

UNIVERSITY OF PENNSYLVANIA
School of Social Policy & Practice

SW 760 MENTAL HEALTH DIAGNOSTICS

1. COURSE PURPOSE

This course will examine historical and contemporary knowledge and theory about mental health and mental disorders. Students will become familiar with dominant approaches to classifying, diagnosing and treating mental illness, while being encouraged to apply a critical lens to understanding the underlying assumptions, strengths, limitations, and consequences of each approach. Students will explore the constructed nature of psychiatric knowledge; that is, the ways in which current understandings of psychopathology are influenced by historical trends, sociocultural context, and claims-making. The course will include information about recent biomedical advances in the understanding of mental health and mental illness, including the role of genetics and neurobiology. The course will also consider the impact of race, ethnicity, social class, age, gender, and other demographic and socio-cultural variables on our understanding and response to mental health and mental disorders.

1. EDUCATIONAL OBJECTIVES

By the end of this course, students will demonstrate:

1. Knowledge about the signs and symptoms of the major clinical syndromes and disorders and ability to consider the epidemiology, causal explanation, prognosis, treatment approaches, and social consequences associated with each.

1. An understanding of the basic tenets of biopsychosocial assessment; and familiarity with formalized systems of assessment and diagnosis and their strengths and limitations: 1) diagnosis according to the Diagnostic and Statistical Manual of Mental Disorders classification system (DSM-5) 2) significant changes from DSM-IV-TR, implications, and clinical language 3) attention to ICD-10 and PIE systems of diagnosis.

1. The ability to apply the DSM-5 and mental health diagnostics to social work practice and to understand multi-disciplinary roles in mental health treatment.
1. Understanding of the impact of race, ethnicity, social class, age, gender and other sociocultural variables, on epidemiology, classification, and the delivery of mental health services.
1. The ability to examine research relevant to understanding mental disorders and their treatment.

III. TEXTBOOKS

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The following books have been ordered at the Penn Bookstore:

Required Textbooks:

1. American Psychiatric Association (2013). Desk reference to the diagnostic criteria for DSM-5. Washington, D.C.: Author.**

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2. American Psychiatric Association (2013). Diagnostic and statistical manual of mental disorders, (DSM-5) (5th ed.). Washington, D.C.: American Psychiatric Publishing, Inc.**

**The readings from the DSM-5 are available online, through the Penn library system at: <http://proxy.library.upenn.edu:2307>. If this link does not work for you just type DSM-5 into the search box at the left of the library home page and you can find the link to the ebook. We will use case examples to practice diagnosing in class, so you will need to bring either the DSM-5 or the pocket version (Desk Reference) to class each week. If you prefer to use the ebook with an Ipad or laptop that is acceptable. There is also an Ipad app for DSM 5 you may choose to purchase.

In addition to readings listed under each class session on this syllabus, students are also expected to read articles and chapters posted on Canvas for each class.

Recommended Textbooks:

1. Kilgus, M., Maxmen, J.S, & Ward. N. G. (2016). *Essential Psychopathology & Its Treatment. 4th Ed.* NY: W.W. Norton & Co.
2. Corcoran, J., & Walsh, J. (2014, DSM update). *Mental Health in Social Work: A Casebook on Diagnosis and Strengths-Based Assessment.* Boston: Allyn & Bacon.
1. Dziegielewski, S. (2010). *Social Work Practice and Psychopharmacology.* NY: Springer Publishing Co.
2. Kirk, S. (Ed.). (2005). *Mental disorders in the social environment.* New York: Columbia University Press.
5. Karls, J. and O'Keefe, M. (2008) *Person-in Environment System Manual*, NASW: Washington, DC.
6. PDM Task Force (2006). *Psychodynamic Diagnostic Manual.* Silver Spring, MD; Alliance of Psychoanalytic Organizations. (presents a different model of diagnostics)

1. COURSE FORMAT AND EXPECTATIONS

Attention to class material and engagement in class is expected at all times. **The use of laptops, tablets or phones for any reason other than note taking or use of the ebook is not acceptable and will be noted in your participation grade.** The course is structured in a lecture/discussion format with the strong expectation that students will come prepared, participate, and contribute to the class learning process.

