****

**North Carolina Central University**

**School of Education**

Department of Counselor Education (DCE)

**The School of Education’s Vision:** To Prepare Educators for Diverse Cultural Contexts and Advance Teaching, Scholarship, and Service through Diversity, Partnership, and Technology.

#### **The Department of Counselor Education’s mission:** North Carolina Central University is located in Durham, a fairly urban area in central North Carolina.  Nearby regions include rural areas, as well as the Research Triangle Park.  The Department of Counselor Education prepares professional counselors to work in career, school, and community agency settings who promote development across the lifespan, advocate for systemic change, and respond to the complexity of human needs associated with a diverse society.  Faculty is expected to teach and mentor students, serve the community and profession, and conduct and disseminate research.

# Syllabus

# CON 5305-OL1

**Advanced Abnormal Psychology**

## **Summer Session I**

*Online Course Utilizing Blackboard*

**Instructor**: Heloisa Portela, PhD, NCC, LPCS, ACS, RPT-S

**Phone**: 919-530-6212

**Email**: heloisa.portela@nccu.edu

**Office Hours**: By Appointment.

## **Required Texts**

American Psychological Association (2009). *Publication manual of the American Psychological Association* (6th ed.). Washington, DC: Author.

Kring, A. M., Davison, G.C., Neale, J.M. & Johnson, S.L. (2012). *Abnormal Psychology* (12th ed.). New York: John Wiley & Sons.

Oltmanns, T.F., Martin, M.T., Neale, J.M., & Davison, G.C. (2012). *Case Studies in Abnormal Psychology* (9th ed.). New York: John Wiley & Sons.

*One of the following texts:*

American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders* (5th ed.). Washington, D.C.: Author.

American Psychiatric Association. (2000). *Diagnostic and statistical manual of mental*

*disorders* (4th ed., TR). Washington, D.C.: Author.

**Course Description**

This course serves as a critical review of contemporary paradigms of abnormal behavior and the diagnosis, etiology and treatment of abnormal behavior or mental disorders cited in the current edition of the Diagnostic and Statistical Manual of Mental Disorders.

**Website**: http://nccu.blackboard.com/ This class will utilize the campus “Blackboard” system.

**Foliotek:** Maintaining an electronic portfolio (i.e., 'Foliotek') is a requirement for continued enrollment as a degree-seeking student in the School of Education at North Carolina Central University. You MUST maintain a Foliotek account while enrolled in school, and you will be required to upload a majority of your assignments to the system (assignments are marked.). The university will use the information to track data and verify that you have met competencies of your program of study - but more importantly - this system will serve as your own professional e-portfolio and file storage.  
  
Once you have registered with Foliotek and have access to your Foliotek account, please create a folder for each course that you take. You are encouraged to upload all of your work (future and previous) for each class in its respective folder. Some of it may be used for your required portfolio.  At the least, you'll have access to all of your work as long as you have access to your online Foliotek account.

**Films/Documentaries:** We will be watching specific documentaries or short videos throughout the course that relate to your readings and to the topic of abnormal psychology.

**Email Correspondence:** When contacting me via email your email subject line should be relevant to your email content. Please use **“CON 5305: (Reason for your email)”** and then describe the nature of your email.

**Prerequisites:** CON 5361: Assessment, Evaluation and Analysis in Counseling.

## **Adverse Weather:** Please read http://web.nccu.edu/publicrelations/EmergencyPlan.pdf for the University’s policy on adverse weather. Please follow the instructions as outlined in the University policy. In addition, announcements regarding scheduled delays or the closing of the university due to adverse weather conditions will be broadcast on local radio and television stations.

# Student Support Services for Students with Disabilities

Students with disabilities (physical, psychological, learning disability, etc.) who would like to request accommodations need to register with the Office of Student Support Services in Suite G20 in the Student Services Building or by contacting Kesha Lee, Director at (919) 530-6325 or klee@nccu.edu. If you are already registered in the office, you need to return to the office each semester to review your information and receive updated accommodations.

Students with documented disabilities are entitled to receive approved modifications, appropriate academic adjustments, or auxiliary aids that will enable them to participate in and have the opportunity to benefit from all educational programs and activities of North Carolina Central University. Please let the instructor know, as soon as possible, if you have a disability so that she may coordinate with you the appropriate accommodations to which you are entitled. Disabilities must be document with the Office of Student Support Services (SSS).

