

HAWAI'I SCHOOL OF PROFESSIONAL PSYCHOLOGY AT CHAMINADE UNIVERSITY OF HONOLULU

Course Syllabus

<u>Chaminade University Honolulu</u> 3140 Waialae Avenue - Honolulu, HI 96816 <u>www.chaminade.edu</u>

Course Number: PP7045 Course Title: Psychopathology Department Name: Clinical Psychology PsyD College/School/Division Name: Behavioral Sciences Term: Fall 2019 Course Credits: 3 Class Meeting Days: Mondays Class Meeting Hours: 2:30-5:45pm Class Location:

Instructor Name: Rick Trammel, Ph.D. Email: <u>Ricky.Trammel@chaminade.edu</u> Phone: 808.739-4613 Cell: 808.295-6379 Office Location: Brogan Hall 116 Office Hours:

University Catalogue Course Description:

The concentration of the course is on the observation, description, etiology, assessment and understanding of the mild to severe range of symptomatology of personality and behavioral disorders of adulthood and childhood. Developmental and dynamic elements are considered in the context of diagnostic and therapeutic concerns. A methodology for organizing clinical data is presented. Also, the assessment, etiology, description, understanding and treatment of the more severe psychological disorders are emphasized. Included in the course are schizophrenia spectrum, anxiety, depressive, bipolar, obsessive-compulsive, substance use, neurodevelopmental and personality disorders among others. Emphasis is on recognition of the continuum of basic psychological processes in normal and severely disturbed experiences.

Additional Course Information:

This course explores the biological, sociological, and historical bases of psychology; the current social and political context of psychopathology and abnormal psychology; and the issues and challenges regarding psychopathology in contemporary society. The application of these topics to the practice of professional psychology and psychotherapy with individuals and couples is a

primary focus of this course and will be discussed particularly in regard to assessment, therapeutic planning, intervention, and outcome measurement. Maintaining clinical objectivity within the context of personal value systems will be addressed.

Course Pre-requisites: none

Instructional Contact and Credit Hours

Students can expect 15 hours of instructional engagement for every 1 semester credit hour of a course. Instructional engagement activities include lectures, presentations, discussions, groupwork, and other activities that would normally occur during class time. Instructional engagement activities may occur in a face-to-face meeting, or in the classroom.

In addition to instructional engagement, students can expect to complete 30 hours of outside work for every 1 semester credit hour of a course. Outside work includes preparing for and completing readings and assignments. Such outside work includes, but is not limited to, all research associated with completing assignments, work with others to complete a group project, participation in tutorials, labs, simulations and other electronic activities that are not a part of the instructional engagement, as well as any activities related to preparation for instructional engagement.

At least an equivalent amount of work specified in the paragraph above shall be applied for other academic activities as established by the institution, including laboratory work, internships, practica, studio work, and other academic work leading to the award of credit hours.

Marianist Values

This class represents one component of your education at Chaminade University of Honolulu. An education in the Marianist Tradition in marked by five principles and you should take every opportunity possible to reflect upon the role of these characteristics in your education and development:

- 1. Education for formation in faith
- 2. Provide an integral, quality education
- 3. Educate in family spirit
- 4. Educate for service, justice and peace
- 5. Educate for adaptation and change

Native Hawaiian Values

Education is an integral value in both Marianist and Native Hawaiian culture. Both recognize the transformative effect of a well-rounded, value-centered education on society, particularly in seeking justice for the marginalized, the forgotten, and the oppressed, always with an eye toward God (Ke Akua). This is reflected in the 'Olelo No'eau (Hawaiian proverbs) and Marianist core beliefs:

1. Educate for Formation in Faith (Mana) E ola au i ke akua ('Ōlelo No'eau 364) May I live by God

- Provide an Integral, Quality Education (Na'auao) Lawe i ka ma'alea a kū'ono'ono ('Ōlelo No'eau 1957) Acquire skill and make it deep
- 3. Educate in Family Spirit ('Ohana) 'Ike aku, 'ike mai, kōkua aku kōkua mai; pela iho la ka nohana 'ohana ('Ōlelo No'eau 1200) Recognize others, be recognized, help others, be helped; such is a family relationship
- Educate for Service, Justice and Peace (Aloha) Ka lama kū o ka no'eau ('Ōlelo No'eau 1430) Education is the standing torch of wisdom
- 5. Educate for Adaptation and Change (Aina) 'A'ohe pau ka 'ike i ka hālau ho'okahi ('Ōlelo No'eau 203) All knowledge is not taught in the same school

