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COUN 5480

Diagnosis and Treatment Planning in Counseling (DSM)

Syllabus and Flexible Calendar Fall 2014

Catalog Description:

Principles and models of biopsychosocial assessment, case conceptualization, and concepts of normalcy leading to an appropriate framework for counseling treatment plans or referral within a managed care framework. DSM 5 diagnosis, disorder prevention, and promotion of optimal mental health are studied.

Learning Objectives:

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

- 1. Discuss historical trends and philosophies related to diagnosis and treatment of mental disorders. (CACREP II.G.1.a, CMHC A1)
- 2. Discuss the range of mental health service delivery and the counseling services network. (CMHC C5)
- 3. Explain ways in which developmental crises, disability, psychopathology, and situational and environmental factors affect both normal and abnormal behavior. (IIG3f)
- 4. Use principles and models of assessment, case conceptualization, and concepts of normalcy and psychopathology to develop appropriate diagnoses and counseling treatment plans. (IIG5d; CMHC G1; SC G1; SACC D5, G1)
- 5. Conduct an intake interview, a mental status evaluation, a biopsychosocial history, a diagnostic interview, and a mental health history. (IIG5c; CMHC G2, H2; SC H1; SACC)
- 6. Discriminate between what is a disorder and what is not; what is clinically significant impairment and what is not; substance abuse and dependence; and what might be an adjustment disorder rather than a diagnosable condition. (CACREP II.K.3.c; CC C.4, 5; SC C.2.d, h; CUC C.4, 9)
- 7. Discuss how age, gender, sexual orientation, ethnicity, disability, culture, spirituality, and other factors are related to disorder presentation, diagnoses, access to treatment, counselor assessment, and counselor evaluation (IIG.2.a; CMHC E1, H1; SC E4; SACC E1)
- 8. Discuss relevance and potential biases of commonly used diagnostic tools with multicultural populations. (CMHC K4)
- 9. Establish treatment plans which are based on initial assessment and ongoing evaluation of efficacy of interventions used. (CACREP II.K.7.g; CC C.4)
- 10. Identify and discuss ethical and legal issues related to diagnosis and treatment planning in counseling (CACREP II.G.1.j; CMHC A2, B1; SC A2, B1, SACC A2, B1)
- 11. Demonstrate familiarity with a variety of empirically supported treatments and counseling modalities (e.g., individual, group, family, and/or other referrals) useful for a variety of diagnoses. (CACREP II.K.5.d; II.K.6.e; CC C.7; SC C.2.a; CUC C.4, 10)
- 12. Evaluate up-to-date research concerning empirically supported treatments, standards of care, and outcomes based on study of professional journals, books, and internet information. (CACREP II.K.8.c, e; II.K.1.c)
- 13. Describe methods of conferring with managed care entities and other providers in a confidential and professional manner. (CACREP II.K.1.b, h; CC B.1)
- 14. Discuss assessment methods used and indicate counseling progress in a manner which will assist in securing funding from managed care and related entities. (CACREP II.K.7.b)

Note: CC = Community Counseling; SC = School Counseling Standard; CUC = College/University Counseling

Methods of Instruction:

This hybrid course will emphasize reading, discussion, and experiential learning as its principal strategies. Didactic lectures will be supplemented with film clips demonstrating various mental disorders, discussion prompts, in-class practice activities, and homework exercises designed to facilitate development of assessment, diagnosis, and treatment planning skills.

Tk20:

This course requires an assignment that will be uploaded and assessed in the UNT Tk20 Assessment System. This will require the one-time purchase of Tk20. Student subscriptions will be effective for seven years from the date of purchase and can also be used for other classes. Key assignments must be uploaded into the Tk20 system for instructors to assess.

Required texts and/or readings:

- American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders* (5th ed.). Washington, DC: Author.
- American Psychological Association. (2009). *Publication manual of the American Psychological Association* (6th ed.). Washington, DC: Author.
- Classnotes, readings, and powerpoints on Blackboard website.

Recommended text:

• Seligman, L. & Reichenberg, L.W. (2012). Selecting effective treatments: A comprehensive, systematic guide to treating mental disorders. (4th ed.). San Francisco: John Wiley & Sons.

Additional required readings and materials are available through password-protected Blackboard. View this site weekly for supplemental materials, additional handouts, required readings, and all class lessons/powerpoints. You are responsible for all content assigned on this website.