1. Instructional aids such as videotapes, case studies, and handouts will be used to enhance learning and understanding of how the material applies to the field.
2. Students are expected to attend all class sessions and be present for the entire class session. In case of illness or if an emergency arises, the student is **expected to contact the instructor** beforehand, and is responsible for obtaining lecture notes. **Any unexcused absence and missing more than 2 classes will put the student at risk of failing the class. Excessive and repeated lateness will also count toward missed classes, participation, and may have further consequences.**
3. Students are expected to be prepared for classes. Preparation consists of reading, thinking critically about the readings, and completing all assignments.
4. This is a paper-less class. All articles, assignments, syllabus and the final exam will be available electronically on Canvas.
5. Assignments are expected on time. Any issues with timeliness of assignments must be addressed with the instructor **before** the due date. All late assignments will be

penalized one half grade (A to A-) per day late if no prior approval has been granted. If the exam is not taken in the window provided that will result in failing the exam.

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Evaluation of Class Performance

Grades will be based on:

- Class attendance, participation & preparedness: 20%
- Video Journal A: 15%
- Video Journal B: 15%
- Case Study Assignment: 25%
- Final Exam: 25%

Assignments and Exam

1. Video Journal A: Due Session 6, Feb 26, uploaded to Canvas before class

Access the PsycTherapy video series through the library. In the database videos are listed by: therapy topics, therapy approaches, and therapists. Some include a series of videos and some are one time clinical interactions.

Access one of the following videos:

1. Exposure Therapy for Anxiety Disorders (Session 1 of 6, Anthony Martin)

or

2. Cognitive Behavior Therapy for Anxiety Disorders (Michelle Craske)

Construct a case vignette from the video, and complete a full diagnostic profile.

Case vignette should include:

Relevant demographic information, presenting problem, mental status, key components of assessment including clinical information, history. Attention to content of the session and process, the way the client is interacting, physical presence and other session factors.

Diagnostic impressions and differential diagnosis

Include DSM 5 codes

This project provides diagnostic practice and also practice with clinical note taking and documentation. The case vignette is in clinical format with attention to clinical language. Write the vignette in a way you would write case notes or have seen cases written (ie sometimes full sentences are not always used, language is slightly different from the formal academic papers that you write). See the outlines/templates provided on Canvas.

Each video write-up is 1-2 pages. No citations needed unless you use DSM 5, PIE, or other readings to support your case in your differential diagnosis section.

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2. **Video Journal B: Due Session 10, April 2, uploaded to Canvas before class**

This assignment is similar to the first video assignment but you are to choose your own video.

Choose and view 1 video (not one from the above assignment). You may choose a video that refers to a type of treatment with a type of diagnosis, ie "CBT for depression." You will still be able to construct a vignette and diagnoses. After viewing the video, construct a case vignette from the video, and complete a full diagnostic profile.

Case vignette should include:

Relevant demographic information, presenting problem, mental status, key components of assessment including clinical information, history. Attention to content of the session and process, the way the client is interacting, physical presence and other session factors.

Diagnostic impressions and differential diagnosis

Include DSM 5 codes

This project provides diagnostic practice and also practice with clinical note taking and documentation. The case vignette is in clinical format with attention to clinical language. Write the vignette in a way you would write case notes or have seen cases written (ie

sometimes full sentences are not always used, language is slightly different from the formal academic papers that you write). See the outlines provided on Canvas.

The video write-up is 1-2 pages. No citations needed unless you use DSM 5, PIE, or other readings to support your case in your differential diagnosis section.

OR

Complete the assignment above but based on an actual client you work with rather than a video. If this option is chosen, you must protect confidentiality of any client information.

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3. **Case Study Assignment: Enriching Understanding of Mental Disorders through Narrative Accounts Due: Session 12, April 16, uploaded to Canvas before class**

It is easy to fall into a mentality of “us and them” when learning, studying and working with clients who struggle with mental health issues. This assignment is designed to expose students to narrative accounts of persons suffering from various psychiatric problems, in an effort to remove the sterile clinical barriers that can develop when we “take the person out of the diagnosis.”

For this assignment, you will read a fictional or ethnographic book that relates to a particular mental disorder. Choose one book from the list provided. (If you would like to read a book that is not on the list, check with the instructor first). You will use your reactions to the book—both intellectual and emotional, along with information from class readings and discussion—to enhance your understanding of the mental disorder described in the book. There are two parts to this assignment:

1. Reaction (3-5 pages, double spaced)

Write a **short** summary of the book. Discuss your reactions to the story and characters including the following in your discussion:

1. How did you feel as you were reading the book?

2. Could you empathize with the characters? Why or why not?
3. What, if anything, in the characters' story were you able to relate to your own experiences?
4. What feelings did you come away with after finishing the book—e.g., sympathetic, critical, hopeful, confused, uplifted, upset, sad, happy, enlightened, and so on.
5. What did you learn that you did not already know?
6. Do you believe the book painted an accurate picture of the characters and problems? why or why not?

