

**SAN DIEGO STATE UNIVERSITY SCHOOL OF SOCIAL WORK  
SUPPLEMENTAL COURSE MATERIALS PACKET**

**Social Work 720: Critical Perspectives in the Assessment  
and Diagnosis of Mental Disorders**

Spring Semester 2009: Thursday 8:30 to 11:10 a.m.

Section 1 HH 122

Section 2 HH 218

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**Office Hours:**

Mondays from 11:00 to 12:00

Thursdays from 11:30-12:30

Other times by appointment

**I. Description of the Course**

This course is designed for social work students who want to develop their clinical skills and increase their knowledge of psychopathology. Social workers provide services in a variety of settings in which clients with an array of problems may present. The ability to competently assess and diagnose a client's mental disorder is an important component in the social worker's skill sets. Accurately diagnosing a client's a mental illness can positively change the course of his life, while overlooking a diagnosis or making an incorrect diagnosis, may create insurmountable challenges for the client. Additionally, assigning an inaccurate diagnosis may also put the practitioner and agency at risk.

The overall goal of the course is to increase the student's knowledge of psychopathology and to increase the student's ability to competently assess and diagnose mental disorders. Emphasis will be placed on increasing the student's ability to accurately diagnose a range of mental disorders according to the DSM-IV-TR criteria. Not all disorders listed in the DSM-IV-TR will be covered in the course. The primary focus will be on mental disorders of adults. However, disorders primarily related to children and adolescents will be briefly addressed. The contributions of the environment, genetics, and the client's history to the development of mental disorders will also be part of the curriculum.

Therapeutic interventions will not be a major focus of the course. However, when they do exist, evidence-based practices for each diagnosis will be explored. The use of psychotropic medications solely or in conjunction with therapeutic interventions will also be discussed.

## **II. Objectives**

### **Ultimate Learning Objectives**

Students will be able to accurately assess and diagnose mental disorders within the major categories of the DSM-IV-TR as evidenced by their ability to use information from case studies presented in class and encountered in their field placements. In addition, students will demonstrate an understanding of the impact of genetics and the environment on the development of mental disorders. Students will have an awareness of how their own histories and experiences impact their perceptions of clients with mental disorders. Students will be able to discuss evidence-based treatment methodologies for specific diagnoses.

### **Knowledge and comprehension**

1. Identify the general diagnostic categories delineated in the DSM-IV.
2. Identify symptoms for each specific diagnosis. Describe the underlying dynamics of each of the major DSM-IV categories of mental disorders.
3. Demonstrate an understanding of the multi-axial systems to achieve a complete diagnosis.
4. Demonstrate an understanding of the contribution of the client's environment in the development of mental disorders.
5. Illustrate an understanding of biological predispositions to specific mental disorders.
6. Illustrate knowledge of appropriate treatment interventions for diagnoses listed in the DSM IV –TR.

### **Skills**

1. Assign accurate diagnoses to clients described in case history exercises and encountered in field placements.
2. Demonstrate through role play and written assignments the ability to gather assessment information through clinical interviews.
3. Identify ethical-legal issues and dilemmas confronting social workers in the diagnosing of mental disorders.
4. Demonstrate through role play and written assignments the ability to provide psychoeducation to clients and families on specific mental disorders.

### **Values**

1. Develop and demonstrate a clear understanding of the role of social work in assessing and diagnosing mental disorders.
2. Demonstrate sensitivity to gender, cultural and ethnic issues, and other areas of diversity in the diagnosing of mental disorders through case examples and actual client situations.
3. Identify and resolve countertransference issues in the diagnosing of mental disorders.
4. Demonstrate through class discussions and assignments the benefits in using evidence-based practices in the treatment of mental disorders.

### III. Outcomes

#### By the end of the semester students will:

1. Demonstrate through role plays and written assignments the ability to gather appropriate assessment information through clinical interviews.
2. Demonstrate through participation in role plays, response to case studies, and written examinations the ability to make accurate diagnoses using the multiaxial classification system.
3. Demonstrate through written assignments and role plays a comprehensive understanding of the genetic and environmental factors that contribute to the development of a mental disorder.
4. Demonstrate through role play, assignments, and discussions the ability to provide psychoeducation to clients and their families.
5. Demonstrate through participation in role plays and written assignments basic knowledge of appropriate therapeutic and pharmacological interventions for mental disorders.
6. Demonstrate awareness of and ability to manage countertransference issues through participation in class discussions and response to written assignments.

### IV. Required Readings

#### Required Texts:

- American Psychiatric Association. (2000). *DSM-IV-Text Revision* (4<sup>th</sup> ed). Washington, DC: Author.
- Gray, S.W., & Zide, M.R. (2008). *Psychopathology: A Competency Based Assessment Model for Social Workers* (2<sup>nd</sup> ed.). Belmont, CA: Thomson/Brooks/Cole.
- Oltmanns, T.F., Martin, M.T., Neale, J.M., & Davison, G.C. (2007). *Case Studies in Abnormal Psychology* (7<sup>th</sup> ed). Danvers, MA: John Wiley & Sons, Inc.

#### Additional Readings on Electronic Reserve (ECR):

Additional readings may be assigned during the semester. They will be posted on ECR or links to the library database will e provided.

#### Materials available on the Internet:

- DSM IV –TR: <http://www.dsmivtr.org/>
- National Institute of Mental Health: <http://www.nimh.nih.gov/>
- Tool kits to support recovery:  
<http://mentalhealth.samhsa.gov/cmhs/CommunitySupport/toolkits/about.asp>
- National Registry of Evidence-based Programs and Practices (SAMHSA):  
<http://www.nrepp.samhsa.gov/>

## Required Assignments

- Individual client written assignment due **Week 6, February 26, 2009**. (See Appendix A.)
- *Midterm Exam*  
A multiple-choice Midterm Exam will be given on **Week 8, March 12, 2009**. The purpose of the Exam is to determine if students have mastered material from the required readings and class lectures to achieve the knowledge, values, and skills objectives of the course. The Exam will cover the major categories of the DSM-IV-TR with an emphasis on differential diagnoses. Students are expected to study all assigned readings, whether or not they are discussed in class. Many of the questions on the Exam will be clinical case vignettes similar in format to the type of questions that students will encounter in the Comprehensive Examination. Students are to bring an 882-ES scantron card and a Number 2 lead pencil to the Exam. Students will receive a grade given by the scantron machine. It is strongly recommended that students bring at least two scantron cards, since scantron machines sometimes miscalculate scores if erase marks are present.
- Group Assignment due **Weeks 14, 15 & 16, April 16, April 23 & April 30, 2009**. See Appendix B.