Blackboard Learn: *If you have trouble logging in, cannot submit an assignment or quiz, or encounter some other problem in Blackboard*, your primary step should be to contact the ITSS Help Desk rather than this professor. The ITSS Help Desk offers phone, email and walk-in support: Help Desk:

Phone: 972-780-3626

Email: http://web3.unt.edu/helpdesk/service

Walk-in: Founders Hall Rm. 127

CITC Help Desk website: http://www.unt.edu/helpdesk/index.htm.

UNT Dallas Bookstore:

phone: (972) 780-3652;

e-mail: 1012mgr@fheg.follett.com

Student Resources information: http://webct.unt.edu including how and where to download the current

correct version of Java (1.5.0 07).

PERFORMANCE EVALUATION AND PROCEDURES

Attendance, Preparation and Participation

Because the course is a hybrid design, students are expected to have thoroughly read and prepared for every class period, and to participate *actively* in class activities, whether online or on campus. This means that your quality of learning is divided between your online participation and use of materials, which support class interactions. On class weeks, students are required to complete readings or assignments prior to classtime; on

non-meeting weeks, students are required to commit 3 to 4 hours of independent study time. Students' commitment and amount of time is automatically tracked by Blackboard software, and by my subjective appraisal of the quality of your work. Level of class participation is qualitatively determined by my subjective appraisal of your class interaction and attentiveness.

To be successful in this course, students must be able to retain and apply information in a practical manner; it is essential that students come to class prepared to discuss the assigned readings. Attendance is required and graduate-level class participation is expected. Absences in **excess of one excused absence** and/or **chronic tardiness** *will* affect your final grade in the course. When possible, any absences should be discussed with the instructor in advance; and while it is certainly understandable that tardiness is occasionally unavoidable, chronic tardiness will result in the loss of 5% deduction from their total points per incident if they (a) miss more than one class meeting for other than a *documented* emergency reason (death in family, hospitalization, major or severe personal illness); (b) are tardy more than 10 minutes or leave class early more than twice a semester; or (c) consistently interact in a non-professional, distracting, or disruptive manner with peers or this professor. Additional missed classes or chronic tardiness will result in another 5% deduction. Students are responsible for all material and assignments covered on days they are absent.

Appropriate class behavior and participation consistent with that of graduate students is expected. Students are therefore expected to refrain from all inappropriate behavior including but not limited to: text-messaging, passing notes, sleeping, surfing the internet, emailing, and working on other material during class time. To that end, please turn off your cellphones during class and close laptops during experiential exercises, videos, and/or during any other class activity during which your attention is expected. Inappropriate behavior or low participation will result in one-on-one conferences, a remedial action plan, faculty review, and a low-effectiveness report in your permanent student file.

Online Activities/Quizzes

Because class activities are divided between in-class and online participation, each week *prior to the class meeting* you are expected to:

- 1. Complete the assigned reading
- 2. View or print the powerpoint and/or video associated with that class topic (on Blackboard) By the weekly deadline, you must also:
- 3. Complete the activity or quiz accompanying Blackboard materials
 These items are intended to represent the week's in-class activity, and the **deadline is Sunday** midnight of the assigned week. Online activities that are not completed prior to the beginning of class will not be accepted. Appendix A of this document details the grading rubric for online activities.

Due dates and deadlines:

Students are responsible for submitting assignments on the date indicated on the syllabus. Assignments will be considered late if not received by class on the date expected. When necessary, students may submit assignments early or via email. In order to be fair to students who submit their assignments on time, students who submit their assignments late for other than a *documented* emergency reason (family death, personal hospitalization, etc.) will receive a 10% deduction on that assignment for one to two days late, 20% deduction for more than three to four days late, etc. Please plan ahead.

Format guidelines:

Unless otherwise indicated, formal papers should be written in accordance with correct APA style. Specifically, assignments should minimally:

- 1. Contain an APA-style cover page and reference page
- 2. Be typed, double-spaced, with 1" margins, and in 12-point Times New Roman font
- 3. Contain citations and references correctly formatted according to the current *APA Publication Manual* (6th ed.) guidelines

4. Adhere to minimum page length, formatting, and content guidelines – cover pages and reference pages will not be counted toward fulfilling the required page length. Incorrectly completed assignments will be evaluated as such.

