RUTGERS, THE STATE UNIVERSITY OF NEW JERSEY
SCHOOL OF SOCIAL WORK
COURSE OUTLINE

Clinical Assessment and Diagnosis

Section:
Time:
Location:

Instructor:
Email:
Office:
Office Hours:

I.   Catalog Course Description

This course explores major forms of emotional distress in adults, children, and youth, including classification trends, issues, and models. The course provides an introduction to clinical syndromes in terms of diagnostic methodology, research and social concerns and their implications for at risk groups.

II.   Course Overview

This is an introductory course will familiarize social work students with the major mental disorders. Since mental health issues are ubiquitous in social work settings and practice, it is appropriate that social workers, regardless of specialization, be acquainted with the language, taxonomy, conceptualizations, and developments in the study of psychopathology. For those desiring to expand knowledge in this area, the advanced curriculum offers this opportunity. This course serves as the prerequisite for further study of psychopathology.

The Diagnostic and Statistical Manual of Mental Disorders 5-TR (DSM-5-TR) is used as the organizing framework for this course. Though controversial, the DSM-5-TR has become the standard diagnostic tool used by local, state and federal governments, major health insurance carriers and by several of the academic disciplines. In this course, however, we will critically examine the DSM and its relevance for social work practice.

DSM-5-TR conceptualizes a mental disorder as a clinically significant behavioral or psychological syndrome or pattern that occurs in an individual and that is associated with present distress (e.g., a painful symptom) or disability (i.e., impairment in one or more important areas of functioning), or with a significantly increased risk of suffering death, pain, disability, or an important loss of freedom. The adequacy and appropriateness of this conceptual framework to illuminate and enhance understanding of the human phenomena seen in social work practice is addressed throughout the course. Factors such as cultural differences, race and ethnicity, social class, gender and age are discussed in terms of their possible influence on clinical judgment and the diagnostic process. Thus, the selection of content areas has been based on several

considerations:

1. Clinical syndromes social workers are most apt to encounter, either directly in micro practice, or indirectly in macro practice.

2. Clinical phenomena that are extensively dealt with in other curriculum offerings receive less focus, e.g., developmental disabilities, alcohol and other drugs, and mental disorders associated with the aging process.

3. Those conditions requiring medical sophistication for evaluation and treatment will also receive less attention e.g. mental disorders due to a general medical condition, organic brain disorders.

As students read through this syllabus, they should also remember to **closely review the School-Wide Syllabus** in Canvas or the Student Handbook to find information on the School of Social Work mission statement and learning goals, school-wide policies (including academic integrity policies and the standardized attendance policy), and student resources and supports.

III.   Place of Course in Program

This is a required course for all students in the Generalist year.

IV.   Program Level Learning Goals and the Council of Social Work Education's Social Work Competencies

The MSW Program at Rutgers is accredited by the Council on Social Work Education (CSWE). Students are welcome to review CSWE's accreditation standards at www.cswe.org

In keeping with CSWE standards, the Rutgers School of Social Work has integrated the 2022 CSWE competencies within its curriculum. The competencies assessed in this course include:

Competency 1: Demonstrate Ethical and Professional Behavior

Social workers understand the value base of the profession and its ethical standards, as well as relevant policies, laws, and regulations that may affect practice with individuals, families, groups, organizations, and communities. Social workers understand that ethics are informed by principles of human rights and apply them toward realizing social, racial, economic, and environmental justice in their practice. Social workers understand frameworks of ethical decision making and apply principles of critical thinking to those frameworks in practice, research, and policy arenas. Social workers recognize and manage personal values and the distinction between personal and professional values. Social workers understand how their evolving worldview, personal experiences, and affective reactions influence their professional judgment and behavior. Social workers take measures to care for themselves professionally and personally, understanding that self-care is paramount for competent and ethical social work practice. Social

workers use rights-based, antiracist, and anti-oppressive lenses to understand and critique the profession's history, mission, roles, and responsibilities and recognize historical and current contexts of oppression in shaping institutions and social work. Social workers understand the role of other professionals when engaged in interprofessional practice. Social workers recognize the importance of lifelong learning and are committed to continually updating their skills to ensure relevant and effective practice. Social workers understand digital technology and the ethical use of technology in social work practice.