## VI. Grading

Grades will be administered in accordance with the policies set forth in the Graduate Bulletin and will follow the School of Social Work Grading Policy documented in the Graduate Student Handbook. (See the School of Social Work website for a copy of the Graduate Student Handbook: [http://www-rohan.sdsu.edu/%7Esocwork/grad\\_handbook/](http://www-rohan.sdsu.edu/%7Esocwork/grad_handbook/) ).

The following grading scale will be utilized:

<b>A</b>	<b>=</b>	<b>100-94.5</b>	<b>C</b>	<b>=</b>	<b>76-73</b>
<b>A-</b>	<b>=</b>	<b>94.4-90</b>	<b>C-</b>	<b>=</b>	<b>72-70</b>
<b>B+</b>	<b>=</b>	<b>89-87</b>	<b>D+</b>	<b>=</b>	<b>69-67</b>
<b>B</b>	<b>=</b>	<b>86-83</b>	<b>D</b>	<b>=</b>	<b>66-63</b>
<b>B-</b>	<b>=</b>	<b>82-80</b>	<b>D-</b>	<b>=</b>	<b>62-60</b>
<b>C+</b>	<b>=</b>	<b>79-77</b>	<b>F</b>	<b>=</b>	<b>59 or less</b>

As documented in the SDSU School of Social Work grading policy, the instructor will determine grades in accordance with the following guidelines:

1. Grades of A or A- are reserved for student work that not only demonstrates very good mastery of content, but also shows that the student has (a) undertaken complex tasks, (b) applied critical thinking skills to the assignment, and/or (c) demonstrated creativity in her or his approach to the assignment. The degree to which the student demonstrates these skills determines whether he/she receives an A or an A-.

2. A grade of B+ is given to work that is judged to be very good. This grade denotes that a student has demonstrated a more-than competent understanding of the material being tested in the assignment.
3. A grade of B is given to student work that meets the basic requirements of the assignment. It denotes that the student has done adequate work on the assignment and meets the basic expectations of the course.
4. A grade of B- denotes that a student's performance was less than adequate on an assignment, reflecting only moderate grasp of content and/or expectations.
5. A grade of C reflects a minimal grasp of the assignments, poor organization of ideas and/or several significant areas requiring improvement.
6. Grades between C- and F denote a failure to meet minimum standards, reflecting serious deficiencies in a student's performance on the assignment.

The final grade will be based on the student's performance on the required assignments:

<u>Assignment:</u>	<u>% of Final Grade</u>	<u>Due Date:</u>
Individual Case Plan	25%	February 26, 2009
Midterm Exam	35%	March 12, 2009
Group Assignment-Response to Case Vignette	40%	April 16, 2009
		April 23, 2009
		April 30, 2009
<hr/>		
100%		

## VII. Class Policies

### A. Attendance and Participation

1. *Expectations for attendance.* Students are expected to come to class on time, sign the attendance sheet provided by the instructor, **and stay for the entire class session**. Students should notify the instructor **in advance by email**, if they need to miss class, arrive late, or leave early. The instructor will excuse absences resulting from verified unforeseen circumstances (e.g., illness, family emergency, unavoidable commitments). Vacations and other out of town activities will **not** be considered to be excused absences. Missing class to take examinations or complete assignments for other classes will not be excused absences. Students may be excused from class to attend a professional workshop if the workshop applies directly to social work practice. In this case, the instructor expects that the student will briefly share with the class what was learned in the workshop. When students miss class, they must take responsibility for obtaining **all** information discussed and presented in class and posted on Blackboard. **Students may have two excused absences without having their final grade impacted. However, more than one unexcused absence will result in the final letter grade being lowered by half a grade (ex. B+ to B). The instructor will notify the student when they have one unexcused absence. If additional**

**unexcused absences occur, students will be notified that their grade is now impacted.**

2. *Behavior in class.* Students are expected to be professional in class, including paying attention to class discussion, refraining from doing other work in class, passing notes, texting, or engaging in side conversations. Regular breaks will be scheduled. Students should wait until the break begins to leave the classroom, unless there is an emergency. Cell phones should be turned off or placed on vibrate during class time to avoid distracting others. Leaving the classroom and hearing cell phones ringing create distractions and interfere with the learning process. (*Note:* If you are expecting an important call and have your phone on vibrate, please sit in a place in the room where you can leave easily in order to take the call.)
3. *Participation.* Class participation means coming to class having studied the assigned readings and prepared to actively contribute to class discussions. **Students are expected to bring material from their field placements to class discussions.** This may include specific case examples, ethical dilemmas encountered that are relevant to the course material or sharing of knowledge obtained in the field placement. Small group exercises will occur in class. Students are expected to actively participate in any small group to which they are assigned. **If the atmosphere in the classroom inhibits free discussion of information, please address the issue in class. If this is not possible, please contact the instructor.**

**B. NASW Code of Ethics – Class Norms**

The NASW Code of Ethics is an academic standard at the SDSU School of Social Work. Students are expected to show professionalism and to follow all the principles of the NASW Code of Ethics (Revised, 1999). The Code of Ethics specifies that social workers need to be “continually aware of the profession's mission, values, ethical principles, and ethical standards and practice in a manner consistent with them” (NASW, Revised 1999, Ethical Principles). The norms of this course support principles in the Code of Ethics: (a) maintaining client confidentiality; (b) placing clients’ interests in highest priority, (c) treating one’s colleagues with respect, (d) demonstrating appropriate professional boundaries, and (e) acting with honesty and integrity.

1. *Confidentiality.* Students are expected at all times to maintain the confidentiality of clients that they have seen or are currently seeing in their field placements or work settings. Maintaining confidentiality includes changing all client names and disguising identifying information. Students should also maintain the confidentiality of their classmates by keeping confidential any private information disclosed in class, except when such information qualifies as a limitation to confidentiality.
2. *Best interests of clients.* In class discussions, students should avoid contributing unintentionally to myths about mental illness and disabilities. It is appropriate for each individual to think about the source of information and its factual base before contributing to the class discussion. Individuals should not be labeled with a condition (e.g., “a schizophrenic,” “a borderline,” or “the disabled”) or language that implies that the person as a whole is disordered (e.g., “disabled persons,” “an ADHD child,” “a learning disabled child”). Students should use terminology that preserves the integrity of the person (e.g., “an individual diagnosed with schizophrenia,” “a child diagnosed with Attention Deficit Hyperactivity Disorder,” a child who has a learning

disability”). Questions about how best to express an idea or concept is **always** acceptable.