HSPP Aims and Competencies

The Hawai'i School of Professional Psychology at Chaminade University of Honolulu's clinical psychology doctoral program's aim is to educate and train students employing a practitionerscholar model so that they will be able to function effectively as clinical psychologists. To ensure that students are adequately prepared, the curriculum is designed to provide for the meaningful integration of psychological science, theory, and clinical practice. The clinical psychology program at the Hawai'i School of Professional Psychology is designed to emphasize the development of knowledge, skills, and attitudes essential in the training of health service psychologists who are committed to the ethical provision of quality, evidence based services to diverse populations and who are able to apply multiple theoretical perspectives to clinical issues.

The Hawai'i School of Professional Psychology at Chaminade University of Honolulu's clinical psychology doctoral program subscribes to the APA Standards of Accreditation. As such, students are expected to establish an identity in and orientation to health service psychology by acquiring the necessary discipline-specific knowledge and profession-wide competencies as follows:

- 1. Students will demonstrate knowledge of ethical and legal standards relevant to the practice of clinical psychology, including professional ethics that guide professional behavior.
- 2. Students will develop both communication and interpersonal skills, to include utilization of clear, informative, well-integrated communication, critical thinking, and effective interpersonal skills in professional interactions.
- 3. Students will demonstrate knowledge of professional values and attitudes as well as selfreflective practice and openness to supervision and feedback.
- 4. Students will demonstrate competency in individual and cultural diversity, including knowledge of theoretical models and diversity research that serve to guide the application of diversity competence.
- 5. Students will have knowledge of the history and systems of psychology as well as the basic areas in scientific psychology, including affective, biological, cognitive, developmental, psychopharmacological, and sociocultural aspects of behavior.
- 6. Students will demonstrate competency in the science of psychology, including knowledge and application of psychometrics, statistical analyses, and quantitative and qualitative research methods.

- 7. Students will demonstrate competency in psychological assessment, including the ability to administer, interpret, and integrate psychological test results and apply knowledge of strengths and psychopathology to the assessment process.
- 8. Students will demonstrate competency in clinical intervention, including case formulation, theoretical conceptualization, developing and applying evidence based treatment plans, and evaluating treatment effectiveness in work with clients.
- 9. Students will evidence knowledge of consultation models and practices, and demonstrate interprofessional and interdisciplinary skills in consultative services.
- 10. Students will evidence knowledge of supervision models and practices.

Learning Outcomes

- Students will demonstrate an understanding of the foundational information of psychopathology, abnormal psychology and the DSM 5. (Competency 5,6,8) [classes 1-14]
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- Be able to articulate, both orally and in writing, a comprehensive understanding of the historical and current array of social norms associated with psychopathology as it pertains to the DSM 5. (Competency 5,6) [class 1]
- Demonstrate both orally and in writing a comprehensive understanding of assessment and diagnostic criteria from the DSM 5. (Competency 2,6,7,8) [classes 2-14]
- Demonstrate their knowledge of and competencies in addressing the needs values and experiences of people from diverse, underserved and marginalized populations as they relate to the understanding of psychopathology. (Competency 4) [classes 1-14]
- Demonstrate in support of their life-long learning, the ability to critique, draw conclusions from, and apply the existing and evolving body of knowledge and methods in the practice and science of the study of psychopathology. (Competency 5) [classes 1-14]
- Demonstrate the ability to apply knowledge of social and personal psychological issues related to psychopathology as it applies to clinical practice. (Competency 2) [classes 1-14]
- Assess and identify presenting issues related to psychopathology and formulate an appropriate clinical response. (Competency 7,8) [classes 2-14]
- Demonstrate their understanding and the correct application of the APA Code of Ethics as it applies to themselves and to other professionals during all interaction with students, staff and faculty, and in the process of learning psychopathology by: restating, describing and explaining that information, and displaying those behaviors in class discussions, presentations, examinations, homework and scholarly paper. (Competency 1) [classes 1-14]

Diversity Component: Diversity will be addressed as a broad-based concept to include such issues as age, ethnicity, culture, family patterns, gender, physical disability, religious preference, sexual orientation, social class, and spirituality of multiple populations. Diversity factors are often critical considerations in human sexuality.