**Ethical Standards**

Universities are unique communities committed to creating and transmitting knowledge through the freedom individuals have to explore ideas and to further their own capabilities. This freedom depends on the responsible behavior of all the members of the community who must treat each other with respect. They must allow each other to develop the full range of their capabilities and take full advantage of the institution’s resources. Students are expected to abide by the University academic integrity policy. Do not receive or give any assistance on tests or projects unless specifies by the instructor. For further information regarding academic integrity, academic dishonesty, cheating, plagiarism, and sanctions, refer to http://www.nccu.edu/catalog2k2/075-092.pdf. Students are also expected to adhere to the Ethical standards of the American Counseling Association. If you have not already familiarized yourself with ACA Ethical standards and the Universities policies on academic integrity, it is recommended that you do so.

**Course Policies And Expectations**

1. Log in to blackboard daily to check for announcements and participate in discussions.

2. All work submitted should reflect graduate level content and preparation. Careless preparation (i.e., spelling and grammatical errors) will adversely affect the grade for that assignment or task. Do not submit any work that you have not proofread. Late assignments, if accepted, will have a reduced grade. Note that a maximum of 80% credit can be obtained on late assignments.

3. Follow all directions and due dates provided in the syllabus (no exceptions).

4. Read and listen/watch all material provided on the course website.

5. Regularly check your email account. I will correspond with you from time to time via campus email. If you are not receiving communication because you aren’t checking the account regularly, then it is not the fault of the instructor.

6. Ensure that you are entirely familiar with all functions available to you via Blackboard. Not knowing how to use various functions of Blackboard is not an excuse for not completing assignments. Contacting the campus ITS helpline should you experience technical problems related to Blackboard (919.530.7676). Do not call or email the instructor with Blackboard technical-related issues, call the help-line.

7. Complete all assigned readings as assigned. You are expected to discuss, summarize, and react to all readings.

8. Attendance will be monitored through blackboard. Inactivity or poor attendance will cause you to be dropped from the course. If you fail to drop the course by the last day of classes, you will be assigned an NF grade (which is equivalent to an “F”). In addition, per University policy, students are permitted two absences per year for religious observances. If you need to miss a class as part of a religious observance you must notify me before the end of the first week of class.

9. Controversial topics and/or opinions may arise during the course of discussions that may cause strong feelings or emotions. It is important that any debate of these topics and opinions be discussed in a respectful and courteous manner. Please be mindful and courteous of others as you participate in the course. It is important our class be a nurturing place for conscientious dialogue.

**Course Requirements**

All assignments and exams must be completed in a scholarly manner and uploaded into Blackboard on time in order to receive a passing grade in the course. Late assignments will be marked down one letter grade for everyday of tardiness. **Make-up exams are usually not available unless there is an extreme emergency situation.**

Make-up exams are not given unless you have a University recognized excuse (e.g. religious holiday, death in the family, medically excused absence due to illness, inclement weather, or participation in a University related athletic event). Vacations, holidays not recognized by the University, or job-related issues that conflict with assignments, quizzes, and/or exams are not University recognized excuses.

## Attendance and participation is an absolute necessity for success in this course. Lack of participation **will result in lowering of the final grade or failing the course**.

**Student Learning Outcomes**

The Student Learning Outcomes for Advanced Abnormal Psychology are based on the CACREP Clinical Mental Health Counseling Specialty Standards (CACREP, 2009) as shown in the table below:

|  |  |  |  |
| --- | --- | --- | --- |
| **CACREP STANDARDS (2009)** | **STUDENT OUTCOME** | **METHOD FOR OBTAINING OUTCOME** | **METHOD FOR EVALUATION OF OUTCOME** |
| **COUNSELING, PREVENTION, AND INTERVENTION**  C. Knowledge  1. Describes the principles of mental health, including prevention, intervention, consultation, education, and advocacy, as well as the operation of programs and networks that promote mental health in a multicultural society. | Students will understand, identify, and assess the principles of mental health, including prevention, intervention, consultation, education, and advocacy, giving special consideration for multicultural issues.  . | Readings  Videos  Peer Discussions  Lectures | - Test scores  - Peer discussion responses  - Case Study Counseling Plan  - Psychological Disorder Paper |
| 2. Knows the etiology, the diagnostic process and nomenclature, treatment, referral, and prevention of mental and emotional disorders | Students will understand, identify, and assess the diagnostic process and nomenclature, treatment, referral, and prevention of mental and emotional disorders | Readings  Videos  Peer Discussions  Lectures | - Test scores  - Peer discussion responses  - Case Study Counseling Plan  - Psychological Disorder Paper |
| 7. Knows the principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning. | Students will understand, identify, and assess the principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning. | Readings  Videos  Peer Discussions  Lectures | - Test scores  - Peer discussion responses  - Case Study Counseling Plan |
| D. Skills and Practices  2. Applies multicultural competencies to clinical mental health counseling involving case conceptualization, diagnosis, treatment, referral, and prevention of mental and emotional disorders. | Students will apply multicultural competencies to clinical mental health counseling involving case conceptualization, diagnosis, treatment, referral, and prevention of mental and emotional disorders | Readings  Videos  Peer Discussions  Lectures | - Test scores  - Peer discussion responses  - Case Study Counseling Plan  - Psychological Disorder Paper |
| **ASSESSMENT**  G. Knowledge  1. Knows the principles and models of assessment, case conceptualization, and concepts of normalcy and psychopathology leading to diagnoses and appropriate counseling treatment plans. | Students will understand, identify, and apply the principles and models of assessment, case conceptualization, and concepts of normalcy and psychopathology leading to diagnoses and appropriate counseling treatment plans. | Readings  Videos  Peer Discussions  Lectures | - Test scores  - Peer discussion responses  - Case Study Counseling Plan  - Psychological Disorder Paper |
| H. Skills and Practices  1. Selects appropriate comprehensive interventions to assist in diagnosis and treatment planning, with an awareness of cultural bias in the implementation and interpretation of assessment. | Students will understand, identify, and apply appropriate comprehensive interventions to assist in diagnosis and treatment planning, with an awareness of cultural bias in the implementation and interpretation of assessment. | Readings  Videos  Peer Discussions  Lectures | - Test scores  - Peer discussion responses  - Case Study Counseling Plan |
| 2. Demonstrates skill in conducting an intake interview, a mental status evaluation, a biopsychosocial history, a mental health history, and a psychological assessment, for treatment planning and caseload management. | Students will demonstrate skill in conducting an intake interview, a mental status evaluation, a biopsychosocial history, a mental health history, and a psychological assessment. | Readings  Videos  Peer Discussions  Lectures | - Test scores  - Peer discussion responses  - Case Study Counseling Plan |
| **DIAGNOSIS**  K. Knowledge  1. Knows the principles of the diagnostic process, including differential diagnosis, and the use of current diagnostic tools, such as the current edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM). | Students will understand, identify, and apply the principles of the diagnostic process, including differential diagnosis, and the use of current diagnostic tools, such as the current edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM). | Readings  Videos  Peer Discussions  Lectures | - Test scores  - Peer discussion responses  - Case Study Counseling Plan  - Psychological Disorder Paper |
| 2. Understands the established diagnostic criteria for mental and emotional disorders, and describes treatment modalities and placement criteria within the continuum of care. | Students will understand the established diagnostic criteria for mental and emotional disorders and describe treatment modalities and placement criteria within the continuum of care. | Readings  Videos  Peer Discussions  Lectures | - Test scores  - Peer discussion responses  - Case Study Counseling Plan  - Psychological Disorder Paper |
| 4. Understands the relevance and potential biases of commonly used diagnostic tools with multicultural populations. | Students will understand the relevance and potential biases of commonly used diagnostic tools with multicultural populations. | Readings  Videos  Peer Discussions  Lectures | - Test scores  - Peer discussion responses  - Case Study Counseling Plan |
| L. Skills and Practices  1. Demonstrates appropriate use of diagnostic tools, including the current edition of the DSM, to describe the symptoms and clinical presentation of clients with mental and emotional impairments. | Students will demonstrate appropriate use of diagnostic tools, including the current edition of the DSM, to describe the symptoms and clinical presentation of clients with mental and emotional impairments. | Readings  Videos  Peer Discussions  Lectures | - Test scores  - Peer discussion responses  - Case Study Counseling Plan  - Psychological Disorder Paper |
| 2. Is able to conceptualize an accurate multi-axial diagnosis of disorders presented by a client and discuss the differential diagnosis with collaborating professionals. | Students will conceptualize an accurate multi-axial diagnosis of disorders presented by a client and how to discuss the differential diagnosis with collaborating professionals. | Readings  Videos  Peer Discussions  Lectures | - Test scores  - Peer discussion responses  - Case Study Counseling Plan |

Additionally:

* The student will demonstrate the ability to conceptualize the etiology of abnormal behavior based on various contemporary paradigms.
* The student will be able to discuss the impact of the factors of culture, ethnicity and gender on the understanding of mental health.
* The student will be able to discuss the advantages and disadvantages of treatment strategies based on the various contemporary paradigms of behavior.
* The student’s comprehension of the coursework will reflect the basic skills necessary to develop clinical formulations, diagnoses, and preliminary treatment plans for sample case materials.