3. *Respect for colleagues.* Students can show respect for one another through collaborating with the instructor to create a safe, interactive, and intellectually stimulating classroom environment. This means: (a) actively contributing one’s thoughts and opinions without monopolizing class discussions, (b) listening respectfully to one’s colleagues, and (c) respecting others’ rights to disagree and express different opinions.
4. *Professional boundaries.* Professional communication involves interacting with others in an assertive, genuine way that respects others’ privacy and is considerate of their needs. Students can maintain clear boundaries by being aware of their level of self-disclosure and disclosing information that can be appropriately and safely shared in an academic setting. In some situations, sharing highly personal information may be appropriate if it directly relates to the course content being discussed and helps to enhance student learning and creates a collaborative classroom environment.
5. *Behavior in class.* Students are expected to be professional in class, including paying attention to class discussion, refraining from doing other work in class, passing notes, or engaging in side conversations. Cell phones should be turned off or placed on vibrate during class time to avoid distracting others and detracting from the learning process. (*Note:* If you are expecting an important call and have your phone on vibrate, please sit in a place in the room where you can leave easily in order to take the call.) Unless there is an emergency, please wait to leave the classroom until a scheduled break. Students leaving and reentering the classroom can be distracting.
6. *Confidentiality of colleagues / Limitations to confidentiality.* As noted above, students need to respect the privacy of their classmates and keep confidential any personal information that they may disclose. However, information disclosed in a classroom is subject to the same limitations as in social work practice (i.e., harm to self or others, evidence of child/elder abuse/neglect). Students have an ethical responsibility to take action if they become aware that classmates have personal problems that impair their ability to complete class assignments or fieldwork and present a risk of self-harm or behaviors that could harm others. If students encounter a situation involving the impairment of a classmate, they should follow these guidelines established by the NASW Code of Ethics:
  - a. “Social workers who have direct knowledge of a social work colleague's impairment that is due to personal problems, psychosocial distress, substance abuse, or mental health difficulties and that interferes with practice effectiveness should consult with that colleague when feasible and assist the colleague in taking remedial action” (NASW, Revised 1999, Section 2.09).
  - b. When, after consultation, a colleague fails to take action to address their impairment, the Code of Ethics specifies that social workers “should take action through appropriate channels established by employers, agencies, NASW, licensing and regulatory bodies, and other professional organizations” (NASW, Revised, 1999, Section 2.09).

In the SDSU School of Social Work, informing the instructor and/or Graduate Advisor is the “appropriate channel” for taking action when a classmate has not addressed his/her impairment due to personal problems, psychosocial distress, substance abuse, or mental health difficulties. The instructor will request an

interview with the student(s) involved. If it is determined that the student's problems are interfering with work with clients in the field placement, the Faculty Field Coordinator may be consulted.

7. *Honesty/integrity.* The NASW Code of Ethics asserts that social workers should "behave in a trustworthy manner" and "not participate in, condone, or be associated with dishonesty, fraud, or deception" (NASW, Rev 1999, Ethical Principles & Section 4.04). Social work students should conduct themselves in a manner consistent with this social work value of integrity and avoid all forms of academic misconduct including: cheating, plagiarizing, stealing course examinations, falsifying data, violating copyright laws, asking another student to sign the roll for them when they are not going to be attending class, and/or intentionally assisting another individual in any of those actions. Please note the following definitions and policies:
  - i. Cheating includes (1) giving or taking exam answers to or from another student, (2) copying another student's paper (in part or in its entirety), and (3) falsifying one's own or another student's class attendance.
  - ii. Plagiarism is "formal work publicly misrepresented as original; it is any activity wherein one person knowingly, directly and for lucre, status, recognition, or any public gain resorts to the published or unpublished work of another in order to represent it as one's own. Work shall be deemed plagiarism (1) when prior work of another has been demonstrated as the accessible source; (2) when substantial or material parts of the source have been literally or evasively appropriated (substance denoting quantity; matter denoting qualitative format or style); and (3) when the work lacks sufficient or unequivocal citation so as to indicate or imply that the work was neither a copy nor an imitation. This definition comprises oral, written, and crafted pieces. In short, if one purports to present an original piece but copies ideas word for word or by paraphrase, these ideas should be duly noted"(Lindey, as cited in the Bulletin of the Graduate Division, SDSU, 2000-2001, p. 40).
  - iii. Giving authorship credit. The NASW Code of Ethics states that social workers should take responsibility and credit, including authorship credit, only for work they have actually performed and to which they have contributed. Social workers should honestly acknowledge the work of and the contributions made by others (NASW, 1999). Students should be careful to give appropriate authorship credit to anyone from whom they have obtained information for written assignments and class presentations, including citing books, journal articles, Internet websites, class lectures, professional colleagues, and/or classmates. *NOTE: If you take a direct quotation from a book or article, you must enclose the quoted material in quotation marks and cite the author, year of publication, and page number of the quote.* If you do not indicate that the material is a direct quote, it can be considered as a form of plagiarism, even though you have appropriately cited the reference from which you took the material.
  - iv. Consequences for academic misconduct. Academic misconduct will be handled according to University policy. Students who are found plagiarizing the works of others or committing other forms of academic misconduct will be subject to standards set forth by the University. Such action could result in failing an assignment, failing the class, or being expelled from the University. Please see Bulletin of the Graduate Division. A student who is found cheating or

plagiarizing will be asked to meet with the instructor (in her role as Graduate Advisor) to determine the consequences to be implemented.