Programmatic evaluation:

Turnitin:

All sources used for all assignments **must be cited** in APA format; students will need to submit major assignments using **turnitin.com**. Your class ID is **8462947**, and your initial password is **DSM5**. Excellent papers will reference scholarly sources and reflect a depth of critical thought and a writing style commensurate with graduate-level work. I will be happy to consult regarding content and style (i.e., grammar, spelling, professional writing quality) of papers up to 2 days prior to the assignment deadline. **Tk20**:

This course requires an assignment that will be uploaded and assessed in the UNT Tk20 Assessment System. This will require the one-time purchase of Tk20. Student subscriptions will be effective for seven years from the date of purchase and can also be used for other classes. Key assessments (KA) must be uploaded into the Tk20 system for instructors to assess.

Grading Criteria

Participation, preparation, & homework 20%

Medication & treatment awareness summary 15% (due on in-class discussion date)

Midterm examination20%Final project (KA)20%Final examination25%

Final Grading

- A, A- (Excellent) will be given for outstanding achievement in written and class contributions. A student who earns an A or A- has shown consistent initiative, originality and comprehension. The student will have demonstrated an ability to use constructs accurately and with depth of understanding.
- B+, B (Good Enough!) will be given for work which is of good quality, as expected of graduate students, but which is either not outstanding in the above characteristics or contains some errors in comprehension. A "B+" grade is given when the writing is clear and well-organized, there are a significant number of insights, but the overall depth of the papers does not rise to the level of "outstanding." "B" and "B+" students are expected to consistently contribute to class discussions.
- B- (Really sincere effort) will be given when there is a noticeable lack of depth, the writing is generally acceptable but occasionally confusing, and there are some genuinely good insights as well as some errors in comprehending and applying the theories)
- C (Insufficient work) will be given for work which is minimally acceptable or insufficient quality for graduate students. A grade of "C" or lower requires course repetition at the graduate level.
- I (Incomplete work) for some justifiable *documented* reason, acceptable to the instructor and University policy (death in family, hospitalization, major or severe personal illness), the student has been unable to complete the full requirements of the course. At the time a grade of I is given, a minimum of 30% of classwork must have been completed at a passing level; the instructor must stipulate in writing to the student and to the University registrar the requirements and completion date that are to be met and the grade that will be given if the requirements are not met by the completion date. The maximum period of time allowed to clear the Incomplete grade normally is 12 months. If the Incomplete grade is not

cleared by the date set by the instructor or by the end of the 12-month Policies and Procedures 25 deadline, the grade of I will be changed to the grade provided by the instructor at the time the Incomplete grade was assigned or to a grade of F if no alternate grade was provided. The grade of I is **not** given in lieu of a grade of F or W, or other grade, each of which is prescribed for other specific circumstances.

If the student's work is incomplete, poor quality and/or not acceptable, a grade of F will be given. The grade of I does not authorize a student to attend the course during a later term. Graduation candidates must clear all Incomplete grades prior to the deadline in the Official University Calendar, which may allow less time than 12 months. Failure to do so can result in removal from the degree candidacy list and/or conversion of the grade of I to the grade indicated by the instructor at the time the grade of I was given.

Flexible Calendar Fall 2014

Date	Topic/Film	Assignments
Aug. 26	Course orientation & introductions Introduction to the DSM Role of diagnosis in counseling Risks & benefits of diagnosis	 DSM pp. xli-25 Seligman Ch. 1 Cosgrove et al. (2006); Grohol (1996); Hohenshil (1996); Ivey & Ivey (1998); Choose a diagnosis for the treatment summary, and submit it to me by mail- first come, first served.
Sept. 2 online	(cont. Lecture 1) V codes Ethical and cultural considerations	 DSM pp. 709-714; 715-727; 809-816 (skim 817-831); 833-837 Smart & Smart (1997); White Kress et al. (2005) Begin reading for next week
Sept. 9	Introduction to managed care Differential diagnosis Multiaxial assessment Mental status assessment	 DSM pp. 731-759 Anderson (2000); Braun & Cox (2005); Daniels (2001); Nelson & Nuefeldt (1996); Polanski & Hinkle (2000)
Sept. 16 <i>online</i>	Somatic-related and factitious disorders Neurocognitive disorders	 DSM pp. 309-327; 591-643 Seligman Ch. 7; 9 Gintner (1995); Hill & Spengler (1997); McLaughlin (2002); Rosenhan (1973)
Sept. 23	Sleep-wake disorders	 DSM pp. 361-422 Seligman Ch. 3 HMHL (1994); Kuhn et al. (1999)
Sept. 30 online	Substance-related and addictive disorders	 DSM pp. 481-589 Seligman Ch. 6 pp. 243-266 Evans (1998)
Oct. 7	Flex day; diagnosis practice	
Oct. 14	Midterm Exam	 Submit final project option/topic for approval
Oct. 21 online	Personality disorders	 DSM pp. 645-684; 761-781 Seligman Ch. 8 Fong (1995)
Oct. 28	Depressive & Trauma-related disorders	 DSM pp. 123-188; 265-290 Seligman Ch. 4 Seligman & Moore (1995)
Nov. 4 online	Anxiety disorders	 DSM pp. 189-264 Seligman Ch. 5 Beamish et al. (2002); Fong & Silien (1999); Roussow (2012)