Critical Thinking Component: The faculty of HSPP at CUH believes that the enhancement of critical, reflexive thinking is integral to our mission to train practitioners with a commitment to working with diverse and marginalized populations. Culturally competent practice must be

informed not only by knowledge and skill bases, but an acknowledgment of the limits of these bases and an attunement to different voices and ways of knowing.

Ethics and Professional Behavior Component: Ethics and professional behavior are integral in the application of knowledge and skills to real world settings. During the course, specific situations or circumstances regarding human sexuality, and will be analyzed as to potential ethical implications. Additionally, classroom activities and interactions will be used in furthering the understanding of ethical principles and professional behavior within the framework of human s0exuality and sex therapy.

Required Learning Materials

- APA. (2012). Guidelines for psychological practice with lesbian, gay, bisexual clients. *The American Psychologist, 67,* 10-42.
- Brand, B., Loewenstein, R., & Speigel, D. (2014). Dispelling myths about dissociative identity disorder treatment: An empirically based approach. *Psychiatry*, 77(2), 169-189.
- Brunelle, N., Bertrand, K., Landry, M., Flores-Anranda, J., Patenande, C. & Brochu, S. (2015).
 Recovery from substance use: Drug dependent people's experiences with sources that motivate them to change. *Drugs: Education, Prevention & Policy, 22*(3), 301-307.
- Choi, H. (2018). Family Systemic approaches for borderline personality disorder in acute adult mental health care settings. *Australian & New Zealand Journal of Family Therapy, 39*(2), 155-173.
- Debrah, A., Buabeng, K., Donnir, G., & Akwo, I. (2018). A caregiver perspective of complementary and alternative medicine use among patients with schizophrenia and bipolar disorders. *International Journal of Mental Health*, 47(4), 298-310.
- Foote, B., & Orden, K. (2016). Adapting dialectical behavior therapy for the treatment of dissociative identity disorder. *American Journal of Psychotherapy*, *70*(4), 343-364.
- Harrow, M., & Jobe, T. (2013). Does long-term treatment of schizophrenia with antipsychotic medications facilitate recovery? *Schizophrenia Bulletin, 39*(5), 962-965.
- Hilbert, A., Pike, K., Goldschmidt, A. Wilfley, D. Fairburn, C., Dobrn, F., et al. (2014). Risk factors across the eating disorders. *Psychiatry Research*, 220(1-2), 500-506. Doi:http://dx.doi.org/10.1016?j.psychres.2014.05.054
- Hoffart, A., Hedley, L., Svanoe, K., & Sexton, H. (2016). Cognitive and guided mastery therapies for panic disorder. *Clinical Psychology & Psychotherapy*, 23(1), 1-13.

- Lang, J., Bliese, P., & Lang, J.W. (2011). Work gets unfair for the depressed: Cross-lagged relations between organizational justice perceptions and depressive symptoms. *Journal of Applied Psychology*, *96*(3), 602-618.
- Langhinrich-Rohling, J., Snarr, J., Smith-Slep, A., Heyman, R., & Foran, H. (2011). Risk for suicidal ideation in the US Air Force: An ecological perspective. *Journal of Clinical and Consulting Psychology*, *79*(5), 600-612.
- Link, M., Jankowski, K., Wichniak, A., Jarema, M., & Wykes, T. (2019). Effects of cognitive remediation therapy versus other interventions on cognitive functioning in schizophrenia inpatients. *Neuropsychological Rehabilitation, 29*(3), 477-488.
- Myrick, A., Green, E. (2012). Incorporating play therapy into evidence-based treatment with children affected by obsessive compulsive disorder. *International Journal of Play Therapy*, *21*(2), 74-86.
- Pagsberg, A. (2012). Schizophrenia spectrum and other psychotic disorders. *European Child Adolescent Psychiatry, 22*(Suppl I): S3-S9.
- Rennert, L, Denis, C., Peer, K., Lynch, Gelernter, J, & Kranzler, H. (2014). *DSM-5* gambling disorder: Prevalence and characteristics in a substance use disorder sample. *Experimental Clinical Psychopharmacology, 22,* 50-56.
- Takeshima, M., & Oka, T. (2015). DSM-5 defined 'mixed features' and Benazzi's mixed depression: Which is practically useful to discriminate bipolar disorder from unipolar depression in patients with depression? Psychiatry & Clinical Neurosciences, 69(2), 109-116.
- Waye, M., & Cheng, H. (2018). Genetics and epigenetics of autism: A review. *Psychiatry & Clinical Neurosciences*, 72(4), 228-244.

