PSY519 Psychopathology

Reformed Theological Seminary–Orlando
Monday, 9:00 a.m. – 12:00 p.m., 3 hours
Fall Semester, 2005
Instructor: Scott Coupland, Ph.D.
Office Hours: By appointment
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Email: scoupland@rts.edu

PURPOSE
The purpose of this course is to introduce you to the study of abnormal behavior based mainly on a psychological approach and nomenclature defined by the DSM-IV-TR. We will be exploring an integrated and multidimensional perspective of maladaptive behavior patterns and their current treatment modes. It is hoped each student will discover a clearer perspective on the problems of definition and classification of abnormal behaviors. In addition, you are encouraged to examine the relationship of sin and psychopathology based on a Christian worldview.

OBJECTIVES
At the completion of this course, students should demonstrate the following competencies:
1. Understand and articulate the accepted nomenclature of psychological problems and disorders as conceptualized by the DSM-IV-TR.
2. Identify various ways of obtaining information necessary to make diagnoses.
3. Describe the process one uses to make differential diagnoses.
4. Use the DSM-IV-TR to make accurate multi-axial diagnoses, either from written clinical summaries, videotape interviews, or real-life interviews.
5. Understand the multiple causes of psychopathology and discern the appropriate treatment recommendations.
6. Discuss some of the concerns people have about the use of psychiatric diagnoses and medications, and some possible responses to those concerns.
7. Consider the role of the church and how it is or is not addressing mental health issues.
8. Exemplify a commitment to the reality of a Christian worldview in discussing the relationship of sin and psychopathology.
9. Know principles and guidelines for conducting an intake interview, a mental status evaluation, a biopsychosocial history, a mental health history, and a psychological assessment for treatment planning and caseload management.
10. Articulate a personal understanding of abnormal behavior based on a Christian worldview.
11. Understand emotional and psychological suffering with compassion, spiritual maturity, and familiarity with the current scientific evidence.
12. Know the basic classifications, indications, and contraindications of commonly prescribed psychopharmacological medications so that appropriate referrals can be made for medication evaluations, and identifying effects and side effects of such medications.

LEARNING FORMAT
Lecture, weekly reading, videotaped interviews, movie clips, case study review, and class discussion.
REQUIRED TEXTS

RECOMMENDED READING

COURSE REQUIREMENTS
1. Clinical Assessment using the DSM-IV-TR: Write a five to six page assessment using the format below. Use this outline for your write up. Students will view a videotaped client interview and review the client’s counseling intake form to complete this assignment. This videotape and intake form will be made available by the instructor. The videotape must be returned to the instructor in order for you to receive a grade for this assignment. Students will complete this assignment with another student in this class.

   1. **Identifying information**
      a. Name
      b. Age
      c. Marital status
      d. Ethnicity/cultural background
      e. Gender
      f. Education
      g. Vocation/vocational status
      h. Religion
      i. Family composition
      j. Place and nature of residence and cohabitants
   2. **Presenting problem(s)**
      a. Chief complaints/problems as the client presents them.
      b. Symptoms
      c. Why did the person tell you they came in for help now?
      d. What does the person believe he/she needs at this time?
      e. Source of referral and the reason for the referral.
   3. **History of presenting problem(s)**
      a. Onset (When did the problem(s) begin?)
      b. Intensity (How severe is the problem(s)?)
      c. Course (Describe the progression (ups and downs) of the problem(s)).
      d. What makes the problem(s) better or worse (alleviating and aggravating factors)?
      e. Factors temporally associated with presenting problem (medical problems, socioeconomic problems, problems with interpersonal relationships, school or work situation)
4. **Suicidality/homicidality and history**
   a. Current level
   b. Past history
5. **Alcohol and/or drug abuse or use and history**
   a. Current use/abuse of drugs and alcohol-type, frequency, severity
   b. Past history of use/abuse
6. **Behavior**
   a. Appearance (e.g., hygiene and self-care, appropriateness of dress, obvious physical stigmata).
   b. Social functioning (e.g., eye contact, willingness to respond to questions)
   c. Posture (e.g., slumped, rigid, tense, legs and arms crossed).
   d. Behavioral evidence of emotion (e.g., tremulousness, nail biting, recurrent laughter, perspiration, crying, clenched fist, turned-down mouth, wrinkled brow).
   e. General body movements/psychomotor activity (e.g., atypical, peculiar, restless, fidgety, agitated, retarded, gestures, tics).
   f. Client’s manner of relating to counselor (e.g., cooperativeness, domineering, overly compliant, provocative, suspicious, placating, seductive).
7. **Speech**
   a. Rate (e.g., normal, increased, decreased).
   b. Volume (e.g., normal, loud, low volume).
   c. Quality (e.g., normal, stuttering, slurring, stammer).
   d. Inflection (e.g., normal, monotonous, exaggerated).
8. **Mood**—predominant mood; a pervasive and sustained emotion that colors the person’s perception of the world; how they feel most days. How does person say he or she feels?
   a. Rate the client on a 7 point mood scale—severely depressed, moderately depressed, mildly depressed, euthymic, mildly elated, moderately elated, severely elated.
   b. Add other words that may describe the client’s mood, if applicable (e.g., stable, changeable, euphoric, swings, irritable, optimistic, pessimistic, anxious, empty, guilty, futile, apathetic, sad, depressed, angry, anhedonia.)
9. **Affect**—an immediately expressed and observed emotion that normally changes through an interview; how they feel at a given moment. This is the counselor’s evaluation.
   a. Range—the extent to which both emotional highs and lows appear in the interview (e.g., normal, broad, constricted, blunted, flat).
   b. Intensity of affect—the amplitude of emotional expression (e.g., normal, increased, decreased).
   c. Lability of affect—evidenced by a rapid, extreme, brief change of emotion followed by a quick return to the previous level (e.g., stable, labile).
   d. Congruence of emotion and thought content (e.g., “is” or “is not” appropriate to thought content).
10. **Insight**—client’s understand and realization of the significance of his/her symptoms and of the situation in which he/she finds himself (e.g., full, partial, none).
11. **Prominent defense style(s)** (e.g., humor, dissociation, denial, projection, rationalization, apathetic withdrawal, passive aggression).
12. **Current level of functioning**
   a. Support systems
   b. Spiritual life
   c. Social life
d. Health
e. Finances
f. Leisure
g. School/Vocational
h. Self-concept

