



UNIVERSITY OF  
PROVIDENCE

**Master of Science in Counseling  
Fall 2023**

**MSC 508 – Psychopathology (3 Credit Hours)**

<b>Location/Time:</b>	Online via Moodle
<b>Instructor:</b>	Betty Cardona PhD., LPC Betty.Cardona@uprovidence.edu
<b>Office Hours:</b>	By Appointment

**COURSE DESCRIPTION**

A comprehensive overview of abnormal human behaviors and their complex etiologies, with emphasis on the DSM 5 classification system, differential diagnosis, and treatment considerations. Exploration of historical and current views, theories, and models of disorders.

**PREREQUISITS TO THIS COURSE and/or REQUIREMENTS THIS COURSE FULLFILLS**

- Prerequisites: none
- Requirements that this course fulfills: required course for MSC students

**REQUIRED and/or RECOMMENDED TEXTS AND COURSE MATERIALS**

- Comer, R.J. (2018). *Abnormal Psychology* (10<sup>th</sup> ed.). New York, NY: Worth Publishers. (Required)
- American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders* (5th ed.). Washington, DC: Author. (Required)
- American Psychological Association. (2020). *Publication manual*. (7th ed.). Washington, DC: Author. (Recommended)

**COURSE LEARNING OBJECTIVES / STUDENT COMPETENCIES / (CACREP STANDARDS)**

Upon completion of this course, the successful student will be able to:

KNOWLEDGE/SKILLS/SCHOLARSHIP (Associated CACREP Standards)

- 1) Describe the criteria and controversy regarding the definition of abnormal behavior and become familiar with historical views of abnormal behavior that influence how mental illness is viewed today (S2.F.1.a).  
Acquisition of the knowledge base for this objective will be assessed via Moodle discussion forum responses.
- 2) Be familiar with the use of basic assessment tools for diagnosis and treatment planning (S2.F.7.e) (S5.C.3.a).

Acquisition of the knowledge for this objective will be assessed via differential diagnosis/etiology/treatment strategy assignments & via Moodle discussion forum responses.

- 3) Understand the prevalence of & therapeutic response to abnormal behavior in and across diverse groups and various cultures (S2.F.2.a).  
Acquisition of the knowledge for this objective will be assessed via differential diagnosis/etiology/treatment strategy assignments & via Moodle discussion forum responses.
- 4) Be able to accurately diagnose clients according to the major diagnostic categories of the DSM-5 and distinguish among symptoms of each of the following groups of disorders (S5.C.2.d) (S5.C.2.e):
  - ✓ Anxiety Disorders
  - ✓ Obsessive-Compulsive and Related Disorders
  - ✓ Trauma- and Stressor-Related Disorders
  - ✓ Bipolar and Related Disorders
  - ✓ Depressive Disorders
  - ✓ Eating Disorders
  - ✓ Substance-Related and Addictive Disorders
  - ✓ Schizophrenia Spectrum and Other Psychotic Disorders
  - ✓ Personality Disorders
  - ✓ Somatic Symptom and Related Disorders
  - ✓ Dissociative Disorders.Acquisition of the skills for this objective will be assessed via differential diagnosis/etiology/treatment strategy assignments & via Moodle discussion forum responses.
- 5) Be familiar with suicide prevention models and strategies (S2.F.5.I)  
Acquisition of the skills for this objective will be assessed via Moodle discussion forum responses.
- 6) Describe the major techniques and theoretical approaches to understanding and treating abnormal behavior (S2.F.5.a) (S5.C.1.c) (S5.C.3.b)  
Acquisition of the knowledge base for this objective will be assessed via completion of differential diagnosis/biopsychosocial assessment/etiology/treatment strategy assignments and via Moodle discussion forum responses.
- 7) Effectively engage in case conceptualization using contemporary theories of counseling (S2.F.5.a) (S2.F.5.b) (S5.C.2.d).  
Acquisition of the knowledge base for this objective will be assessed via completion of differential diagnosis/biopsychosocial assessment/etiology/treatment strategy assignments.
- 8) Be able to constructively articulate the probable etiology of a client's condition (S5.C.1.d) (S5.C.2.b) (S5.C.2.g).  
Acquisition of the knowledge base for this objective will be assessed via completion of differential diagnosis/biopsychosocial assessment/etiology/treatment strategy assignments.

- 9) Be familiar with mental health service delivery modalities including inpatient, outpatient and partial hospitalization (S5.C.2.c)  
Acquisition of the skills for this objective will be assessed via Moodle discussion forum responses.
- 10) Be familiar with the classifications, indications and contraindications of commonly prescribed psychopharmacological medications. S5.C.2.h  
Acquisition of the knowledge base for this objective will be assessed via completion of differential diagnosis/biopsychosocial assessment/etiology/treatment strategy assignments.
- 11) Be able to create a general treatment strategy for clients, based on diagnosis (S5.C.1.c)  
Acquisition of the knowledge base for this objective will be assessed via completion of differential diagnosis/biopsychosocial assessment/etiology/treatment strategy assignments.
- 12) Be able to effectively critique and use research to improve counseling effectiveness (S2.F.5.j) (S2.F.8.a) (S2.F.8.b)  
Acquisition of the knowledge base for this objective will be assessed via completion of differential diagnosis/biopsychosocial assessment/etiology/treatment strategy assignments via Moodle discussion Forum responses and via completion of a research paper.

#### CACREP Standards – Section 2

##### PROFESSIONAL COUNSELING ORIENTATION AND ETHICAL PRACTICE

- History and philosophy of the counseling profession and its specialty areas. (S2.F.1.a)

##### SOCIAL AND CULTURAL DIVERSITY

- Multicultural and pluralistic characteristics within and among diverse groups nationally and internationally (S2.F.2.a)

##### COUNSELING AND HELPING RELATIONSHIPS

- Theories and models of counseling (S2.F.5.a)
- Evidence-based counseling strategies and techniques for prevention and intervention (S2.F.5.j)
- Suicide prevention models and strategies (S2.F.5.l)

##### ASSESSMENT AND TESTING

- Use of assessments for diagnostic and intervention planning purposes (S2.F.7.e) (S5.C.3.a)

##### RESEARCH AND PROGRAM EVALUATION

- Importance of research in advancing the counseling profession, including how to critique research to inform counseling practice (S2.F.8.a)
- Identification of evidence based practices (S2.F.8.b)

#### CACREP STANDARDS – Section 5 – C. Clinical mental health counseling

##### FOUNDATIONS

- Theories and models related to mental health counseling (S5.C.1.b)
- Principles, models, and documentation formats of biopsychosocial, case conceptualization, and treatment planning (S5.C.1.c)