1. Analysis (3-5 pages, double spaced)

Using the DSM-5, provide an assessment/diagnosis of one of the characters from the book. You may include a formal PIE assessment or choose to address PIE related factors within your assessment. The assessment should be written up as a clinical format. Be sure to describe your decision-making process as you arrive at your diagnoses or assessment of the character and include relevant social work considerations.

4. **Final Exam**

A final exam will be taken on Canvas between April 17 at 8 am and April 24, 8 pm. The exam covers material from the readings and class lectures. The exam is open-book and you can use class materials and notes while taking it. **The exam is an individual activity. Working in pairs or groups on the exam is a violation of academic integrity.** The exam consists of 50 multiple-choice questions. You will take the exam in a designated 3-hour time slot of your choosing. You will not be able to take part of the exam and return to it at a later time. ***If you do not take the exam during the allotted time period your exam grade will be a zero***

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1. **Course Outline**

*****In addition to the readings listed on the syllabus, you are to read any additional readings posted on Canvas in preparation for that day of class.***

Week 1, Jan 22 : Course Overview and Introduction

- What is psychopathology?
- Why does diagnosis and assessment matter?
- A biopsychosocial framework for assessment and diagnosis
- The changing face of mental health diagnosis

Required readings

1. Maxmen, Ward & Kilgus, pp. *Psychopathology*, 3-20
2. DSM-5, *Introduction; Use of the Manual; Cautionary Statement for Forensic Use of DSM 5*
3. Frances, A. (2013). What's normal and what's not? In *Saving Normal* (pp. 3-32). NY: HarperCollins.
4. Kirk, S. (2005). Introduction: Critical Perspectives. In Kirk, S. (2005) *Mental Disorders in the Social Environment* (Ch. 1). NY: Columbia University Press.
5. Watters, E. (2010) The Americanization of Mental Illness. *The New York Times*.

Retrieved from <http://www.nytimes.com/2010/01/10/magazine/10psyche-t.html> ([Links to an external site.](#))[Links to an external site.](#)

Week 2, Jan 29 : Diagnosis according to the Diagnostic and Statistical Manual (DSM)/Using the DSM and the Person-In-Environment Systems

- History and context
- Organization of each system
- Strengths and weaknesses
- Moving away from the multiaxial system

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Required readings

1. Karls, J. and O'Keefe, M. (2008) The PIE System. In *Person-in Environment System Manual* (Ch. 1).

NASW: Washington, DC.

2. Kilgus, Maxmen, & Ward, *Diagnosis and Prognosis, Systems Based Practice, Legal, Ethical,*

Multicultural Issues

3. McWilliams, N. (1994). Why diagnose? In *Psychoanalytic diagnosis* (pp. 7-20). New York: The Guilford

Press.

4. Pottick, Wakefield, Kirk and Xin Tian (2003). Influences of Social Workers' Characteristics on the

Perceptions of Mental Disorders in Youths. *Social Service Review*. 77(3), 431-454.

Week 3, Feb 5: Interviewing and Assessment

- Conducting a clinical interview
- Assessments, WHODAS
- Cultural Formulation
- Mental Status Examination
- Use of language
- Contracting for treatment

Other Conditions That May Be a Focus of Clinical Attention

- V-codes; Z-codes
- Coding but not identifying these as disorders
- Problems of life?
- Implications in practice
- Differential diagnosis, including malingering, factitious disorders

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Required readings

1. Karls, J. and O'Keefe, M. (2008) How to Use PIE in Practice. In *Person-in-Environment System Manual*

(Ch. 2). NASW: Washington, DC.

2. Maxmen, Ward & Kilgus, *Assessment*, 21-48

3. Goldstein, Miehl, and Ringel (2009). Assessment in relational treatment. In *Advanced Clinical Social*

Work Practice (pp. 79-105). NY: Columbia University Press.

4. DSM-5, *Section III, Emerging Measures and Models* (you are not required to read the second part of this section about Conditions of Further Study)

5. DSM-5, *Other Disorders That May Be a Focus of Clinical Attention*

6. Saleebey, D. (2005) *Balancing Act: Assessing Strengths In Mental Health Practice*. In S. Kirk (Ed.)

Mental Disorders in the Social Environment (pp. 23-43). NY: Columbia University Press.