This course will be graded using an A to F-system as follows:

|  |  |
| --- | --- |
| 405 and above | A |
| 360 and above | B |
| 315 and above | C |
| Below 315 points | F |

Students will be evaluated as follows:

|  |  |  |
| --- | --- | --- |
| Class activity and Discussions | 100 pts | On-going |
| Psychological Disorder Paper | 50 pts | May 26th |
| Case Study Counseling Plan | 100 pts | June 9th |
| Midterm Exam | 100 pts | June 1st |
| Final Exam | 100 pts | June 21st |
| **Total Points** | **450 pts** |  |

**ASSIGNMENTS**

# Class participation & Discussion Board (100 points)

Overall criteria for the participation grade:

1) Apply the knowledge on diagnosis, etiology and treatment of abnormal behavior as cited in the current edition of the Diagnostic and Statistical Manual of Mental Disorders as well as in other scholarly resources.

2) Actively and respectfully engage in class activities and follows guidelines for discussion postings;

3) Substantively and scholarly contribute to class discussion displaying critical and creative thinking skills;

4) Demonstrate dispositions consistent with an inclusive, multicultural, and ethical counseling role in promoting well-being, healthy relationships, academic success, and career mastery.

Active participation in the discussion board is very important! Active participation requires that you develop a substantive initial posting for each of the discussion topics. In addition, you should also respond to the postings of at least two of your classmates for each discussion question. These responses to other learners need to be substantive posts that contribute to the conversation by asking questions, respectfully debating positions, and presenting supporting information relevant to the topic.  
 **Discussion postings instructions and tips: You must adhere to the following:**  
  
- Each initial response to a discussion must be a maximum of 450 words, not including references and citations.

- **Initial postings** are to be written within the first two days of the discussion opening. Discussions will be opened mostly on **Sunday and Thursday**, making your initial postings due by Monday at 11:59PM and Friday at 11:59PM.

- Discussions will be closed on Wednesdays at 11:59PM and Sunday at 11:59PM.

- Include at least 2 scholar references in your initial posting.  
  
- Please include the number of words you used in the last line of your posting (after references).   
  
- **Peer Responses** are to be written before the discussions close (Wednesdays at 11:59PM and Sunday at 11:59PM).

- Each peer response must be written using a minimum of 100 words, not including any references and citations.  Two peer responses are required for each discussion.  
  
- References and citations need to follow APA formatting and need to be included in the end of your initial postings.   
  
- Tip: Use headings in your posting.

- Forums open and close according to the dates on the course schedule. My suggestion is for you to create your postings early, since once forums are closed, you will not have access to it any longer.  
  
-Some discussions are based on selections from *Case Studies in Abnormal Psychology,* 9th Edition.  The assigned case study is indicated on the course schedule.    
  
- I also suggest that you write your posting in a word document and copy and paste into the forum.  
  
- Please post any questions in the “Ask Dr. H Portela” forum.

Please remember the guidelines for discussions: Active participation in the discussion board is very important! Active participation requires that you develop a substantive initial posting for each of the discussion topics. In addition, you should also respond to the postings of at least two of your classmates for each discussion question. These responses to other learners need to be substantive posts that contribute to the conversation by asking questions, respectfully debating positions, and presenting supporting information relevant to the topic.

**Written Communication:** Written communication is free of errors so that the overall message is clear. May be written in first-person (especially peer responses). All questions must be answered in full according to the instructions for that week.

**APA Formatting:** References and citations are formatted according to APA (6th Edition) Style.

**In-text citations and References:** Include at least 2 scholar references in your initial posting. Students who desire to earn an “A” should add additional information from current scholarly peer reviewed articles (published in the last 5 – 7 years).

**Structure of Post:** Indicate that it is your initial post, for example: “Main Post – Jane Smith.” Utilize headings throughout your post according to the questions asked. I am interested in the answer you found in the literature as well as your scholarly thoughts and ideas. In your responses, think of how you can apply what you are learning about research to your own journey as a practitioner as well as your own research interest. In your peer responses, please indicate the number of the response as well as the person that you are responding to: “Response #1 – Jasmita Singh” and then “Response #2 – Maria Ortiz.” Indicate in your post what you are responding to about his/her post.

**Length of Post:** Each initial response (main post) must be between 350 and 450 words, not including references and citations. Please include the number of words you used in the last line of your posting. Each response to your peer must be written using a minimum of 100 words, not including any references and in text citations.