13. Psychosocial history
   a. Social/family/marital
   b. Sexual
   c. Vocational
   d. Spiritual
e. Academic

14. Previous counseling/psychiatric history
   a. Clients counseling/psychiatric or treatment program experiences. Include treatment dates and major issue(s) addressed.
   b. Family history of treatment or hospitalization for substance abuse, mental health issues, or psychiatric conditions
   c. History of family or friends attempting or committing suicide?
   d. Past or present psychiatric medications? Compliant with medication regimen?

15. Summary and Integration of Findings—Using the case history to summarize your findings so as to formulate a diagnostic impression of the client. Clearly justify your Axis I and Axis II diagnoses so that another clinician can judge whether to agree with you (more often, how to make sense of the picture the client presents at a later date with what they have said about their history).

16. Multiaxial diagnosis—Your diagnosis should be based on the multiaxial system of DSM-IV-TR and each of the five axes should be addressed in this section of your report. Provide a diagnostic code for each Axis I and Axis II diagnosis.

**Due December 7, 2005 in Scott Coupland’s mailbox by 11:00 a.m.**

2. Take Home Exams.
   There will be two (2) take home mid-term exams plus a take home final. Each exam will cover the assigned readings and class lectures, and will be cumulative. You are free to use your lecture notes, the DSM-IV-TR, and any other written resources you deem helpful. However, this is an **individual** project—you may not consult with any other person. The exams will consist of several brief case histories from which you will make appropriate DSM-IV-TR multiaxial diagnoses (answers will be in a multiple choice format).

