

# ANTIOCH UNIVERSITY

SEATTLE

**COUN 5150**  
**Psychopathology**

## **Institutional Information**

Antioch University Seattle  
Master of Arts in Clinical Mental Health Counseling (CMHC) Program

## **Basic Course Information**

COUN 5150  
Psychopathology  
3 credits

(Quarter, Year)

Required prerequisites: COUN5004: Essential Topics in Abnormal Psychology; COUN 5060 Communication and Counseling Skills

(First and last day of the course)

(Meeting times and locations (On Campus, Hybrid (w/ ASYNC & SYNC) and/or Online denoted per date)

## **Instructor Information**

(Instructor's name)

2400 3<sup>rd</sup> Avenue, Suite 200, Seattle, WA 98121

(Individual campus phone number or leave blank for adjunct)

(Antioch email address (only - Do not include personal or other email address.))

Office hours/instructor availability:

(ZOOM Drop-in Hours and link)

## **Course Owner and Course Liaison Information**

- **Primary Course Owner/Liaison:**  
Mary Roberts, MA [mroberts3@antioch.edu](mailto:mroberts3@antioch.edu)
- **Secondary Course Owner/Liaison:**  
Erin Berzins [eberzins@antioch.edu](mailto:eberzins@antioch.edu)
- **Course Consultant:**  
Lisa Rudduck, MA [lrudduck@antioch.edu](mailto:lrudduck@antioch.edu)

## **Course Description**

Provides orientation to the etiology and symptoms of the major DSM-5 categories of psychopathology, as understood from a variety of perspectives. Includes discussion of schizophrenia, major affective disorders, borderline, narcissistic and other personality disorders and anxiety disorders. Focus is on the role of the symptom in the inner world of the individual and in the broader interpersonal and cultural contexts

## **Expanded Course Description**

The purpose of this course is to introduce students to the diagnostic system contained in the *Diagnostic*

and *Statistical Manual 5* (2013) and to facilitate their understanding of psychopathology. This course on psychopathology is designed to give students the foundation for assessing both patterns, and factors creating those patterns, of diagnostic categories presently in use in the mental health system today. We will look at symptoms, etiology, and treatment -- taking into consideration, views from different theoretical frameworks as well as increasing awareness of cultural issues. Particular attention will be paid to issues of co-occurring disorders including addictions, as well as issues surrounding crisis management and disaster response.

This course will be structured primarily as a lab course, providing a supportive context for increasing self-awareness and interpersonal skills as they apply to counseling practice.

### **Program Competencies & Outcomes**

By successfully completing the requirements for this course, students will be able to understand and demonstrate competencies in the following areas.

### **Primary Learning Objectives (PLOs):**

By successfully completing the requirements for this course, participants will be able to:

1. Understand and apply principles of cultural responsiveness and critical evaluation to the diagnostic process.
2. Apply and understand processes for professional identity development as a diagnostician, Professional Counselor, or Couple and Family Therapist.
3. Understand the use of diagnostic tools, including the DSM and ICD, and become familiar with the ethical and legal considerations around mental health diagnosis.
4. Become familiar with self-evaluation processes and the role of personal and systemic biases in the diagnostic process.

### **Student Learning Objectives (SLOs):**

By the end of the course, students are expected to:

1. Demonstrate understanding of psychopathology in terms of the DSM-5 and ICD diagnostic categories and diagnostic processes (5.C.2.d.)
2. Recognize and apply multiple theoretical, contextual, and cultural perspectives in evaluating and interpreting DSM-5 disorders (F.1.c, F.3.d, e, f).
3. Demonstrate strategies for self-evaluation of one's own biases, attitudes, and beliefs, and privilege, and demonstrate an ability to explore and integrate others' worldview related to specific psychopathologies (F.1.k., F.2.c, d, e)
4. Demonstrate understanding of etiology, prevention, resilience, treatment, and referral of mental, emotional, and substance use disorders (5.C.1.d., 5.C.1.b., 5.C.2.e, 5.C.2.g)
5. Apply ethically and culturally relevant strategies for differential diagnosis and advocacy for varied client needs. (5.C.2.j.)

### **Relevant CACREP (2016) Standards**

<b>2.F.1.k.</b>	Strategies for personal and professional self-evaluation and implications for practice
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<b>2.F.2.c</b>	Multicultural counseling competencies
<b>2.F.2.e.</b>	The effects of power and privilege for counselors and clients
<b>2.F.3.d.</b>	Theories and etiology of addictions and addictive behaviors
<b>2.F.3.e.</b>	Biological, neurological, and physiological factors that affect human development, functioning, and behavior
<b>2.F.3.f.</b>	Systemic and environmental factors that affect human development, functioning, and behavior
<b>5.C.1.c</b>	principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning
<b>5.C.1.d.</b>	Neurobiological and medical foundation and etiology of addiction and co-occurring disorders
<b>5.C.2.b.</b>	Etiology, nomenclature, treatment, referral, and prevention of mental and emotional disorders
<b>5.C.2.d.</b>	Diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the DSM and the ICD
<b>5.C.2.e.</b>	Potential for substance use disorders to mimic and/or co-occur with a variety of neurological, medical, and psychological disorders
<b>5.C.2.h.</b>	Classifications, indications, and contraindications of commonly prescribed psychopharmacological medications for appropriate medical referral and consultation
<b>5.C.2.g.</b>	Impact of biological and neurological mechanisms on mental health
<b>5.C.2.j.</b>	Cultural factors relevant to clinical mental health counseling
<b>5.C.3.a.</b>	Intake interview, mental status evaluation, biopsychosocial history, mental health history, and psychological assessment for treatment planning and caseload management

<b>Learning Objectives (CACREP 2016)</b>	<b>Key Performance Indicators (KPIs)  (S) Skills, (k) Knowledge, (d) Dispositions</b>	<b>Direct Evaluation Methods</b>
Demonstrate understanding of psychopathology in terms of the DSM-5 and ICD diagnostic categories and diagnostic processes (5.C.1.c, 5.C.2.d.)	<i>Class Participation (d), Seminar Discussions (s), Course Readings (k), Diagnosis Paper (k).</i>	<i>Counseling Theory and Pathology Paper, Diagnosis Paper (Core Assignment)</i>
Recognize and apply multiple theoretical, contextual, and cultural perspectives in evaluating and interpreting DSM-5 disorders	<i>Class Participation (d), Seminar Discussions (s), Course Readings (k), Counseling Theory and Pathology</i>	<i>Diagnosis Paper (Core Assignment)</i>