**C. Policies Related to Required Assignments**

1. *Coordination of course with student's field placement.* **Students are to provide their field instructor with a copy of this syllabus and take the time during supervision to review and discuss the required assignment (Case Study of a Client). If the student does not have a field placement, please notify the instructor.**
2. *Written Assignment – Individual Case Plan*  
The Individual *Case Plan* assignment must be based on a *new* client assigned in the current semester at the student's field practicum placement. It is NOT appropriate to use a client system from any other agency, including students' place of employment or agencies where they do volunteer work. Students must obtain approval from their field instructor when selecting a client for the paper.
3. *Informed consent.* Students should discuss with their Field Instructor whether to obtain informed consent from the client whom they select for the *Case Study of a Client and Family System*. If the student and field instructor determine that informed consent is needed, the student will tell the client that his/her situation is being used as the subject of an educational paper. The student will assure the client that (a) his/her confidentiality will be protected and (b) all names and identifying information in the paper will be changed. Documentation of informed consent, with client's name blacked out,) should be noted in the paper, unless the student and field instructor determine that obtaining informed consent is not in the client's best interests. **In such a case, the student should provide written documentation from the field instructor.** Please refer to the Graduate Student Handbook and materials in the SW750 packet for information regarding protecting client confidentiality.
  - a. *Field instructor review:* Students should review the final draft of the Individual *Case Study of a Client and Family System* with their field instructor and obtain his/her signature on the paper. *Students should plan well in advance with their field instructors to assure that they are able to obtain the required signatures from the client and/or the field instructor.*
  - b. *Expectations for paper.* Students are expected to write at a graduate level and produce clear, well-organized, professional papers, with correct grammar and spelling. Students should write their *Case Study of a Client and Family System* as if their paper were to be presented to other social workers in the community. The paper should follow the stylistic guidelines suggested by the Fifth Edition of the APA manual (2001). Particular attention should be placed on APA guidelines regarding: the style of the manuscript; expression of ideas (e.g., writing style, grammar, and ways to reduce bias in language); format and content of the abstract; reference citations in the text; reference list; citation of Internet websites; margins; headings; and use of numbers. Please see the "Format for Paper" section of Appendix A for specific expectations related to the structure of the paper and compliance with APA format. The handout in Appendix B, "Guidelines for Writing Papers in APA Format" (Rasmussen, 2004) can be helpful to students in ensuring that their *Case Study of a Client and Family System* complies with APA format.
4. *Midterm Exam.* *The Midterm Exam will be given on Thursday, March 12, 2009. It will*

include individual multiple choice questions and vignettes followed by multiple choice questions. The vignettes studies will prepare the Student for the comprehensive exam. The exam must be taken on that date, unless students have made **prior** arrangements with the instructor. If illness or other extenuating circumstances prevent students from taking the Midterm Exam when it is scheduled, they should notify the instructor of the reasons preventing them from taking the exam. The instructor will then negotiate another time for the student to take the Exam.

5. *Disabilities.* The San Diego State University School of Social Work abides by the Americans with Disabilities Act of 1990. If a student believes that he or she may have a disability and wants to be evaluated, he or she should consult with the instructor in her role as Graduate Advisor to obtain information about the procedures for contacting Student Disability Services for an informational session. Or, students who have disabilities that can potentially impact their academic performance may request special accommodations by contacting the SDSU Student Disability Services (SDS) directly and receiving an evaluation. If SDS determines that a student has a disability and is eligible for special accommodations (e.g., extended time for taking Exams), it is the student's responsibility to inform the instructor and provide the necessary paperwork from SDS for special accommodations **within the established timelines.**
6. *Policy on late assignments.* The instructor expects that students will turn in the written assignments by the due dates specified in the Course Outline. Students should contact the instructor immediately (by phone or email) if unforeseen circumstances (e.g., severe illness, family emergency) prevent completion of work by the due date. If the emergency is verifiable, and the instructor agrees that it justifiably prevented student from completing the assignment, the student may negotiate an extended time frame for completing the work. Late papers will not be accepted if the student has failed to contact the instructor prior to the due date. If the paper is late for any reason other than a verifiable emergency, but has been discussed with the instructor prior to the due date, the grade for the student will be reduced by two grade levels (e.g., from A to B+), and a new due date will be established. The penalty for lateness will be increased to one full letter grade (three grade levels - e.g., from A to B) if the student still fails to turn in the assignment by the extended due date. The instructor may choose not to accept a paper that is more than 2 weeks late, and the student would then receive a zero for the assignment.
7. *Incomplete grade.* On rare occasions (e.g., severe illness, family emergency), an "incomplete" grade may be granted, provided the student meets the criteria established by University and School of Social Work policies. These criteria include: (a) the instructor must agree that extenuating circumstances prevented the student from completing the work; (b) the student does not have to make up more than 30% of the required course work; and (c) the student and the instructor will sign a contract specifying the actions needed for the student to complete the course and a time line for completion. University policy dictates that an Incomplete must be made

up within one calendar year following the end of the term in which it was assigned, or the grade will be converted to an F.

8. *Blackboard*. Materials for this course, including this Supplemental Syllabus, some of the readings, handouts, and lecture notes/PowerPoint slides will be posted on Blackboard. Please note the following regarding Blackboard:
  - a. *Communication from the instructor*. The instructor will use Blackboard to send emails to students notifying them of documents posted on Blackboard and/or updates to course assignments. **Students are responsible for ensuring that their current email is listed on the Blackboard system.** In addition, students are responsible for ensuring that any registration changes have been posted and that they are on the course roster for the class section that they are attending. The Blackboard system does not handle hotmail accounts well, so students who have a hotmail account should request a rohan account from SDSU and use it as their University email. Students should check Blackboard on the morning of the class to download any posted documents. Students requiring assistance on Blackboard are encouraged to contact the Blackboard Help Desk at <http://its.sdsu.edu/bbsupport/>.
  - b. *Lecture notes*. Each week the instructor may post summarizing some of the major points in the assigned readings or other materials that the instructor plans to present related to the topic of the class session. Slides will be posted in PowerPoint. Slides will usually be posted **the evening before or morning of** the class. In some cases, the slides may be provided after the topic is discussed in class. The PowerPoint slide handouts are a resource and can be helpful to students in preparing for Exams or assignments. **Not all PowerPoint slides will be covered in class and not all text book material is included in the PowerPoint slides.** Students should download the slides first and print them in “pure black and white” format, in order to reduce the amount of printer ink needed.
8. *Grades*. The instructor will post student grades for each assignment on Blackboard. The grades for the assignments will be weighted towards the final grade according to the percentages listed above under “Grading” (see page 4). The final percentage for the class is computed by totaling the weighted percentages that the student receives on the assignments.
9. *Office hours*: The instructor will maintain office hours as listed on the heading of this syllabus, and may be available at other times by appointment. Students are encouraged to use the office hours to discuss questions related to the assigned readings or required assignments. In order to make the best use of office hour time, the instructor encourages students to schedule appointments when possible. The instructor also welcomes questions from students via email or phone (see contact information on the heading of this syllabus). Email is the preferred mode of communication.
10. *Return of written assignments*: If students are absent the day a paper is returned, they should either pick up the paper from the instructor during office hours or provide a self-addressed stamped envelope so that the instructor can mail the paper. In order to receive graded group assignments that are not returned during the class time, students should designate one group member to receive the paper and provide

a self-addressed stamped envelope so that the instructor can mail the paper to that student. If no student claims the group paper, the instructor will shred it.

