George Mason University College of Education and Human Development Counseling Program

EDCD 656.DL1 – Diagnosis and Treatment Planning for Mental Health Professionals 3 Credits, Spring 2022 Mondays 7:20 – 10:00 PM – Synchronous Online

Faculty

Name: Dr. Lakesha Roney

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Prerequisites/Corequisites

None

University Catalog Course Description

Covers human development throughout the life span, including emotional, physical, and cognitive development; and emphasizes personal adjustment and achievement.

Course Overview

This course introduces students to fundamental concepts in the classification of psychopathology as well as the clinical interviewing skills necessary to apply DSM-5 diagnoses to clients in a sound and ethical manner. The course incorporates an explicit focus on the role of race and culture in diagnosis and treatment. The course will introduce students to formulating treatment plans utilizing the accepted standards of care in the fields of mental health counseling, clinical and counseling psychology, and psychiatry. Finally, the course will focus on clinician self-awareness as a critical dimension in accurate diagnosis and effective treatment planning. Course materials will be delivered in a variety of methods including lecture, required readings, research activities and visual media.

Course Delivery Method

This course will be delivered online (76% or more) using a synchronous format via Blackboard Learning Management system (LMS) housed in the MyMason portal. You will log in to the Blackboard (Bb) course site using your Mason email name (everything before @masonlive.gmu.edu) and email password. The course site will be available on January 24, 2022

Under no circumstances, may candidates/students participate in online class sessions (either by phone or Internet) while operating motor vehicles. Further, as expected in a face-to-face class meeting, such online participation requires undivided attention to course content and communication.

Technical Requirements

To participate in this course, students will need to satisfy the following technical requirements:

• High-speed Internet access with standard up-to-date browsers. To get a list of Blackboard's supported browsers see:

https://help.blackboard.com/Learn/Student/Getting Started/Browser Support#supported-browsers

To get a list of supported operation systems on different devices see:

https://help.blackboard.com/Learn/Student/Getting_Started/Browser_Support#tested-devices-and-operating-systems

- Students must maintain consistent and reliable access to their GMU email and Blackboard, as these are the official methods of communication for this course.
- Students may be asked to create logins and passwords on supplemental websites and/or to download trial software to their computer or tablet as part of course requirements.
- The following software plug-ins for PCs and Macs, respectively, are available for free download:
 - o Adobe Acrobat Reader: https://get.adobe.com/reader/
 - Windows Media Player:
 https://support.microsoft.com/en-us/help/14209/get-windows-media-player
 - o Apple Quick Time Player: www.apple.com/quicktime/download/

Expectations

• Course Week:

Because asynchronous courses do not have a "fixed" meeting day, our week will start on **Monday** and finish on **Sunday**.

• Log-in Frequency:

Students must actively check the course Blackboard site and their GMU email for communications from the instructor, class discussions, and/or access to course materials at least 2 times per week.

• Participation:

Students are expected to actively engage in all course activities throughout the semester, which includes viewing all course materials, completing course activities and assignments, and participating in course discussions and group interactions.

• Technical Competence:

Students are expected to demonstrate competence in the use of all course technology. Students who are struggling with technical components of the course are expected to seek assistance from the instructor and/or College or University technical services.

• Technical Issues:

Students should anticipate some technical difficulties during the semester and should, therefore, budget their time accordingly. Late work will not be accepted based on individual technical issues.

• Workload:

Please be aware that this course is **not** self-paced. Students are expected to meet *specific* deadlines and due dates listed in the **Class Schedule** section of this syllabus. It is the student's responsibility to keep track of the weekly course schedule of topics, readings, activities and assignments due.

• Instructor Support:

Students may schedule a one-on-one meeting to discuss course requirements, content or other course-related issues. Those unable to come to a Mason campus can meet with the

instructor via telephone or web conference. Students should email the instructor to schedule a one-on-one session, including their preferred meeting method and suggested dates/times.

• Netiquette:

The course environment is a collaborative space. Experience shows that even an innocent remark typed in the online environment can be misconstrued. Students must always re-read their responses carefully before posting them, so as others do not consider them as personal offenses. *Be positive in your approach with others and diplomatic in selecting your words*. Remember that you are not competing with classmates but sharing information and learning from others. All faculty are similarly expected to be respectful in all communications.

• Accommodations:

Online learners who require effective accommodations to insure accessibility must be registered with George Mason University Disability Services.