Social workers:
a) make ethical decisions by applying the standards of the National Association of Social Workers Code of Ethics, relevant laws and regulations, models for ethical decision making, ethical conduct of research, and additional codes of ethics within the profession as appropriate to the context;
b) demonstrate professional behavior; appearance; and oral, written, and electronic communication;
c) use technology ethically and appropriately to facilitate practice outcomes; and
d) use supervision and consultation to guide professional judgment and behavior.

Explore the entire set of 2022 CSWE competencies.

V.   Course Level Learning Goals

Upon completion of this course, students will be able to:

1. Describe the DSM-5-TR as the current representations of a changing classification model and its application for the diagnosis of children, youth, and adults.

2. Analyze the potential abuse of diagnostic classification as a means of social control and its significance for vulnerable populations.

3. Discus the social worker's particular contribution to the diagnostic process that promote and constrain the diagnostic-intervention process.

4. Explain the possible conflict between social work norms, ethics, values, and diagnostic classification system.

5. Describe the role of psychopharmacology in the treatment of clinical disorders and the social worker's role with regards to medication management in treatment.

6. Explain the role of the stigma that exists in society towards individuals and their families dealing with clinical disorders.

VI.   Required Texts and Readings

American Psychiatric Association. (2022). *Diagnostic and Statistical Manual of Mental Disorders*, *DSM-5-TR.* Washington, DC: American Psychiatric Association [This book can be accessed via the Rutgers University Library.]

American Psychiatric Association. (2022). DSM-5-TR fact sheets. https://www.psychiatry.org/psychiatrists/practice/dsm/educational-resources/dsm-5-tr-fact-sheets

==Please keep in mind that since the DSM-5-TR was conceived as a dynamic text use of the online version of the text allows access to the updated data on clinical disorders.==

Pomeroy, E. (2015). *The clinical assessment workbook: Balancing strengths and differential diagnosis* (2nd ed.). Pacific Grove, CA: Brooks/Cole-Thompson Learning.

Recommended Readings:

Gray, S.W. (2016) Psychopathology A Competency-based Assessment Model for Social Workers (4th ed.). Boston, MA: Cengage.

Sadock, B. J., Sadock, V. A., & Ruiz, P. (2015). *Kaplan and Sadock's synopsis of psychiatry: Behavioral sciences/clinical psychiatry* (11th ed.). Lippincott Williams and Wilkins.

- National Alliance for the Mentally Ill (NAMI)
- National Institute of Mental Health
- National Institute on Alcohol Abuse and Alcoholism
- National Institute on Drug Abuse (NIDA)
- National Mental Health Association
- Substance Abuse and Mental Health Services Administration

VII. <u>Course Attendance and Participation Policies</u>

Attendance
Please refer to the school-wide syllabus for the standard attendance policy for classes in on-the-ground (traditional) program, intensive weekend program (IWP), and asynchronous online program.
Students are expected to be **<u>active</u>** learners and collaborators. Students are <u>expected</u> to contribute knowledge and observations to discussions. Regular class participation is expected. When students participate actively in class discussions learning is enhanced. It is important that reading assignments be completed prior to each session. Please take responsibility for seeking clarification of difficult material encountered in the text, readings, and lectures.

Class attendance and participation is **<u>not</u>** optional. No make-up examinations will be given without prior arrangements made with the instructor.

Late Work

All written work **must** be submitted through Canvas unless otherwise directed by the instructor. Late assignments will **not** be accepted, unless the student has made arrangements prior to the assignment due date. The instructor reserves the right to reduce the letter grade for late assignments.

VIII. Assignments and Grading

All written assignments must follow APA format. The professor reserves the right to reduce the letter grade for any assignment that does not confirm to APA format.

Assingment Value:

Grades for the course will be weighted as follows:

Participation/Attendance	10%
Case Exercises	20%
Midterm exam	35%
Final Exam	35%

(Note: Assignments are due by start of class and are to be submitted to canvas under the respective module and assignment drop box.)

IX. Course Outline

A variety of methods are used including lectures, discussions, exercise, assignments, readings, and videos. Readings marked with an asterisk "*" are available electronically through the library reserve system and are required.