**Psychological Disorder Paper (50 points)**

- Choose one disorder from the list below.

- Write a paper (minimum 3 pages, maximum 5 pages, not including References or Appendix) including the following:

- Brief overview of the disorder

- Information from at least 3 peer reviewed articles published within the last 5 years

- Key points of the DSM-5 criteria for the disorder being discussed

- Key symptoms of the diagnosis

- How to diagnose a client? Find an assessment tool (questionnaire, checklist) to be used

to assess this diagnosis and include it as an appendix to your paper. Provide an overview of the tool.

- Provide specific recommendations on best practices to treating the disorder.

- Review the changes for this diagnosis in the DSM-5.

- Include a link to a short video clip online about the disorder and provide a brief discussion in your paper on how this video helped you learn about this disorder.

**Disorder Groups (pick 1 disorder from a group below):**

- Anxiety Disorders

- Mood Disorders

#### - Disorders of Childhood

- Sexual and Gender Identity Disorders

#### - Late Life and Psychological Disorders

- Schizophrenia

- Personality Disorders & DBT

- Somatoform Disorders and Dissociative Disorders

- Eating Disorders

- Substance Related Disorders

- Stress and Health

**Case Study Counseling Plan (100 points)**

For the Case Study Counseling Plan group course project, you should act as the counselor and create a counseling plan for a case study created by your group. Choose a diagnosis from the DSM-5 and write a case study that fits its criteria.

The following topics must be addressed in your case study and treatment plan:

- Case study details (demographics, suicidality, relationship status, sexual orientation, religious beliefs, culture and ethnic information)

- Client Assessment (psychological assessment, family history, mental health history, medical history, and biological, cultural, and psychological factors impacting diagnosis)

- Multi-axial diagnostic impression of the client AND the diagnosis according to the DSM-5

- Scholarly supported information about client’s primary diagnosis (general information about diagnosis, symptoms, and prognosis).

- Creation of three measurable goals for treatment.

- Critical explanation and assessment of evidence-based systemic counseling interventions for the mental health issues presented in the case study.

- Explanation of what techniques a counselor would use to help this client.

- Must include an intake form for the client in the appendix of the paper.

The body of your project paper must be a minimum of 8 and maximum of 10 typed double-spaced pages. The title page, abstract, table of contents and references are not included in this count. Utilize headings before the discussion of each one of the main points above. Remember that all your academic work is to be written in third person ("this learner" and "this author" are not acceptable uses of third person).

Make sure your assignment is well scholarly supported!! Cite at least 7 peer reviewed scholar resources in your assignment. At least 5 of your peer-reviewed resources should be no more than 5 years old. Remember not to rely on direct quotes. Instead, use your own words to summarize what a specific author has said (and cite accordingly). Remember that APA formatting requires you to use font Times New Roman, 12 point.

Cite and reference your sources in proper APA style. Not formatting your assignment according to APA will cost you one letter grade. Format your file according to APA 6th Edition formatting: title page, abstract, table of contents, reference page.

A discussion forum has been established for you to talk with others in the class to determine who will work in your 3-4 person group. You should email the instructor the names of members by June 5, 2013 and a new discussion forum will be established to serve as a means of group communication through-out the project.

**Mid-term and Final Assessments (200 points)**

Two assessments will be given via blackboard: a mid-term and a final exam. The exams will consist of multiple choice and fill-in the blank. The midterm exam will be available from Sunday, June 2, 2013 at 3:00pm and will close on Monday, June 3, 2013 at 6:00pm. The final exam will be available from Friday, June 21, 2013 at 3:00pm and will close on Saturday, June 22, 2013 at 6:00pm.

**COURSE SCHEDULE**

(Subject to modification by instructor)