Course Objectives

This course is designed to enable students to do the following:

- 1. Critique and examine the major theories of human growth and development and their applicability across different cultures; to include, individual and family development, learning, normal and abnormal personality development across the lifespan (CACREP 2.F.3.a.; 2.F.3.b.; 2.F.3.c.).
- 2. Understand biological, neurological, physiological, systemic, and environmental factors that affect human development, functioning, and behavior (CACREP 2.F.3.e.; 2.F.3.f.).
- 3. Apply a general framework for understanding differing abilities and strategies for differentiated interventions (CACREP 2.F.3.h.).
- 4. Gain knowledge of ethical and culturally relevant strategies for promoting resilience and optimum development and wellness across the lifespan (CACREP 2.F.3.i.).
- 5. Understand and appreciate the complexities of culture and its influence on human growth and development (CACREP 2.F.3.f.).
- 6. Impact of biological and neurological mechanisms on mental health (CACREP 5.C.2.g)

Professional Standards

Council for Accreditation of Counseling and Related Education Programs (CACREP) 2016

CACREP Standard	Course Objective Coverage	Course Activities
theories of individual and	This Standard is part of Course	Assigned readings that discuss this
family development across	Objective #1, which is	Standard include: Chapters 1
the lifespan (CACREP	addressed in Classes 2, 3, 5,	and 2 in <i>The life span: Human</i>
2.F.3.a)	7, 8, 9, 10, 11, 12, 13 on	Development for helping
	"Theory, Research, and	professionals
	Foundations" and others.	
	(Given the nature of this	
	Standard, it is covered in	
	most classes.)	
theories of learning	This Standard is part of Course	Assigned readings that discuss this
(CACREP 2.F.3.b)	Objective #1, which is	Standard include: Chapters 3,
	addressed in Classes 2, 3, 4,	6, 9, and 11 in The life span:
	5, 6, 7, 9, 11 on "Early	Human Development for
	Years" and others. (Given	helping professionals
	the nature of this Standard, it	
	is covered in many classes.)	
theories of normal and	This Standard is part of Course	Assigned readings that discuss this
abnormal personality	Objective #1, which is	Standard include: Chapters 2,
development (CACREP	addressed in Classes 2, 3, 5,	5,6,8, 10, 12, 14, 16, & 18 in
2.F.3.c)	7, 8, 9, 10, 11, 12, 13 on	The life span: Human

biological, neurological, and physiological factors that affect human development, functioning, and behavior (CACREP 2.F.3.e)	"Middle Childhood" and others. (Given the nature of this Standard, it is covered in many classes.) This Standard is part of Course Objective #2, which is addressed in Classes 2, 5, 7, 8, 9, 10, 11, 12, 13 on "The Early Years" and others. (Given the nature of this Standard, it is covered in	Development for helping professionals Assigned readings that discuss this Standard include: Chapters 2, 5, 7, 9, 11, 13,15, & 17 in The life span: Human Development for helping professionals
systemic and environmental factors that affect human development, functioning, and behavior (CACREP 2.F.3.f)	many classes.) This Standard is part of Course Objective #2 and Course Objective #5 which are addressed in Classes 4, 5, 7, 8, 9, 10, 11, 12, 13 on "The emerging self and socialization" and others. (Given the nature of this Standard, it is covered in many classes.)	Course activities that address this Standard include readings from The life span: Human Development for helping professionals (Chapters 4-15) and class lectures/discussions. Additionally, this Standard is measured as part of the Research Paper Key Assignment, which assesses KPI A.3.a.1
a general framework for understanding differing abilities and strategies for differentiated interventions (CACREP 2.F.3.h) ethical and culturally relevant strategies for promoting resilience and optimum development and wellness across the lifespan (CACREP 2.F.3.i)	This Standard is part of Course Objective #3, which is addressed in Classes 5, 7, 8, 9, 10, 11, 12, 13 on and others. (Given the nature of this Standard, it is covered in many classes.) This Standard is part of Course Objective #4, which is addressed in Classes 5, 7, 8, 9, 10, 11, 12, 13 on "Identity Development in Adolescence," "Young Adulthood" and others. (Given the nature of this Standard, it is covered in many classes.)	Course activities that address this Standard include readings from The life span: Human Development for helping professionals (Chapters 4-15) and class lectures/discussions. Assigned readings that discuss this Standard include: Chapters 4, 5, 7, 8, 9, 10, 12, &14 in The life span: Human Development for helping professionals Additionally, this Standard is measured as part of the Research Paper Key Assignment, which assesses KPI A.3.a.1
impact of biological and neurological mechanisms on mental health (CACREP 5.C.2.g)	This Standard is part of Course Objective #6, which is addressed in Classes 5, 7, 8, 9, 10, 11, 12, 13 on "Adolescence" and others. (Given the nature of this Standard, it is covered in many classes.)	Assigned readings that discuss this Standard include: Chapters 5, 7, 8, 9, 11, 13,& 15 in The life span: Human Development for helping professionals