##### CONTEXTUAL DIMENSIONS

- Roles and settings of mental health counselors (S5.C.2.a)
- Etiology, nomenclature, treatment, referral, and prevention of mental and emotional disorders (S5.C.2.b)
- Diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the *Diagnostic and Statistical Manual of Mental Disorders (DSM)* and the International Classification of Diseases (ICD) (S5.C.2.d)
- Impact of crisis and trauma on individuals with mental health diagnosis (S5.C.2.f)
- Impact of biological and neurological mechanisms on mental health (S5.C.2.g)
- Cultural factors relevant to clinical mental health counseling (S5.C.2.j)
- Record keeping, third party reimbursement, and other practice and management issues in clinical mental health counseling (S5.C.2.m)

#### PRACTICE

- Intake interview, mental status evaluation, biopsychosocial history, mental health history, and psychological assessment for treatment planning and caseload management (S5.C.3.a)
- Techniques and interventions for prevention and treatment of a broad range of mental health issues (S5.C.3.b)
- Strategies for interfacing with behavioral health care professionals (S5.C.3.d)
- Strategies to advocate for persons with mental health issues (S5.C.3.e)

#### COURSE REQUIREMENTS

- A. Discussion Board: Participate in weekly Moodle forums.
1. You will be required to participate in the Moodle portion of this course on a weekly basis. Discussion questions are posted in advance. To receive full credit, students must make an initial posting to the Moodle Discussion Board by **Thursday evening at 11:55 PM**. To receive full credit, **initial posts must be at least 300 words in length**. Students must make at least one unique peer response each week by **Sunday evening at 11:55PM**. The Rubric for discussion posts can be found at the end of this syllabus. Each week's posts will be worth 20 points, 15 for the initial post and 5 for peer responses. Please note that Forum # 8 and # 10 are 50 points each.
- B. Case Studies: Develop differential diagnosis/etiology/treatment strategy reports for 5 hypothetical clients based upon presented case studies.
1. Five times during the semester a detailed case study will be distributed to the class. Each student will diagnose, explain possible etiologies, and develop an initial treatment strategy for that case. Students are required to turn in the case studies to Moodle by the due date listed (see the course schedule for due dates). Please expect that you will have to spend a substantial amount of time putting together your answers to the first case study, the time needed to complete each additional case study will become less as you become accustomed to the content and process.
  2. The format and grading criteria for the differential diagnosis/etiology/treatment strategy case studies can be found at the end of this syllabus. Additional guidelines and a sample student paper are provided on the Start Here page of Moodle.
  3. Each case study is worth up to 60 points. For each calendar day that an assignment is late, the grade earned will be dropped by 10%. Assignments will not

be accepted if they are more than one calendar day late without prior permission from the instructor.

- C. Intake Evaluation / Case Note: Students will extend their understanding of psychopathology by conducting an intake evaluation role play. Students will interview another student in the course. The student being interviewed will use a provided vignette as the basis for their role play (content unknown to the interviewer). Unlike the case studies assignment, students will need to gather the pertinent information necessary to make a diagnose, explain possible etiologies, develop an initial treatment strategy, and generate a case note. Due December 11<sup>th</sup>. Worth 275 points.
- D. Class Participation:
1. You are expected to log into Moodle regularly (a minimum of every other day is expected). Failure to maintain engagement with the course may result in course failure.
  2. You are expected to schedule and participate in one meeting with the professor via collaborate prior to November to discuss your performance in the class.

## GRADING

	<u>Points</u>	<u>Percentage</u>
Discussion Board	375	35%
Case Studies	300 (60 points/assignment):	30%
Intake Evaluation	275	30%
<u>Collaborate Meeting with Professor</u>	<u>50</u>	<u>5%</u>
TOTAL	1000 points	100%

### Grading Scale

- A = 100-90%
- B = 89-80%
- C = 79-70%
- D = 69-60%
- F = 59-0%

### PAPER SUBMISSION REQUIREMENTS:

Written assignments should be typed, double-spaced, with 12-pt font and 1 inch margins, and should conform to APA (American Psychological Association) Style. Proper spelling, grammar, and punctuation are expected. **Late papers/assignments will not be accepted without prior approval and must be due to a legitimate emergency.**

### CLASS ATTENDANCE POLICY

“Students are expected to log in every other day on a minimum of 3 times per week for on-line Moodle courses. The specific attendance and grading policy for each class is determined by the instructor and is listed in the course syllabus. Students who miss classes due to participation in university sanctioned events are required to make up any work or assignments they have missed in an equitable manner determined by the instructor and should not have their grade affected by the absence itself. In isolated cases involving family or medical emergencies, students are encouraged to speak with their instructors. Instructors may require documentation of family or medical emergencies. (UP Catalog: “Academic Policies”)

## ACADEMIC HONESTY:

“Students should exhibit high standards of academic conduct. All acts of dishonesty in academic work constitute academic misconduct. Such acts include:

**Cheating:** use or attempted use of unauthorized material or the work of another student in any academic assignment, paper, or examination.

**Plagiarism:** representation of another’s work as one’s own. This includes the unauthorized and unacknowledged use of the phrases, sentences, paragraphs, ideas, illustrations, drawings, photographs, or computer programs of another whether by using exact or nearly exact words without quotation marks or by omitting citations or both.

The course instructor is the initial judge of whether a student is guilty of academic misconduct. Should a student disagree with an instructor’s judgment, the student may appeal the instructor’s decision by following the "Academic Related Appeals Process" on page xxi of the UP Catalog. The minimum penalty for an act of academic misconduct shall be a grade of “F” (failure) on the paper, assignment or examination involved. More severe penalties may be enforced by individual instructors, provided that such penalties are identified in the course syllabus. The maximum penalty for plagiarism that may be levied is a grade of “F” (failure) for the course. Copies of plagiarized work will be placed on file with the Coordinator of Student Faculty Relations. Severe or repeated instances of academic misconduct will result in more severe sanctions up to and including expulsion.” (UP Catalog: “Academic Policies”)

### Instructor’s additions to the Academic Conduct policy:

Work on the differential diagnosis/treatment plan assignments is to be conducted without discussion or collaboration with anyone inside or outside of the course. Failure to work independently will be considered a violation of the university academic integrity policy. Students are encouraged to collaborate as needed on each assignment with the course instructor.

Students who engage in academic misconduct (including plagiarism or cheating) will receive an F in this course.

## PROVISION FOR SPECIAL NEEDS

Accommodation for documented disabilities: If you have a documented disability and would like the professor to make accommodations, visit with the Center for Academic Excellence or call 406-791-5212. To promote the growth and mental well-being of MSC students, the University of Providence has contracted with mental health service providers to provide mental health counseling for students. Counseling services can be access by calling (406) 252-1315.