Nov. 11	Dissociative disorders Schizophrenia & other psychotic disorders	 DSM pp. 87-122; 291-307 Seligman Ch. 9
Nov. 18 online	Sexual and gender dysphoria disorders	 Walker et al. (2004) DSM pp. 423-459; 685-705 Seligman Ch. 6 pp. 274-287 Seligman & Hardenburg (2000); Thanasiu (2004)
Nov. 25	No class- holiday	•
Dec. 2	Feeding and eating disorders Impulse-control disorders	 DSM 329-354; 461-480 Seligman Ch. 6 pp. 266-274, 287-303 Craigen & Foster (2009); Polivy & Herman (2002); White Kress et al. (2004) Final project due; also submit to turnitin and tk20
Dec. 9	Final Exam	Course evals

Please note: Instructor may alter schedule of events as necessary or as mandated by class needs.

PARTICIPATION, PREPARATION, & HOMEWORK

This is a reading-intensive course, and students are expected to complete scheduled readings prior to class on the due date. Careful preparation will facilitate understanding of lectures and successful completion of inclass exercises. Readings from the DSM 5and Blackboard readings, are always required; listed Seligman (1998) text readings are suggested, and will definitely help with the Medication/Treatment Summary assignment. Supplemental required and recommended readings are available via **Blackboard**. At instructor's discretion you will be provided with practice exercises to be completed during class or before the next class.

Participation is best manifested by readiness and *active* participation in class discussion. It may be helpful to jot down thoughts or questions during your reading time, and bring these to class to stimulate discussion. ...there are no "stupid" questions or observations in this learning environment; fellow students likely have the same questions you have.

MIDTERM & FINAL EXAMINATION

Two in-class examinations are required for this course. Exams will include objective questions (true/false, multiple-choice, short-answer) and case vignettes which require the identification of diagnoses and treatment plans. Use of the DSM 5 is allowed during exams; this is the reason you are required to "tab" your book, i.e., in order to facilitate easily finding information you need during exams.

MEDICATION & TREATMENT METHODS AWARENESS SUMMARY

Regardless of your work setting or guiding theory, you will be expected to have a high degree of familiarity regarding psychotropic medications and commonly used treatments for a variety of diagnosable disorders. The purpose of this assignment is to assist students to build a reference source regarding common medications and counseling methods used to treat a variety of specific disorders. A secondary purpose of the assignment is to familiarize students with methods for obtaining such information; over the course of the semester, students will have the opportunity to compile a notebook of resources/readings they may use in their future professional careers. It is expected that this information may also be used to enhance empathy, educate clients, collaborate with other professionals, and converse with managed care personnel. These goals will be accomplished by assigning each student a diagnosis for which he or she will become an expert. Students will compile and share a minimum of two resources for this assignment (include a correctly formatted APA style reference page).

First, compile a **1-page listing of psychotropic medications** currently used to treat the specific diagnosis you are assigned. Do not simply copy this information off any website; this assignment will be submitted to turnitin.com for an originality report. For each medication include as much of the following as possible:

- a) All names/classifications of medication (i.e., name-brand, generics)
- b) Typical prescription dosage
- c) Time it takes for medication to work
- d) Potential benefits of the medication for the client
- e) Potential risks/side effects of the medication for the client
- f) If there are no common medications for your diagnosis, you must write a 1-page (single-spaced) discussion of the reason no medications are used/available.

