subject to a grade of 0 on the particular assignment and a grade of F in the course. The faculty member must file a record for each case of academic dishonesty with the Dean, who will forward a copy to the Office of Student Affairs. The student has the right to appeal the judgment or the penalty and should contact the Office of Student Affairs for guidance about how to do this. Academic misconduct may also be referred to the CNEP department for consideration. Please note: saving of any homework assignments, case studies, or exam material is considered a violation of academic integrity in this class. While I understand that you may need to download homework assignments, midterm and final exams, and case study documents to use during the course, you must delete it once this course is completed. Sharing the information with students who come after you, even though this material is regularly changed, is a form of cheating and will be dealt with as such. Losing a flash drive from which you have not deleted this information is not an excuse.

X. Textbooks
The textbooks adopted for this course are:


XI. Bibliography
The knowledge base that supports course content and procedures includes but is not limited to:


Seligman, L. & Reichenberg, L. (2012). *Selecting effective treatments: A comprehensive, systematic guide*


Play Therapy


XII. Grade Appeals

As stated in University Rule 13.02.99.C2, Student Grade Appeals, a student who believes that he or she has not been held to appropriate academic standards as outlined in the class
sylabus, equitable evaluation procedures, or appropriate grading, may appeal the final grade given in the course. The burden of proof is upon the student to demonstrate the appropriateness of the appeal. A student with a complaint about a grade is encouraged to first discuss the matter with the instructor. For complete details, including the responsibilities of the parties involved in the process and the number of days allowed for completing the steps in the process, see University Rule 13.02.99.C2, Student Grade Appeals, and University Procedure 13.02.99.C2.01, Student Grade Appeal Procedures. These documents are accessible through the University Rules Web site at http://www.tamucc.edu/provost/university_rules/index.html. For assistance and/or guidance in the grade appeal process, students may contact the Office of Student Affairs.

XIII. Disabilities Accommodations

The Americans with Disabilities Act (ADA) is a federal anti-discrimination statute that provides comprehensive civil rights protection for persons with disabilities. Among other things, this legislation requires that all students with disabilities be guaranteed a learning environment that provides for reasonable accommodation of their disabilities. If you believe you have a disability requiring an accommodation, please call or visit Disability Services at (361) 825-5816 in Driftwood 101.

If you are a returning veteran and are experiencing cognitive and/or physical access issues in the classroom or on campus, please contact the Disability Services office for assistance at (361) 825-5816.

XIV. Grading Rubrics

Please note: For all assignments, it can and will impact grades if there is plagiarism in your work. Appropriate citation and references are required for all material, whether paraphrased, summarized, or quoted. If you use direct quotations, quotation marks and page numbers must be provided using appropriate APA styling. There is one exception, which applies to this course only: When you are justifying your diagnoses and using specific criteria outlined in the DSM, you do not have to quote the material. In this course only, it will be understood that you are taking the information directly from specific pages in the DSM 5. This exception is NOT consistent with APA style, but is absolutely reasonable in this course.

Homework: Point values for each question are noted on the homework. Students are encouraged to note point values of questions. Questions with high point values should reasonably be expected to require excellent coverage of the material for full credit, including attention to all parts of a question. Homework assignments 2-9 (50 points each) are primarily case studies. Specific directions for each case study, along with point values for each element, are provided in the Homework document posted on BlackBoard. Responses should be appropriate for the client presented in the case study rather than for a diagnosis in general. Bullet or outline presentation of material is preferred where
appropriate.

**Crisis/Disaster/Trauma-Causing Events Project:** The disaster/crisis/trauma-causing event assessment and intervention case study (100 points) will be assessed based on appropriate responses to a variety of scenarios. Students will work in groups outside of class, and will present one project on the due date. Evaluation of responses will be based on ability to assess what is needed and how to respond in each scenario.

**Mid-term and Final Examination:** The mid-term exam involves providing multiple diagnoses, with justifications for case studies (150 pts.) as well as a more detailed case presentation of a treatment protocol for a client using the case study you choose from those provided. Specific questions for the protocol will include treatment interventions from a particular theoretical model as well as other information that is consistent with the model, such as medication issues, recommended additional services, and similar treatment information covered in class, on homework, and in on-line materials. For both the mid-term and final, a general CBT model is not acceptable; however, specific cognitive, behavioral, or CBT approaches may be used (e.g., reality therapy, dialectical behavior therapy). The final exam will be a case study, which you will choose from those provided to you. You will provide a diagnosis and justification and a detailed case presentation/treatment protocol, using a theoretical orientation different from that which you used for your mid-term exam. For the final examination, you will provide basic tenets of the theory chosen, the reasons you chose the theory along with expected outcomes (both to be based in literature and research), specific interventions appropriate for the theoretical approach chosen, and responses regarding medications, clinician characteristics, and prognosis. Cases will be drawn from any diagnostic category covered since the beginning of class for each exam. Detailed instructions for the Mid-term and Final Exams will be found on the documents posted in BlackBoard by mid-semester. In addition to the point structure outlined, up to 30 points may be deducted for writing style, APA 6th edition adherence, bibliography, and other writing issues. Students may lose additional points for serious citation issues within the body of the paper.