Required Textbook(s):

- American Psychiatric Association. (2013). Diagnostic and statistical manual of mental disorders. Fifth Edition. Washington DC: APA.
- Hooley, J., Butcher, J., Nock, M., & Mineka, S. (2016). Abnormal Psychology. (17th ed.). Boston: Allyn & Bacon.

Technology

The following technology may be required in order to complete courses in the Clinical Psychology program:

Minimum technology requirements. For PCs: at least an Intel[®] or AMD x86 processor running at 1.3 GHz or faster; 4GB of RAM, 10 GB hard drive space, 1024x576 display, and a DVD-ROM drive (video hardware acceleration is optimal); one of the following operating systems: Windows 7, Windows Server 2003 with Service Pack 2 and MSXML 6.0 (32-bit Office only), or Windows Server 2008 or later 32 or 64-bit OS. For Macs: at least an Intel processor, Mac OS X 10.5.8 or later; 1 GB of RAM, 10 GB free hard drive space, 1280x800 display, and a DVD-ROM drive.

Software requirements. Current Norton Antivirus (Version 10.2 or higher); Microsoft Office Professional (Version 2010 for PC and 2011 for Mac) containing Powerpoint and Word; Acrobat (full version).

Internet requirements. 56K or faster Internet or broadband connection; web browser: Microsoft Internet Explorer, Mozilla Firefox, or Google Chrome for PC users, Apple Safari, Mozilla Firefox, or Google Chrome for Mac users.

Course Requirements/Methods of Evaluation

- 1. Criteria for Class Participation/Attendance: (15 points). Class time will be spent in lectures, presentations, roles plays and exams, participation and preparation for all in class activities is required.
- 2. Midterm Exam: 100 points. The midterm will be in class multiple choice, true/false, fill in the blank and will cover the material from the first half of the course from both texts.
- **3. Final Exam**: 100 points. The final exam will follow the format of the midterm exam and will include material from the readings from the second half of the course.
- 4. Book Review Paper: 35 points: each student will select a biography or autobiography of an individual dealing with a mental disorder and write a 5-6 page book review. Provide an appropriate DSM 5 diagnosis of the main character or characters. In addition, include a minimum of 5 references which can include the DSM 5, the Butcher et al. text and other relevant research. The paper should be APA Style and include a cover page and 5-6 pages of text with a reference page. The book may be, for example, a biography or autobiography of a child, adolescent or adult who has or had struggled with a psychological disorder or mental illness. Please have your book selection approved by the instructor. The paper should be a critical analysis of the book, the person(s), and his or her issues that would pertain to our course content.

Note: All papers should be submitted electronically to the instructor on the day it is due. Late papers may have points deduced at the discretion of the instructor. In addition, on the day the paper is due, each student will give a brief oral presentation of his or her book selection.

5. Journal Article Presentation: 25 points: each student will research and present a current research journal article on the topic of the class discussion/lecture of that day. The student will present the major points of the article and how it applies to the

DSM 5 and psychopathology. Presentation should consist of as many powerpoint slides as necessary to summarize the article along with any appropriate videos from the internet to illustrate the topic/disorder being presented. It is recommended that the powerpoints be copied for each member of the class and the instructor. Presentations length is from 20-30 minutes or however much time you deem necessary to lead the class in a discussion of the article.

6. Film/Movie Presentation: 25 points: each student will present an oral overview of a fictional film or documentary on a DSM 5 diagnosis of their choice.

Grading:	
Method	
Participation/Attendance	15
Midterm	100
Final exam	100
Book Review	
Film Review	
Research Presentation	20
	275 total

• Final Grades will be calculated based on a percentage of points.

Grading Scale (final scores > .5 will be rounded up)

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

Course Policies

It is the mission of Chaminade University Hawaii to support diversity in all its many forms. As therapists-in-training, it is important that we develop an attitude of openness and respect for differing worldviews and life experiences. To that end, promotion of a safe classroom environment is everyone's responsibility.

Pagers, cellular phones and other electronic devices must be on "silent" mode while in class. No audio taping in the classroom is allowed without the express permission of each and every participant, including the instructor. It is expected that students will adhere to the accepted code of ethics of the profession and will treat as confidential all information of a personal nature that may be disclosed during classroom discussions, activities and assignments. Students are encouraged to bring laptops or tablets to class as the instructor will assign online activities and readings that will require the use of a laptop or tablet. Laptops and tablets should not be misused, such as checking distracting websites. Use your best judgment and respect your classmates and instructor.