3. Quizzes
   There will be 8 random quizzes throughout the semester. The quizzes will be based on the required reading for the lecture topic being covered in class that day. The quizzes will consist of 5 multiple choice questions, and each quiz is worth 10 points. The lowest 2 quiz grades will be dropped. The quizzes will be given during the first 10 minutes of class. There is no make up permitted for missed quizzes.
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<thead>
<tr>
<th>Week</th>
<th>Date</th>
<th>Topic</th>
<th>Reading Assignment</th>
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<tbody>
<tr>
<td>1</td>
<td>8/29</td>
<td>Introduction to Abnormal Behavior</td>
<td>Y., B., &amp; M., Ch. 1-4 &lt;br&gt;Introduction to the DSM-IV-TR &lt;br&gt;DSM IV pp. xxiii-xxxvii, 1-37, 743&lt;br&gt;D. &amp; B., Ch. 1, pp. 1-7; Ch. 2; Ch. 3, pp. 68-89</td>
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<td>2</td>
<td>9/5</td>
<td>No class, Labor Day</td>
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<td>3</td>
<td>9/12</td>
<td>Mood Disorders</td>
<td>Y., B., &amp; M., Ch. 6 &lt;br&gt;DSM IV pp. 345-428 &lt;br&gt;R., Ch. 5 &lt;br&gt;O., N., D., Ch. 7, 8 &lt;br&gt;D. &amp; B., Ch. 6, pp. 194-232</td>
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<td>4</td>
<td>9/19</td>
<td>Suicide, Anxiety Disorders</td>
<td>Y., B., &amp; M., Ch. 5 &lt;br&gt;DSM IV pp. 429-484 &lt;br&gt;R., pp. 155-159, 170-175 &lt;br&gt;O., N., D., Ch. 2, 4 &lt;br&gt;D. &amp; B., Ch. 6, pp. 232-239; Ch. 4</td>
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<td>5</td>
<td>9/26</td>
<td>Adjustment Disorders, and Post-Traumatic Stress Disorder</td>
<td>Y., B., &amp; M., Ch. 5 &lt;br&gt;DSM IV pp. 679-683, 463-472, 731-736 &lt;br&gt;R., pp. 165-170 &lt;br&gt;O., N., D., Ch. 1, 3 &lt;br&gt;D. &amp; B., Ch. 4</td>
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<td><strong>Take home midterm 1 distributed</strong></td>
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<td>6</td>
<td>10/3</td>
<td>Somatoform and Dissociative Disorders</td>
<td>Y., B., &amp; M., Ch. 8 &lt;br&gt;DSM IV pp. 485-511, 519-533 &lt;br&gt;O., N., D., Ch. 6 &lt;br&gt;D. &amp; B., Ch. 5</td>
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<td><strong>Take home midterm 1 due at beginning of class</strong></td>
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<td>7</td>
<td>10/10</td>
<td>No class, reading week</td>
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8  10/17  Eating and Sleeping Disorders
   Y., B., & M., Ch. 8
   *DSM IV* pp. 583-595
   R., pp. 252-267
   O., N., D., Ch. 16, 17
   D. & B., Ch. 8

9  10/24  Sexual and Gender Identity Disorders
   Y., B., & M., Ch. 11
   *DSM IV* pp. 535-582
   O., N., D., Ch. 13, 14, 15
   D. & B., Ch. 9

10 10/31  Schizophrenia and Psychotic Disorders
    Y., B., & M., Ch. 9
    *DSM IV* pp. 297-343
    R., Ch. 4
    O., N., D., Ch. 10, 11
    D. & B., Ch. 12

11  11/7  Personality Disorders
    Y., B., & M., Ch. 10
    *DSM IV* pp. 685-729
    R., pp. 177-200
    O., N., D., Ch. 18, 20
    D. & B., Ch. 11

12  11/14 Personality Disorders
    Y., B., & M., Ch. 10
    *DSM IV* pp. 685-729
    R., pp. 200-221
    O., N., D., Ch. 19
    D. & B., Ch. 11

    **Take home midterm 2 distributed**

13  11/21  Disorders of Childhood and Adolescence
    Y., B., & M., Ch. 12
    *DSM IV* pp. 39-134
    R., pp. 230-252
    O., N., D., Ch. 21, 22, 23
    D. & B., Ch. 13

    **Take home midterm 2 due at beginning of class**

14  11/28 Substance Abuse and Other Addictive Disorders
    Y., B., & M., Ch. 7
    *DSM IV* pp. 191-295
    R., Ch. 3
    O., N., D., Ch. 12
    D. & B., Ch. 10

15  12/5  Psychopharmacology for Counselors
    D. & B., pp. 41-50

    **Take home final exam distributed**
Take home final exam due December 13, 2003 in the Scott Coupland’s mailbox by 5 pm.

GRADING SCALE
Listed below are the assignments that will determine your final course grade.

Clinical Assessment 100 points
3 Exams (at 100 points each) 340 points
Quizzes (6 at 10 points each) 60 points
Total Points 400 points

A = 386-400  B- = 344-351  D+ = 300-311
A- = 376-385  C+ = 332-343  D = 288-299
B+ = 464-375  C = 320-331  D- = 280-287
B = 352-463  C- = 312-319  F = 279 points and below

ACADEMIC STANDARDS
If you should miss a class, you are expected to contact another student regarding the information covered.

All assignments will be due on the date specified in the syllabus. For each day a take home exam or the clinical assessment paper is late, 10 points will be deducted from the score of the assignment.

Plagiarism/cheating will result in the failure of the course.

Writing format for the clinical assessment: Include an APA style cover page. Include a header and page number on each page. Use the outline provided in this syllabus for your write up.