(F.1.c, F.3.d, e, f, 5.C.2.h.).	<i>Paper (s), Diagnosis Paper (k), Culture Group Presentation (k).</i>	
Demonstrate strategies for self-evaluation of one's own biases, attitudes, and beliefs, and privilege, and demonstrate an ability to explore and integrate others' worldview related to specific psychopathologies (F.1.k., F.2.c, d, e)	<i>Class Participation (d), Seminar Discussions (s), Course Readings (k), Diagnosis Paper (k), Counseling Theory and Pathology Paper (s).</i>	<i>Professional Identity Reflections, Group Presentations</i>
Demonstrate understanding of etiology, prevention, resilience, treatment, and referral of mental, emotional, and substance use disorders (5.C.3.a, 5.C.1.d., 5.C.1.b., 5.C.2.e, 5.C.2.g)	<i>Class Participation (d), Seminar Discussions (s), Course Readings (k), Diagnosis Paper (k), Counseling Theory and Pathology Paper (k), Culture Group Presentation (k).</i>	<i>Seminar Discussions, Discussion Forums</i>
Apply ethically and culturally relevant strategies for differential diagnosis and advocacy for varied client needs. (5.C.2.j.)	<i>Class Participation (d), Seminar Discussions (s), Course Readings (k), Culture Group Presentation (k).</i>	<i>Discussion Forum Case Study Evaluations</i>

**COAMFTE Competencies**

1. Understands psychopathology in terms of the DSM-5 diagnostic categories.
2. Applies multiple clinical treatment and cultural perspectives in interpreting DSM-5 disorders.

**Learning Experiences**

**Pedagogical Design:** This course is a lab course that includes a mix of didactic and experiential learning. Students will learn via lecture, reading, discussion, demonstration and practice. This course focuses on understanding the intention of utilizing counseling skills and, then, effectively utilizing these skills in practice.

Because of the experiential learning inherent in this course, the instructor uses a constructivist and emergent design process, which means that the instructor may change the design of the course depending upon group and class development needs. The instructor will discuss this process with student participants.

**Learning Resources**

<b>Required Textbooks &amp; Readings</b>	
<b>Titles &amp; Authors</b>	<b>ISBN</b>
Reichenberg, L. & Seligman, L. (2016). <i>Selecting effective treatments</i> (5 <sup>th</sup> ed.). San Francisco. CA: Wiley.	ISBN 13: 978-1-118-79135-6  ISBN 10: 1-118-79135-5

American Psychiatric Association. (2013). <i>Diagnostic and statistical manual of mental disorders</i> (5th ed.). Arlington, VA: Author.	AUS Library Online  ISBN 13: 978-0-89042-555-8  ISBN 10: 0-89042-555-8
Ratts, M.J., Singh, A.A., Nassar-McMillan, S., Butler, S.K., McCullough, J.R. (2016). Multicultural and social justice counseling competencies: Guidelines for the counseling profession. <i>Journal of Multicultural Counseling and Development</i> , 44, 28-48. DOI: 10.1002/jmcd.12035.	AUS Library Online
Hays, P. (1996). Addressing the complexities of culture and gender in clinical practice. <i>Journal of Counseling and Development</i> , 74, 332-338.	AUS Library Online
*Other required readings (articles, chapters, etc.) will be posted on Sakai.	

### MA Programs Multicultural References

Lee, C. C. (Ed.). (2006). *Multicultural issues in counseling: New approaches to diversity* (3<sup>rd</sup> ed.). Alexandria, VA: American Counseling Association.

McGoldrick, M., Giordano, J., & Garcia-Preto, N. (Eds.). (2005). *Ethnicity and family therapy* (3<sup>rd</sup> ed.). New York, NY: Guilford Press.

### Course Requirements

1. Adherence to Antioch University Seattle procedures stated in the syllabus and defined in the Antioch University Seattle Catalog:  
<http://www.antiochseattle.edu/registrar/aus-catalog/>
2. Submitting ALL course assignments on time—**late work is not accepted** unless emergency documentation is provided
3. Course Evaluations: Students evaluate all courses during mid-term and at the end of the quarter. The final course evaluation is required for all students in all courses.

Additionally, to earn credit for this course, all students must meet minimum attendance (students should not miss any classes unless emergency documentation is provided; missing more than one class will result in a failing grade for this course), scholarship, and competence standards. These requirements are as follows:

**Course Attendance:** Students are expected to attend all scheduled classes. Credits may be denied for failure to attend more than 90% of class sessions (see above). (Antioch Seattle University Catalog). Each participant is expected to be on time for all classes and to attend a minimum of 90% of the classes. Arrival to class more than 15 minutes late will result in a “missed class.”

**Active participation** in class exercises and discussions. (e.g., to engage in both small and large group interactions in a manner that demonstrates interpersonal effectiveness, openness to group membership

and leadership experiences, seeking out and being open to feedback, and showing respect for the entire class as a community of learners).

**Complete assigned readings** (see CLASS SCHEDULE below).

**Complete all assignments** by due date (see CLASS SCHEDULE below).

Written work should be typed and turned in as an electronic Word .docx to your student drop box link on Sakai.

Students are expected to **demonstrate graduate level** analytical thinking as well as self-reflection and self-critique.

Assignments are expected to be **on time**. Assessments that do not follow APA writing guidelines will be considered below graduate level work and will place the student in jeopardy of not receiving credit for the course. Instructor may ask students to re-write papers when necessary and students will likely receive an average of the two posted marks.

### **Learning Experiences**

Teaching and learning methods include a mix of lecture and class discussion, assigned readings, use of audio-visual materials, case vignettes, and small group activities. Emphasis will be on broadening the base of understanding and utilizing the DSM 5 as a tool of communication within the mental health disciplines. The instructor will highlight the main ideas/issues for each session and add material from other sources. It is assumed that learning is an active rather than a passive process. Therefore in contrast to the "empty cup theory" of education, students are encouraged to take an active role in the process of their own learning/growth.