### VIII. Organization of Course

Graduate level seminars require dialogue among students. The instructor will introduce course content through a lecture format, illustrated by PowerPoint slides and videos, and will facilitate student contributions to class discussion. Students are expected to come prepared for class, having studied the assigned readings and thought about how the content applies to social work practice. They should come to class prepared with questions or comments to bring up during class discussion. All readings will NOT be covered in class. Students are responsible for ALL assigned readings, regardless of whether they are discussed in class.

*The following Course Outline is subject to changes by the instructor throughout the semester. Psychosocial and functional issues, etiology, family issues and treatment options will be addressed in the lectures. The reading assignments correspond with the lecture topics. Specifically, for each class, the student should have read the material that matches the lecture and discussion topics for that class session.*

Date of Class	Lecture and Discussion Topics	Readings and/or Assignments
Week 1 1-22-09	A. Overview of Course B. Introductions C. Review of readings D. Review of assignments E. Initial group discussions F. Questions and answers G. Foundations of mental health disorders– the ACE Study	✓ Provide Field Instructor with copy of syllabus this week.  • <b>Felitti, Vincent , “The Relationship of Adverse Childhood Experiences to Adult Health: Turning gold into lead”</b>  <u>Other Readings</u> <a href="http://xnet.kp.org/permanentejournal/winter02/goldtolead.html">http://xnet.kp.org/permanentejournal/winter02/goldtolead.html</a>
Week 2 1-29-09	<b>Using the DSM IV</b> <ul style="list-style-type: none"> <li>• History of DSM-IV-TR</li> <li>• Using the DSM IV</li> <li>• Arguments for and against using the DSM IV</li> </ul> <b>Assessment of the client</b> <b>Cognitive disorders and dementia</b>	<u>Gray &amp; Zide:</u> <ul style="list-style-type: none"> <li>• Chapter 1: Intro to Competency Based Assessment pp. 1-23</li> <li>• Chapter 2: Cognitive disorders and dementia pp. 24-42</li> </ul> <u>DSM IV TR:</u> <ul style="list-style-type: none"> <li>• Use of the Manual : pp. 1-12</li> <li>• Multiaxial Assessment: pp. 27-37</li> <li>• Chapter 2: Cognitive disorders and dementia pp. 24-42</li> </ul> <u>Other Readings:</u> <a href="http://proquest.umi.com.libproxy.sdsu.edu/pqdlink?Ver=1&amp;Exp=01-20-2014&amp;FMT=7&amp;DID=42964821&amp;RQT=309">http://proquest.umi.com.libproxy.sdsu.edu/pqdlink?Ver=1&amp;Exp=01-20-2014&amp;FMT=7&amp;DID=42964821&amp;RQT=309</a>

<p>Week 3 2-5-09</p>	<p><b>Psychotic Disorders</b> A. Schizophrenia B. Other Psychotic Disorders</p>	<p><b><u>Gray &amp; Zide:</u></b></p> <ul style="list-style-type: none"> <li>Chapter 3: Schizophrenia and Other Psychotic Disorders pp. 43-86</li> </ul> <p><b><u>DSM IV TR:</u></b></p> <ul style="list-style-type: none"> <li>Schizophrenia and Other Psychotic Disorders pp. 297 – 343</li> </ul>
<p>Week 4 2-12-09</p>	<p><b>Mood Disorders</b></p> <ul style="list-style-type: none"> <li>Major Depressive Disorders</li> <li>Bipolar Disorder</li> <li>Minor Mood disorders</li> <li>Suicide Risk and Mood Disorders</li> </ul>	<p><b><u>Gray &amp; Zide:</u></b></p> <ul style="list-style-type: none"> <li>Chapter 4: Mood Disorders pp. 87-117</li> </ul> <p><b><u>DSM IV TR</u></b></p> <ul style="list-style-type: none"> <li>Mood Disorders pp. 345-428</li> </ul>
<p>Week 5 2-19-09</p>	<p><b>Anxiety Disorders</b></p> <ul style="list-style-type: none"> <li>Agoraphobia</li> <li>Specific Phobias</li> <li>OCD</li> <li>PTSD</li> <li>Acute Stress Disorder</li> <li>Generalized Anxiety Disorder</li> </ul> <p><b>Somatoform Disorders</b></p> <ul style="list-style-type: none"> <li>Conversion Disorder</li> <li>Pain disorder</li> <li>Hypochondriasis</li> <li>Body Dysmorphic Disorder</li> <li>Somatorform disorders</li> </ul> <p><b>Factitious and Malingering Disorders</b></p>	<p><b><u>Gray &amp; Zide:</u></b></p> <ul style="list-style-type: none"> <li>Chapter 5: Anxiety Disorders pp. 118-164</li> <li>Chapter 6: Somatoform, Factitious, and Malingering Disorders pp. 165-214</li> </ul> <p><b><u>DSM IV TR</u></b></p> <ul style="list-style-type: none"> <li>Anxiety Disorders pp. 429-484</li> <li>Somatoform Disorders pp. 485-517</li> <li>Factitious Disorders pp. 513-517</li> <li>Malingering p. 739</li> </ul>
<p>Week 6 2-26-09</p>	<p><b>Dissociative Disorders</b></p> <ul style="list-style-type: none"> <li>DID</li> <li>Dissociative Amnesia Disorder</li> <li>Dissociative Fugue Disorder</li> <li>Depersonalization Disorder</li> </ul>	<p><b><u>Gray &amp; Zide:</u></b></p> <ul style="list-style-type: none"> <li>Chapter 7: Dissociative Disorders pp. 215-241</li> </ul> <p><b><u>DSM IV TR</u></b></p> <ul style="list-style-type: none"> <li>Dissociative Disorders pp. 519-533</li> </ul> <p>✓ <b>Individual client paper due at beginning of class</b></p> <p>✓ Groups 1 &amp; 2 draw Case Study for Group Project.</p>
<p>Week 7 3-5-09</p>	<p><b>Personality Disorders</b></p> <ul style="list-style-type: none"> <li>Paranoid</li> <li>Schizoid</li> <li>Schizotypal</li> <li>Histrionic</li> <li>Antisocial</li> <li>Borderline</li> <li>Avoidant</li> </ul>	<p><b><u>Gray &amp; Zide:</u></b></p> <ul style="list-style-type: none"> <li>Chapter 9: Personality Disorders pp. 268-319</li> </ul> <p><b><u>DSM IV TR</u></b></p> <ul style="list-style-type: none"> <li>Personality Disorders pp 685 – 729</li> </ul> <p>• Groups 3 &amp; 4 draw Case Study for Group Project.</p>