Modules	Readings, Activities, and Assignments
1	**Introduction to the DSM -5-TR, Role of Stigma and Mental Health Work** **Learning Objectives:** 1. Describe the organization of the DSM-5-TR. 2. Distinguish between Mental illness and Mental distress. 3. Describe how stigma affects persons diagnosed with a mental disorder. **Required Readings:**

	American Psychiatric Association. (2022). DSM-5-TR fact sheets. https://www.psychiatry.org/psychiatrists/practice/dsm/educational-resources/dsm-5-tr-fact-sheets
	DSM-5-TR: Topics—Introduction, Use of the Manual, Cautionary Statement, p. 5-29.
	Barrera, I., Schulz, C. H., Rodriguez, S.A., Gonzalez, C. J., & Acosta, C. (2013). Mexican-American perceptions of the causes of mental distress. Social Work in Mental Health, 11, 233-248.
	Hansen, H. B., Donaldson, Z., Link, B.G., Bearman, P. S., Hopper, K., Bates, L. M. et al. (2013). Independent review of social and population variation in mental health could improve diagnosis in DSM revision, Health Affairs, 32, 984-993.
	Hinshaw, S. P. (2005). The stigmatization of mental illness in children and parents: developmental issues, family concerns, and research needs. Journal of Child Psychology and Psychiatry, 46, 714-734.
	Recommended Readings:
	Gray, S.W. (2016) Psychopathology A Competency-based Assessment Model for Social Workers (4th ed.). Boston, MA: Cengage. Chapter 1, pages 1-12.
	Sadock, B. J., Sadock, V. A., & Ruiz, P. (2015). *Kaplan and Sadock's synopsis of psychiatry: Behavioral sciences/clinical psychiatry* (11th ed.). Chapter 6, pages 290-299.
2	**Competency-Based Assessment and Ethics.**
	Learning Objectives:
	1. Identify the central themes in Dual Relationships. 2. Summarize the difference between boundary violations and boundary crossing. 3. Describe the components of the competency-based assessment model. 4. Provide examples of Conditions that may be the Focus of Clinical Attention.
	Required Readings:
	DSM-5-TR: Topics-- Assessment Measures, Other Conditions that may be the Focus of Clinical Attention, and Culture and Psychiatric Diagnosis, 821-836, 859-880.
	Pomeroy, E. (2015). *The Clinical Assessment and Differential Diagnosis Workbook: Balancing Strengths*, chapters 1 and 20.
	Ethics
	National Association of Social Workers (NASW; 2021) Code of Ethics. https://www.socialworkers.org/About/Ethics/Code-of-Ethics/Code-of-Ethics-English
	Reamer, F. G. (2003). Boundary issues in social work: Managing dual relationships. https://www.bu.edu/ssw/files/2017/07/Reamer-F.-Boundary-Issues-in-SocialWork-Managing-dual-relationships.pdf

Recommended Readings:

Emmelkamp. (2005). Technological Innovations in Clinical Assessment and Psychotherapy. *Psychotherapy and Psychosomatics, 74*(6), 336–343. https://doi.org/10.1159/000087780

Garcia, Legerski, J.-P., & Petrovich, A. (2021). *Strengthening the DSM: Incorporating resilience and cultural competence.* Springer Publishing Company. Chapter 1, p. 3-27.

Gray, S.W. (2016) Psychopathology A Competency-based Assessment Model for Social Workers (4th ed.). Boston, MA: Cengage. Chapter 1, pages 12-32.

National Association of Social Workers. (2017). Technology in social work practice. https://naswor.socialworkers.org/Portals/31/Docs/PRA-BRO-33617.TechStandards_FINAL_POSTING.pdf?ver=2019-02-14-122206-443

Sadock, B. J., Sadock, V. A., Ruiz, P. (2015*). Kaplan and Sadock's synopsis of psychiatry: Behavioral sciences/clinical psychiatry* (11th ed.). Chapter 5, pages 192-235, Chapter 25, pages 812. 823, and Chapter 26, pages 824-830.

3	**Neurodevelopmental Disorders**

Learning Objectives:

1. Identify the Disorders considered Neurodevelopmental disorders.
2. List common psychosocial and psychopharmacological interventions used to treat neurodevelopmental disorders.
3. Apply the Competency Based Assessment model to the assigned Case Exercises.
4. List other disorders that may co-occur and or need to be considered as Differential Diagnosis.

Required Readings:

DSM-5-TR: Topics—Neurodevelopmental Disorders, 35-100.

Ballentine, K. L. (2019). Understanding Racial Differences in Diagnosing ODD Versus ADHD Using Critical Race Theory. *Families in Society*, *100*(3), 282–292. https://doi.org/10.1177/1044389419842765

Norbury, C. F., & Sparks, A. (2013). Difference or disorder? Cultural issues in understanding neurodevelopmental disorders. *Developmental Psychology, 49*(1), 45–58. https://doi.org/10.1037/a0027446

Pomeroy, E. (2015) *The Clinical Assessment and Differential Diagnosis Workbook: Balancing Strengths*, Chapter 2.

