



SCHOOL OF SOCIAL WORK

UNIVERSITY OF MICHIGAN

SW 606.001: Mental Health and Mental Disorders of Adults and Elderly Mondays 6-10pm-Spring/Summer 2018

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Office hours for the summer are by appt only.

Course Description: This course will present the state-of-the-art knowledge and research of mental disorders of adults and the elderly, as well as factors that promote mental health and prevent mental disorders in adults and the elderly. Biopsychosocial theories of coping, trauma, and etiology, the impact of mental health disorders on individuals and family members, and the relationship of ability, age, class, color, culture, ethnicity, family structure, gender (including gender identity and gender expression) marital status, national origin, race, religion or spirituality, sex, and sexual orientation to mental health will be presented. Classification systems of adult mental functioning and mental disorders will be presented, such as the Diagnostic and Statistical Manual of Mental Disorders (DSM-5) and Person-in-Environment (PIE). Students will be taught to critically understand both the strengths and limitations of these classification systems.

Course Content: The DSM-5 system of classifying behavior will be compared with other classification systems, such as PIE. DSM-5 will be examined in light of various conceptualizations of mental health and in the context of broader social work and social science approaches to assessment, particularly those focusing on social functioning rather than disorder. The reliability of the DSM-5 system, the utility of the system for the purposes of promotion, prevention, treatment or rehabilitation, and the connections between the system and social work and social science constructs will be discussed.

Disorders that will be discussed include: Neurodevelopmental Disorders, Neurocognitive Disorders, Schizophrenia Spectrum and other Psychotic Disorders, Medication-Induced Movement Disorders and Other adverse Effects of Medication, Bipolar and Related Disorders, Depressive Disorders, Anxiety Disorders, Obsessive-Compulsive and Related Disorders, Trauma- and Stressor-Related Disorders, Dissociative Disorders, Somatic Symptom and Related Disorders, Feeding and Eating Disorders, Elimination Disorders, Sleep-Wake Disorders, Sexual Dysfunctions, Gender Dysphoria, Disruptive/Impulse-Control, and Conduct Disorders, Substance-Related and Addictive Disorders, Personality Disorders, and other Mental Disorders.

The prevalence and incidence of each of these disorders will be reviewed, including their relationship to socio-economic status, race, ethnicity, gender, sexual orientation, and physical disability. Studies investigating the role of biological factors in the development of these disorders will be examined, as well as the response of these disorders to a variety of medications and other somatic treatments (e.g., light therapy and electroconvulsive therapy). Similarly, studies of environmental factors implicated in the development of these disorders will be reviewed. Moreover, each of the disorders will be discussed in terms of the appropriateness of various psychosocial services, including psychotherapy/counseling, residential, vocational, social, educational, and self-help and mutual aid programs. The role of families and community caregivers in supporting individuals with these disorders will be addressed. Similar attention will be given to identifying family and environmental factors that may be amenable to modification, thus preventing a relapse. Special attention will be given to understanding the processes by which stigma arises and is perpetuated and to the consequences of stigma.

The potential of the mental disorder classification system to generate deviance will be examined. Misuses of the system and their negative consequences will be discussed, especially as they disproportionately affect persons who are not members of the dominant cultural group, including women, racial and ethnic minorities, gay/lesbian/bisexual/transgendered persons, persons with other primary medical conditions, and persons of low socio-economic status. Courses of action available to minimize these misuses will be discussed. Concerns about the unethical and inappropriate use of the DSM-5 system to influence eligibility for services or reimbursement will also be discussed.

Prevention will be addressed in relation to each of the disorders. For example, loss in relation to depression and dysthymia, and violence in relation to post-traumatic stress syndrome. Internet resources will be used to obtain information about the social justice and change goals and activities of family advocacy and consumer support and empowerment groups.