	<ul style="list-style-type: none"> <li>• Dependent</li> <li>• Obsessive-Compulsive</li> <li>• Narcissistic</li> </ul>	
Week 8 3-12-09	Mid –Term Exam (90 minutes)	✓ <b>Mid-Term Exam</b> <ul style="list-style-type: none"> <li>• Groups 5 &amp; 6 draw Case Study for Group Project.</li> </ul>
Week 9 3-19-09	<b>Eating Disorders</b> <ul style="list-style-type: none"> <li>• Anorexia Nervosa</li> <li>• Bulimia Nervosa</li> <li>• Obesity</li> </ul>	<u><b>Gray &amp; Zide:</b></u> <ul style="list-style-type: none"> <li>• Chapter 8: Eating Disorders pp. 242-267</li> </ul> <u><b>DSM IV TR</b></u> <ul style="list-style-type: none"> <li>• Eating Disorders pp 583 – 595</li> </ul>
Week 10 3-26-09	<b>Substance Related Disorders</b> <ul style="list-style-type: none"> <li>• Substance Use Disorders</li> <li>• Substance Induced Disorders</li> <li>• Specific Substances <ul style="list-style-type: none"> <li>o Depressants</li> <li>o Stimulants</li> <li>o Uploads</li> <li>o Hallucinogens</li> </ul> </li> </ul>	<u><b>Gray &amp; Zide:</b></u> <ul style="list-style-type: none"> <li>• Chapter 10: Substance Related Disorders pp. 320-378</li> </ul> <u><b>DSM IV TR</b></u> <ul style="list-style-type: none"> <li>• Substance Abuse Disorders pp 191 – 295</li> </ul>
Week 11 4-2-09	<u><b>Spring Break</b></u> <b>No class</b>	
Week 12 4-9-09	<b>Disorders Usually First Diagnosed in Infancy, Childhood or Adolescence</b> <ul style="list-style-type: none"> <li>• Conduct Disorder</li> <li>• Oppositional Defiant Disorder</li> <li>• Separation Anxiety Disorder</li> </ul>	<u><b>DSM IV TR</b></u> <ul style="list-style-type: none"> <li>• Conduct Disorder -pp 93- 99</li> <li>• ODD – pp 100 -102</li> <li>• Separation Anxiety Disorder – pp 121-125</li> </ul>
Week 13 4-16-09	<b>Disorders Usually First Diagnosed in Infancy, Childhood or Adolescence</b> <ul style="list-style-type: none"> <li>• Reactive Attachment Disorder</li> <li>• PTSD In Children and Adolescence</li> </ul>	<u><b>DSM IV TR</b></u> <ul style="list-style-type: none"> <li>• RAD – pp 127-130</li> </ul>
Week 14 4-23-09	Group Presentations	<ul style="list-style-type: none"> <li>• <b>Groups 1 &amp; 2</b></li> </ul>
Week 15 4-30-09	Group Presentations	<ul style="list-style-type: none"> <li>• <b>Groups 3 &amp; 4</b></li> </ul>
Week 16 5-7-09	Group Presentations	<ul style="list-style-type: none"> <li>• <b>Groups 5 &amp; 6</b></li> </ul>
5-22-09	Commencement! You did it!	Congratulations!

## *Appendix A*

### **Individual Client Case Study**

The goal of this assignment is to provide you with an opportunity to demonstrate your ability to engage a client, conduct a clinical interview, and make a provisional diagnosis. By week 6, you should be competent in completing these tasks. If the client is a child, all possible diagnoses, will not have been covered in class or in the reading. However, the interview process can be completed and a provisional diagnosis assigned. If the client is a child, a parent or other caretaker will need to provide the developmental history on the child.

The client must be assigned in your **current** field placement. Begin discussing this assignment with your Field Instructor by the second week in class. **If you do not have a field placement during the semester, discuss an alternate plan with the Instructor.**

**Grading criteria are listed at the bottom of Appendix A.**

#### **Section I**

Describe the agency in detail. Also describe your role in the agency as a social work intern. Discuss with the Field Instructor the policy or practice of the agency on making a diagnosis and providing the client with this information. Include in the paper what you learned about the agency's practices from this discussion and your thoughts in regard to this issue. For example, if a diagnosis is not made, what is the reason? On what foundation are treatment goals developed? What is the client's understanding of the treatment plan? Clearly describe your role as a social work intern in the agency.

The paper **must** contain documentation indicating that the student has: (a) protected the confidentiality of the client and his or her family members by changing names and disguising identifying information, and (b) consulted with the field instructor about the client and determined whether or not to seek the client's informed consent to use his or her situation as the subject for the paper. Document the decision made regarding informed consent by attaching an additional page that contains a signed statement from: (a) the client (with client's name blacked out), indicating he or she has given informed consent for the paper; or (b) your field instructor indicating in writing that seeking informed consent was determined not to be in the client's best interests.

#### **Section II**

Discuss the client's presenting problem. How does the client describe the problem? Why was he or she referred for services? Is the client seeking services on a voluntary or involuntary basis? Why is he or she seeking service now? What is your role in providing services in the agency and specifically to this client? Can the agency meet the client's expectations and needs?

### Section III

Describe the assessment process, including the questions asked in the interview process. Summarize the client's responses to the questions, especially their significance in refining a diagnosis. Do not list every question asked and every client response. A summary of the information is sufficient. You may be unable to obtain a piece of information that you think would be useful. If so, state what information you would like to have and why you are unable to obtain it. For example, are there specific questions the agency does not routinely ask in the intake process?

### Section IV

Complete the multiaxial diagnosis based upon the information you obtained in the assessment process. Before completing this component of the assignment review the sections on the DSM- IV-TR regarding the specific information that is placed on each Axis. Include the multiaxial diagnosis as it would appear in a professional report (See DSM-IV-TR p.35.)

The paper should reflect your thought process as the information is integrated to make a provisional diagnosis. **Examples** are as follows:

- How did you decide which questions to ask in the interview? What goals did you have?
- How was the specific diagnosis selected? Were decision trees followed?
- What other diagnoses were considered?
- Does the client present any symptoms that do not fit the diagnosis?
- What doubts did you have in making this diagnosis? (Expressing doubts will not lower your grade!)