Recommended Readings:

		Gray, S.W. (2016) Psychopathology A Competency-based Assessment Model for Social Workers (4th ed.). Boston, MA: Cengage. Chapter 2, pages 33-65. Mahone, M. E. (2012). Neuropsychiatric differences between boys and girls with ADHD. *Psychiatric Times*, 29, 34-43. Mandell et al. (2009). Racial/ ethnic disparities in the identification of children with autism spectrum disorders. *American Journal of Public Health*, 99, 493-498. Sadock, B. J., Sadock, V. A., Ruiz, P. (2015). Kaplan and Sadock's synopsis of psychiatry: Behavioral sciences/clinical psychiatry (11th ed.). Chapter 31, pages 1137-1205 **Case Exercises can be found on Canvas.** Please carefully review these cases and answer the required questions. When making your diagnosis, please be sure to use the DSM-5-TR to support your formulation.
4		**Disruptive, Impulse-Control and Conduct Disorders** **Learning Objectives:** 1. Identify the disorders in the clinical category of Disruptive, Impulse-Control and Conduct Disorders. 2. Apply the Competency Based Assessment model to the assigned Case Exercises. 3. Describe the common psychosocial and psychopharmacological interventions used to treat clients that meet this clinical criterion. 4. List other disorders that may co-occur and or need to be considered as Differential Diagnosis **Required Readings:** Atkins-Loria, S., Macdonald, H. & Mitterling, C. (2015). Young African American Men and the Diagnosis of Conduct Disorder: The Neo-colonization of Suffering. *Clin Soc Work J* **43,** 431–441. https://doi.org/10.1007/s10615-015-0531-8 DSM-5-TR: Topics—Disruptive, Impulse-Control Disorders, 521-542. Fadus, M.C., Ginsburg, K.R., Sobowale, K. et al. Unconscious Bias and the Diagnosis of Disruptive Behavior Disorders and ADHD in African American and Hispanic Youth. Acad Psychiatry 44, 95–102 (2020). https://doi.org/10.1007/s40596-019-01127-6 Pomeroy, E. (2015). *The clinical assessment workbook: Balancing strengths and differential diagnosis*, Chapter 15. **Recommended Readings:** Fairchild, G., van Goozen, S. H. ., Calder, A. J., & Goodyer, I. M. (2013). Research Review: Evaluating and reformulating the developmental taxonomic theory of antisocial behaviour. *Journal of Child Psychology and Psychiatry, 54*(9), 924–940. https://doi.org/10.1111/jcpp.12102

		Gray, S.W. (2016) Psychopathology A Competency-based Assessment Model for Social Workers (4th ed.). Boston, MA: Cengage. Chapter 13, 353-372
		Kohls, G., Baumann, S., Gundlach, M., Scharke, W., Bernhard, A., Martinelli, A., Ackermann, K., Kersten, L., Prätzlich, M., Oldenhof, H., Jansen, L., van den Boogaard, L., Smaragdi, A., Gonzalez-Madruga, K., Cornwell, H., Rogers, J. C., Pauli, R., Clanton, R., Baker, R., … Konrad, K. (2020). Investigating sex differences in emotion recognition, learning, and regulation among youths with conduct disorder. *Journal of the American Academy of Child and Adolescent Psychiatry, 59*(2), 263–273. https://doi.org/10.1016/j.jaac.2019.04.003
		Sadock, B. J., Sadock, V. A., Ruiz, P. (2015). *Kaplan and Sadock's synopsis of psychiatry: Behavioral sciences/clinical psychiatry* (11th ed.). Chapter 19, pages 608-615, and Chapter 31, pages 1244-1253.
		Case Exercises can be found on Canvas. Please carefully review these cases and answer the required questions. When making your diagnosis, please be sure to use the DSM-5-TR to support your formulation.
5		**Substance-Related and Addictive Disorders** **Learning Objectives:** 1. Identify the disorders in the clinical category of Substance-Related and Addictive Disorders. 2. Apply the Competency Based Assessment model to the assigned Case Exercises. 3. Describe the common psychosocial and psychopharmacological interventions used to treat clients that meet this clinical criterion. 4. List other disorders that may co-occur and or need to be considered as Differential Diagnosis. **Required Readings & Viewing:** DSM-5-TR: Topics—Substance-Related and Addictive Disorders, 543-666. Pomeroy, E. (2015). *The clinical assessment workbook: Balancing strengths and differential diagnosis*, Chapter 16. Understanding the Opioid Epidemic https://www.pbs.org/video/understanding-the-opioid-epidemic-oei0dd **Recommended Readings:** Gray, S.W. (2016) Psychopathology A Competency-based Assessment Model for Social Workers (4th ed.). Boston, MA: Cengage. Chapter 14, 373-442. Sadock, B. J., Sadock, V. A., Ruiz, P. (2015). Kaplan and Sadock's synopsis of psychiatry: Behavioral sciences/clinical psychiatry (11th ed.). Chapter 20, pages 616-693 and Chapter 31, pages 1273-1278 **Case Exercises can be found on Canvas.**