Course Objectives: Upon completion of the course, students will be able to:

1. Assess and diagnose mental health problems in adults and the elderly using DSM-5, PIE, and other widely applied nosological systems. (Practice Behaviors 7.IP, 7.SPE, 7.CO, 7.MHS)
2. Compare and contrast the utility of the mental disorders diagnostic system with broader social work and behavioral science frameworks focusing on social functioning. (Practice Behaviors 7.IP, 7.SPE, 7.CO, 7.MHS)
3. Discuss the biopsychosocial aspects of the disorders below in terms of clinical presentation, prognosis, etiology, prevention, treatment, and rehabilitation.
 - a) schizophrenia and other psychotic disorders
 - b) mood disorders (including major depression, bipolar disorder, and dysthymia)
 - c) personality disorders (including anti-social and borderline personality disorders)
 - d) anxiety disorders (including obsessive-compulsive, panic and post traumatic stress disorders, and phobias)
 - e) mental disorders of aging (including Alzheimer's and other dementias).
 - f) substance abuse disorders (Practice Behaviors 7.IP, 7.SPE, 7.CO, 7.MHS)
4. Discuss the impact of culture, race, and the other diversity dimensions described above on the disorder and the person diagnosed with the disorder. (Practice Behaviors 4.IP, 4.SPE, 4.CO, 4.MHS)
5. Discuss the potential of the mental disorder classification system to generate deviance, and discuss strategies to minimize those risks and combat stigma. (Practice Behaviors 5.IP, 5.SPE, 5.CO, 5.MHS)
6. Discuss the appropriate use of diagnostic/classification systems and the ethical questions surrounding the use of these systems. (Practice Behaviors 2.IP, 2.SPE, 2.CO, 2.MHS)
7. Distinguish empirically-based generalizations related to mental disorders from what is sometimes described as clinical wisdom,

often promulgated by prominent figures, and be able to use the scientifically-based literature to search for solutions to problems. (Practice Behaviors 7.IP, 7.SPE, 7.CO, 7.MHS) 8. Discuss typical value and ethical concerns related to mental health and mental disorders of adults and elderly. (Practice Behaviors 2.IP, 2.SPE, 2.CO, 2.MHS) 9. Demonstrate knowledge of important theories, research findings, and core concepts related to mental health etiology, epidemiology, assessment, and service delivery to adults and the elderly with mental health problems. (Practice Behaviors 7.IP, 7.SPE, 7.CO, 7.MHS) 10. Evidence an awareness of current evidence-based treatments for mental health problems afflicting adults and the elderly. (Practice Behaviors 7.IP, 7.SPE, 7.CO, 7.MHS)

Course Design: This course will include lectures, audiovisual materials, guest speakers, internet resources, and written assignments.

Theme Relation to Multiculturalism & Diversity: *This will be addressed through discussions of different patterns of health promotion opportunities and diagnostic practices affecting diverse cultural groups, including persons differing in ability, age, class, color, culture, ethnicity, family structure, gender (including gender identity and gender expression) marital status, national origin, race, religion or spirituality, sex, and sexual orientation, health status, and SES.*

Theme Relation to Social Justice: *This will be addressed through examination of the discrimination experienced by people with mental illness, particularly those from disadvantaged groups. The social justice and social change agenda of family advocacy and consumer support and empowerment groups will be examined as a source of information about needed social changes.*

Theme Relation to Promotion, Prevention, Treatment and Rehabilitation: *This will be addressed through the following means: 1) epidemiological studies of the influence of different factors (e.g., poverty) on the prevalence and incidence of particular disorders and their promotion and prevention implications, 2) prevention will also be addressed by an examination of the avoidable negative social consequences of severe mental illness (e.g. homelessness, joblessness, and disrupted educational careers), 3) prevention, still further, will be considered from the point of view of averting the occurrence of disorders through early intervention, 4) treatment will be discussed in terms of the clinical efficacy and service effectiveness of various interventions, and 5) rehabilitation will be considered in the context of the effectiveness of various residential, vocational, social, and educational services for people with mental disorders.*

Theme Relation to Behavioral and Social Science Research: *This will be addressed through the review of epidemiological studies dealing with: the frequency and distinguishing characteristics of those who experience particular disorders; controlled trials of various interventions including medication, intensive outreach services, social skills training and psychoeducational services; and follow-up surveys of persons affected by the disorders.*

Relationship to SW Ethics and Values: *This course will emphasize working on behalf of the most disadvantaged persons with mental disorders. Special emphasis will be placed on advocacy and environmental modifications. The potential harm associated with classification will be discussed as will ethically questionable practices that have arisen as the DSM 5 has been embedded in insurance*

reimbursement and service eligibility policies. Issues related to person-centered mental health practice, client self-determination, confidentiality, dignity, HIPPA, duty to warn, and associated legal, ethical, and value concerns will also be addressed.