Second, compile a **1-2 page listing and brief description of Empirically Supported Treatments** (ESTs) [aka: Evidenced-Based Treatments (EBTs), Empirically Validated Treatments (EVTs), or Evidence-Based Best Practices (EBBP)] for the assigned diagnosis. Include as much of the following information as possible:

- a) Type of treatment
- b) Length of treatment
- c) Sample counseling goals/objectives
- d) Specific methodology used in the treatment
- e) Potential benefits

f) Risks/contraindications

Students are encouraged to use professional and online resources, sources must be cited, and references must be included on the handouts using correct APA formatting (sources such as Wikipedia are NOT scholarly sources and are not allowed). Assignments are due on the day we are scheduled to cover the assigned diagnosis. On the due date, **bring enough copies to share with all classmates**. The assignment will be graded as follows:

- Accuracy, quality, and thoroughness of information (8 points)
- Professional appearance of summaries (2 points)
- Professionalism/preparedness of oral summary (2 points)
- Grammar, use of APA style citations and references (3 points)

Projects should be submitted to www.turnitin.com by the due date. Your class ID is 8462947, and your initial password is DSM5.

FINAL PROJECT

Students will select one of the following options to comprise a final project; be prepared to submit option and topic in class on **October 16th:**

OPTION 1: CASE STUDY

Students will select a character from a book (preferred) or public figure to serve as the basis for a *comprehensive* case study. Students will use what they know of this character to construct an in-depth case conceptualization using **Resource C** and covering the following:

- a) Presenting problem
- b) Biopsychosocial history
- c) Mental status report (only if applicable)
- d) DSM diagnosis
- e) Theoretically- and diagnostically-based conceptualization of client concerns/functioning
- f) Evidence-based treatment plan including attention to ongoing assessment

All data included in the report must be written using professional language, based on evidence provided in the media source(s), and supported with rationale. Students are encouraged to consider and document multiple sources of information (e.g., client report, collateral report, observation). When information is not available, the student should indicate information is needed and propose methods for gathering such information. Evidence of differential diagnosis should be provided. Finally, students will provide a rationale for treatment plan choices by incorporating data from at least three (3) scholarly sources.

Students should format treatment documents (e.g., history, mental status, diagnosis, treatment goals, treatment plan) according to the Resource C case conceptualization guidelines. Text and rationale for the above topics should be in narrative form and formatted according to APA guidelines. Specific grading criteria will be distributed in class.

Movies are NOT acceptable. Sources must be confirmed with me prior to beginning.

Accepted resources:

Angelou, M. (1970). I know why the caged bird sings. New York: Random House.

Axline, V. (1964). Dibs in search of self. New York: Random House.

Burgess, A. (1962). A clockwork orange. New York: Norton.

Burroughs, A. (2002). Running with scissors: A memoir. New York: Picador.

Chase, T. (1987). When rabbit howls. New York: E.P. Dutton.

Fitzgerald, F.S. (1925) The great Gatsby. New York: Charles Scribner.

Frey, J. (2003). A million little pieces. New York: Doubleday.

Garland, A. (1997). The beach. New York: Riverhead.

Golding, W. (1954). Lord of the flies. New York: Perigree.

Greenberg, J. (1964). I never promised you a rose garden. New York: Penguin.

Haddon, M. (2003). The curious incident of the dog in the nighttime. New York: Vintage.

Hautzig, D. (1999). Second star to the right. New York: Penguin.

Hornbacher, M. (1998). Wasted: A memoir of anorexia and bulimia. New York: HarperCollins.

Leathan, V. (2006). Bloodletting: A memoir of secrets, self-harm, & survival. Oakland, CA: Harbinger.

Lee, H. (1960). To kill a mockingbird. New York: HarperCollins.

Menzie, M. (2003). Diary of an anorexic girl. Nashville: W Publishing.

Miller, J. (2001). The day I went missing. New York: St. Martin's.

Morrison, T. (1970). The bluest eye. New York: Penguin.

Orion, D. R. (1997). I know you really love me: A psychiatrist's journal of erotomania, stalking, and obsessive love. New York: Macmillan.

Rogers, A. G. (1995). A shining affliction: A story of harm and healing in psychotherapy. New York: Penguin.

Salinger, J.D. (1951). The catcher in the rye. New York: Back Bay.

Schiller, L., & Bennett, A. (1994). *The quiet room: A journey out of the torment of madness*. New York: Warner.