	Please carefully review these cases and answer the required questions. When making your diagnosis, please be sure to use the DSM-5-TR to support your formulation.
6	**Depressive Disorders** **Learning Objectives:** 1. Identify the disorders in the clinical category of Depressive Disorders. 2. Apply the Competency Based Assessment model to the assigned Case Exercises. 3. Describe the common psychosocial and psychopharmacological interventions used to treat clients that meet this clinical criterion. 4. Identify the skills of risk assessment as it pertains to this group of disorders and suicide. 5. List other disorders that may co-occur and or need to be considered as Differential Diagnosis **Required Readings:** DSM-5-TR: Topics—Depressive Disorders, 177-214. Ching, T. H. (2021). Culturally attuned behavior therapy for anxiety and depression in Asian Americans: addressing racial microaggressions and deconstructing the Model Minority Myth. *Cognitive and Behavioral Practice.* https://doi.org/10.1016/j.cbpra.2021.04.006 Columbia Lighthouse Project. (2016). SAFE-T with C-SSRS. https://cssrs.columbia.edu/wp-content/uploads/SAFE-T-Protocol-w-C-SSRS-and-Columbia-Risk-and-Protective-Factors-Recent-2021.docx Falicov, C. J. (2003). Culture, society, and gender in depression. *Journal of family therapy, 25*(4), 371-387. Pomeroy, E. (2015). *The Clinical Assessment Workbook: Balancing Strengths and Differential Diagnosis*, Chapter 5. SAFE-T Protocol with C-SSRS (PDF document on Canvas) **Recommended Readings:** Gray, S.W. (2016) Psychopathology A Competency-based Assessment Model for Social Workers (4th ed.). Boston, MA: Cengage. Chapter 5, 129-160. Sadock, B. J., Sadock, V. A., Ruiz, P. (2015). *Kaplan and Sadock's synopsis of psychiatry: Behavioral sciences/clinical psychiatry* (11th ed.). Chapter 8, pages 347-386, and Chapter 31, pages 1226-1235. **Case Exercises can be found on Canvas.** Please carefully review these cases and answer the required questions. When making your diagnosis, please be sure to use the DSM-5-TR to support your formulation.
7	**Bipolar and Related Disorders** **Learning Objectives:**

	1. Identify the disorders in the clinical category of Bipolar and Related Disorders. 2. Apply the Competency Based Assessment model to the assigned Case Exercises. 3. Evaluate the Case Exercises using a suicide risk assessment tool. 4. Describe the common psychosocial and psychopharmacological interventions used to treat clients that meet this clinical criterion. 5. List other disorders that may co-occur and or need to be considered as a Differential Diagnosis. **Required Readings:** Akinhanmi, Biernacka, J. M., Strakowski, S. M., McElroy, S. L., Balls Berry, J. E., Merikangas, K. R., Assari, S., McInnis, M. G., Schulze, T. G., LeBoyer, M., Tamminga, C., Patten, C., & Frye, M. A. (2018). Racial disparities in bipolar disorder treatment and research: A call to action. *Bipolar Disorders, 20*(6), 506–514. https://doi.org/10.1111/bdi.12638 DSM-5-TR: Topics—Bipolar and Related Disorders, 139-176. Pomeroy, E. (2015). *The Clinical Assessment Workbook: Balancing Strengths and Differential Diagnosis*, Chapter 4. **Recommended Readings:** Gray, S.W. (2016) Psychopathology A Competency-based Assessment Model for Social Workers (4th ed.). Boston, MA: Cengage. Chapter 4, 111-128. Haeri, S. et al. (2011). Disparities in diagnosis of bipolar disorder in individuals of African and European descent: A review. Journal of Psychiatric Practice, 17, 394-403. Sadock, B. J., Sadock, V. A., Ruiz, P. (2015). *Kaplan and Sadock's synopsis of psychiatry: Behavioral sciences/clinical psychiatry* (11th ed.). Chapter 31, pages 1236-1244. **Case Exercises can be found on Canvas.** Please carefully review these cases and answer the required questions. When making your diagnosis, please be sure to use the DSM-5-TR to support your formulation. **Midterm Exam opens**
8	**Anxiety Disorders** **Learning Objectives:** 1. Identify the disorders in the clinical category of anxiety disorders. 2. Apply the Competency Based Assessment model to the assigned Case Exercises 3. Describe the common psychosocial and psychopharmacological interventions used to treat clients that meet this clinical criterion. 4. List other disorders that may co-occur and or need to be considered as Differential Diagnosis **Required Reading**s: DSM-5-TR: Topics—Anxiety Disorders, 215-262.