KDNJ= Kring, Davis, Neale, Johnson DSM= DSM-5

|  |  |  |
| --- | --- | --- |
|  | **Topics** | **Assignments** |
| **May 21 – May 29** | Historical Review  Paradigms in Psychopathology  Research Methods  Psychological Treatment  Legal and Ethical Issues | Read Chapters 1, 2, 4, 16 (KDNJ)  Read Psychological Treatment posted in Content  Complete introduction discussion 5/21 – 5/22  Complete Discussion Questions (DQ) #1  5/21 – 5/26  Complete DQ #2  5/23 – 5/26  Complete DQ #3  5/25 – 5/29  **Due: Psychological Disorder Paper on 5/26 at 11:59PM.** |
| **May 30 – June 5** | Diagnosis and Assessment  Anxiety Disorders  Obsessive-Compulsive and Trauma Related Disorders  Mood Disorders | Read Chapters 3, 6, 7, & 5 (KDNJ)  Complete DQ#4  (Case Studies in Abnormal Psychology pgs. 35-51)  5/30 – 6/2  Complete DQ#5  6/1 – 6/5  **Midterm**  **6/2 3:00pm – 6/3 6:00pm** |
| **June 6 – June 12** | Disorders of Childhood  Sexual and Gender Identity Disorders  Late Life and Psychological Disorders | Read Chapters 13, 12, & 14 (KDNJ)  Complete DQ #6  (Case Studies in Abnormal Psychology pgs. 202-220)  6/6 – 6/9  Complete DQ #7  6/8 – 6/12  **Due: Case Study Counseling Plan on 6/9 at 11:59PM.** |
| **June 13 – June 19** | Schizophrenia  Personality Disorders  Dissociative and Somatoform Disorders  Eating Disorders | Read Chapters 9, 15, 8, & 11 (KDNJ)  Complete DQ #8  (Case Studies in Abnormal Psychology pgs. 115-129)  6/13 – 6/16  Complete DQ #9  6/15 – 6/19  Complete DQ #10  (Case Studies in Abnormal Psychology pgs. 159-170)  6/17 – 6/20 |
| **June 20 – June 24** | Substance Related Disorders  Stress and Health | Read Chapter 10  Read Stress and Health posted under content  Complete DQ #11  6/20 – 6/23  **Final Exam**  **6/21 3:00pm – 6/22 6:00pm** |

**Discussions Rubric**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Criteria** | **F: Non-Performance** | **C: Basic** | **B: Proficient** | **A: Distinguished** |
| **Responsiveness** | Postings and responses are *unresponsive* to the requirements of the discussion instructions and/or the prompt provided. They miss the point of the question by providing responses that are insubstantial and/or anecdotal (e.g., largely comprised of student opinion), and do not demonstrate that the student has read, viewed, and considered the learning resources and/or colleague postings. | Postings and responses are *somewhat responsive* to the requirements of the discussion instructions and/or the prompt provided. They lack in substance by relying more on anecdotal than scholarly evidence (e.g., largely comprised of student opinion); and/or do not adequately demonstrate that the student has read, viewed, and considered the learning resources and/or colleague postings. | Postings and responses are *responsive to and meet the requirements* of the discussion instructions and/or the prompt provided. They respond to the question being asked in a substantive, reflective, and evidence-based way and demonstrate that the student has read, viewed, and considered the learning resources and/or colleague postings. | Postings and responses are *responsive to and exceed requirements* of the discussion instructions and/or the prompt provided. They respond to the question being asked and *go beyond what is required* in some meaningful way (e.g., incorporates additional readings outside of the assigned learning resources). They are substantive, reflective, evidence-based and demonstrate that the student has read, viewed, and considered the learning resources and/or colleague postings. |
| **Content Knowledge** | Postings and responses *demonstrate a lack of understanding* of the concepts and issues presented in the course; and/or are inaccurate, contain many omissions and errors, are not supported by research/evidence, and contain many critical errors when demonstrating specific skills or strategies. | Postings and responses *demonstrate minimal understanding* of concepts and issues presented in the course, and contain some omissions and/or errors, are not supported by research/evidence and/or the research/evidence is inappropriate or marginal in quality, and there is a lack of mastery of skills and/or numerous errors when demonstrating specific skills or strategies. | Postings and responses *demonstrate understanding and application* of the concepts and issues presented in the course demonstrating that the student has absorbed the general principles and ideas presented; and postings/responses are supported by research/evidence from peer-reviewed books and journals, and mastery and application of skills or strategies are demonstrated. | Postings and responses *demonstrate in-depth understanding and application* of concepts and issues presented in the course demonstrating that the student has integrated the general principles and ideas presented, and postings/responses are well supported by pertinent research/evidence from a variety of peer-reviewed books and journals, and mastery and thoughtful/accurate application of skills or strategies are demonstrated. |
| **Quality of Writing** | Postings and responses are *well below graduate level writing expectations*. They use unclear and inappropriate  language, make many errors in spelling, grammar and syntax, do not provide information about a source when citing or paraphrasing it, directly quote from original source materials and/or consistently paraphrase rather than use original language, and/or are discourteous and disrespectful when offering suggestions, feedback, or opposing viewpoints. | Postings and responses are *somewhat below graduate-level writing expectations*. They use language that is unclear  and/or inappropriate, make more than occasional errors in spelling, grammar, and syntax, provide inadequate information about a source when citing or paraphrasing it, under-use original language and over-use direct quotes and paraphrases; and/or are at times less than courteous and respectful when offering suggestions, feedback, or opposing viewpoints. | Postings and responses *meet graduate-level writing expectations*. They use language that is clear; make only a few errors in spelling, grammar, and syntax; provide adequate information about a source when citing or paraphrasing it; use original language wherever possible and only directly quote when necessary and/or appropriate; and/or are courteous and respectful when offering suggestions, constructive feedback, or opposing viewpoints. | Postings and responses *exceed graduate-level writing expectations*. They use language that is clear, concise, and appropriate; make few if any errors in spelling, grammar, and syntax; provide adequate information about a source when citing or paraphrasing it; use a preponderance of original language and only directly quote when necessary and/or appropriate; and/or are positive, courteous, and respectful when offering suggestions, constructive feedback, or opposing viewpoints. |
| **Contribution to the Discussion** | Postings and responses *do not contribute* to the quality of Discussion interaction, thinking, and learning as they do not provide examples, do not include interesting thoughts or ideas, and/or do not demonstrate critical thinking. Response posts miss the mark, do not attend to the content of the discussion, and/or are not supported by the learning resources. | Postings and responses *do little to contribute* to the quality of Discussion interactions, thinking, and learning by providing few and/or irrelevant examples; few if any thought-provoking ideas, and “regurgitated” knowledge rather than critical thinking. Response posts do not demonstrate that the student has read, viewed, and considered a sampling of colleagues' postings; absorbed the general principles and ideas presented; or demonstrated mastery and thoughtful/accurate application of skills or strategies presented in the course. | Postings and responses *contribute* to the quality of the interactions, thinking, and learning by providing relevant examples, thought provoking ideas and interpretations, and critical thinking. Response posts demonstrate that the student has read, viewed, and considered a sampling of colleagues' postings; absorbed the general principles and ideas presented; and demonstrate mastery and thoughtful/accurate application of skills or strategies presented in the course. | Postings and responses *significantly contribute* to the quality of the discussion; Full points for main posts are awarded to those reflective of interactions, thinking, and learning by providing rich and relevant examples, discerning and thought-provoking ideas, stimulating prompts and probes, new perspectives, and original and critical thinking. Full points for response posts are awarded to those that go beyond minimum expectations and demonstrate an integration of learning resources and a sampling of colleagues' postings. |