Intensive Focus on PODS (Privilege, Oppression, Diversity and Social Justice): This course integrates PODS content and skills with a special emphasis on the identification of practice, theories and/or policies that promote social justice, illuminate injustices and are consistent with scientific and professional knowledge. Through the use of a variety of instructional methods, this course will support students developing a vision of social justice, learn to recognize and reduce mechanisms that support oppression and injustice, work toward social justice processes, apply intersectionality and intercultural frameworks and strengthen critical consciousness, self-knowledge and self-awareness to apply PODS learning.

Approved by faculty 9/03/2014

Accommodations for students with disabilities: If you need an accommodation for a disability please let me know as soon as possible. Many aspects of this course, the assignments, the in class activities, and teaching methods can be modified to facilitate your participation and progress throughout the semester. I will make every effort to use the resources available to us, such as the services for Students with Disabilities, the Adaptive Technology Computing Site, and the like. If you disclose your disability, I will (to the extent permitted by law) treat that information as private and confidential. For more information and resources, please contact the Services for Students with Disabilities office at G664 Haven Hall, (734) 7633000 or go to <http://www.umich.edu/~sswd/>

Health and Wellness Services: Health and wellness encompasses situations or circumstances that may impede your success within the program. The Office of Student Services offers health and wellness services that are directed to the MSW student body. Feel free to contact Health and Wellness Advocates Lauren Davis (laurdavi@umich.edu) or Nyshourn PriceReed (ndp@umich.edu); 734-936-0961, regarding any health, mental health or wellness issue. This could include need for advocacy and referral to University or community resources, financial resources or counseling. Also contact Health and Wellness using ssw.wellness@umich.edu. The MSW student Guide to Health and Wellness can be found at http://www.ssw.umich.edu/current/Health_Wellness_Guide.pdf

Student Mental Health and Wellbeing Services: University of Michigan is committed to advancing the mental health and wellbeing of its students. If you or someone you know is feeling overwhelmed, depressed, and/or in need of support, services are available. For help, contact Counseling and Psychological Services (CAPS) at (734) 764-8312 and <https://caps.umich.edu/> during and after hours, on weekends and holidays, or through its counselors physically located in schools on both North and Central Campus. You may also consult University Health Service (UHS) at (734) 764- 8320 and <https://www.uhs.umich.edu/mentalhealthsvcs>, or for alcohol or drug concerns, see www.uhs.umich.edu/aodresources.

Religious Observances: Please notify me if religious observances conflict with class attendance, community participation or due dates for assignments so that we can make appropriate arrangements.

Student Code of Academic and Professional Conduct: All students should be familiar with the Student

Code for Academic and Professional Conduct (<http://archive.ssw.umich.edu/studentguide/2014/page.html?section=12&volume=1>) which holds our students to the highest standards of academic and professional conduct. Unacceptable academic behavior refers to actions or behaviors that are contrary to maintaining the highest standards in course work and includes such actions as cheating, plagiarism, falsification of data, aiding and abetting dishonesty and impairment. Any suspected situations of academic misconduct will be discussed with the student and then reported to the Associate Dean for Academic Programs, Mary Ruffolo.

Campus Commitment: A respectful, supportive, and welcoming environment are necessary for student learning. The University of Michigan has developed a University wide educational program that "provides clear definitions of discrimination and harassment prohibited by University policy, as well as contact information for University resources and ways to report concerns. Its goal is to contribute to an environment of civility and respect in which all members of the University community can work and learn." Please contact me if you have any concerns about these issues as they relate to our class or your experience at the UM in general.

Safety & Emergency Preparedness:

In the event of an emergency, dial 9-1-1 from any cell phone or campus phone.

All University of Michigan students, faculty and staff are required to familiarize themselves with emergency procedures and protocols for both inside and outside of the classroom. In the event of possible building closure (i.e. severe weather conditions, public health notices, etc.) you may contact (734)764-SSWB(7793) for up-to-date School closure information.

Be Prepared. Familiarize yourself with the emergency card posted next to the phone in every classroom/meeting room. Review the information on the emergency evacuation sign (located nearest the door) and locate at least (2) emergency exits nearest the classroom.

If you are concerned about your ability to exit the building in the case of an emergency, contact the Office of Student Services and/or email ssw-ADAcpliance@umich.edu.

Office of Student Services
School of Social Work | Room 1748
[734-936-0961](tel:734-936-0961)

For more information view the annual Campus Safety Statement at <http://www.dpss.umich.edu/>. Register for UM Emergency Alerts at <http://www.dpss.umich.edu/emergency-management/alert/>.