Garcia, Legerski, J.-P., & Petrovich, A. (2021). *Strengthening the DSM: Incorporating resilience and cultural competence.* Springer Publishing Company. Chapter 4, p. 115-117.

Pomeroy, E. (2015). *The clinical assessment workbook: Balancing strengths and differential diagnosis*, Chapter 6.

Recommended Readings:

Asnaani, A., Gutner, C.A., Hinton, D. E., & Hofmann, S. G. (2009). Panic disorder, panic attacks, and panic attack symptoms across race-ethnic groups: Results of the collaborative psychiatric epidemiology studies. *CNS Neuroscience and Therapeutics*, 13, 249-254.

Gray, S.W. (2016) Psychopathology A Competency-based Assessment Model for Social Workers (4th ed.). Boston, MA: Cengage. Chapter 6, 161-190.

Sadock, B. J., Sadock, V. A., Ruiz, P. (2015). *Kaplan and Sadock's synopsis of psychiatry: Behavioral sciences/clinical psychiatry* (11th ed.). Chapter 9, pages 387-417 and Chapter 31, pages 1253-1263.

Case Exercises can be found on Canvas.
Please carefully review these cases and answer the required questions. When making your diagnosis, please be sure to use the DSM-5-TR to support your formulation.

Midterm Exam Due

9	**Obsessive-Compulsive and Related Disorders**

Obsessive-Compulsive and Related Disorders

Learning Objectives:

1. Identify the disorders in the clinical category of Obsessive-Compulsive and Related Disorders.
2. Apply the Competency Based Assessment model to the assigned Case Exercises.
3. Describe the common psychosocial and psychopharmacological interventions used to treat clients that meet this clinical criterion.
4. List other disorders that may co-occur and or need to be considered as Differential Diagnosis

Required Readings:

DSM-5-TR: Topic—Obsessive-Compulsive and Related Disorders, 263-294.

Lind, Boschen, M. J., & Morrissey, S. (2012). Technological advances in psychotherapy: Implications for the assessment and treatment of obsessive-compulsive disorder. *Journal of Anxiety Disorders, 27*(1), 47–55. https://doi.org/10.1016/j.janxdis.2012.09.004

Pomeroy, E. (2015). *The clinical assessment workbook: Balancing strengths and differential diagnosis*, Chapter 7.