## TENTATIVE SCHEDULE (each week runs from Monday through Sunday)

WEEK	CONTENT	ASSIGNMENTS DUE
1 8/28-9/01	<b>History and Research in Psychopathology</b> Abnormal Psychology: Chapters 1 and 2	Initial Moodle Post due by 11:55 PM Thursday. Response to at least one fellow student due by 11:55 PM Sunday.
2 9/05-9/08	<b>Theories/Models of Abnormality</b> Abnormal Psychology: Chapter 3 DSM-5: Pgs. xiii-xliii & 5-25	Initial Moodle Post due by 11:55 PM Thursday. Response to at least one fellow student due by 11:55 PM Sunday.
3 9/11-9/15	<b>Assessment and Diagnosis of Abnormality</b> Abnormal Psychology: Chapter 4 DSM-5: Pgs. 809-833	Initial Moodle Post due by 11:55 PM. Thursday Response to at least one fellow student due by 11:55 PM Sunday.
4 9/18-9/22	<b>Anxiety Disorders, OCD and Related Disorders</b> Abnormal Psychology: Chapter 5	Initial Moodle Post due by 11:55 PM Thursday. Response to at least one fellow



	DSM-5: Pgs. 189-264	student due by 11:55 PM Saturday. <b>Case Study #1 due Sunday 9/24 by 11:55PM</b>
5 9/25-09/29	<b>Depressive &amp; Bipolar Disorders</b> Abnormal Psychology: Chapter 7 DSM-5: Pgs. 123-154	Initial Moodle Post due by 11:55 PM Thursday. Response to at least one fellow student due by 11:55 PM Sunday.
6 10/2-10/06	<b>Treatments for Depressive and Bipolar Disorders</b> Abnormal Psychology: Chapter 8 DSM-5: Pgs. 155-188	Initial Moodle Post due by 11:55 PM Thursday. Response to at least one fellow student due by 11:55 PM Sunday. <b>Case Study # 2 due Sunday 10/08 by 11:55 pm.</b>
7 10/07-10/13	<b>Disorders of Trauma &amp; Stress</b> Abnormal Psychology: Chapter 6 DSM-5: Pgs. 265-291	Initial Moodle Post due by 11:55 PM Thursday, Response to at least one fellow student due by 11:55 PM Sunday.
8 10/16-10/20	<b>Suicide</b> Abnormal Psychology: Chapter 9 DSM-5:	Initial Moodle Post due by 11:55 PM Thursday. Response to at least one fellow student due by 11:55 PM Sunday. <b>Forum # 8 50 points.</b>
9 10/23-10/27	<b>Fall Break – No Class</b>	
10 10/30-11/03	<b>Eating Disorders &amp; Disorders of Sex and Gender</b> Abnormal Psychology: Chapters 11 & 13, DSM-5: 329-354, 423-460	Initial Moodle Post due by 11:55 PM Thursday. Response to at least one fellow student due by 11:55 PM Sunday. <b>Case Study #3 due Sunday 11/05 by 11:55PM</b>
11 11/06-11/10	<b>Substance-Related and Addictive Disorders</b> Abnormal Psychology: Chapter 12, DSM-5: Pgs. 481-590	Initial Moodle Post due by 11:55 PM Thursday. Response to at least one fellow student due by 11:55 PM Sunday. <b>Forum # 10 50 points.</b>
12 11/13-11/17	<b>Schizophrenia Spectrum &amp; other Psychotic Disorders</b> Abnormal Psychology: Chapters 14 & 15, DSM-5: Pgs. 87-122	Initial Moodle Post due by 11:55 PM Thursday. Response to at least one fellow student due by 11:55 PM Sunday. <b>Case Study #4 due Sunday 11/19 by 11:55PM</b>
13 11/20-11/24	<b>Personality Disorders</b> Abnormal Psychology: Chapter 16, DSM-5: Pgs. 645-684	Initial Moodle Post due by 11:55 PM Thursday. Response to at least one fellow student due by 11:55 PM Sunday.
14 11/27-12/01	<b>Disorders of Childhood and Adolescence</b> Abnormal Psychology: Chapter 17, DSM-5: Pgs. 461-480	Initial Moodle Post due by 11:55 PM Thursday. Response to at least one fellow student due by 11:55 PM Sunday. <b>Case Study #5 due Sunday 12/03 by 11:55PM</b>
15 12/04-12/08	<b>Disorders of Aging and Cognition</b> Abnormal Psychology: Chapter 18, DSM-5: Pgs. 591-644	<b>Intake Evaluation / Case Note due Sunday 12/10 by 11:55PM</b>
16 12/11-12/15	Finals Week	

### Late Assignment Policy:

Late papers/assignments will not be accepted without prior approval and must be due to a legitimate emergency.

### Writing Support:

Writing support and proofreading assistance are available. This includes support for proofing your work! For more information, call (406) 791-5216.

### I. University Policies and Information

<https://www.uprovidence.edu/academics/>

This Link includes access to the following important University Information: Academic Catalog (University Policies and Information) Academic Calendar, Library Services, Registrar's Office, Student Academic Support Services and more.

**Instructor's Statement:**

The instructor reserves the right to adjust the syllabus schedule as needed to meet the needs of this class. Changes will be communicated with students in a timely manner.

University-level education is about broadening horizons and looking at academic issues from a variety of perspectives. Participants are encouraged to bring their own life experiences and viewpoints to bear on classroom discussions and assignments. Along with the freedom to express one's own view comes the responsibility of respecting race, ethnicity, age, creed, religion, gender, sexual orientation, marital-status, or political ideology. In other words, be kind.