### Section V

Finally, prepare a one page psychoeducational handout that could be provided to **this specific client** to increase his or her understanding of the diagnosis. Be sure that the handout is culturally and developmentally appropriate for **this specific client**. List least three resources that the client could access by phone or on the internet to learn more about his or her diagnosis. If the client is a child, the resources listed may be for the parent. If this is the case, make a decision about completing the handout for the parent, the child, or both. The developmental capabilities of the child will probably be the guiding factor in this decision.

### Section VI

This is an opportunity to describe what you learned from writing this paper and your reactions to completing the assignment.

You are expected to write at a graduate level and produce clear, a well-organized, professional paper, with correct grammar and spelling. Prepare the paper as if it were being presented to a multidisciplinary team in an agency setting. Assume that the other members of the team have no knowledge of your client and his history. The paper should follow the stylistic guidelines in the Fifth Edition of the APA manual (2001). (See Appendix C.) The paper should be 7-8 pages in length.

**Grading criteria:**

Content	Total Possible Points
<b>Formatting of Paper Client or Field Instructor Signature</b>	5
<b>Section I Description of the Field Placement Description of Role as an Intern</b>	10
<b>Section II Description of the Client's Presenting Problem</b>	15
<b>Section III Description of the questions asked in the clinical interview and client responses.</b>	25
<b>Section IV Provisional diagnosis, using all 5 axes.</b>	20
<b>Section V Psychoeducational handout that could be provided to the client or the client's parent/caregiver.</b>	15
<b>Section VI Description of response to the assignment.</b>	10
<b>Total Points</b>	<b>100</b>

## ***Appendix B***

### **Group Presentation**

The goal of this assignment is to provide you with an opportunity to demonstrate your ability to respond to a complex case study of which they have no previous knowledge. This assignment will be completed in a group format that will allow you to support and learn from each other. The case studies will represent clients in a variety of developmental stages, diagnoses, family situations, and settings in which a social worker might encounter a client. During the sixth, seventh, and eight weeks of class, the groups will draw a client case history from a compilation of case studies. Groups will draw the case study in order of their presentations. (See course structure.) Each group will then have 6 weeks to prepare a presentation. Other class members will have access to the client's history on the day before the presentation, thus avoiding the need for group members to provide every detail on the client's life.

The grade will be assigned based upon the following:

- The thoroughness and clarity of the presentation. Do not read from notes. Be prepared to make a professional presentation. A PowerPoint presentation should be included to support your lecture.
- The research cited to support the assessment and treatment plan. At least 10 articles should be cited in both the presentation and a bibliography.
- The quality of a hand out presented to the class at the time of the presentation. This handout should include a bibliography. Your PowerPoint presentation may be included in the handout. **No paper is required for this assignment.**
- A discussion of the group process that occurred in the preparation of this presentation. Groups that describe and demonstrate an integrated, cooperative approach, as opposed to presenting individual components of the presentation will receive a higher grade.

**All** of the following information should be included in the presentation:

#### **A. Setting: 5 points**

- In what setting are the services being provided?
  - Outpatient clinic, inpatient unit, crisis clinic, school, emergency room?
- What is the Group's collective role in providing service to the client?
- How is the client's treatment paid for? Does the agency rely on insurance, grants to pay for services?

#### **B. The Client: 15 points**

- Devise and describe a plan for assessing the client.
  - In addition to interviewing the client, will you use standardized assessment tools, gather information from friends and relatives, review previous medical and psychiatric records?

- What can you tell your fellow students about “best practice” in assessing a client?
- Describe how the assessment information is synthesized into a unique picture of the client. What do you now know about the client?

**C. Diagnosis: 10 points**

- Are you able to make a diagnosis with the information you have? If so, what is your diagnosis?
- If you are unable to make a diagnosis with the information you have, what is your plan?
  - What do you still need to know and how will you obtain it?
- When you have all of the information, complete a multi-axial diagnosis.
- Discuss environmental and genetic influences in the diagnosis.

**D. Plan for Intervention: 20 points**

- Based on what you have learned in class and the readings, what are the elements of a well thought out intervention plan? Assume that you can arrange and pay for the best of care for your client.
  - What sources did you use to determine a plan that is based on state of the art knowledge and research?
  - Which component of the plan can be provided within the setting of the agency described in the case study?
  - What other services will the client need? How will you support/motivate him in obtaining these services? Is there particular setting in which these services are typically provided?
    - What other disciplines will be involved in the plan? State the contribution of each discipline and your rationale for including the specific discipline. Examples: psychiatry, medicine, nursing, occupational or physical therapy, ongoing psychotherapy, psychopharmacology
  - Describe how you will explain the plan to the client.
    - Considering all aspects of your client’s history and development, what accommodations will you make in describing the plan to him?
    - Will you involve family members? If so, how?
    - How will you describe to your client why you are recommending this plan?

**E. Outcomes: 15 points**

- What are the best outcomes you believe your client can achieve if he follows the intervention plan you have designed? What does the research on the intervention you have selected show are the results that can be expected?
- List the research you have found on which you base your statement.
- How will you measure the outcomes?
- How was a baseline level of functioning established?

**F. Legal and Ethical Issues: 15 points**

- Create an all inclusive list of the legal and ethical issues that you will encounter in working with this client.
- How will you respond to each of the above issues?

**G. Group Approach and Degree of Integration Apparent in the Presentation: 10 Points**

- **Describe:**
  - Did the group members have varying opinions? How were they resolved?
  - What countertransference issues arose for group members?
  - How did you integrate all information into a cohesive picture of the client and his life?

**H. Class Feedback**

- The instructor will distribute a “Class Feedback Sheet” immediately after each presentation to the students who are in the audience. They will be asked to list the strengths and limitations of the group’s presentation. Providing constructive feedback to one’s peers is evidence of critical thinking and professionalism and is part of listening to a presentation.
- On the week following their presentation, the instructor will provide the group with a summary of the class feedback.

**I. Instructor Feedback**

- As noted above, all group members will receive the same grade for the Group Presentation. The instructor will grade the Group Presentations using a written feedback sheet, and will send the completed sheet to each member of the group via email.