Late Work Policy

Late work will be accepted with the discretion of the instructor.

Grades of "Incomplete"

Incomplete grades must be requested 2 weeks prior to the end of the term.

Writing Policy

The faculty at Chaminade University is dedicated to providing a learning environment that supports scholarly and ethical writing, free from academic dishonesty and plagiarism. This includes the proper and appropriate referencing of all sources. You may be asked to submit your course assignments through "Turnitin," (www.turnitin.com), an online resource established to help educators develop writing/research skills and detect potential cases of academic dishonesty. Turnitin compares submitted papers to billions of pages of content and provides a comparison report to your instructor. This comparison detects papers that share common information and duplicative language.

Instructor and Student Communication

Questions for this course can be emailed to the instructor at [email address]. Online, in-person and phone conferences can be arranged. Response time will take place up to 2 days.

Disability Access

If you need individual accommodations to meet course outcomes because of a documented disability, please speak with me to discuss your needs as soon as possible so that we can ensure your full participation in class and fair assessment of your work. Students with special needs who meet criteria for the Americans with Disabilities Act (ADA) provisions must provide written documentation of the need for accommodations from the Counseling Center by the end of week three of the class, in order for instructors to plan accordingly. If a student would like to determine if they meet the criteria for accommodations, they should contact the Counseling Center at (808) 735-4845 for further information.

Title IX Compliance

Chaminade University of Honolulu recognizes the inherent dignity of all individuals and promotes respect for all people. Sexual misconduct, physical and/or psychological abuse will NOT be tolerated at CUH. If you have been the victim of sexual misconduct, physical and/or psychological abuse, we encourage you to report this matter promptly. As a faculty member, I am interested in promoting a safe and healthy environment, and should I learn of any sexual misconduct, physical and/or psychological abuse, I must report the matter to the Title IX Coordinator. If you or someone you know has been harassed or assaulted, you can find the appropriate resources by visiting Campus Ministry, the Dean of Students Office, the Counseling Center, or the Office for Compliance and Personnel Services.

Attendance Policy

The following attendance policy is from the 2018-2019 Academic Catalog (p. 57-58). Faculty members should also check with their divisions for division-specific guidelines.

Students are expected to attend regularly all courses for which they are registered. Student should notify their instructors when illness or other extenuating circumstances prevents them from attending class and make arrangements to complete missed assignments. Notification may be done by emailing the instructor's Chaminade email address, calling the instructor's campus extension, or by leaving a message with the instructor's division office. It is the instructor's prerogative to modify deadlines of course requirements accordingly. Any student who stops attending a course without officially withdrawing may receive a failing grade. Unexcused absences equivalent to more than a week of classes may lead to a grade reduction for the course. Any unexcused absence of two consecutive weeks or more may result in being withdrawn from the course by the instructor, although the instructor is not required to withdraw students in that scenario. Repeated absences put students at risk of failing grades.

Students with disabilities who have obtained accommodations from the Chaminade University of Honolulu ADA Coordinator may be considered for an exception when the accommodation does not materially alter the attainment of the learning outcomes. Federal regulations require continued attendance for continuing payment of financial aid. When illness or personal reasons necessitate continued absence, the student should communicate first with the instructor to review the options. Anyone who stops attending a course without official withdrawal may receive a failing grade or be withdrawn by the instructor at the instructor's discretion.

Academic Conduct Policy

From the 2018-2019 Graduate Academic Catalog (p. 21):

Any community must have a set of rules and standards of conduct by which it operates. At Chaminade, these standards are outlined so as to reflect both the Catholic, Marianist values of the institution and to honor and respect students as responsible adults. All alleged violations of the community standards are handled through an established student conduct process, outlined in the Student Handbook, and operated within the guidelines set to honor both students' rights and campus values.

Students should conduct themselves in a manner that reflects the ideals of the University. This includes knowing and respecting the intent of rules, regulations, and/or policies presented in the Student Handbook, and realizing that students are subject to the University's jurisdiction from the time of their admission until their enrollment has been formally terminated. Please refer to the Student Handbook for more details. A copy of the Student Handbook is available on the Chaminade website.