Required Course Texts:

The Diagnostic Manual of Mental Disorders or DSM 5 can be obtained in electronic format via the University library system. To do so go to mirlyn.lib.umich.edu and search for "DSM 5" or go to <http://mirlyn.lib.umich.edu/Record/012353711>. Under "holdings", look for "Electronic Resources". Click on "Available Online". Or a copy may be purchased on your own.

Beidel, D. C., Frueh, B. C., & Hersen, M. (2014). *Adult Psychopathology and Diagnosis*. John Wiley & Sons.

CANVAS Readings

Optional Course Texts (*are not required, but may enhance your learning*):

Zimmerman, M. (2013). *Interview Guide for Evaluating DSM-5 Psychiatric Disorder and the Mental Status Examination*. East Greenwich, Rhode Island. Psych Products Press.

Morrison, J. (2014). *DSM-5 made easy: The clinician's guide to diagnosis*. NY: Guilford Press.

IMPORTANT COURSE POLICIES

Attendance/Participation:

Spring/Summer Attendance Policy: Attendance is necessary for participation to occur but attendance alone is not enough –you have to actively engage – ask and answer questions, make comments. Participation counts for 10% of your overall grade. If you are to miss any class during the semester, you will need to speak with me as an additional writing assignment will be required of you. Additionally, if you are to miss more than one class during the spring/summer semester, we will need to meet. Due to the pace of the spring/summer semester it is expected that you will make a strong effort to attend every class.

Typically each week we'll have some combination of lecture, small group discussion and full class discussion. Lecture outline will be posted on CANVAS before the night of the lecture. Each week there will be assigned readings. As we progress through the semester, I will begin to highlight readings based on our class discussions. Each week, in discussion you will be asked about the core concepts and relevant implications of these concepts. Core concepts should link from one week to the next in the sense that you should be asking yourself (and me) how the current week's content relates to what we already learned. The goal of the discussions is to create an active learning context in which each week's content is actively linked to prior content so that by the end of the semester, students will have a linked memory structure, facilitating later recall and use of the material in class and in the field.

Assignment Extensions:

Are only given in circumstances in which the student is experiencing an extreme hardship that is interfering with completion of course assignments or if a due date conflicts with student observance of a religious holiday. Inability to balance the requirements of other courses with the due dates of assignments for this course will not qualify as a hardship in which an assignment extension will be granted. If a student is struggling with school/life/work balance they are encouraged to reach out to me and other university resources for support. Concerns over lack of access to computers and other resources needed to complete assignments will also not warrant assignment extensions. If a student needs support with access to computers and other resources they are encouraged to reach out to me and other university support systems in a timely manner. **Late assignments will receive a one point deduction for each day the assignment is late with a maximum five point deduction.**

Course Assignments:

1. Presentation and Write-up of a Diagnosis (40 points total)

This assignment is created to help you better understand the history and presentation of mental health disorders in adults and elderly. There are several parts of this assignment that include a case presentation, write-up of the diagnosis as well as a reflection component that will be completed after

your presentation. The write-up will be due one week following your presentation. Sign up will be on the first class.

- a) Case presentation (5 points). Create a mock case reflecting the diagnostic criteria of your chosen diagnosis. Please try and be as creative as possible with your case presentation meaning try not to present the diagnostic criteria in a purely straightforward way. The case presentation should include about as much information you would get in the session following a basic intake. You case presentation will be about 15-20 minutes in length with 10 minutes for feedback from the class.
- b) Write-up of Diagnosis (30 points). This paper should be approximately 5-7 pages in length and include 3-5 outside academic sources (not including the DSM 5 or our book *Adult Psychopathology and Diagnosis*), this paper should also use APA citations and format.
 1. Introduction, description of diagnosis, and history of diagnosis (5 points)
 2. Common features, "clinical picture," epidemiology (5 points)
 3. Best practices for treatment of this diagnosis including therapy and medications (10 points)
 4. Conclusion, current and future research on this particular diagnosis and treatment of this diagnosis (10 points)