<b>Discussion Post Grading Rubric</b>				
	<b>Exemplary Criteria</b>	<b>Proficient Criteria</b>	<b>Progressing</b>	<b>Emerging</b>
<p><b>Element (1):</b> Responsiveness: Did the student respond to the <b>main</b> question of the week?</p> <p><b>5 points (25%)</b></p>	<p>Posts exceed requirements of the Discussion instructions (e.g., fully respond to the question being asked and go beyond what is required [i.e., incorporates additional external, primary resources, and shares relevant professional experiences]; are substantive, reflective, and refer to Learning Resources demonstrating that the student has considered the information in Learning Resources and colleague postings).</p> <p><b>5 points</b></p>	<p>Posts are responsive to and meet the requirements of the Discussion instructions. Posts fully answer the question(s) being asked and respond to the assignment in a substantive, reflective way. The post is supported with the course Learning Resources demonstrating that the student has read, viewed, and considered the Learning Resources and colleague postings but does not include external resources.</p> <p><b>4 points</b></p>	<p>Posts are somewhat responsive to the requirements of the Discussion instructions but do not include all required elements. Posts are not substantive and rely more on anecdotal evidence (i.e., largely comprised of student opinion); and/or does not adequately demonstrate that the student has read, viewed, and considered Learning Resources and colleague postings.</p> <p><b>2-3 points</b></p>	<p>Posts are unresponsive to the requirements of the Discussion instructions; miss the point of the question by providing responses that are not substantive and/or solely anecdotal (i.e., comprised of only student opinion); and do not demonstrate that the student has read, viewed, and considered Learning Resources and colleague postings.</p> <p><b>0-1 points</b></p>
<p><b>Element (2):</b> Critical Thinking, Analysis, and Synthesis: Is the student able to understand the issues associated with the question and make sense of the subject matter being addressed</p> <p><b>5 points (25%)</b></p>	<p>Posts demonstrate the student's ability to apply, reflect, AND synthesize concepts and issues presented in the weekly Learning Objectives. Student has integrated and mastered the general principles, ideas, and skills presented. Reflections include clear and direct correlation to authentic examples or are drawn from professional experience; insights demonstrate significant changes in awareness, self-understanding, and knowledge and are fully supported with scholarly literature including external, primary resources.</p> <p><b>5 points</b></p>	<p>Posts demonstrate the student's ability to apply, reflect OR synthesize concepts and issues presented in the weekly Learning Objectives. The student has integrated many of the general principles, ideas, and skills presented. Reflections include clear and direct correlation to authentic examples or are drawn from professional experience, share insights that demonstrate a change in awareness, self-understanding, and knowledge and are somewhat supported with scholarly literature limited to the course resources.</p> <p><b>4points</b></p>	<p>Posts demonstrate minimal ability to apply, reflect, or synthesize concepts and issues presented in the weekly Learning Objectives. The student has not fully integrated the general principles, ideas, and skills presented. There are little to no salient reflections, examples, or insights/experiences provided and they are supported with non-scholarly sources.</p> <p><b>2-3 points</b></p>	<p>Posts demonstrate a lack of ability to apply, reflect, or synthesize concepts and issues presented in the weekly Learning Objectives. The student has not integrated the general principles, ideas, and skills presented. There are no reflections, examples, or insights/experiences provided and no scholarly sources are included.</p> <p><b>0-1 points</b></p>

<p><b>Element (3):</b> Professionalism of Writing: Does the student meet graduate level writing expectations?</p> <p><b>5 points (25%)</b></p>	<p>Posts meet graduate level writing expectations (e.g., are clear, concise; make few errors in spelling, grammar, and syntax; and; use a preponderance of original language). Posts are written in APA format and include few if any errors. Demonstrate full incorporation of faculty feedback correcting errors from previous assignments. Posts are courteous and respectful when offering suggestions, constructive feedback, or opposing viewpoints.</p> <p><b>5 points</b></p>	<p>Posts meet graduate level writing expectations (e.g., are clear; make only a few errors in spelling, grammar, and syntax; provide adequate citation of sources when paraphrasing or referring to it; directly quote only when necessary and/or appropriate). Adhere to APA &amp; have minimal errors. Demonstrate some incorporation of growth oriented faculty feedback from previous assign. Posts are courteous &amp; respectful when offering feedback.</p> <p><b>4 points</b></p>	<p>Posts partially meet graduate level writing expectations (e.g., use language that is unclear/inappropriate; make more than occasional errors in spelling, grammar, and syntax; provide inadequate citation of sources when paraphrasing or referring to it; under-use original language and over-use direct quotes). Postings are at times less than courteous and respectful when offering suggestions, feedback, or opposing viewpoints. Posts demonstrate little incorporation of growth oriented faculty feedback from previous assignments.</p> <p><b>2-3 points</b></p>	<p>Posts do not meet graduate level writing expectations (e.g., use unclear/inappropriate language; errors in spelling, grammar, &amp; syntax; do not provide information about a source when paraphrasing or referring to it; directly quote from original source materials or consistently paraphrase rather than use original language; or are discourteous &amp; disrespectful. Do not demonstrate incorporation of growth oriented faculty feedback &amp; consistently repeat errors corrected in previous assignments.</p> <p><b>0-1 point</b></p>
<p><b>Element (4):</b> <b>Responses to Peers:</b> Did the peer respond to peer posts and contribute professionally and substantively?</p> <p><b>5 points (25%)</b></p>	<p>Responds to two or more peers in a manner that significantly contributes to the Discussion. Peer responses are substantive and well supported. With references and additional citations. Participates in the Discussion on more than two days during the week.</p> <p><b>5 points</b></p>	<p>Responds to two or more peers in a manner that significantly contributes to the Discussion. Responses are substantive but lack additional references. Participates in the Discussion a minimum of two days during the week.</p> <p><b>4 points</b></p>	<p>Responds to one or more peers in a manner that minimally contributes to the Discussion. Contributes all posts on one day.</p> <p><b>2-3 points</b></p>	<p>Does not respond to any peer posts.</p> <p><b>0-1 points</b></p>
TOTAL	<b>20 points</b>	<b>16 points</b>	<b>8-12 points</b>	<b>0-11 points</b>

### Written Assignments / Case Study Rubric

	Exemplary Criteria	Proficient Criteria	Progressing	Emerging
<p>RESPONSIVENESS TO ALL COMPONENTS OF THE CASE STUDY ASSIGNMENT (Did the student respond adequately to the writing assignment?)</p> <p><b>10% 6 points</b></p>	<p>Paper or writing assignment is responsive to and exceeds the requirements given in the instructions; Responds to assigned or selected topic; Goes beyond what is required in some meaningful way (e.g., ideas contribute a new dimension to what we know about the topic, unearths something unanticipated, etc.); Is substantive and evidence based; Demonstrates that the student has read, viewed, and considered the learning resources in the course and that the paper topic connects in a meaningful way to the course content; Is submitted by the due date.</p> <p><b>6 points</b></p>	<p>Paper or writing assignment is responsive to and meets the requirements given in the instructions. The paper responds to the assigned or selected topic; Is substantive and evidence based; Demonstrates that the student has read, viewed, and considered the Learning Resources in the course and that the paper topic connects in a meaningful way to the course content; Is submitted by the due date.</p> <p><b>5 points</b></p>	<p>Paper or writing assignment is somewhat responsive to the requirements given in the instructions. Content: Somewhat misses the point of the assigned or selected topic; and/or lacks in substance, relying more on anecdotal than scholarly evidence; and/or contains little evidence that the student has read, viewed, and considered the Learning Resources in the course and that the paper topic connects in a meaningful way to the course content; and/or is submitted by the due date.</p> <p><b>4 points</b></p>	<p>Paper or writing assignment is unresponsive to the requirements given in the instructions. Content: Misses the point of the assigned or selected topic; and/or relies primarily on anecdotal evidence; and/or contains little evidence that the student has read, viewed, and considered the Learning Resources in the course and that the paper topic connects in a meaningful way to the course content; and/or is submitted past the late deadline.</p> <p><b>0-3 points</b></p>