**Psychological Disorder Paper Rubric (50 Points)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Criteria** | **F: Non-Performance** | **C: Basic** | **B: Proficient** | **A: Distinguished** |
| **Overview** | Paper does not provide overview of disorder including DSM criteria. | Paper includes name of disorder but was very limited in descriptive factors of the disorder. | Paper provides an overview of the disorder including a brief history of the disorder. | Paper provides a brief and concise overview of the disorder including a brief history. |
| **Diagnosis** | Paper does not explain the process of diagnosing the disorder. No assessment tool is described. No comparison of DSM-IV-TR criteria for disorder is provided. | Paper includes brief information on the symptoms of the disorder. Criteria for diagnosis are very limited or an assessment tool is not discussed. | Paper explains the DSM-IV-TR diagnostic criteria for the disorder. The paper discusses an assessment tool that clinicians utilize to assist with diagnosis | Paper discusses DSM-IV-TR diagnostic criteria for the disorder. Paper fully explains an assessment tool for clinicians to use to diagnose disorder. |
| **Treatment** | Paper does not provide treatment information for disorder. | Paper provides very limited information on treatment of the disorder. | Paper discusses treatment options for the disorder that are research-based. | Paper includes information on best practices to treating the disorder including research references for published studies on treating the disorder. |
| **Video and Analysis** | No video link is provided or no discussion about what can be learned about the disorder from the video clip is provided. | Video link is present but does not include sufficient analysis of the video and the disorder provided in the paper. | Video link is present and includes descriptions of how the video helps us learn more about the diagnosis. | Paper includes link to video and provides a brief discussion on how the video helps us learn about the disorder. |
| **APA Guidelines** | Submits a poorly organized paper that demonstrates little or no evidence of critical thinking, does not apply APA format and standards, and does not use sufficient evidence to establish academic credibility. Utilizes fewer than 3 peer-reviewed articles to describe the diagnosis and to support treatments. | Demonstrates some evidence of effective, credible academic writing, with noted, but minor, deficiencies in the paper’s organization, flow, support, use of grammar or adherence to APA format and standards. Utilizes at least 3 peer-reviewed articles to support the information presented. | Exhibits proficiency in effective, credible academic writing and critical thinking skills. Adherence to APA style, but with mistakes. Utilizes 3 peer-reviewed articles in support. | Exhibits proficiency in effective, clear academic writing and critical thinking skills, with complete adherence to style and standards; evidence of critical thinking; excellent flow, organization, and support; and has no errors of grammar. Utilizes more than 3 peer reviewed articles in support. Formulates a final product that demonstrates professional writing. |