**Summary of scoring:**

<b>A. Setting</b>	<b>5 points</b>
<b>B. The Client</b>	<b>15 points</b>
<b>C. Diagnosis</b>	<b>10 points</b>
<b>D. Plan for Intervention</b>	<b>15 points</b>
<b>E. Outcomes</b>	<b>15 points</b>
<b>F. Legal and Ethical Issues</b>	<b>15 points</b>
<b>G. Group Approach and Quality of Presentation</b>	<b>10 points</b>
<b>H. Quality of Handout quality</b>	<b>5 points</b>
<b>I. <u>Research Citations</u></b>	<b><u>10 points</u></b>
<b>Total</b>	<b>100 points</b>

## ***Appendix C***

### ***Guidelines for Writing Papers in APA Format***

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#### **SDSU School of Social Work**

Reference: American Psychological Association (2001). Publication manual of the American Psychological Association (5<sup>th</sup> ed.). Washington, DC: Author.

#### **I. Manuscript Preparation:**

A. Typing the paper: Follow guidelines in APA Manual Chapter Five as noted below:

Double spacing, margins, page numbering, paragraph indentation, 12-point font  
(Preferred: Times New Roman or another proportional font that takes up less space)

1. Sections of manuscript - title page with running head, abstract, text, list of references, appendixes (if any), tables and figures (if any).
  - a. Title Page: Title page should list author's name and institutional affiliation (e.g., John Smith, San Diego State University). It should include a running head (see **APA 1.06**). *Do not include course number, date, or instructor's name.*
  - b. Abstract: Make sure your abstract complies with APA guidelines for format and content (see **APA 1.07**). The abstract should be written in third person. Most student papers fit the criteria for a "review or theoretical article." According to APA guidelines, the abstract should contain: (a) a statement of the purpose of the article, (b) documentation of the sources used for the analysis, and (c) a brief statement of your findings (see **APA 1.07, p. 14**).
  - c. Headings: Headings are used to divide your paper into sections and to improve readability for those who read your paper. Make sure your paper complies with the proper levels of headings as specified by APA guidelines (see **APA 3.31 and 3.32**). Type the title of your paper at the top of the first page of the paper. Begin the paper with a short introduction summarizing the purpose of the paper. After the introduction, use your first heading, which APA guidelines specify should be a Level 1 heading (centered, upper and lower case letters, no caps). Most student term papers will need two to three levels of headings. In addition to Level 1 headings, use Level 3 (flush left, upper and lower case letters, italics), and Level 4 (paragraph heading, indented, italics, only the first word is capitalized, and a period is placed at end of the heading). See **APA 3.31/3.32** for examples of the headings. Also, see the sample papers included in the APA manual.

- d. Lists: Whenever you have items in a series that are lengthy or complex, enumerate them using the guidelines in **APA 3.33**. You may make a list of bullet points, using 1, 2, 3, etc. When making a list within a paragraph, use a, b, c, etc.
- e. Tables and Figures: See **APA pages 147-176** for guidelines in formatting tables. See **APA pages 176-201** for guidelines in designing figures.

## II. Citing References:

### A. Reference Citation in the Text: Cite according to the guidelines in **APA 3.39** and **pages 120-122 (APA 3.94-3.103)**.

1. When you directly quote material, follow guidelines in **APA 3.34**. (Quotations over 40 words are to be indented in a freestanding block. Quotations under 40 words are incorporated in the text and enclosed with double quotation marks).
2. Follow guidelines in **APA 3.95, pages 208-209** when citing multiple authors.
3. Follow guidelines in **APA 3.102** whenever you cite personal communications (e.g., letters, memos, electronic communications such as email, personal conversations, telephone interviews, etc.).

### B. Reference List

1. Make sure that every reference on your reference list is cited in the text of your paper. Make sure the author and year of publication in the citation in the text match what you list on the reference list (see **APA 4.02**).
2. When constructing your reference list, follow the guidelines listed on pages 215-281. See sample reference list on pages 313-314. Use the examples in the APA text and on the sample reference list as models as you construct your own list.
3. When citing a work discussed in a secondary source, give the secondary source in the reference list. In the text, name the original work and give a citation for the secondary source (see **APA Reference List Section, Example #22, p. 247**).
4. Note the change in the format for references in the Fifth Edition of the APA Manual; references are now typed using a hanging indent.
5. Cite authors by last name, first and middle initials. Put a comma after each author.
6. When citing titles of books and articles, capitalize the first word of the title and the first word after every colon in the title. When citing titles of professional journals, capitalize every important word in the title.

7. When citing the location of the publisher, refer to **Table 4.1 (page 218)** and use the proper abbreviations for states
8. When using *electronic media*, direct readers as closely as possible to the information being cited and provide Internet addresses that work. This should include the document title/ description, date, and an address with the URL. Use the examples as models as you construct your reference list (see **pages 268-271**).
9. When citing multiple authors (3 to 5 authors), cite all authors the first time you cite the reference. In subsequent citations cite the first author and et al. (e.g., Jones et al. (2000)). For two authors, always cite both authors. For 6 or more authors, cite first author and et al.

### III. Language and Expression of Ideas

#### A. Writing Style

1. Use the guidelines in Chapter 2 to improve your writing style. Avoid jargon, wordiness, overly long sentences, and redundancy (see **APA 2.03**). Use parallel construction (see **APA 2.11**).
2. Make sure that each paragraph is longer than a single sentence but not longer than one manuscript page (see **page 36**).

#### B. Grammar

1. *First person or third person* - the Fifth Edition of the APA Manual now indicates that first person may be used when writing a scholarly paper (see **APA 2.04, p. 37**). Exception: third person must be used in the abstract (see **APA 1.07, p. 14**).
2. *Verbs* - prefer active voice whenever possible. Use the correct tense. Make sure that a verb agrees in number with its subject (see **APA 2.05**).
3. *Pronouns* - make sure that a pronoun agrees in number and in gender with the noun it replaces (see **APA 2.08**). With *relative pronouns*, select the most precise (see **APA 2.10**).
4. *Modifiers* - avoid misplaced modifiers (see **APA 2.09**).
5. *Use of numbers* - General rule - use figures to express numbers 10 and above and words to express numbers below 10 (see **APA 3.42 -3.49**). Exceptions – refer to those sections for exceptions to the general rule. For example, one common exception concerns numbers that represent units of time (e.g., days, weeks, years, age). Use figures rather than words to when referring to units of time (e.g., “The client is 8 years old.” “The client was suicidal 2 days ago.”). (See **APA 3.42 e.**)
6. *Punctuation*: Use correct punctuation for an orderly flow of ideas (see **APA, p. 32**). Use Latin abbreviations (i.e., e.g.) only within parenthesis (see **APA 3.24**).

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