<p><b>CONTENT KNOWLEDGE</b> (Does the content in the paper demonstrate an understanding of the Diagnostic, etiological and treatment planning issues relevant to the case study) Includes knowledge of: Theories and models of counseling (S2.F.5.a) Assessment tools (S2.F.7.e) Diagnostic issues/DSM-5 (S5.C.2.d) Case conceptualization and evidence based treatment planning (S5.C.1c) (S5.C.3.a) (S2.F.8.e) Mental health delivery modalities (S5.C.2.c) 50% 30 points</p>	<p>Paper or writing assignment demonstrates/provides: In-depth understanding and application of concepts and issues presented in the course (e.g., insightful interpretations or analyses; accurate and perceptive ideas, opinions, and conclusions) showing that the student has absorbed the general principles and ideas presented and makes inferences about the concepts/issues or connects to them to other ideas; rich and relevant examples; thought-provoking ideas and interpretations, original thinking, new perspectives; original and critical thinking; and mastery &amp; thoughtful/ accurate application of knowledge and skills.</p> <p>27-30 points</p>	<p>Paper or writing assignment demonstrates/provides: Understanding and application of the concepts and issues presented in the course, demonstrating that the student has absorbed the general principles and ideas presented; relevant examples; thought-provoking ideas and interpretations, some original thinking; and critical thinking; and mastery and application of knowledge and skills or strategies presented in the course.</p> <p>24-26 points</p>	<p>Paper or writing assignment demonstrates/provides: Minimal understanding of concepts and issues presented in the course, and, while generally accurate, displays some omissions and/or errors; and/or few and/or irrelevant examples; and/or few if any thought-provoking ideas, little original thinking; and/or "regurgitated" knowledge rather than critical thinking; little mastery of skills and/or numerous errors when using the knowledge, skills, or strategies presented in the course.</p> <p>21-23 points</p>	<p>Paper or writing assignment demonstrates/provides: A lack of understanding of the concepts and issues presented in the course and/or application is inaccurate and contains many omissions and/or errors; and/or no examples or irrelevant examples; and/or no thought-provoking ideas or original thinking; and/or no critical thinking; and/or many critical errors when applying knowledge, skills, or strategies presented in the course.</p> <p>0-20 points</p>
<p><b>CULTURAL AND DIVERSITY ISSUES RELEVANT TO THE CASE (S2.F.2.a)</b> 10% 6 points</p>	<p>Assignment meets exemplary criteria for Multicultural and pluralistic characteristics within and among diverse groups nationally and internationally 6 points</p>	<p>Assignment meets proficient criteria for Multicultural and pluralistic characteristics within and among diverse groups nationally and internationally 5 points</p>	<p>Assignment meets progressing criteria for Multicultural and pluralistic characteristics within and among diverse groups nationally and internationally 4 points</p>	<p>Assignment meets emerging criteria for Multicultural and pluralistic characteristics within and among diverse groups nationally and internationally 0-3 points</p>
<p><b>QUALITY OF WRITING</b> 10% 6 points</p>	<p>Writing is scholarly and exceeds graduate-level writing expectations. The paper: Uses language that is clear, concise, and appropriate; has few if any errors in spelling, grammar, and syntax; is extremely well organized, logical, clear, and never confuses the reader; uses a preponderance of original language and uses direct quotes only when necessary and/or appropriate; provides information about a source when citing or paraphrasing it. 6 points</p>	<p>Writing is scholarly and meets graduate-level writing expectations. The paper: Uses language that is clear; has a few errors in spelling, grammar, and syntax; is well organized, logical, and clear; uses original language and uses direct quotes when necessary and/or appropriate; provides information about a source when citing or paraphrasing it. 5 points</p>	<p>Writing is somewhat below graduate-level writing expectations: The paper: Uses language that is unclear and/or inappropriate; and/or has more than occasional errors in spelling, grammar, and syntax; and/or is poorly organized, is at times unclear and confusing, and has some problems with logical flow; and/or reflects an overuse of original language and an overuse of direct quotes and paraphrases; and/or sometimes lacks information about a source when citing or paraphrasing it. 4 points</p>	<p>Writing is well below graduate-level writing expectations: The paper: Uses unclear and inappropriate language; and/or has many errors in spelling, grammar, and syntax; and/or lacks organization in a way that creates confusion for the reader; and/or contains many direct quotes from original source materials and/or consistently and poorly paraphrases rather than using original language; and/or lacks information about a source when citing or paraphrasing it. 0-3 points</p>
<p><b>RESEARCH, SCHOLARSHIP, AND PROFESSIONAL (APA) STYLE</b></p>	<p>The paper represents exceptional research, scholarship, and professional style. Paper content: Significantly contributes to the knowledge in the field; is well supported by current and pertinent research/evidence (within the previous 5 years, except for seminal, original research where appropriate)</p>	<p>The paper meets graduate-level expectations for research, scholarship, and professional style. Paper content: Contributes to knowledge in the field; is supported by current and pertinent research/evidence (within the previous 5 years, except for seminal, original research where appropriate)</p>	<p>The paper is somewhat below graduate-level expectations for research, scholarship, and professional style. Paper content: does little to contribute to knowledge in the field; is often supported by research older than 5 years, secondary sources (textbooks and websites), and sources that lack in variety; and/or uses APA form and style (including citations, references, use of nonbiased language, clear</p>	<p>The paper is substantially below graduate-level expectations for research, scholarship, and professional style. Paper content: Does not contribute to knowledge in the field; is, for the most part, unsupported by current (within the past 5 years), primary, and pertinent research/evidence from a variety of peer-reviewed books and journals; and/or does not use or contains pervasive errors in</p>

	from a variety of primarily primary, peer-reviewed sources (rather than textbooks and websites); and consistently uses correct APA form and style (including citations, references, use of nonbiased language, clear organization, good editorial style, etc.) with very few or no errors.	from a variety of peer-reviewed books and journals (rather than textbooks and websites); uses correct APA form and style (including citations, references, use of nonbiased language, clear organization, good editorial style, etc.) with only a few errors.	organization, good editorial style, etc.), but has frequent errors.	APA style (including citations, references, use of nonbiased language, clear organization, good editorial style, etc.).
20% 12 points	11-12 points	9-10 points	7-8 points	0-6 points
100% 60 points	54-60points	48--53 points	42-47 points	0-41 points