The course begins with consideration of some of the different issues regarding the classification and labeling of behavior. A brief history of the classification systems will help set the context for contemporary systems of assessment and classification. After this general overview, the course will begin the examination of various difficulties and disorders categorized in the DSM 5. *While a range of major difficulties will be covered that clinicians will encounter in practice, it is impossible to cover the complete range and scope of difficulties and problems that human beings experience. The fact that theory and research do not provide complete answers or solutions to people's difficulties is stressed, and students are encouraged to engage in personal exploration of knowledge.*

Class discussions will be enhanced by preparedness to discuss the content of the assigned readings. In addition, students are encouraged to explore related materials and bring them to the attention of the class. Sometimes the best and most vivid descriptions of human behavior are contained in fictional, autobiographical, or controversial works, and students are encouraged to explore these representations of human concerns as time permits, and bring these examples as enrichment to vary the learning experience for the class. A partial list will be included below. In addition to the printed word, videotapes and movies are also recommended under specific topics to provide immediacy of the felt experience (a picture is worth a thousand words!). Students are encouraged to select a few and view them during the course of the semester (popcorn is optional, but highly recommended!). A few bibliographical suggestions:

- *Barron, J. & Barron, S. There's a Boy in Here: A Mother and Her Son Reveal the Astonishing Story of His Triumphant Emergence from Autism.*
- *Beers, C. A Mind that Found Itself.*
- *Burch, J.M. They Cage the Animals at Night*
- *Casey, L., & Wilson, L. The Flock/the Autobiography of a Multiple Personality*

- Chase, T. *When Rabbit Howls*
- Duke, P. & Hochman, G. *A Brilliant Madness: Living with Manic-Depressive Illness*.
- Friedrich, O. *Going Crazy*.
- Gordon, B. *I'm Dancing as Fast as I Can*.
- Grandin, T. *Thinking in Pictures, and Other Reports from my Life with Autism*.
- Greenberg, J. *I Never Promised You a Rose Garden*
- Harrison, M. *A Woman in Residence: A Dedicated Doctor's Personal Story of her struggle with the Fierce Challenges of a Major American Hospital*.
- Klein, N. *The World as It Is*.
- Miller, A. *The Crucible*.
- Naylor, P. *Crazy Love*.
- Pipher, M. *Reviving Ophelia*.
- Sacks, O. *The Man Who Mistook His Wife for a Hat*.
- Sacks, O. *Awakenings*
- Schreiber, F. *Sybil*.
- Szasz, T. *The Myth of Mental Illness*.
- Warren, C. *Madwives: Schizophrenic Women in the Fifties*.
- Zuckerman, M. *Vulnerability to psychopathology: A biosocial model*.

### Course Assignments and Schedule

The schedule of assignments and course content are subject to change at the discretion of the faculty member. Please be available during Week Eleven to accommodate any required changes in schedule (e.g., in response to emergency situations).

**Reading:** Read all assigned material **before** the class meeting each week. It is expected that students will integrate their readings into class activities, written submissions, as well as a foundation to their developing theory of counseling and change. Since this course presumes prior understanding to relevant counseling theories, it is expected that students will review prior course materials as needed. Finally, readings will be posted periodically on Sakai (as well as other resource materials) and should be checked frequently for updates.

### Assignment #1: Seminar Discussion

A seminar is defined as an “exchange of ideas” facilitated by “advanced graduates” engaged in “intensive study”. Throughout the semester, students (dyads) will facilitate a brief seminar discussion in relation to the scheduled diagnostic category (see course outline for the sequence of course topics). The primary purpose of the seminar is to lead a discussion on the scheduled topic as it relates to the assessment criteria, process, and limitations. While designed to promote lively discourse within a community of fellow learners, the dialogs are academic in nature and require a scholarly orientation, with students supporting their perspectives while facilitating multiple points of view. A time limit of 30 minutes is encouraged.

### Assignment #2 Counseling Theory and Pathology Paper

The intent of this paper is to overlap your understanding of a specific disorder with a theoretical orientation to assist with providing a context to clinical understanding which may lead to appropriate treatment recommendations. Integrate a diagnostic formulation with how your chosen theory understands (1) human development, (2) the role of cultural factors, (3) its understanding of the

etiology of pathological symptoms/problem areas, and (4) the role of treatment. Include examples to highlight how/why symptoms emerge, and how the theory approaches working with them, and (5) a reflective critical analysis of the pros/cons of using just one point of view to understand a complex illness along with a self reflection that includes what you noticed about yourself during this assignment and how that new knowledge might affect your future work as a counselor or therapist.

Please cite a minimum of 5 recent (less than 10 years old), relevant, peer reviewed journal readings (in addition to class texts, when applicable) that support and/or contrast your assertions, following APA guidelines. ***A minimum of 3 of your 5 peer reviewed journal references must be from Professional Counseling journals if you are a CMHC student. If you are a CFT student, please include at least 3 references from CFT specific journals.*** This paper should be no more than 7 pages, exclusive of title and reference pages.

Pick and discuss a theoretical orientation, preferably one that you have identified as being a match to your own biases within the field of counseling (e.g. CMHC students should focus on the intra-psychically oriented theory that best fits your biases, or that you are interested in learning more about. CFT students should choose the systems theory that you most identify with or want to learn more about).

### **Assignment #3 (Core Assignment): Diagnosis Paper**

Choose one specific DSM-5 diagnosis. Research and discuss this diagnosis in depth – including at least (3) different theoretical views of etiology and treatment of your choosing. Again, if you are a CFT student, please make sure that at least one of your theories is family systems based. Minimally include:

- Provide an overview of your chosen disorder, including epidemiological data, symptoms, and overarching etiological perspectives
- Integrate current research on at least three factors per theoretical orientation that influence the expression or maintenance of the disorder or symptoms of the disorder. Please use empirical outcome research to demonstrate the relationship between the factor(s) and the chosen disorder (or symptoms of the disorder).
- Include a discussion of the cultural implications that need to be considered in relation to this diagnosis
- Synthesize how your research on this diagnosis informs your development and future clinical practice as a future Professional Counselor or Couple and Family Therapist in work with individuals struggling against the disorder's symptomology.

The paper should be no more than 12 pages, exclusive of title and reference pages, and must utilize APA format. Cite a minimum of 5 peer reviewed journal references to support your discussion, following APA guidelines. ***At least 3 of your 5 peer reviewed references must be from Professional Counseling journals if you are a CMHC student. If you are a CFT student, please make sure 3 of your five references are from CFT journals.***

**Note:** A competent submission demonstrates graduate quality linking the reflective activities into a single set of ideas, themes, and conclusions that are relevant to the professional development of the learner and the field of mental health counseling.