**Case Study Counseling Plan Rubric (100 Points)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Criteria** | **F: Non-Performance** | **C: Basic** | **B: Proficient** | **A: Distinguished** |
| **Case Study** | Paper does not provide details of the client in the case study or an overview of disorder including DSM criteria. | Paper includes very limited details of the client in the case study and descriptive factors of the disorder. | Paper includes details of the client including demographics, suicidality, relationship status, sexual orientation, religious beliefs, culture and ethnic information. | Paper provides a brief and concise overview of the disorder including a brief history. Paper includes extensive details of the client including and exceeding the following: demographics, suicidality, relationship status, sexual orientation, religious beliefs, culture and ethnic information. |
| **Client Assessment & Diagnosis** | Paper does not explain the process of diagnosing the disorder. No assessment tool/process is described | Paper includes brief information on the symptoms of the disorder. Criteria for diagnosis are very limited or an assessment is not evident. | Paper compares client’s symptoms to the DSM-IV-TR and DSM 5 diagnostic criteria for the diagnosed disorder. The paper discusses the assessment tool/process that was used for diagnosis. Paper includes the results of the following assessments: psychological assessment, family history, mental health history, medical history, and biological, cultural, and psychological factors impacting diagnosis. Diagnosis information includes scholarly supported information about client’s primary diagnosis (general information about diagnosis, symptoms, and prognosis). | Paper compares client’s symptoms to the DSM-IV-TR and DSM 5 diagnostic criteria for the diagnosed disorder. The paper fully discusses the assessment tool/process that was used for diagnosis. Paper includes detailed, clear, and concise results of the following assessments: psychological assessment, family history, mental health history, medical history, and biological, cultural, and psychological factors impacting diagnosis. Diagnosis information includes scholarly supported information about client’s primary diagnosis (general information about diagnosis, symptoms, and prognosis). |
| **Treatment** | Paper does not provide a treatment plan for the client in the case study. | Paper provides very limited information on the treatment plan for the client in the case study. | Treatment plan for the client consists of at least three measurable goals for treatment and a critical explanation and assessment of evidence-based systemic counseling interventions for the mental health issues presented in the case study. Research is provided to explain why specific interventions are being selected. Paper provides an explanation of what techniques a counselor would use to help this client. | Treatment plan for the client consists of more than three measurable goals for treatment and a critical explanation and assessment of evidence-based systemic counseling interventions to address each goal for the mental health issues presented in the case study. Research is provided to explain why specific interventions are being selected and why unselected interventions were deemed inappropriate for this client. Paper provides an explanation of what techniques a counselor would use to help this client and provides research based proof that these techniques are effective for this specific client. Paper includes information on best practices to treating the disorder including research references for published studies on treating the disorder. |
| **Assessment Documentation – Appendix**  **(In-take form)** | No assessment form is included in the appendix of the paper. | The paper includes a completed assessment form for the client but lacks sufficient details to support diagnosis and treatment. | The paper includes a completed assessment form for the client including enough details to support the diagnosis and treatment of the client. | The paper includes a comprehensive, completed assessment form that fully supports the diagnosis and treatment plan selected. |
| **APA Guidelines** | Submits a poorly organized paper that demonstrates little or no evidence of critical thinking, does not apply APA format and standards, and does not use sufficient evidence to establish academic credibility. Utilizes fewer than 7 peer-reviewed articles to describe the diagnosis and to support treatments. | Demonstrates some evidence of effective, credible academic writing, with noted, but minor, deficiencies in the paper’s organization, flow, support, use of grammar or adherence to APA format and standards. Utilizes at least 7 peer-reviewed articles to support the information presented. | Exhibits proficiency in effective, credible academic writing and critical thinking skills. Adherence to APA style, but with mistakes. Utilizes 7 peer-reviewed articles in support. | Exhibits proficiency in effective, clear academic writing and critical thinking skills, with complete adherence to style and standards; evidence of critical thinking; excellent flow, organization, and support; and has no errors of grammar. Utilizes more than 7 peer reviewed articles in support. Formulates a final product that demonstrates professional writing. |