**Written Assignments / Intake Evaluation Rubric**

	<b>Exemplary Criteria</b>	<b>Proficient Criteria</b>	<b>Progressing</b>	<b>Emerging</b>
<p>RESPONSIVENESS TO ALL COMPONENTS OF THE INTAKE EVALUATION ASSIGNMENT (Did the student respond adequately to the writing assignment?)</p> <p>30 points</p> <p align="center">15%</p>	<p>Paper or writing assignment is responsive to and exceeds the requirements given in the instructions; Responds to assigned or selected topic; Goes beyond what is required in some meaningful way (e.g., ideas contribute a new dimension to what we know about the topic, unearths something unanticipated, etc.); Is substantive and evidence based; Demonstrates that the student has read, viewed, and considered the learning resources in the course and that the paper topic connects in a meaningful way to the course content; Is submitted by the due date.</p> <p align="center">6 points</p>	<p>Paper or writing assignment is responsive to and meets the requirements given in the instructions. The paper responds to the assigned or selected topic; Is substantive and evidence based; Demonstrates that the student has read, viewed, and considered the Learning Resources in the course and that the paper topic connects in a meaningful way to the course content; Is submitted by the due date.</p> <p align="center">5 points</p>	<p>Paper or writing assignment is somewhat responsive to the requirements given in the instructions. Content: Somewhat misses the point of the assigned or selected topic; and/or lacks in substance, relying more on anecdotal than scholarly evidence; and/or contains little evidence that the student has read, viewed, and considered the Learning Resources in the course and that the paper topic connects in a meaningful way to the course content; and/or is submitted by the due date.</p> <p align="center">4 points</p>	<p>Paper or writing assignment is unresponsive to the requirements given in the instructions. Content: Misses the point of the assigned or selected topic; and/or relies primarily on anecdotal evidence; and/or contains little evidence that the student has read, viewed, and considered the Learning Resources in the course and that the paper topic connects in a meaningful way to the course content; and/or is submitted past the late deadline.</p> <p align="center">0-3 points</p>
<p>CONTENT KNOWLEDGE (Does the content in the paper demonstrate an understanding of the following content:) theories and models related to clinical mental health counseling (S5.C.1.b)</p> <p>5%</p>	<p>Assignment meets exemplary criteria for theories and models related to clinical mental health counseling (S5.C.1.b)</p>	<p>Assignment meets proficient criteria for theories and models related to clinical mental health counseling (S5.C.1.b)</p>	<p>Assignment meets progressing criteria for theories and models related to clinical mental health counseling (S5.C.1.b)</p>	<p>Assignment meets emerging criteria for theories and models related to clinical mental health counseling (S5.C.1.b)</p>
<p>CONTENT KNOWLEDGE (Does the content in the paper demonstrate an understanding of the following content:) principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning (S5.C.1.c) (S5.D.1.d)</p> <p>5%</p>	<p>Assignment meets exemplary criteria for principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning (S5.C.1.c) (S5.D.1.d)</p>	<p>Assignment meets proficient criteria for principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning (S5.C.1.c) (S5.D.1.d)</p>	<p>Assignment meets progressing criteria for principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning (S5.C.1.c) (S5.D.1.d)</p>	<p>Assignment meets emerging criteria for principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning (S5.C.1.c) (S5.D.1.d)</p>
<p>CONTENT KNOWLEDGE (Does the content in the paper demonstrate an understanding of the following content:)</p>	<p>Assignment meets exemplary criteria for roles and settings of clinical mental health counselors (S5.C.2.a)</p>	<p>Assignment meets proficient criteria for roles and settings of clinical mental health counselors (S5.C.2.a)</p>	<p>Assignment meets progressing criteria for roles and settings of clinical mental health counselors (S5.C.2.a)</p>	<p>Assignment meets emerging criteria for roles and settings of clinical mental health counselors (S5.C.2.a)</p>

Written Assignments / Intake Evaluation Rubric				
	Exemplary Criteria	Proficient Criteria	Progressing	Emerging
roles and settings of clinical mental health counselors (S5.C.2.a) 5%				
CONTENT KNOWLEDGE (Does the content in the paper demonstrate an understanding of the following content:) etiology, nomenclature, treatment, referral, and prevention of mental and emotional disorders (S5.C.2.b) 5%	Assignment meets exemplary criteria for etiology, nomenclature, treatment, referral, and prevention of mental and emotional disorders (S5.C.2.b)	Assignment meets proficient criteria for etiology, nomenclature, treatment, referral, and prevention of mental and emotional disorders (S5.C.2.b)	Assignment meets progressing criteria for etiology, nomenclature, treatment, referral, and prevention of mental and emotional disorders (S5.C.2.b)	Assignment meets emerging criteria for etiology, nomenclature, treatment, referral, and prevention of mental and emotional disorders (S5.C.2.b)
CONTENT KNOWLEDGE (Does the content in the paper demonstrate an understanding of the following content:) diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the <i>Diagnostic and Statistical Manual of Mental Disorders (DSM)</i> and the <i>International Classification of Diseases (ICD)</i> (S5.C.2.d) (S5.D.2.f) 5%	Assignment meets exemplary criteria for diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the <i>Diagnostic and Statistical Manual of Mental Disorders (DSM)</i> and the <i>International Classification of Diseases (ICD)</i> (S5.C.2.d) (S5.D.2.f)	Assignment meets proficient criteria for diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the <i>Diagnostic and Statistical Manual of Mental Disorders (DSM)</i> and the <i>International Classification of Diseases (ICD)</i> (S5.C.2.d) (S5.D.2.f)	Assignment meets progressing criteria for diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the <i>Diagnostic and Statistical Manual of Mental Disorders (DSM)</i> and the <i>International Classification of Diseases (ICD)</i> (S5.C.2.d) (S5.D.2.f)	Assignment meets emerging criteria for diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the <i>Diagnostic and Statistical Manual of Mental Disorders (DSM)</i> and the <i>International Classification of Diseases (ICD)</i> (S5.C.2.d) (S5.D.2.f)
CONTENT KNOWLEDGE (Does the content in the paper demonstrate an understanding of the following content:) impact of crisis and trauma on mental health diagnosis (S5.C.2.f) 5%	Assignment meets exemplary criteria for impact of crisis and trauma on mental health diagnosis (S5.C.2.f)	Assignment meets proficient criteria for impact of crisis and trauma on mental health diagnosis	Assignment meets progressing criteria for impact of crisis and trauma on mental health diagnosis	Assignment meets emerging criteria for impact of crisis and trauma on mental health diagnosis
CONTENT KNOWLEDGE (Does the content in the paper demonstrate an	Assignment meets exemplary criteria for impact of biological and neurological mechanisms on mental health (S5.C.2.g)	Assignment meets proficient criteria for impact of biological and neurological mechanisms on mental health (S5.C.2.g)	Assignment meets progressing criteria for impact of biological and neurological mechanisms on mental health (S5.C.2.g)	Assignment meets emerging criteria for impact of biological and neurological mechanisms on mental health (S5.C.2.g)