Schreiber, F. R. (1973). Sybil. New York: Warner.

Slater, L. (1998). Prozac diary. New York: Penguin.

Steele, K,. & Berman, C. (2001). The day the voices stopped: A schizophrenic's journey from madness to hope. New York: Basic.

Theroux, P. (1982). The mosquito coast. New York: Avon.

Wurtzel, E. (1995). Prozac nation: Young and depressed in America. New York: Penguin.

Zusak, M. (2005). The book thief. New York: Alfred A. Knopf.

Alternative to the book, you may select a public figure for your case study. Following are some approved suggestions, but you may certainly submit someone else for approval:

Jodi AriasHemy NewmanCasey AnthonyJoshua PhillipsKate or John GosselinCharlie SheenAaron HernandezEric SmithMichael JacksonAndrea Speider

Michael Jackson Andrea Sneiderman Lindsay Lohan Nadya Suleman Jared Loughner Kanye West

Other potentially appropriate materials (including autobiographies) will be considered on a case-by-case basis only (students must consult me). Minimum 5 pages, not including title page and any reference page (it will be exceedingly difficult to complete this assignment fully and accurately with fewer than 5 pages). This assignment will also be submitted to turnitin.com; submit a hard copy to class.

OPTION 2: POSITION STATEMENT

Marilyn Monroe

Students will select a controversial issue related to the DSM 5 and submit a research paper in which they define the issue, outline a history of the issue, use scholarly sources to provide evidence related to multiple sides of the issue, critique this information, and present their own position and rationale. The following topics are provided as *sample issues* that would be appropriate for the project:

a) Was it wise/necessary to abandon the multiaxial diagnostic system in changing from the DSM-IV-TR to the DSM 5?

- b) Will the DSM 5 gain widespread acceptance, or will it continue to be controversial with working mental health providers?
- c) Are DSM 5 [insert diagnosis(es)] diagnoses culturally appropriate for use with [insert population]?
- d) Are DSM 5 [insert diagnosis(es)] diagnoses gender-biased?
- e) Are [insert diagnosis(es)] overdiagnosed in [insert population]?
- f) Should [insert diagnosis(es)] have been included in the DSM 5?
- g) Should a diagnosis related to self-injurious behavior have been added to the DSM 5?
- h) Other issues related to specific controversial diagnoses (e.g., Gender Identity Disorder, Dissociative Identity Disorder, personality disorders)

Students are expected to use a minimum of 8 scholarly sources (e.g., professional journal articles or book chapters) in construction of this position statement, and it is expected that position statements will be approximately 7-10 pages in length text. Papers must be written and formatted in accordance with APA style. Specific grading criteria will be distributed in class.

All projects are due by the beginning of class on December 4th. Projects should be submitted to www.turnitin.com and tk20; bring hard copies to class.

Great books for human beings (and those who are also counselors)

- Axline, V. M. (1964). *Dibs in search of self.* New York: Ballantine.
- Benjamin, C. L. (1985). Mother knows best: The natural way to train your dog. New York: Hungry Minds.
- Bloomfield, H. H., & McWilliams, P. (1995). How to heal depression. New York: Prelude.
- De Becker, G. (1997). The gift of fear: And other survival signals that protect us from violence. New York: Dell.
- Domar, A., & Dreher, H. (2000). Self-nurture: Caring for yourself as effectively as you care for everyone else. New York: Penguin.
- Faber, A., & Mazlish, E. (1980). *How to talk so kids will listen, and listen so kids will talk*. New York: Avon.
- Fulghum, R. (1989). *It was on fire when I lay down on it.* New York: Ballantine.
- Fulghum, R. (1998). *All I really need to know I learned in kindergarten: Uncommon thoughts on common things.* New York: Ballantine.
- Gladwell, M. (2005). *Blink: The power of thinking without thinking*. New York: Little, Brown, and Company.
- Gottman, J. M., & Silver, N. (1999). *The seven principles for making marriage work*. New York: Three Rivers.
- Helmstetter, S. (1982). What to say when you talk to your self. New York: Pocket.
- Hodges, S. (2011). The graduate practicum and internship manual: A resource for graduate counseling students. New York: Springer.
- Kabat-Zinn, J. (1994). Wherever you go, there you are: Mindfulness meditation in everyday life. New York: Hyperion.
- Kottler, J. A., & Hazler, R. J. (1997). What you never learned in graduate school: A survival guide for therapists. New York: W. W. Norton.
- Kottler, J. A. (2003). *On being a therapist*. San Francisco: Jossey-Bass.
- Kottler, J. A., & Carlson, J. (2003). *Bad therapy: Master therapists share their worst failures*. New York: Brunner-Routledge.
- Ramsey, D. (2003). *The total money makeover: A proven plan for financial fitness*. Nashville, TN: Thomas Nelson.
- McWilliams, P., Bloomfield, H. H., & Colgrove, M. (1993). How to survive the loss of a love. New York: Prelude.
- McWilliams, P. (). Life 101: Everything we wished we had learned about life in school- but didn't. New York: Prelude.
- Millan, C. (2006). Cesar's way: The natural, everyday guide to understanding and correcting common dog problems. New York: Harmony.
- Mitchell, S. (1991). The gospel according to Jesus: A new translation and guide to his essential teachings for believers and unbelievers. New York: HarperCollins.
- Nelsen, J. (1996). Positive discipline: The classic guide to helping children develop self-discipline, responsibility, cooperation, and problem-solving skills. New York: Ballantine.
- Richardson, C. (2005). *The unmistakable touch of grace*. New York: Free Press.