Week 4, Feb 12 : Personality Disorders

- Character and Personality
- Categorical (taxonomic) and dimensional (non-taxonomic) systems for classifying personality.
- Defense Mechanisms
- Treatment Considerations of the Personality Disorders: Questioning our assumptions, selecting effective methodologies.

Required readings

1. DSM-5, *Personality Disorders*
2. Carey, B. (2011, June 23). Expert on mental illness reveals her own fight. *The New York*

Times. Retrieved from www.NYTimes.com ([Links to an external site.](#))[Links to an external site.](#)

3. Becker, D. (2001). Diagnosis of psychological disorders: DSM and gender. In J. Worrell (Ed.), *The Encyclopedia of gender* (pp. 333-343). San Diego: Academic Press.

Week 5, Feb 19 : Anxiety Disorders; Obsessive Compulsive and Related Disorders

- “Normal” versus “pathological anxiety
- A case-based approach to understanding anxiety disorders
- Anxiety and the brain
- Differential diagnosis including adjustment disorders

Required readings

1. DSM-5, *Anxiety Disorders; Obsessive Compulsive and Related Disorders*
2. Chansky, T. (2009, October 18). The anxious mind. *The New York Times*. Retrieved from

www.NYTimes.com

3. LeDoux, J. (1996). Where the wild things are. In *The Emotional Brain* (pp. 225-266). NY: Simon &

Schuster.

4. Murphy, T. (2007, July 24). For fear of flying, therapy takes to the skies. *The New York Times*.

Retrieved from <http://www.nytimes.com/2007/07/24/health/psychology/24fear.html>

**Week 6, Feb 26 : Trauma- and Stressor-Related Disorders; Dissociative Disorders
(Video Journal A Due)**

- The spectrum of dissociative experiences and disorders.
- Dissociative and somatoform disorders; Similarities and differences.
- The “trauma-dissociation” theory.
- Memory, repression, and the “false memory” controversy.

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Required readings

1. DSM-5, *Trauma- and Stressor- Related Disorders; Dissociative Disorders*
2. Courtois, C. (2008). Complex trauma, complex reactions: assessment and treatment.

Psychological Trauma: Theory, Research, Practice, Policy. S(1) 86-100.

3. Hartocollis, L. (2008). Guidelines for clinical social work with clients with dissociative disorders. In

Roberts, A. (Ed), *Social Worker’s Desk Reference*, 2nd Edition. NY: Oxford University Press.

4. Interlandi, J. (2014, May 22). A Revolutionary Approach to Treating PTSD. *The New York Times*.

Retrieved from <http://www.nytimes.com> (Links to an external site.)[Links to an external site.](#)

5. Volk, S. (2012, Aug 23) Welcome to the city of post traumatic stress disorder.

Philadelphia Magazine.

March 5 : No class, Spring Break

Week 7, March 12: Depressive Disorders; Bipolar and Related Disorders

- Unipolar depression
- Bipolar Mood Disorders
- Differential Diagnosis

Required readings

1. DSM-5, *Depressive Disorders, Bipolar and Related Disorders*
2. Egan, J. (2008, September 14). The bipolar puzzle. *The New York Times Magazine*.
3. Fitzpatrick, K, Piko, B. Wright, D. and LaGory, M (2005). Depressive Symptomatology, Exposure to

Violence and the Role of Social Capital Among African American Adolescents. *American Journal of Orthopsychiatry*. 75(2), 262-274.

4. Menand, L. (2010, March 1). Head case: Can psychiatry be a science? *The New Yorker*. Retrieved from http://www.newyorker.com/arts/critics/atlarge/2010/03/01/100301crat_atlarge_menand.html (Links to an external site.)Links to an external site.

Week 8, March 19 : Substance-Related and Addictive Disorders

- Etiology of substance abuse disorders
- Recognizing and managing dual diagnosis
- Socioeconomic issues related to diagnosis and treatment of substance abuse
- Moving from abuse/dependence toward use/induced
- Sub-diagnostic usage

Required readings

1. DSM-5 *Substance-Related and Addictive Disorders*.
2. Gossop, M and Rudolf, M. (2008). Substance use among older adults: a neglected but treatable problem.

Addiction, 103, 347-348.