Additional professional standards addressed in this course:

- This course addresses the following Virginia Department of Education (VDOE) School Counselor Prek-12 Competency Topic requirements: 8VAC20-543-610.2
- This course addresses the following Virginia Department of Education (VDOE) Professional Studies requirements for Prek-12 Endorsements: 8VAC20-543-140.1.a, 1.b
- This course fulfills the Virginia Board of Counseling Licensed Professional Counselor (LPC) coursework requirement (18VAC115-20-51) for "Human growth & development"

Required Texts

- American Psychiatric Association (2013). Diagnostic and statistical manual of mental disorders (5th ed). Arlington, VA: Author.
- Nussbaum, A. M. (2013). The pocket guide to the DSM-5 diagnostic exam. Arlington, VA: American Psychiatric Association.
- Diagnosis and Treatment Planning Skills A Popular Culture Casebook Approach (DSM-5 Update) SECOND EDITION. Alan M. Schwitzer & Lawrence C. Rubin.
- Jongsma, A. E., Peterson, L. M., & Bruce, T. J. (2014). The complete adult psychotherapy treatment planner. Hoboken, NJ: John Wiley & Sons, Inc.

IMPORTANT NOTE TO STUDENTS

* A text revision of the DSM 5 (DSM 5-TR) is scheduled to be published March 18, 2022. I would recommend that use the library version, rent a version, or borrow version from another student until the new version is published. There will be only a few changes but I wanted to make you aware of the new publication prior to you investing in this version prior to the new version being published.

Additional Readings:

- Castillo, R. J. (1997a). Why culture?. In *Culture and mental illness: A client centered approach* (pp. 3-24). Boston, MA: Brooks/Cole.
- Castillo, R. J. (1997b). Culture & clinical reality. In *Culture and mental illness: A client centered approach* (pp. 25-38). Boston, MA: Brooks/Cole.
- Castillo, R. J. (1997c). Culture and personality. In *Culture and mental illness: A client centered approach* (pp. 39-54). Boston, MA: Brooks/Cole.

Course Performance Evaluation

Students are expected to submit all assignments on time in the manner outlined by the instructor (e.g., VIA).

Assignments and/or Examinations

Two Treatment Plans- DUE 2/21/22 & 4/11/22

An essential element of this course is the ability of the student to be able to formulate and plan for the treatment of the client. You will be required to complete two formal treatment plans. Detailed instructions, case vignettes, and grading rubric will be provided. You will be given feedback on the first treatment plan, which you should incorporate when completing the second

treatment plan. The second treatment plan is a Counseling program required performance-based assessment (specific information to be discussed in class) (**Key Assignment: KPI A.9CMHC.b.1; CACREP 5.C.3.b, 5.C.2.j**). Continuation in the program may be contingent on satisfactory performance on this assessment.

* 10 points each

Cultural Formulation Interview - DUE 3/28/22

The DSM-5 Cultural Formulation Interview (CFI) is an evidence-based tool is composed of a series of questionnaires that assist clinicians in making person-centered cultural assessments to inform diagnosis and treatment planning. The CFI can be used in clinical encounters with all patients and all clinicians, not just with cultural minorities or in situations of obvious cultural difference between clinicians and patients. This is because all of us bring our own cultures, values, and expectations to the clinical encounter, including often invisible influences on how we approach specific aspects of care. You will be required to use the CFI to guide interview process in writing a peer's biopsychosocial history. Presenting issues can be fictional and focus on diagnosis(es) that will be of focus in this course, for example, a presenting can be symptoms related to PTSD and Sexual Abuse. This document should be typed, single-spaced, please conceal the identity of the peer you are interviewing but include their demographic (age, gender identity, race, ethnicity, spiritual/religious background, immigration status if applicable) information in your paper. A biopsychosocial history form will be provided for you to complete and to be submitted with your paper which should be a minimum of one page and a maximum of two pages in length. The paper should include: A.) a brief description of the presenting issue; B.) a discussion of your reactions, thoughts, and feelings in response to the issue; C.) describe your ideas you about the way that culture influences mental illness; and D.) explain how the CFI assisted you in collecting information from vour participant.