- Robbins, T. (1991). Awaken the giant within: How to take immediate control of your mental, emotional, physical, and financial destiny! New York: Simon & Schuster.
- Rogers, A. G. (1995). A shining affliction: A story of harm and healing in psychotherapy. New York: Penguin.
- Salmonsohn, K., & Zinzell, D. (2001). *How to be happy, damnit! A cynic's guide to spiritual happiness*. Berkeley, CA: Celestial Arts.
- Seligman, M. (1998). Learned optimism: How to change your mind and your life.
 New York: Pocket.
- Shem, S. (1997). *Mount misery*. New York: Ivy.
- Walker, B. (1991). *The crazy dog guide to lifetime happiness*. Dell.
- Wurtzel, E. (1995). Prozac nation: Young and depressed in America. New York: Penguin.
- Yalom, I. D. (2002). The gift of therapy: An open letter to a new generation of therapists and their patients. New York: HarperCollins.

Have a great semester! ~Dr. Mc

IMPORTANT POLICIES

Blackboard:

We will be using Blackboard as a course management tool this semester. Students may access the course using their EUID and password via **http://Blackboard.unt.edu**. Once within Blackboard, you will be able to view announcements, download and print copies of class materials, access course readings, and check your grades. The instructor may also post audio files of lectures for those who are absent or who would like to review class sessions.

Eagle Mail:

All UNT students should activate and regularly check their Eagle Mail (e-mail) account. Eagle Mail is used for official communication from the University to students. Many important announcements for the University and College are sent to students via Eagle Mail. For information about Eagle Mail, including how to activate an account and how to have Eagle Mail forwarded to another e-mail address, visit https://eaglemail.unt.edu. This is the main electronic contact for all course-related information and/or material.

Disability Accommodations:

The University of North Texas College of Education does not discriminate on the basis of disability in the recruitment and admission of students, the recruitment and employment of faculty and staff, or the operation of any of its programs and activities, as specified by federal laws and regulations. Copies of the College of Education ADA Compliance Document are available in the Dean's Office, Matthews Hall 214.

The student has the responsibility of informing the course instructor of any disabling condition that will require modification to avoid discrimination. Students with disabilities should approach each instructor within the first two weeks of class to make an appointment to discuss disability accommodation and then must follow the meeting with an e-mail or hard-copy message to the instructor summarizing the accommodations that will be made. The instructor will reply with affirmation or modification and place a copy of the communication in the student's file.

Diversity/Tolerance Policy:

Students are encouraged to contribute their perspectives and insights to class discussions. However, offensive & inappropriate language and remarks offensive to others of particular nationalities, ethnic groups, sexual preferences, religious groups, genders, or other ascribed statuses will not be tolerated. Disruptions which violate the Code of Student Conduct will be referred to the Center for Student Rights and Responsibilities as the instructor deems appropriate.

Bad Weather Policy:

On those days that present severe weather and driving conditions, a decision may be made to close the campus. In case of inclement weather, call UNT Dallas Campuses main voicemail number (972) 780-3600 or search postings on the campus website www.unt.edu/dallas. Students are encouraged to update their Eagle Alert contact information, so they will receive this information automatically.