For further information, please refer to the Student Handbook: <u>https://studentaffairs.chaminade.edu/wp-content/uploads/sites/28/2018-19-NEW-STUDENT-HANDBOOK.pdf</u>

All sources must be documented through normal scholarly references/citations and all work must be submitted using the *Publication Manual of the American Psychological Association*, 6th *Edition* (2010). Washington DC: American Psychological Association (APA) format. Please refer

to Appendix A in the *Publication Manual of the American Psychological Association, 6*th Edition for thesis and paper format.

Academic Dishonesty/Plagiarism: In an effort to foster a spirit of honesty and integrity during the learning process, Chaminade University requires that the submission of all course assignments represent the original work produced by that student. All sources must be documented through normal scholarly references/citations and all work must be submitted using the *Publication Manual of the American Psychological Association, 5th Edition (2001).* Washington DC: American Psychological Association (APA) format. Please refer to Appendix A in the *Publication Manual of the American Psychological Association, 5th Edition* for thesis and paper format. Students are encouraged to purchase this manual (required in some courses) and become familiar with its content as well as consult the Argosy University catalog for further information regarding academic dishonesty and plagiarism.

Class Schedule

Date	Topics and Assignments
August 26 Class 1	Orientation to Course Introductions/Overview of Course Film: Madness
	Butcher et al. Chapter 1 Abnormal Psychology: An Overview Introduction to the <i>DSM 5</i>
	Reading (for following week): Butcher et al. Ch. 2-3; DSM 5 xiii-25
September 9 Class 2	Butcher et al. Ch. 2 - Historical and Contemporary Views; DSM 5 xiii-25 Butcher et al. Ch. 3 Causal Factors and Clinical Assessment
	Journal Article Presentation
	APA. (2012). Guidelines for psychological practice with lesbian, gay, bisexual clients. <i>The American Psychologist, 67,</i> 10-42
	Reading (for following week): Butcher et al. Ch. 15; DSM 5 Neurodevelopmental Disorders pp. 31-87

September 16 Class 3	Butcher et al. Ch. 15 Disorders of Childhood and Adolescence DSM 5 Neurodevelopmental Disorders pp. 31-87
	Journal Article Presentation Myrick, A., Green, E. (2012). Incorporating play therapy into evidence- based treatment with children affected by obsessive compulsive disorder. International Journal of Play Therapy, 21(2), 74-86.
	Waye, M., & Cheng, H. (2018). Genetics and epigenetics of autism: A review. <i>Psychiatry & Clinical Neurosciences, 72</i> (4), 228-244.
	Case Studies (bring your DSM 5 to class)
	Reading (for following week): DSM 5 pp. 461-480; Butcher et al. Ch. 15
September 23 Class 4	Disruptive, Impulse Control & Conduct Disorders DSM 5 pp. 461-480; Butcher et al. Ch. 15
	Journal Article Presentation Debrah, A., Buabeng, K., Donnir, G., & Akwo, I. (2018). A caregiver perspective of complementary and alternative medicine use among patients with schizophrenia and bipolar disorders. <i>International Journal</i> <i>of Mental Health, 47</i> (4), 298-310.
	Case Studies (bring your DSM 5 to class)
	Reading (for following week): Butcher et al. Ch. 13; DSM 5 pp. 87-122
September 30 Class 5	Butcher et al. Ch. 13 Schizophrenia Spectrum & Other Psychotic Disorders DSM 5 pp. 87-122
	Journal Article Presentation Harrow, M., & Jobe, T. (2013). Does long-term treatment of schizophrenia with antipsychotic medications facilitate recovery? <i>Schizophrenia Bulletin, 39</i> (5), 962-965.
	Link, M., Jankowski, K., Wichniak, A., Jarema, M., & Wykes, T. (2019). Effects of cognitive remediation therapy versus other interventions on cognitive functioning in schizophrenia inpatients. <i>Neuropsychological</i> <i>Rehabilitation, 29</i> (3), 477-488.
	Pagsberg, A. (2012). Schizophrenia spectrum and other psychotic disorders. <i>European Child Adolescent Psychiatry, 22</i> (Suppl I): S3-S9.