2. Psychopharmacology (15 points)

This assignment is created to help you better understand medication that is currently being used to treat mental health issues or symptoms that accompany a certain diagnosis or diagnoses. You will write up a 3-5 page paper on a medication of your choice. In addition to using Stahl's *Prescriber's Guide*, 6th Edition (Stahl, S. M. (2017). *Prescriber's Guide: Stahl's Essential Psychopharmacology*. Cambridge university press.), you will identify **2 outside sources for your references**. This paper should include the history of the medication, uses of the medication (is it also used to treat other medical issues?), effectiveness in managing symptoms with certain diagnoses, and finally future considerations of this medication for managing other diagnoses or symptoms. **This paper is due May 28, 2018 on CANVAS by 11:59pm.**

3. Documentary on Mental Illness (15 points)

Select a documentary that portrays a psychiatric disorder or a substance use disorder that will be covered in this course. In a 2-4 page APA formatted paper students will: Discuss the accuracy of the portrayal of mental illness or substance abuse: How is the "character" shown to be mentally ill? Be specific, how is the illness communicated to viewers? What are the "typical" symptoms and how are they displayed. Discuss treatment recommendations: How is the illness "treated" in the documentary? What are the other treatments available? (Especially if this movie is older, are there new therapies?). Address professional ethics: How are the therapists or practitioners depicted? How are these professionals helping or hurting the situation? What is the purpose of depicting mental health care professionals in this light? Finally, did you like the documentary? Why or why not? **This assignment is due June 11, 2018 on CANVAS by 11:59pm.**

4. Take Home Final (20 points)

Students will complete a take home final which will include an online CANVAS quiz (10 points) that covers areas discussed throughout the semester as well as a short paper focused on a topic that will be assigned in early July. **This assignment will be due July 22, 2018 on CANVAS by 11:59pm.**

Assignment	Points	Due Date
Presentation and Write-up of Diagnosis	40	on-going
Psychopharmacology paper	15	5/28/18
Documentary on Mental Illness	15	6/11/18
Take Home Final Exam	20	7/22/18
Participation	10	on-going

Grading Scale

A+ ***	A 100-96	A- 93-95	B+ 90-92	B 86-89
B- 83-85	C+ 80-82	C 76-79	C- 73-75	D+ 70-72
D 66-69	D- 63-65	F <62		

*****A+'s are reserved for exceptional work and at the discretion of the instructor.**

Course Outline

May 7, 2018 (Session One)

Introductions

Course Introduction and Syllabus Review

Introduction to Diagnostic Systems: ICD-10, DSM-5, PIE

Diagnostic Readings:

- DSM 5, pages 5-25 (skim)
- Adult Psychopathology and Diagnosis, pages 3-33

Additional Diagnostic Readings (if interested):

1. Berzoff, J., & Drisko, J. (2015). *What Clinical Social Workers Need to Know: Biopsychosocial Knowledge and Skills for the Twenty First Century*. *Clinical Social Work Journal*. 43:263-273
2. Ecks, S. (2016). The strange absence of things in the "culture" of the DSM-V. *CMAJ* : *Canadian Medical Association Journal*, 188(2), 142–143.
<http://doi.org/10.1503/cmaj.150268>
3. Karls, J., & O'Keefe, M. (2008). *Person-In-Environment System Manual*. NASW Press. Pages ix-x
4. Karls, J. M., & Wandrei, K. E. (1992). PIE: A new language for social work. *Social Work*, 37(1), 80-85.
5. Walsh, J. (2016). *The utility of the DSM-5 Z-codes for clinical social work diagnosis*. *Journal of Human Behavior in the Social Environment*, 26:2, 149-153,
DOI:10.1080/10911359.2015.1052913

May 14, 2018 (Session Two)

Diagnostic Systems: DSM-5 and PIE Continued; Diagnostic Focus: Conducting Biopsychosocial Assessments with Adults and the Elderly

- o How to develop an Initial Diagnostic Impression
- o Documenting a Mental Status Exam

Diagnostic Readings:

- Adult Psychopathology and Diagnosis, pages 103-129; 131-162

Additional Diagnostic Readings (if interested):

1. Berzoff, J.(2011). *Why We Need a Biopsychosocial Perspective with Vulnerable, Oppressed, and At-Risk Clients*, Smith College Studies in Social Work, 81:2-3, 132-166, DOI: 10.1080/00377317.2011.590768
2. Holcomb-McCoy, C. (2008). *Transference and Countertransference*. Encyclopedia of Counseling.
3. Holcomb-McCoy, C. (2008). *Prejudice*. Encyclopedia of Counseling.
4. Holcomb-McCoy, C. (2008). *Barriers to Cross-Cultural Counseling*. Encyclopedia of Counseling.
5. Phillips, D. (2013). *Clinical Social Workers as Diagnosticians: Legal and Ethical Issues*. Clinical Social Work Journal. 41:205-211
6. Sable, P. (2010). The Origins of an Attachment Approach to Social Work Practice with Adults. *Adult Attachment in Clinical Social Work*. Pages 17-29.
7. Zarit, S.H. & Zarit, J.M. (2011). *Mental disorders in older adults: Fundamentals of assessment and treatment*. NY: Guilford Press.