Academic Misconduct:

Cheating and plagiarism are types of academic misconduct. The term 'plagiarism' includes, but is not limited to, the use, by paraphrase or direct quotation, of the published or unpublished work of another person without full and clear acknowledgement. Plagiarism also includes the unacknowledged use of materials prepared by another person or agency engaged in the selling of term papers or other academic materials. A faculty member can assign specific penalties. Penalties can include reducing or changing a grade or issuing a failing grade for an assignment/test or for the entire course and/or expulsion from the academic program and the

university. A student penalized for academic misconduct has the right of appeal (University of North Texas Graduate Catalog, 2002, p. 94).

The term "cheating" includes, but is not limited to, (1) use of any unauthorized assistance in taking quizzes, tests or examinations; (2) dependence upon the aid of sources specifically prohibited by the instructor in writing papers, preparing reports, solving problems or carrying out other assignments; (3) the acquisition, without permission, of tests or other academic material belonging to a faculty or staff member of the university; (4) dual submission of a paper or project, or resubmission of a paper or project to a different class without express permission from the instructor(s); (5) any other act designed to give a student an unfair advantage.

Plagiarism is plagiarism, whether intentional or unintentional. To avoid plagiarism, follow guidelines in the current edition of the *APA Publication Manual*. APA-style writing is always required for every submitted document or assignment, unless specified otherwise by this instructor.

Plagiarism of any sort will not be tolerated and will result in a minimum of a failing grade on the assignment; plagiarism will also jeopardize your standing in the program. UNT counseling program students should be prepared to submit papers and other written work electronically so that the instructor can use anti-plagiarism software to validate the originality of the student's work. Students also have access to these plagiarism-prevention tools and are strongly encouraged to utilize these resources.

American Psychological Association. (2001). *Publication manual of the American Psychological Association* (5th ed.). Washington, DC: Author.

Pan, M. L. (2003). Preparing literature reviews. Los Angeles: Pyrczak.

Appendix A: Online participation rubric

	Excellent performance	Good performance	Fair performance	Poor performance	Does not meet standard
	4	3	2	1	0
Quality and critical analysis in posts	Student responses were thoughtful, original, or demonstrated excellent comprehension; uses relevant terminology; no more than 10% of posting is quotation, with proper citations where necessary	Postings display an understanding of the concepts and correct use of terminology, with proper citation where necessary.	Postings repeat or summarize an understanding of basic information, but do not consider alternative ideas or connect ideas, no citations or use of outside sources	Postings are minimal and show little depth or evidence that materials were completed or understood; postings are brief or are personal opinions, without supporting evidence	Student did not post a sufficient response, or an original response
Quantity of posts	Student posts frequently, and contributed multiple responses above the requirement	Student posts frequently, and contributed several responses above the requirement	Student posts occasionally and met the minimum required number of interactions	Student posted, but did not meet the minimum required number of interactions	Student did not post any response
Interaction with classmates	Student responds consistently throughout the discussion period; extends discussion by including new ideas, resources, or personal experiences; demonstrates a rich, meaningful contribution to others' posts	Student responds consistently throughout the discussion period; contributes well to ongoing conversation; makes affirmative remarks to others' posts	Student responses were correct and relevant to others' remarks; contributes but may not enrich discussion; responses are made within the last 2 days of the discussion period	Student responses were shallow or superficial (e.g., agrees or disagrees); does not extend discussion; responses are made in the last day of the discussion period	Student did not post any response; responses are irrelevant
Professional communica- tion	Student responses are free of spelling, punctuation, and grammatical errors, and facilitate ease of communication	Student responses contain are mostly free of spelling, punctuation, and grammatical errors, and generally facilitate ease of communication	Student responses contain some spelling, punctuation, and grammatical errors that can distract the reader	Student responses contain frequent spelling, punctuation, and grammatical errors that can distract the reader	Student responses contain numerous spelling, punctuation, and grammatical errors; style does not facilitate effective communica-tion
Online etiquette	Student responses show respect and sensitivity to peers' gender, racial/ethnic background, sexual orientation and religious beliefs	Student responses show respect and interest in the views of others	Student responses show interest in the views of others but occasionally lack sensitivity	Student responses show lack of sensitivity for the views and experiences of others	Student responses show disrespect for the views and experiences of others