	Case Studies (bring your DSM 5 to class)	
	Reading (for following week): Butcher et al. Ch. 7 – DSM 5 pp. 123-154	
October 7 Class 6	Bipolar and Related Disorders - Butcher et al. Ch. 7 – DSM 5 pp. 123-154 Depressive Disorders - Butcher et al. Ch.7 – DSM 5 pp. 155-188	
	Journal Article Presentation Lang, J., Bliese, P., & Lang, J.W. (2011). Work gets unfair for the depressed: Cross-lagged relations between organizational justice perceptions and depressive symptoms. <i>Journal of Applied Psychology</i> , <i>96</i> (3), 602-618.	
	Langhinrich-Rohling, J., Snarr, J., Smith-Slep, A., Heyman, R., & Foran, H. (2011). Risk for suicidal ideation in the US Air Force: An ecological perspective. <i>Journal of Clinical and Consulting Psychology, 79</i> (5), 600-612.	
	Takeshima, M., & Oka, T. (2015). <i>DSM-5</i> defined 'mixed features' and Benazzi's mixed depression: Which is practically useful to discriminate bipolar disorder from unipolar depression in patients with depression? <i>Psychiatry & Clinical Neurosciences, 69</i> (2), 109-116.	
	Case Studies (bring your DSM 5 to class)	
October 14 Class 7	r 14 Midterm Exam	
	Reading (for following week): DSM 5 pp. 235-264 - Butcher et al. Ch. 6	
October 21 Class 8	Anxiety Disorders; Obsessive-Compulsive Disorders - Butcher et al. Ch. 6 DSM 5 pp. 235-264	
	Journal Article Presentation Hoffart, A., Hedley, L., Svanoe, K., & Sexton, H. (2016). Cognitive and guided mastery therapies for panic disorder. <i>Clinical Psychology &</i> <i>Psychotherapy, 23</i> (1), 1-13.	
	Case Studies (bring your DSM 5 to class)	
	Reading (for following week): DSM 5 pp. 291-328 – Butcher et al. Ch. 8	
October 28	Constitution Constants & Disconsisting Disconsister	
Class 9	Somatic Symptom & Dissociative Disorders DSM 5 pp. 291-328 – Butcher et al. Ch. 8	

<i>y, 70</i> (4), 343-364.
ewenstein, R., & Speigel, D. (2014). Dispelling myths about lentity disorder treatment: An empirically based approach. 7(2), 169-189.
bring your DSM 5 to class)
f ollowing week): DSM 5 pp. 329-360 – Butcher et al. Ch. 9
ing Disorders – Elimination Disorders 9-360 – Butcher et al. Ch. 9
Paper Due
e Presentation ke, K., Goldschmidt, A. Wilfley, D. Fairburn, C., Dobrn, F., et k factors across the eating disorders. <i>Psychiatry Research,</i> -506. Doi:http://dx.doi.org/10.1016?j.psychres.2014.05.054
bring your DSM 5 to class)
following week): DSM 5 pp. 645-684; 591-644 Butcher et al.
 isorders and Other Mental Disorders 5-684 – Butcher et al. Ch. 10 ve Disorder Butcher et al. Ch. 14 DSM 5 591-644 e Presentation B). Family Systemic approaches for borderline personality ute adult mental health care settings. <i>Australian & New bal of Family Therapy, 39</i>(2), 155-173. (bring your DSM 5 to class) following week): Butcher et al. Ch. 12; DSM 5 pp. 423-460;

November 18 Class 12	Sexual Dysfunctions – Gender Dysphoria – Paraphilic Disorders DSM 5 pp. 423-460; 685-706 – Butcher et al. Ch. 12
	Journal Article Presentation Case Studies (bring your DSM 5 to class)
	Reading (for following week): DSM 5 pp. 481-590; 361-422 Butcher et al. Ch. 11
November 25 Class 13	Substance Use Disorder/Addictive Disorders Sleep-Wake Disorders DSM 5 pp. 361-422 ;481-590 – Butcher et al. Ch. 11
	Journal Article Presentation Brunelle, N., Bertrand, K., Landry, M., Flores-Anranda, J., Patenande, C. & Brochu, S. (2015). Recovery from substance use: Drug dependent people's experiences with sources that motivate them to change. <i>Drugs:</i> <i>Education, Prevention & Policy, 22</i> (3), 301-307. Rennert, L, Denis, C., Peer, K., Lynch, Gelernter, J, & Kranzler, H. (2014). <i>DSM-5</i> gambling disorder: Prevalence and characteristics in a substance use disorder sample. <i>Experimental Clinical Psychopharmacology, 22</i> , 50-
	56. Case Studies (bring your DSM 5 to class)
December 2 Class 14	Film/Video Discussion Case Studies (bring your DSM 5 to class)
	Journal Article Presentation
December 9 Class 15	Final Exam