<b>Written Assignments / Intake Evaluation Rubric</b>				
	<b>Exemplary Criteria</b>	<b>Proficient Criteria</b>	<b>Progressing</b>	<b>Emerging</b>
understanding of the following content:) impact of biological and neurological mechanisms on mental health (S5.C.2.g) 5%				
CONTENT KNOWLEDGE (Does the content in the paper demonstrate an understanding of the following content:) cultural factors relevant to clinical mental health counseling (S5.C.2.j) 5%	Assignment meets exemplary criteria for cultural factors relevant to clinical mental health counseling (S5.C.2.j)	Assignment meets proficient criteria for cultural factors relevant to clinical mental health counseling (S5.C.2.j)	Assignment meets progressing criteria for cultural factors relevant to clinical mental health counseling (S5.C.2.j)	Assignment meets emerging criteria for cultural factors relevant to clinical mental health counseling (S5.C.2.j)
CONTENT KNOWLEDGE (Does the content in the paper demonstrate an understanding of the following content:) record keeping, third party reimbursement, and other practice and management issues in clinical mental health counseling (S5.C.2.m) 5%	Assignment meets exemplary criteria for record keeping, third party reimbursement, and other practice and management issues in clinical mental health counseling (S5.C.2.m)	Assignment meets proficient criteria for record keeping, third party reimbursement, and other practice and management issues in clinical mental health counseling (S5.C.2.m)	Assignment meets progressing criteria for record keeping, third party reimbursement, and other practice and management issues in clinical mental health counseling (S5.C.2.m)	Assignment meets emerging criteria for record keeping, third party reimbursement, and other practice and management issues in clinical mental health counseling (S5.C.2.m)
CONTENT KNOWLEDGE (Does the content in the paper demonstrate an understanding of the following content:) intake interview, mental status evaluation, biopsychosocial history, mental health history, and psychological assessment for treatment planning and caseload management (S5.C.3.a) (S5.D.3.a) 5%	Assignment meets exemplary criteria for intake interview, mental status evaluation, biopsychosocial history, mental health history, and psychological assessment for treatment planning and caseload management (S5.C.3.a) (S5.D.3.a)	Assignment meets proficient criteria for intake interview, mental status evaluation, biopsychosocial history, mental health history, and psychological assessment for treatment planning and caseload management (S5.C.3.a) (S5.D.3.a)	Assignment meets progressing criteria for intake interview, mental status evaluation, biopsychosocial history, mental health history, and psychological assessment for treatment planning and caseload management (S5.C.3.a) (S5.D.3.a)	Assignment meets emerging criteria for intake interview, mental status evaluation, biopsychosocial history, mental health history, and psychological assessment for treatment planning and caseload management (S5.C.3.a) (S5.D.3.a)
CONTENT KNOWLEDGE	Assignment meets exemplary criteria for techniques and interventions for	Assignment meets proficient criteria for techniques and interventions for	Assignment meets progressing criteria for techniques and interventions for prevention	Assignment meets emerging criteria for techniques and interventions for prevention

<b>Written Assignments / Intake Evaluation Rubric</b>				
	<b>Exemplary Criteria</b>	<b>Proficient Criteria</b>	<b>Progressing</b>	<b>Emerging</b>
(Does the content in the paper demonstrate an understanding of the following content:) techniques and interventions for prevention and treatment of a broad range of mental health issues (S5.C.3.b) 5%	prevention and treatment of a broad range of mental health issues (S5.C.3.a)	prevention and treatment of a broad range of mental health issues (S5.C.3.a)	and treatment of a broad range of mental health issues (S5.C.3.a)	and treatment of a broad range of mental health issues (S5.C.3.a)
<b>CONTENT KNOWLEDGE</b> (Does the content in the paper demonstrate an understanding of the following content:) strategies for interfacing with integrated behavioral health care professionals (S5.C.3.d) 5%	Assignment meets exemplary criteria for strategies for interfacing with integrated behavioral health care professionals (S5.C.3.d)	Assignment meets proficient criteria for strategies for interfacing with integrated behavioral health care professionals (S5.C.3.d)	Assignment meets progressing criteria for strategies for interfacing with integrated behavioral health care professionals (S5.C.3.d)	Assignment meets emerging criteria for strategies for interfacing with integrated behavioral health care professionals (S5.C.3.d)
<b>CONTENT KNOWLEDGE</b> (Does the content in the paper demonstrate an understanding of the following content:) strategies to advocate for persons with mental health issues (S5.C.3.e) 5%				
<b>QUALITY OF WRITING</b>  10%	Writing is scholarly and exceeds graduate-level writing expectations. The paper: Uses language that is clear, concise, and appropriate; has few if any errors in spelling, grammar, and syntax; is extremely well organized, logical, clear, and never confuses the reader; uses a preponderance of original language and uses direct quotes only when necessary and/or appropriate; provides information about a source when citing or paraphrasing it.	Writing is scholarly and meets graduate-level writing expectations. The paper: Uses language that is clear; has a few errors in spelling, grammar, and syntax; is well organized, logical, and clear; uses original language and uses direct quotes when necessary and/or appropriate; provides information about a source when citing or paraphrasing it.	Writing is somewhat below graduate-level writing expectations: The paper: Uses language that is unclear and/or inappropriate; and/or has more than occasional errors in spelling, grammar, and syntax; and/or is poorly organized, is at times unclear and confusing, and has some problems with logical flow; and/or reflects an underuse of original language and an overuse of direct quotes and paraphrases; and/or sometimes lacks information about a source when citing or paraphrasing it.	Writing is well below graduate-level writing expectations: The paper: Uses unclear and inappropriate language; and/or has many errors in spelling, grammar, and syntax; and/or lacks organization in a way that creates confusion for the reader; and/or contains many direct quotes from original source materials and/or consistently and poorly paraphrases rather than using original language; and/or lacks information about a source when citing or paraphrasing it.