May 21, 2018 (Session Three)

Diagnostic Focus: Schizophrenia; Schizophrenia Spectrum And Other Psychotic Disorders; Medication Induced Movement Disorders and Other Adverse Effects of Medication

Diagnostic Readings:

- Schizophrenia Spectrum and other Psychotic Disorders-DSM 5- pages 87-122
- Medication Induced Movement Disorders and Other Adverse Effects of Medication-DSM 5- pages 709-714
- Adult Psychopathology and Diagnosis, pages 165-216

Additional Diagnostic Readings (if interested):

1. Howes, O. D., Kambeitz, J., Kim, E., Stahl, D., Slifstein, M., Abi-Dargham, A., & Kapur, S. (2012). The nature of dopamine dysfunction in schizophrenia and what this means for treatment. *Archives of General Psychiatry*, 69(8), 776–786. <http://doi.org/10.1001/archgenpsychiatry.2012.169>
2. Kahn R, Keefe R. (2013). Schizophrenia Is a Cognitive Illness Time for a Change in Focus. *JAMA Psychiatry*.70(10):1107–1112. doi:10.1001/jamapsychiatry.2013.155
3. Malaspina,D. Corcoran,C., Kleinhaus, K., Perrin, M., Fennig, S., Nahon, D., Friedlander, Y.,

Harlap, S. (2008). Acute maternal stress in pregnancy and schizophrenia in offspring: A cohort prospective study, Columbia University Academic Commons, <https://doi.org/10.7916/D8T43RM5>.

4. Seeman, P. (2011). All Roads to Schizophrenia Lead to Dopamine Supersensitivity and Elevated Dopamine D2 High Receptors. *CNS Neuroscience & Therapeutics*, 17: 118-132. doi:10.1111/j.1755-5949.2010.00162.x
5. Sullivan, G., Mittal, D., Reaves, C. M., Haynes, T. F., Han, X., Mukherjee, S., . . . Corrigan, P. W. (2015). Influence of schizophrenia diagnosis on providers' practice decisions. *The Journal of Clinical Psychiatry*, 76(8), 1068-1074. <http://dx.doi.org/10.4088/JCP.14m09465>

June 04, 2018 (Session Four)

Diagnostic Focus: Bipolar and Related Disorders; Depressive Disorders

Diagnostic Readings:

- Bipolar and Related Disorders-DSM-5—pages 123-154 (skim)
- Depressive Disorders-DSM-5—pages 155-188 (skim)
- Adult Psychopathology and Diagnosis, pages 217-251; pages 253-298.

Additional Diagnostic Readings (if interested):

1. Gersner, R., Rosenberg, O., & Dannon, P. N. (2012). Major depressive disorder: treatment and future perspective. *Clinical Practice*, 9(3), 269+. Retrieved from http://link.galegroup.com/apps/doc/A323526211/AONE?u=lom_umichanna&sid=AONE&xid=fd940738
2. Geddes, J. R., & Miklowitz, D. J. (2013). Treatment of bipolar disorder. *Lancet*, 381(9878), 10.1016/S0140-6736(13)60857-0. [http://doi.org/10.1016/S0140-6736\(13\)60857-0](http://doi.org/10.1016/S0140-6736(13)60857-0)

June 11, 2018 (Session Five)

Diagnostic Focus: Trauma- and Stressor-Related Disorders, Dissociative Disorders, Somatic Symptom and Related Disorders

Diagnostic Readings:

- Trauma- and Stressor-Related Disorders -DSM-5—pages 265-290 (skim)
- Dissociative Disorders -DSM-5—pages 291-308 (skim)
- Somatic Symptom and Related Disorders- DSM-5—pages 309-328 (skim)
- Adult Psychopathology and Diagnosis, pages 387-406; 407-450; 451-471

Additional Diagnostic Readings (if interested):