#### **Assignment #4: Culture Group Presentation**

Choose a specific ethnic/cultural population (as defined by Hays' AD/DRESSING model). This cultural group should be one that you preferably have little current knowledge about. Utilizing the generic case example given to you in class, examine and present this population's views about mental illness/mental health in general, and more specifically how this cultural group might understand and respond to the symptoms/behaviors reflected by the case example. Then, turning the lens on yourselves, please end with a brief reflection to the class on the following:

- What have you learned about this culture group's worldview, and what do you think is still TBD?
- What have you as a group learned about your own worldview through learning about this culture group's?
- What Professional Counseling/CFT clinical skills do you believe might be effective/harmful with this culture group?
- What specific social justice initiatives are needed for the overall wellness of this culture group from a clinical point of view?

This presentation should be no more than 45 minutes, inclusive of 10 minutes for questions and answers. Compile a bibliography and/or reference sheet to be shared with the class. In addition to the research, preparation, and implementation of your presentation, an equally important purpose of this assignment is to grow in your ability to work effectively in groups.

Competency will be based on graduate quality of the presentation, the quality and relevance of literature references, and the individual submission of a reaction paper to the experience and relevance to her/his preparation as a professional counselor.

#### **Assignment #5 Professional Identity Reflections**

Students will write two 2-3 page reflections on the following prompts (Due week 2 and again week 10). The purpose of writing to separate reflections, one very early in the term and the second on the last day of the term, is to demonstrate growth and professional identity development as well as your progress toward integrating principles of diagnosis with the tenets of Professional Counseling and with your personal identity development.

- How do I feel about psychopathology and diagnosis as a construct from the point of view as a Counselor or Couple and Family Therapist?
- How do I envision myself including diagnostic labels and processes in my future work as a Counselor or Family Therapist?
- What discipline-specific expertise do I plan to contribute (did I contribute) to this class?

#### **Assignment #6: Weekly Discussion Forums (or journal)**

Students will participate in interactive asynchronous activities designed to demonstrate multicultural competence, application of diagnostic principles to case studies, incorporation of multicontextual and systemic processes to the diagnostic process, and the ability to critically evaluate and engage with material that supports social justice and advocacy opportunities as well as professional identity development. See Sakai for details.

## COURSE SCHEDULE

The schedule assignments and course content are subject to change at the discretion of the faculty member(s).

Week No. and Date	Topics & Activities	Reading /Viewing (Before the Class)	Assignment Due
Week 1	<p>Introductions &amp; Course Overview</p> <p><i>Brief History of the Classification Systems</i></p> <p><i>Seminar Discussion Assignments</i></p>	<p><u>Recommended Reading:</u></p> <ul style="list-style-type: none"> <li>● DSM: General Introduction</li> <li>● Hays (1996)</li> <li>● Ratts, et. al, (2016)</li> </ul> <p><u>Related Film/Video:</u> <i>Burning Times, They Might Be Giants, Patch Adams</i></p>	<b>None</b>
Week 2	<p>Check-in on Readings/Films</p> <p><i>Neurodevelopmental Disorders</i></p> <p><i>Schizophrenic Spectrum Disorders</i></p>	<p><u>Required Reading:</u></p> <ul style="list-style-type: none"> <li>● DSM-5 Topic Diagnostic Criteria, Differential Diagnoses</li> <li>● Reichenberg &amp; Seligman: Ch. 1, 2, &amp; 3</li> </ul> <p><u>Related Film/Video:</u> <i>Rainman, Awakenings, This Boy's Life, The Bad Seed, The Breakfast Club, Trainspotting, I Never Promised You a Rose Garden, Benny and Joon, One Flew Over the Cuckoo's Nest, The Dream Team, Shine, A Beautiful Mind</i></p>	<p><b>Seminar Discussion:</b></p> <p><b>Async. Discussion Forum:</b></p> <p><b>Initial Prof. Identity Reflection Due</b></p>
Week 3	<p>Check-in on Readings/Films</p> <p><i>Bipolar/Related Depressive Disorders</i></p> <p><i>Anxiety &amp; Obsessive-Compulsive Disorders</i></p>	<p><u>Required Readings:</u></p> <ul style="list-style-type: none"> <li>● DSM-5 Topic Diagnostic Criteria, Differential Diagnoses</li> <li>● Reichenberg &amp; Seligman: Ch. 4-7</li> </ul> <p><u>Related Film/Video:</u> <i>The Patty Duke Story, Mr. Jones, I'm Dancing as Fast as I Can, Vertigo, High Anxiety, As Good As It Gets, What About Bob, any episodes of "Hoarders" on TLC</i></p>	<p><b>Seminar Discussion:</b></p> <p><b>Async. Discussion Forum:</b></p>
Week 4	<p>Check-in on Readings/Films</p> <p><i>Trauma/Stress-Related</i></p> <p><i>Dissociative &amp; Somatic Symptom/Related Disorder</i></p>	<p><u>Required Readings:</u></p> <ul style="list-style-type: none"> <li>● DSM-5 Topic Diagnostic Criteria, Differential Diagnoses</li> <li>● Reichenberg &amp; Seligman: Ch. 8, 9, &amp; 10</li> </ul> <p><u>Related Film/Video:</u> <i>Prince of Tides, Sybil, Born on the Fourth of July, Casualties of War, The Fisher King, Sophie's Choice, An Angel at my Table,</i></p>	<p><b>Counseling Theory &amp; Pathology Paper</b></p> <p><b>Seminar Discussion:</b></p> <p><b>Async. Discussion</b></p>