Week 9, March 26 : Schizophrenia Spectrum and Other Psychotic disorders

- Symptoms, Diagnosis and Prognosis of Schizophrenia and Psychotic Disorders
- The interface of biology and environment (“nature vs. nurture”): Biological and Psychosocial Factors
- Treatments for Schizophrenia

Required readings

1. DSM-5, *Schizophrenia Spectrum and Other Psychotic Disorders*
2. Mueser, K. and Brunette, M. (2003). Schizophrenia-Spectrum Disorders. In *Treating Difficult Couples*

(pp. 137-158). NY: Guilford Press.

3. Vedantam, S. (2005, June 27). The power of social networks. *Washington Post*.

Retrieved from www.washingtonpost.com ([Links to an external site.](#))[Links to an external site.](#)

4. Watters, E. (2010). The Shifting Mask of Schizophrenia in Zanzibar. In E. Watters *Crazy Like Us* (pp 127-185). New York: Simon & Schuster.

Week 10, April 2 : Neurodevelopmental Disorders

Video Journal B Due

- Conceptual problems in the diagnosis of children and adolescents.
- The role of development.
- Psychopharmacology & children.
- Interviewing children and adolescents.

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Required readings

1. DSM-5, *Neurodevelopmental Disorders*
2. Wallis, C. (2009). A powerful identity, a vanishing diagnosis. *The New York Times*.
3. Schwarz, A. (2013) Drowned in a Stream of Prescriptions. *The New York Times*.

Week 11, April 9: Feeding and Eating Disorders

- The Eating Disorders: Anorexia Nervosa and Bulimia Nervosa—etiology, diagnosis, course, treatment, and prognosis.
- Sociocultural influences and issues in eating disorders.
- Understanding the precipitating factors and issues in eating disorders
- Treatments for eating disorders.
- Feminist treatment considerations for eating disorders
- Non-suicidal self-injury – etiology, diagnosis and treatment

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Required readings

1. DSM-5, *Feeding and Eating Disorders*
2. Berg, K.C., Peterson, C.B. & Frazier, P. (2012). Assessment and diagnosis of eating disorders: A guide

for professional counselors. *Journal of Counseling and Development*, 90: 262 – 269.

3. Gordon, H.G., et.al. (2010). Cultural body shape ideals and eating disorder symptoms among White, Latina, and Black college women. *Cultural Diversity and Ethnic Minority Psychology*, 16: 135-143.
4. Kazan, Z. (2016, Nov 17). Zoe Kazan on Overcoming an Eating Disorder. *The New York Times*.

Week 12, April 16 : Sexual Dysfunctions;;Paraphilic Disorders

FINAL EXAM: Due April 17 at 8 am and April 24, 8 pm.

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- Differential diagnosis
- Sociocultural issues

Gender Dysphoria

- Differential diagnosis
- Sociocultural and developmental issues

- Gender euphoria versus gender identity disorder
- Sociocultural and socioeconomic issues related to trans competent care

Required readings

1. DSM-5, *Sexual Dysfunctions; Paraphilic Disorders, and Gender Dysphoria*
2. Drescher, J. (2010). Queer Diagnoses: Parallels and Contrasts in the History of Homosexuality, Gender Variance, and the Diagnostic and Statistical Manual. *Archives of Sexual Behavior*. 39: 427-460.
3. Hale, J. (2007) Ethical problems with the mental health evaluation standards of care

for adult gender variant prospective patients. *Perspectives in Biology and Medicine*. 50:4, 491-505.

4. Lev, A.L. (2013). Gender Dysphoria: Two steps forward, one step back. *Clinical Social Work Journal*,

41, pp. 288-296.

5. Singh, A., Hayes, D. and Watson, L. (2011). Strength in the Face of Adversity. *Journal of Counseling*

and Development. 89: 20-27.

Week 13, April 23 : Somatic Symptom and Related Disorders; Disruptive, Impulse Control, and Conduct Disorders

- Differential diagnosis
- Sociocultural issues

Required readings

1. DSM-5, *Somatic Symptom and Related Disorders*
2. DSM-5, *Disruptive, Impulse Control, and Conduct Disorders*
3. Dominus, S. (2012, March 7) What happened to the girls in Le Roy. *The New York Times*.
4. Egan, J. (2008, September 14). The bipolar puzzle. *The New York Times Magazine*.
5. Wheaton, S. (2012) Memoirs of a Compulsive Firestarter. In C. LeCrow and J. Holschuh (Eds.) *First*

Person Accounts of Mental Illness and Recovery. (1st ed., pp. 294-297) New York: Wiley.

Week 14, April 30 : Wrap up

- Ongoing questions
- Categories that did not get attention in class
- Test review, Quizzo