1. Brand, B., Loewenstein, R., Spiegel, D. (2014). *Dispelling Myths About Dissociative Identity Disorder Treatment: An Empirically Based Approach*. *Psychiatry: Interpersonal and Biological Processes*: Vol. 77:2, pp. 169-189. <https://doi.org/10.1521/psyc.2014.77.2.169>
2. Brand, B. L., Sar, V., Stavropoulos, P., Krüger, C., Korzekwa, M., Martínez-Taboas, A., & Middleton, W. (2016). Separating Fact from Fiction: An Empirical Examination of Six Myths About Dissociative Identity Disorder. *Harvard Review of Psychiatry*, 24(4), 257-270. <http://doi.org/10.1097/HRP.000000000000100>

3. Howlett, J., Stein, M. (2016). Prevention of Trauma and Stressor-Related Disorders: A Review. *Neuropsychopharmacology*, 41, pp. 357–369. doi:10.1038/npp.2015.261

June 18, 2018 (Session Six)

Diagnostic Focus: Sexual Dysfunctions and Paraphilic Disorders

Diagnostic Readings:

- Sexual Dysfunctions -DSM-5—pages 423-450 (skim)
- Gender Dysphoria - DSM-5—pages 451-460
- Adult Psychopathology and Diagnosis, pages 547-601; 603-639

Additional Diagnostic Readings (if interested):

1. Barr, S. M., Budge, S. L., & Adelson, J. L. (2016). Transgender community belongingness as a mediator between strength of transgender identity and well-being. *Journal of Counseling Psychology*, 63(1), 87-97. <http://dx.doi.org/10.1037/cou0000127>
2. Boskey, E. (2013). Sexuality in the DSM 5: Research, Relevance, and Reaction. *Contemporary Sexuality*, 47(7), 1-5.
3. Forbes, M., Baillie, A., Schniering, C. (2016). Should Sexual Problems Be Included in the Internalizing Spectrum? A Comparison of Dimensional and Categorical Models, *Journal of Sex & Marital Therapy*, 42:1, 70-90, DOI:10.1080/0092623X.2014.996928
4. Lin, K. (2017). The medicalization and demedicalization of kink: Shifting contexts of sexual politics. *Sexualities*, 20(3), pp. 302 - 323.
5. Reed, G. M., Drescher, J., Krueger, R. B., Atalla, E., Cochran, S. D., First, M. B., ... Saxena, S. (2016). Disorders related to sexuality and gender identity in the ICD-11: revising the ICD-10 classification based on current scientific evidence, best clinical practices, and human rights considerations. *World Psychiatry*, 15(3), 205–221. <http://doi.org/10.1002/wps.20354>

June 25, 2018 (Session Seven)

Diagnostic Focus: , Anxiety Disorders, Obsessive-Compulsive and Related Disorders, Disruptive/Impulse-Control, and Conduct Disorders

Diagnostic Readings:

- Anxiety Disorders -DSM-5—pages 189-234 (skim)
- Obsessive-Compulsive and Related Disorders -DSM-5—pages 235-264 (skim)
- Disruptive/Impulse-Control, and Conduct Disorders - DSM-5—pages 461-480 (skim)
- Adult Psychopathology and Diagnosis, pages 299-349; 355-385

July 2, 2018 (Session Eight)

Diagnostic Focus: Sleep-Wake Disorders

Diagnostic Readings:

- Sleep-Wake Disorders - DSM-5—pages 361-422 (skim)
- Adult Psychopathology and Diagnosis, pages 523-545

July 9, 2018 (Session Nine)

Diagnostic Focus: Personality Disorders; Other Mental Disorders

Diagnostic Readings:

- Personality Disorders -DSM-5—pages 645-684
- Other Mental Disorders -DSM-5—pages 707-708
- Adult Psychopathology and Diagnosis, pages 739-773

July 16, 2018 (Session Ten)

Diagnostic Focus: Substance-Related and Addictive Disorders

Diagnostic Readings:

- Substance-Related and Addictive Disorders -DSM-5—pages 481-591
- Adult Psychopathology and Diagnosis, pages 641-672; 673-703_

July 23, 2018 (Session Eleven)

Diagnostic Focus: Neurocognitive Disorders; Neurodevelopmental Disorders

Diagnostic Readings:

- Neurocognitive Disorders -DSM-5—pages 591-644 (skim)
- Neurodevelopmental Disorders-DSM-5-pages 31-86 (skim)
- Adult Psychopathology and Diagnosis, pages 705-738