		<i>Apocalypse Now, Dirty Filthy Love, Antoine Fisher, Sybil.</i>	<b>Forum:</b>
Week 5  <i>Mid-Term Evaluation</i>	Check-in on Readings/Films  <i>Feeding/Eating, Elimination Disorders</i>  <i>Sleep &amp; Wake Disorders</i>	<u>Required Readings:</u> <ul style="list-style-type: none"> <li>DSM-5 Topic Diagnostic Criteria, Differential Diagnoses</li> <li>Reichenberg &amp; Seligman: Ch. 11, 12, &amp; 13</li> </ul> <u>Related Film/Video:</u> <i>PBS Special - Anorexia, Dying to be Thin, What's Eating Gilbert Grape</i>	<b>Seminar Discussion:</b>  <b>Async. Discussion Forum:</b>
Week 6	Check-in on Readings/Films  <i>Sexual Dysfunctions</i>  <i>Gender Dysphoria</i>  <i>Disruptive/Impulse Control/Conduct Disorders</i>	<u>Required Readings:</u> <ul style="list-style-type: none"> <li>DSM-5 Topic Diagnostic Criteria, Differential Diagnoses</li> <li>Reichenberg &amp; Seligman, Ch. 14, 15, &amp; 16</li> </ul> <u>Related Film/Video:</u> <i>Coach, Body Double, 8 MM, 8 ½ Weeks</i>	<b>Seminar Discussion:</b>  <b>Async. Discussion Forum:</b>
Week 7	Check-in on Readings/Films  <i>Substance Related Disorders</i>	<u>Required Readings:</u> <ul style="list-style-type: none"> <li>DSM-5 Topic Diagnostic Criteria, Differential Diagnoses</li> <li>Reichenberg &amp; Seligman: Ch. 17</li> </ul> <u>Related Film/Video:</u> <i>The Bell Jar, Committed, Days of Wine and Roses, Clean and Sober, Ironweed, When a Man Loves a Woman, Woman Under the Influence, The Man with the Golden Arm, Hatful of Rain, Monkey on My Back, Bigger than Life, Valley of the Dolls, The French Connection, Panic in Needle Park, Born to Win, The Seven Percent Solution, Who's Afraid of Virginia Wolf (also good for pathological communication patterns in couple and family systems), Barfly, Postcards from the Edge</i>	<b>Seminar Discussion:</b>  <b>Async. Discussion Forum:</b>
Week 8	Check-in on Readings/Films  <i>Neurocognitive Disorder</i>  <i>Personality &amp; Paraphilic Disorders</i>	<u>Required Readings:</u> <ul style="list-style-type: none"> <li>DSM-5 Topic Diagnostic Criteria, Differential Diagnoses</li> <li>Reichenberg &amp; Seligman: Ch. 18, 19, &amp; 20</li> </ul> <u>Related Film/Video:</u> <i>Attraction, Truth or Dare, Body Heat, Cape Fear, Basic Instinct</i>	<b>Diagnosis Paper</b>  <b>Seminar Discussion:</b>  <b>Async. Discussion Forum:</b>
Week 9		<u>Required Readings:</u>	<b>Culture Group</b>

		<ul style="list-style-type: none"> <li>DSM-5 pp. 809-817, 833-837</li> </ul>	<b>Presentations</b>
Week 10 Final Evaluation		<u>Required Readings:</u>	<b>Culture Group Presentations</b>  <b>Final Prof Identity Reflection Due</b>
Week 11	HOLD FOR EMERGENCY		

### University Attendance and Participation

This is an experiential class with dyad/triadic processing activities that provide opportunities to interact with and learn from your peers. Such activities are significant factors in your educational growth and development. Therefore, students are expected to attend class regularly and participate in class discussions, class activities, and peer practice sessions at the graduate level. Students are expected to demonstrate interpersonal effectiveness, openness to feedback, and respect for the community of learners.

Each student is expected to be on time and attend for all classes. Failure to attend less than 90% of the class meeting time, or 27 clock hours, will result in no credit for the course unless appropriate makeup work is completed. If a student falls below the 90% standard of attendance, it is the student's responsibility to arrange for appropriate makeup work with the instructor. No makeup work will be permitted and no credit will be granted in those cases where 20% or more of the total class meeting time has been missed.

If there is a need to miss a class based on emergency, it is expected that the student will contact the instructor before the missed class. Furthermore, as stated in Antioch University's attendance policy, missing more than one class for any reason may result in a No Credit evaluation. It is the policy of the instructor that students who are more than 15 minutes late will receive a loss of attendance for that class period.

### Scholarship

Completion of written assignments should be typed, double-spaced, proof read, and reflect graduate competency in both technical and grammatical arenas utilizing APA format. Students should submit papers electronically through Sakai ("Assignments"). All written papers must conform to M.A. Psychology style and writing standards of graduate level scholarship. Failure to adhere to these standards of scholarly writing will result in the automatic return of a paper. No students will be permitted more than one opportunity to re-write a paper that fails to meet M.A. Psychology scholarship standards. No re-written final papers will be accepted beyond the end of the eleventh week of the quarter.

### Competency

All students are expected to demonstrate Required Competency in order to receive credit for the course. Students will be evaluated with regard to the quality and professionalism expected of counseling professionals. Prompt attendance, reflective preparation, demonstration of willingness to learn basic counseling skills, peer collaboration, receive and provide feedback, and synthetic thinking are aspects of professional counselors and expected of students throughout the course. Evaluative feedback will occur both in person and in written throughout the quarter.

### Assessment Criteria for CMHC Students

CMHC students are assessed in 9 areas across 5 competency levels as defined below. In order to be granted credit for a specific course, students must demonstrate an overall **minimum level of competency**. In order

to successfully move into the internship year, students must demonstrate an overall 50% **competency level** in all courses/learning assessments to date, and in order to successfully graduate the student must demonstrate an overall competency level in at least 75% of course/learning assessments for their program.

### **Definitions of Competency Areas (CMHC)**

To achieve a particular level of competence for the course, students must complete the following:

#### **PCC – Professionalism and SKD – Professional:**

Adheres to the ethical guidelines of AAMFT/ACA. Behaves in a professional manner towards supervisors, instructors, peers, and clients (e.g. emotional regulation). Is respectful and appreciative to the culture of colleagues and is able to effectively collaborate with others - shows ability to think abstractly, recognize multiple sides of an issue and generate creative solutions; demonstrates intellectual curiosity, flexibility, and active engagement with new knowledge.

#### **PCC - Reflective Practice and SKD – Perceptual:**

Demonstrates capacity to engage in self-analysis, flexibility in thinking, sitting with abstract concepts and complexity. Exhibits ability to take responsibility for behavior, choices, and mistakes.

#### **PCC - Applied Critical Thinking and SKD - Conceptual/Evaluative:**

Able to recognize multiple sides of an issues, tolerate ambiguity, accept situations which require flexibility in thinking and creative solutions.

#### **PCC - Diversity and Social Justice and SKD – Executive:**

Demonstrates awareness, knowledge, and skills of both self and other, in relation to working with individuals, groups and communities from various cultural backgrounds and identities. Works to dismantle systems of marginalization, domination, oppression, and consciously resists engaging in microaggressions. Microaggressions for these purposes are defined as; subtle or overt communications lacking in cultural awareness that humiliate, offend, or invalidate a person verbally or nonverbally, intentionally or unintentionally

#### **PCC - Written Communication and SKD – Conceptual/Evaluative:**

Writes clearly, professionally and reflectively; integrates personal and academic material. Presents ideas and information in an organized format. Demonstrates Master’s level technical writing skills and APA style. Does not engage in plagiarism of any type.