	Recommended Readings: D'Alessandro, T. M. (2009). Factors influencing the onset of childhood obsessive-compulsive disorder. *Pediatric Nursing*, 35, 43-46. Gray, S.W. (2016) Psychopathology A Competency-based Assessment Model for Social Workers (4th ed.). Boston, MA: Cengage. Chapter 7, 191-213. Sadock, B. J., Sadock, V. A., & Ruiz, P. (2015). *Kaplan and Sadock's synopsis of psychiatry: Behavioral sciences/ clinical psychiatry* (11th ed.). Chapter 10, pages 418-436, and Chapter 31. **Case Exercises can be found on Canvas.** Please carefully review these cases and answer the required questions. When making your diagnosis, please be sure to use the DSM-5-TR to support your formulation.
10	**Trauma-and Stress Related Disorders** **Learning Objectives:** 1. Identify the disorders in the clinical category of Trauma-and Stress Related Disorders. 2. Apply the Competency Based Assessment model to the assigned Case Exercises. 3. Describe the common psychosocial and psychopharmacological interventions used to treat clients that meet this clinical criterion. 4. List other disorders that may co-occur and or need to be considered as Differential Diagnosis. **Required Readings:** DSM-5-TR: Topic—Trauma-and Stress Related Disorders, 295-328. Garcia, Legerski, J.-P., & Petrovich, A. (2021). *Strengthening the DSM: Incorporating resilience and cultural competence.* Springer Publishing Company. Chapter 5, p. 136-144. Pomeroy, E. (2015). *The clinical assessment workbook: Balancing strengths and differential diagnosis*, Chapter 8. **Recommended Readings:** Gray, S.W. (2016) Psychopathology A Competency-based Assessment Model for Social Workers (4th ed.). Boston, MA: Cengage. Chapter 8, 214-243. Kline, A. (2013). Gender differences in the risk and protective factors associated with PTSD: A prospective study of National Guard troops deployed to Iraq. *Psychiatry*, 76, 256-272. Rauch, S. A. M., Eftekhari, A., & Ruzek, J. I. (2012). Review of exposure therapy: A gold standard for PTSD treatment. *Journal Rehabilitation Research and Development, 49*(5), 679-688.

	Sadock, B. J., Sadock, V. A., & Ruiz, P. (2015). *Kaplan and Sadock's synopsis of psychiatry: Behavioral sciences/ clinical psychiatry* (11th ed.). Chapter 11, pages 437-450 and Chapter 31, pages 1216-1225. **Case Exercises can be found on Canvas.** Please carefully review these cases and answer the required questions. When making your diagnosis, please be sure to use the DSM-5-TR to support your formulation.
11	**Personality Disorders** **Learning Objectives:** 1. Identify the disorders in the clinical category of Personality Disorders. 2. Apply the Competency Based Assessment model to the assigned Case Exercises. 3. Describe the common psychosocial and psychopharmacological interventions used to treat clients that meet this clinical criterion. 4. List other disorders that may co-occur and or need to be considered as Differential Diagnosis. **Required Readings:** DSM-5-TR: Topics--Personality Disorders, 667-732. Pomeroy, E. (2015). *The clinical assessment workbook: Balancing strengths and differential diagnosis*, Chapter 18. **Recommended Readings:** Gray, S.W. (2016). *Psychopathology A Competency-based Assessment Model for Social Workers.* (4th ed.). Boston, MA: Cengage. Chapter 16, 475-539. Sadock, B. J., Sadock, V. A., & Ruiz, P. (2015). *Kaplan and Sadock's synopsis of psychiatry: Behavioral sciences clinical psychiatry* (11th ed.). Chapter 22, pages 742-762. Skodol, A. E., & Bender, D. S. (2003). Why are women diagnosed borderline more than men? *Psychiatry Quarterly*, 74, 349-360. **Case Exercises can be found on Canvas.** Please carefully review these cases and answer the required questions. When making your diagnosis, please be sure to use the DSM-5-TR to support your formulation.
12	**Schizophrenia Spectrum and Other Psychotic Disorders** **Learning Objectives:** 1. Identify the disorders in the clinical category of Schizophrenia Spectrum and Other Psychotic Disorders. 2. Apply the Competency Based Assessment model to the assigned Case Exercises. 3. Describe the common psychosocial and psychopharmacological interventions used to treat clients that meet this clinical criterion.

	4. List other disorders that may co-occur and or need to be considered as Differential Diagnosis. **Required Reading:** DSM-5-TR: Topic—Schizophrenia Spectrum and Other Psychotic Disorders, 101-138. Coldwell, J., Meddings, S., & Camic, P. M. (2011). How people with psychosis positively contribute to their family: A grounded theory analysis. *Journal of Family Therapy*, 33, 353-371. Garcia, Legerski, J.-P., & Petrovich, A. (2021). *Strengthening the DSM: Incorporating resilience and cultural competence.* Springer Publishing Company. Chapter 8, p. 249-251. Pomeroy, E. (2015). *The clinical assessment workbook: Balancing strengths and differential diagnosis*, Chapter 3. **Recommended Readings:** Gray, S.W. (2016). *Psychopathology A Competency-based Assessment Model for Social Workers.* (4th ed.). Boston, MA: Cengage. Chapter 3, 66-110. Sadock, B. J., Sadock, V. A., & Ruiz, P. (2015). *Kaplan and Sadock's synopsis of psychiatry: Behavioral sciences/ clinical psychiatry* (11th ed.). Chapter 7, pages 300-346 and Chapter 31, 1268-1273. **Case Exercises can be found on Canvas.** Please carefully review these cases and answer the required questions. When making your diagnosis, please be sure to use the DSM-5-TR to support your formulation.
13	**Feeding, Eating Disorders, and Elimination Disorders** **Learning Objectives:** 1. Identify the disorders in the clinical category of Feeding, Eating Disorders, and Elimination Disorders. 2. Apply the Competency Based Assessment model to the assigned Case Exercises. 3. Describe the common psychosocial and psychopharmacological interventions used to treat clients that meet this clinical criterion. 4. List other disorders that may co-occur and or need to be considered as Differential Diagnosis. **Required Readings:** DSM-5-TR: Topics—Feeding and Eating Disorders, 371-398 & Elimination Disorders, 399-406. Goode, R.W., Cowell, M. M., Mazzeo, S.E., Cooper-Lewter, C., Forte, A., Olayia, O., Bulik, C.M. (2020). Binge eating and binge-eating disorder in Black women: A systematic