**Written Assignments / Intake Evaluation Rubric**

	<b>Exemplary Criteria</b>	<b>Proficient Criteria</b>	<b>Progressing</b>	<b>Emerging</b>
<p>RESEARCH, SCHOLARSHIP, AND PROFESSIONAL (APA) STYLE</p> <p align="center">10%</p>	<p>The paper represents exceptional research, scholarship, and professional style. Paper content: Significantly contributes to the knowledge in the field; is well supported by current and pertinent research/evidence (within the previous 5 years, except for seminal, original research where appropriate) from a variety of primarily primary, peer-reviewed sources (rather than textbooks and websites); and consistently uses correct APA form and style (including citations, references, use of nonbiased language, clear organization, good editorial style, etc.) with very few or no errors.</p>	<p>The paper meets graduate-level expectations for research, scholarship, and professional style. Paper content: Contributes to knowledge in the field; is supported by current and pertinent research/evidence (within the previous 5 years, except for seminal, original research where appropriate) from a variety of peer-reviewed books and journals (rather than textbooks and websites); uses correct APA form and style (including citations, references, use of nonbiased language, clear organization, good editorial style, etc.) with only a few errors.</p>	<p>The paper is somewhat below graduate-level expectations for research, scholarship, and professional style. Paper content: does little to contribute to knowledge in the field; is often supported by research older than 5 years, secondary sources (textbooks and websites), and sources that lack in variety; and/or uses APA form and style (including citations, references, use of nonbiased language, clear organization, good editorial style, etc.), but has frequent errors.</p>	<p>The paper is substantially below graduate-level expectations for research, scholarship, and professional style. Paper content: Does not contribute to knowledge in the field; is, for the most part, unsupported by current (within the past 5 years), primary, and pertinent research/evidence from a variety of peer-reviewed books and journals; and/or does not use or contains pervasive errors in APA style (including citations, references, use of nonbiased language, clear organization, good editorial style, etc.).</p>
100% 275 points	275-220	219-165	164-110	109-55

## The University of Providence Grid

University Goals & Objectives	Competency Objectives CACREP Standards	MSC 508 Behavioral Objectives	Assessment Measurements
<p><b>Reflective Scholarship:</b> To understand the major theoretical perspectives in their field of study.</p>	<p>Develop an understanding of the nature and needs of individuals of cultures, developmental levels, of various abilities, exceptionalities, and environments</p> <p>Learn to use research to improve counseling effectiveness.</p>	<p>Describe the criteria and controversy regarding the definition of abnormal behavior.</p> <p>Understand the prevalence of &amp; therapeutic response to abnormal behavior in our culture.</p> <p>Be able to accurately diagnose clients according to the major diagnostic categories of the DSM-5 and distinguish among symptoms.</p> <p>Be able to constructively articulate the probable etiology of the client's condition.</p> <p>Be able to create a general treatment strategy for clients, based on diagnosis.</p>	<p>Acquisition of the knowledge for this objective will be assessed via class participation.</p> <p>Acquisition of the knowledge will be assessed via differential diagnosis/etiology/treatment strategy assignments &amp; via class participation.</p> <p>Acquisition of the knowledge base for this objective will be assessed via completion of differential diagnosis/etiology/treatment strategy assignments and via class participation.</p> <p>Acquisition of the knowledge base for this objective will be assessed via completion of differential diagnosis/etiology/treatment strategy assignments.</p> <p>Acquisition of the knowledge base for this objective will be assessed via completion of differential diagnosis/etiology/treatment strategy assignments.</p>
<p><b>Reflective Learning:</b> To apply major theoretical perspectives in their field of study to real-life cases and to reflect on these applications.</p>	<p>Develop an understanding of the cultural context of relationships, issues and trends in a multicultural and diverse society</p> <p>Develop an understanding of assessment and evaluation instruments, techniques, and case conceptualization</p>	<p>Describe the criteria and controversy regarding the definition of abnormal behavior.</p> <p>Understand the prevalence of &amp; therapeutic response to abnormal behavior in our culture.</p> <p>Be able to accurately diagnose clients according to the major diagnostic categories of the DSM-5 and distinguish among symptoms.</p> <p>Be able to constructively articulate the probable etiology of the client's condition.</p> <p>Be able to create a general treatment strategy for clients, based on diagnosis.</p>	<p>Acquisition of the knowledge for this objective will be assessed via class participation.</p> <p>Acquisition of the knowledge for this objective will be assessed via differential diagnosis/etiology/treatment strategy assignments &amp; via class participation.</p> <p>Acquisition of the knowledge base for this objective will be assessed via completion of differential diagnosis/etiology/treatment strategy assignments and via class participation.</p> <p>Acquisition of the knowledge base for this objective will be assessed via completion of differential diagnosis/etiology/treatment strategy assignments.</p> <p>Acquisition of the knowledge base for this objective will be assessed via completion of differential diagnosis/etiology/treatment strategy assignments.</p>

<p><b>Reflective Practice:</b> To reflect and act on one's own ideas, analyses, values, and personal and organizational interests in relation to one's field of study.</p>	<p>Develop a broadly based professional identity</p> <p>Develop an understanding of career development and related life factors and the career counseling processes, techniques, and resources</p> <p>Embrace the broader UGF mission and actively incorporate the Providence Leadership Covenant, licensure law standards, and professional counselor guidelines into a personal model of counseling.</p> <p>Develop an understanding of the knowledge and skills necessary for becoming a professional counselor</p>	<p>Understand the prevalence of &amp; therapeutic response to abnormal behavior in our culture.</p> <p>Understand the historical views of abnormal behavior that influence how mental illness is viewed today.</p> <p>Describe the major techniques and theoretical approaches to understanding and treating abnormal behavior.</p> <p>Be able to accurately diagnose clients according to the major diagnostic categories of the DSM-5 and distinguish among symptoms.</p> <p>Be able to constructively articulate the probable etiology of the client's condition.</p> <p>Be able to create a general treatment strategy for clients, based on diagnosis.</p>	<p>Acquisition of the knowledge for this objective will be assessed via differential diagnosis/etiology/treatment strategy assignments &amp; via class participation.</p> <p>Each student's acquisition of the knowledge base for this objective will be assessed class participation.</p> <p>Each student's acquisition of the knowledge base for this objective will be assessed via completion of differential diagnosis/etiology/treatment strategy assignments and via class participation.</p> <p>Acquisition of the knowledge base for this objective will be assessed via completion of differential diagnosis/etiology/treatment strategy assignments and via class participation.</p> <p>Acquisition of the knowledge base for this objective will be assessed via completion of differential diagnosis/etiology/treatment strategy assignments.</p> <p>Acquisition of the knowledge base for this objective will be assessed via completion of differential diagnosis/etiology/treatment strategy assignments.</p>
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