CMHC/CMHC-CAT STUDENTS: Additionally, in order to successfully move into the internship year, students must demonstrate an overall “Intermediate Competency” in at least 50% of “required” courses to date, and in order to successfully graduate the student must demonstrate an overall “Intermediate Competency” in at least 75% of “required” courses. A comprehensive student review by the faculty occurs at early and midpoints in their progress through the curriculum. If the student falls below competency in 50% of “required” courses as they prepare to enter internship, a Student Development Plan (SDP), will be implemented, in collaboration with their advisor, to map out specific steps toward academic improvement.

PROFESSIONAL CORE COMPETENCY: In addition to the competencies specific to each course, CFT/CMHC students are also evaluated on 5 areas of Professional Core Competencies (PCC), with subsidiary Skill or

Knowledge Domains (SKD), to be demonstrated in each course and throughout their graduate counseling or therapy experience with peers, faculty, clients, and colleagues.

### **Definitions of Competency Levels**

**“Below Competency”** reflects a failure to sufficiently address all of the issues specified in the guidelines as indicated in the syllabus, which includes inadequate completion in terms of the defined criteria. Failure to meet minimum attendance, graduate-level of written work, submission of assignments, and contribute practice lab sessions. A lack of self-awareness, cultural awareness, and harmful use of counseling skills and interactions with peers. Defensive attitude toward feedback.

**“Required Competency”** indicates beginning sufficiency in meeting the criteria specified in the syllabus with no major difficulties in terms of the defined criteria. Minimum attendance is met, all the assignments are submitted with graduate-level of written work, and participated all the in-class practice lab sessions. Receive and provided feedback effectively, and demonstrate multicultural awareness. Required Competency is achieved through the satisfactory completion of all course assignments and the quality of class participation and professionalism. The expectation is that all work will be submitted on or before the date it is due (*unless there is a prior arrangement with the instructor, written work submitted beyond the due date will not be accepted*). As a mastery-learning course, assignments will be returned with a **P** (Pass) or **I** (Incomplete). Prompt attendance, reflective preparation, peer collaboration, and synthetic thinking are aspects of professional leadership and expected of students throughout the course. Academic dishonesty will be penalized in accordance with AUS policies.

**“Intermediate Competency”** denotes the student has met the “Required Competency” criteria as well as demonstrated a consistently high level of mastery and scholarship in terms of the defined criteria. Demonstrate insightful reflections, synthetic and critical thinking, and active risk-taking in practicing new skills. Reflection papers including intrapersonal challenges and developments, as well as multicultural awareness and competency. Integrate feedback to professional development in both oral and written presentations.

**“Advanced Competency”** is reserved for practicum/internship coursework.

### **Counselor Competency & Fitness**

Antioch University is obligated, as a CACREP-equivalent institution, to hold our students to the highest professional, personal, and ethical standards and to respond when those standards are compromised. The 2014 American Counseling Association *Code of Ethics*, Section F.5.b. states that “students and supervisees monitor themselves for signs of impairment from their own physical, mental, or emotional problems and refrain from offering or providing professional services when such impairment is likely to harm a client or others. They notify their faculty and/or supervisors and seek assistance for problems that reach the level of professional impairment, and, if necessary, they limit, suspend, or terminate their professional responsibilities until it is determined that they may safely resume their work.”

Section F.8.d. states Addressing Personal Concerns Counselor that “educators may require students to address any personal concerns that have the potential to affect professional competency.” Further, Section F.9.b. states “Counselor educators 1) assist students in securing remedial assistance when needed, 2) seek professional consultation and document their decision to dismiss or refer students for

assistance, and 3) ensure that students have recourse in a timely manner to address decisions requiring them to seek assistance or to dismiss them and provide students with due process according to institutional policies and procedures.

In this course, you are expected to be: 1) open, 2) flexible, 3) positive, 4) cooperative, 5) willing to use and accept feedback, 6) aware of impact on others, 7) able to deal with conflict, 8) able to accept personal responsibility, and 9) able to express feelings effectively and appropriately. You will be informed by your instructor if your performance on any of these factors is substandard and will be given specific, written feedback with guidelines for improvement.

Counseling not only demands the highest levels of performance, it also subjects counselors to stresses and challenges that may threaten individuals' coping abilities. You are encouraged to seek professional assistance and notify your instructor if you feel that your work is being compromised.

### **Audio- or Video-recording of Classes**

- **Audio- or Video-recording of Classes**

Your instructor may identify times when recording a class session may have educational or academic value. In these cases, the recordings will be used and shared by your instructor in accordance with the [Guidelines for Lecture Capture and Audio/Video Recording](#). The Guidelines provide information about when it is necessary for faculty to obtain permission to use and/or share class recordings. Students will be asked to provide their verbal consent to have the sessions recorded. Faculty may not share or transfer the recordings to third parties outside the class without students' written consent. Students who receive copies of recorded classes may use the recordings for their own personal educational purposes only; for the duration of the course. Students may not share or transfer the recordings to third parties outside the class under any circumstances.

### **Evaluation Procedures**

1. **Attendance:** Students are expected to attend all scheduled classes. Credits may be denied for failure to attend classes.
2. **Conduct:** Students are expected to be treated and to treat others with respect. Failure to do so may result in suspension, dismissal, or exclusion from class.
3. **Plagiarism:** Plagiarism is defined as the presentation of an idea or a product as one's own, when that idea or product is derived from another source and presented without credit to the original source. "Idea or product" includes not only written work but also artworks, images, performances or ideas expressed orally or via any electronic or other medium.
4. **Communication Protocol:** All students must have access to computer technology. AUS maintains computer access in the AUS Library on the third floor and the study center on the second floor.

E-mail accounts and addresses are assigned for all Antioch Seattle students. Students are required to check their e-mail accounts at least weekly and are responsible for being aware of information posted as official announcements and through their programs. To comply with students' record confidentiality and security requirements, official e-mail communication with Antioch Seattle, including e-mail between students and instructors, should originate from and be conducted within

the Antioch University Seattle e-mail system.

5. **Incompletes:** If a student does not satisfactorily complete the assigned work in a course by the end of the term, he or she will be granted No Credit. If a student is unable to complete the work due to extraordinary extending circumstances, he or she should discuss the matter with the instructor and, if approved, the instructor can assign an incomplete (INC) and set a deadline of thirty (30) days for required submission of all remaining assignments. The incomplete will be calculated in the same way as No Credit is when determining the student's academic standing. Upon satisfactory completion of the INC, it will no longer count against the student's academic standing. If the work is not completed by the deadline and an assessment has not been submitted, a No Credit (NC) will be assigned, not subject to change. To earn credit for a course deemed No Credit or permanently incomplete, the student must reenroll in and repay for the course. Incomplete contracts are not available to non-matriculated or visiting students.