review. *The International Journal of Eating Disorders, 53*(4), p. 491-507.
https://doi.org/10.1002/eat.23217

Smart, R. Yuying, T., Mejfa, O.L., Hayashino, D., & Braaten, M. E. T. (2011). Therapists'
experiences treating Asian American women with eating disorders. *Professional
Psychology: Research and Practice.* 42, 308-315.

Strother, E., Lemberg, R., Stanford, S. C., & Tuberville, D. (2012). Eating Disorders in Men:
Underdiagnosed, undertreated, and misunderstood. *Eating Disorders: The Journal of
Treatment and Prevention*, 20, 346-355.

Recommended Readings:

Buser, J. K. (2010). American Indian adolescents and disordered eating. *Professional School
Counseling*, 14, 146-155.

Gray, S.W. (2016) Psychopathology A Competency-based Assessment Model for Social
Workers (4th ed.). Boston, MA: Cengage. Chapter 11, 297-340.

Pomeroy, E. (2015). *The clinical assessment workbook: Balancing strengths and differential
diagnosis*, Chapter 11.

Sadock, B. J., Sadock, V. A., & Ruiz, P. (2015*). Kaplan and Sadock's synopsis of psychiatry:
Behavioral sciences/ clinical psychiatry* (11th ed.). Chapter 15, pages 509-522, Chapter
31, pages 1205-1216.

Case Exercises can be found on Canvas.
Please carefully review these cases and answer the required questions. When making your
diagnosis, please be sure to use the DSM-5-TR to support your formulation.

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14 | **Dissociative Disorder, Somatic Symptom and Gender Dysphoria**

Learning Objectives:

1. Identify the disorders in the clinical category of Dissociative Disorder, Somatic
   Symptom and Related Disorders.
2. Apply the Competency Based Assessment model to the assigned Case Exercises.
3. Describe the common psychosocial and psychopharmacological interventions used to
   treat clients that meet this clinical criterion.
4. List other disorders that may co-occur and or need to be considered as Differential
   Diagnosis.

Required Readings:

DSM-5-TR: Topic—Dissociative Disorders, 329-348, Somatic Symptom and Related Disorders,
349-370.

Davy, Z., & Toze, M. (2018). What is gender dysphoria? A critical systematic narrative
review. *Transgender health*, *3*(1), 159-169.

	Pomeroy, E. (2015). *The clinical assessment workbook: Balancing strengths and differential diagnosis*, Chapters 9, and 10. Ringrose, J. L. (2011). Meeting the needs of clients with dissociative identity disorder: Considerations for psychotherapy, *British Journal of Guidance and Counselling*, 39, 293-305. **Recommended Readings:** Gray, S.W. (2016) Psychopathology A Competency-based Assessment Model for Social Workers (4th ed.). Boston, MA: Cengage. Chapter 9, 244-269; Chapter 10, 270-296. Sadock, B. J., Sadock, V. A., & Ruiz, P. (2015). *Kaplan and Sadock's synopsis of psychiatry: Behavioral sciences/ clinical psychiatry* (11th ed.). Chapter 12, pages 451-464, Chapter 13, pages 465-503, and Chapter 18, 600-607. **Case Exercises can be found on Canvas.** Please carefully review these cases and answer the required questions. When making your diagnosis, please be sure to use the DSM-5-TR to support your formulation. **Final Exam opens**
15	**Last Class** **Final Exam Due (Modules 8-14)**

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