Upon withdrawal from Antioch, outstanding incomplete courses are converted to NC (No Credit). An NC is permanent and not subject to change. Students must complete all course and degree requirements prior to or on the last day of classes of a term to be eligible to graduate that term.

## University Policies

- Antioch University Policies:

Antioch University is committed to building a vibrant and inclusive educational environment that promotes learning and the free exchange of ideas. Our academic and learning communities are based upon the expectation that their members uphold the shared goal of academic excellence through honesty, integrity, and pride in one's own academic efforts and respectful treatment of the academic efforts of others. All students are expected to comply with Antioch University policies, including the Title IX Sexual Harassment and Sexual Violence Policy, Student Academic Integrity Policy, and the Student Conduct Policy. Academic, student, and other university policies are available online: [http://aura.antioch.edu/au\\_policies/](http://aura.antioch.edu/au_policies/)

Questions about policies may be directed to Jane Harmon Jacobs, Academic Dean, [Jharmonjacobs@antioch.edu](mailto:Jharmonjacobs@antioch.edu) or 206.268.4714.

## Reasonable Accommodation for Students with Disabilities

Antioch University is committed to providing reasonable accommodations to qualified students with disabilities in accordance with Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act of 2008. Students with disabilities may contact the Disability Support Services office to initiate the process and request accommodations that will enable them to have an equal opportunity to benefit from and participate in the institution's programs and services. Students are encouraged to do this as early in the term as possible, since reasonable accommodations are not retroactive. The Disability Support Services office is available to address questions regarding reasonable accommodations at any point in the term.

For more information, please contact Jill Haddaway, Disability Support Services Coordinator: 206-268-4822 or [dss.aus@antioch.edu](mailto:dss.aus@antioch.edu).



## Library Services and Research Support

The AUS Library is here to serve you throughout your academic career. On our physical shelves, you will find books carefully selected to help you in your academic pursuits. In addition, you will also find journals, masters' theses, dissertations, and videos/DVDs. The AUS Library provides computers including PCs and Macs, a printer/copier, and scanners available for you to use. You may also bring your laptop and connect to the campus wireless system.

To search the library catalog and beyond, please see the AUS Library web page, <http://www.antiochseattle.edu/library>. Both the catalog and our extensive research databases may be searched from off campus. Please call the AUS Library at 206-268-4120 if you need information on how to access the databases.

The Library teaches **workshops** throughout the year that are designed to help you in your research. Students may also make an appointment with the librarian for individual research help. Call or email Beverly Stuart, Library Director, at 206-268-4507 or [bstuart@antioch.edu](mailto:bstuart@antioch.edu).

## Writing Support at Antioch University

Much of your learning is writing intensive, and you will write in a variety of genres, from critical reflections to more formal research papers. Writing for an academic audience can also require one to gain new understandings about style and format. All students are encouraged to seek writing support for their courses throughout their career at Antioch. Students at AUS have multiple venues for **free writing support**:

**Writing Lab (room 323 Library/CTL):** The Writing Lab offers *free* peer-based writing consultations (schedule directly online at <https://antiochctl.mywconline>; call 206-268-4416; or email [writinglab.aus@antioch.edu](mailto:writinglab.aus@antioch.edu)) and drop in hours. They also conduct workshops and maintain resources for successful writing at AUS. Writing Lab consultants are graduate students in various programs at AUS and thus have deep understanding of the types of writing done by students here. Check their [website](#) for future workshops on topics related to academic writing.

**The Virtual Writing Center (VWC):** The VWC is located at [antioch.edu/vwc](http://antioch.edu/vwc) and allows busy AU students to get quality peer-based feedback of their writing within 48 hours. Live conversations with peer e-tutors may also be arranged by emailing [vwc@antioch.edu](mailto:vwc@antioch.edu).

### **The Writers' Exchange (WEX): fee-based writing support**

The [Writers' Exchange](#) (WEX) was developed at Antioch University in direct response to the increase demand of graduate students' need for specialized editing support that exceeded the free peer-editing available at the Virtual Writing Center. If you're working on your thesis or dissertation, or just want professional writing support, visit WEX at [wex.antioch.edu](http://wex.antioch.edu).

All WEX editors are professionals who have been vetted for their range of editing experience and the breadth of their expertise. Our fees are competitive and further discounted for the entire AU community.



**Appendix A**  
**GUIDELINES FOR FEEDBACK**

*(Modified with Wood, 2017)*

Feedback is information that flows between people that has to do with their interaction in the here and now. Effective feedback is information that:

1. Can be heard by the receiver (as evidenced by the fact that s/he does not get hurt, defensive, etc.).
2. Keeps the relationship intact, open, and healthy (though not devoid of conflict and pain).
3. Validated the feedback process in future interaction (rather than avoiding it because “last time it hurt”).

**Giving Feedback**

<b>Effective Feedback</b>	<b>Ineffective Feedback</b>
Comes as soon as possible after the behavior.	Is delayed, saved up or dumped.
Refers to behavior the receiver can do something about.	Refers to behaviors over which the receiver has little or no control. “Your southern accent is very annoying.”
Direct, objective, from sender to receiver.	Indirect; ricocheted (“Tom, how do you feel when Jim cracks his knuckles in session?”)
Describes the behavior specifically: “I observed your voice is louder when you were telling the client...”	Uses judgmental statements: “You were being rude to the client.”
Uses “I” messages – the sender takes responsibility for his or her own thoughts, feelings, and reactions. “I think,” “I observed...”	“Ownership” is transferred to “people,” “everybody,” “we,” etc: “Everybody thinks you ask too many closed questions in session.”
Recognizes that this is a “process,” that an interaction between the sender and receiver can occur at any moment.	No recognition of the need to process the feedback.
Be sensitive with cultural dynamic between sender and receiver and be curious in addressing your cultural awareness. “I wonder if that was influenced by cultural difference...,” “I am curious how your culture perceive ...”	Ignore cultural dynamic between sender/receiver or counselor/client.

## Receiving Feedback

Effectively Receiving Feedback	Ineffectively Receiving Feedback
<b>Open:</b> listens without frequent interruption or objections.	<b>Defensive:</b> defends personal action, frequently objects to feedback given.
<b>Responsive:</b> willing to hear what's being said without turning the table.	<b>Attacking:</b> verbally attacks the feedback giver and turns the table.
<b>Accepting:</b> accepts the feedback, without denial.	<b>Denies:</b> refutes the accuracy or fairness of the feedback.
<b>Respectful:</b> recognized the value of what is being said and the speaker's right to say it.	<b>Disrespectful:</b> devalue the speaker, what the speaker is saying, or the speaker's right to give feedback.
<b>Engaged:</b> interacts appropriately with the speaker, asking for clarification when needed.	<b>Closed:</b> ignores the feedback, listening blankly without interest.
<b>Active listening:</b> listens carefully and tries to understand the meaning of the feedback.	<b>Inactive listening:</b> makes no attempt to "hear" or understand the meaning of the feedback.
<b>Thoughtful:</b> tries to understand the personal behavior that has led to the feedback.	<b>Rationalization:</b> finds explanations for the feedback that dissolve any personal responsibility.
<b>Interested:</b> is genuinely interested in getting feedback.	<b>Patronizing:</b> listens but shows no real interest.
<b>Sincere:</b> genuinely wants to make personal changes if appropriate.	<b>Superficial:</b> listens and agrees. But gives the impression that the feedback will have little actual effect.
<b>Appreciate:</b> willing to consider multiple perspectives.	<b>Dismiss:</b> ignore or unwilling to consider multiple perspective.

**Appendix B**  
**Seminar Discussion Rubric**

<b>Criterion</b>	<b><i>Below Minimum Competency</i></b>	<b><i>Required Competency</i></b>	<b><i>Intermediate Competency</i></b>	<b>Notes</b>
Academic Content	Minimally references course readings	Adequately references and applies course readings	Critically and fully references and applies course readings plus supplementary material as required	
Multiple Perspectives	Minimally or does not present multiple points of view, if more than one point of view presented, academic content supports only one	Adequately presents and supports multiple points of view, integrates course readings to substantiate all perspectives	Thoroughly presents and substantiates multiple perspectives; integrates academic content from the course and other as required	
Emphasis on Diagnostic Category	Minimally emphasizes week's diagnostic category and related considerations	Adequately emphasizes week's diagnostic category and related considerations	Focuses almost entirely on week's diagnostic category and related considerations	
Promoting Lively Discourse	Primarily presentation of course materials with minimal discussion	Primarily discussion; minimal or no presentation of course materials	Balanced, lively graduate level discussion integrating course materials to support points of view	
Cultural Awareness/Social Responsibility	Does not or minimally addresses cultural awareness and social responsibility	Adequately addresses and integrates concepts of cultural awareness and social responsibility	Thoroughly integrates concepts of cultural awareness and social responsibility	
Verbal and Oral Presentation Skills	Verbal and oral presentation skills demonstrate minimal engagement with material and classmates; or lacks professionalism	Verbal and oral presentation skills demonstrate adequate engagement with material and classmates; adequate professionalism	Verbal and oral presentation skills demonstrate strong engagement with material and classmates; thorough professionalism present	

Interpersonal Skills	Interpersonal skills minimally present; difficulty resolving conflict between group members; participation appears unbalanced	Interpersonal Skills mostly present; group members resolve conflicts and demonstrate mutual participation	Interpersonal skills highly present throughout; group members work effectively together; participation appears balanced and supportive of one another	
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**Overall Competency:**

**Appendix C**  
**Diagnosis Paper Rubric (Core Assignment)**

<b>Criterion</b>	<b><i>Below Minimum Competency</i></b>	<b><i>Required Competency</i></b>	<b><i>Intermediate Competency</i></b>	<b>Notes</b>
Dx Research	Minimally researched Dx, references more than 10 years old or not peer reviewed; relied only on course materials;	Adequately researched Dx of choice; at least 5 recent peer reviewed references, at least 3 of which are published by peer-reviewed journals of student's discipline of study	Thoroughly researched and presented Dx, more than 5 high quality peer reviewed references throughout, student's professional discipline (CMHC/CFT) is represented through more than 3 journal references.	
Theoretical Approaches	Fewer than 3 theoretical views presented; minimal supporting literature; supporting literature is only or primarily course readings, not connected to tenets of student's own discipline; no systems-based theory present for CFT students	Adequately presents at least three theoretical approaches; Connects approaches to tenets of student's own discipline (CMHC/CFT); at least one systems based theory used for CFT students	At least three theoretical approaches are presented and evaluated; Theoretical approaches are clearly connected to tenets of student's own discipline (CMHC/CFT); at least one systems-based theory used for CFT students	
Dx Overview	Minimally presents an overview of Dx per assignment instructions	Adequately presents Dx overview per assignment instructions; each subcriterion is addressed and supported	Thoroughly presents Dx overview per assignment instructions, each subcriterion is thoroughly addressed and supported with high quality peer reviewed references	
Factors Influencing Expression or Maintenance	Fewer than three factors per theoretical orientation; did not or minimally included outcome research; research and/or factors not connected to expression or maintenance of Dx or Sx	Three factors per theoretical orientation included; Empirical outcome research used; Connection between factors, Expression or maintenance of Dx clearly articulated	At least three factors per theoretical orientation explored and substantiated with current empirical outcome research, connection between factors, research, and expression or	

	of Dx		maintenance of Dx or Sx of Dx clearly established	
Cultural Implications/Awareness	Cultural Implications/awareness minimally addressed, or addressed but not connected to Dx, no high quality supporting literature	Cultural implications/awareness adequately addressed, connected to Dx, and supported with high quality literature	Cultural implications/awareness thoroughly addressed, connected to Dx, supported with high quality literature	
Synthesis	Research and content of Dx paper not connected to student's professional discipline, professional development, or future clinical practice	Research and content of Dx paper connect to student's professional discipline, professional and future clinical practice	Research and content of Dx paper connect explicitly to primary tenets of student's professional discipline, professional development, and future clinical practice	
Formatting	Exceeds 12 pages, several APA errors throughout, peer reviewed references do not meet criteria for "high quality," or course text used as primary reference	Does not exceed 12 pages, minimal APA errors, peer reviewed references meet criteria outlined in assignment details; empirical outcome research included	Does not exceed 12 pages, minimal or no significant APA errors, peer reviewed references exceed minimum expectations outlined in assignment details, empirical outcome research is relevant and used appropriately	
Critical Thinking	Paper reports current state of the literature but does not evaluate or synthesize	Paper adequately evaluates and synthesizes current state of the literature, cultural implications, and other relevant factors	Paper thoroughly evaluates and synthesizes the literature, connection to student's discipline, cultural implications, and other relevant factors	

**Overall Competency:**