* 15 points

In-class Role Play and Disorder Information Sheet-DUE dates will be assigned

The class will be split up into triads. Each triad will be assigned a date in which they will perform an 8–10 minute role-play in front of the class demonstrating either a partial counseling session with a student (for SC students) or clients (for CMHC/CAC students) with a specific disorder (disorder will be assigned by instructor). One group member will play the student/client, one will play the school counselor/mental health counselor, and the third group member will facilitate a class debriefing after the role-play. The debriefing should focus on what additional information the class would like to gather from the student, discussion of the diagnosis, and thoughts regarding the goal plan.

In addition to the role-play, the group will create an information sheet for their assigned disorder that will be disseminated to the class following the role-play (bring copies for the class). The information sheet should be in an outline format, single spaced, no longer than 1 page, and include the following sections:

A. Recommended Therapeutic Interventions: List recommended interventions school counselors/counselors can use for students with the disorder (i.e., CBT, DBT, etc.).

- **B. Resources for School Counselors/Counselors**: List professional resources that would be helpful to counselors working with clients with this disorder. The resources should include classroom supports, journal articles, and cultural considerations.
- **C. Commonly Used Medications** (if any): List the medications that are most prescribed for the disorder.
- **D.** Resources for Students/Clients: It is very important that we can provide students/clients with additional resources that may be useful for them. Research potential resources for students/clients with your assigned disorder. These resources may include books (written for the general public), websites, and support groups (in-person/online).

* Role Play/Debriefing 10 Points; Disorder Information Sheet 10 Points

Final Exam (open book/notes)- DUE Last Class 5/9/22

* 25 *Points*

• Other Requirements Class Participation

Attendance, arriving to class on time, and actively participating in class discussions and activities are all included in the participation grade. In order to get an A or A- for class participation you must attend all scheduled classes.

Grading

In accordance with the George Mason University Grading Policy, the following grades may be achieved:

A [100-94]; A- [93-90]; B+ [89-87]; B [86-84]; B- [83-80]; C [79 - 70]; F [69 and below]

Graded Assignments

Two Treatment Plans 20 points (10 points each)

Cultural Interview Formulation 15 points
In-class Role Play/Debriefing 10 points
Disorder Information Sheet 10 points
Take-home Final 25 points
Class participation 20 points
Total 100 points

Late Assignments: Late assignments will result in a point reduction

In accordance with the George Mason University Grading Policy, the following grades may be achieved:

A [100-94]; A- [93-90]; B+ [89-87]; B [86-84]; B- [83-80]; C [79 - 70]; F [69 and below]

Professional Dispositions

See https://cehd.gmu.edu/students/polices-procedures/

Students must adhere to program professional dispositions: shttps://cehd.gmu.edu/assets/docs/forms/Professional%20Dispositions.pdf

Professional Dispositions Assessment

Professional Dispositions Assessment are completed by instructors in all courses except electives and field experience courses (Practicum: 750/751; Internship 1: 792/793; and Internship 2: 794/795). In electives and field experience courses, instructors or supervisors may choose to complete a Professional Disposition Assessment should the need arise. In field experience classes, University and Site Supervisors will assess students on a Student Evaluation that is specific to P&I.

A developmental approach to PD Assessment is used, understanding that students are developing in their awareness, skills, and abilities throughout the course of the Counseling Program. In general, students in "basic or pre-practicum level" courses may demonstrate the disposition sometimes or inconsistently. Students in "intermediate or practicum level" courses should demonstrate the disposition more often or frequently. The courses are assigned to levels as follows:

Course Level	Courses
Basic (Pre-Practicum)	<i>Core</i> : 602, 601, 525, 603, 609, 606, 604, 656 <i>CMHC</i> : 654, 652, 658 <i>SC</i> : 613, 611, 626
Intermediate (Practicum)	Core: 608, 660, 628, 619, 610, 797

Professional Dispositions assessments are scored as follows:

- **4:** Consistently Evident The student demonstrates the disposition all or almost all of the time. This rank is considered exceptional, particularly for students who are at the beginning of their program. Students who are advanced in the program (i.e., in their last year of the program and enrolled in Internship I or II) should except to achieve this rank.
- **3: Frequently Evident** The student demonstrates the disposition often or most of the time. It is expected that students in the middle of the program (i.e., usually the second year for full time or third year for part time students) will achieve this rank. This reflects that they have moved beyond the initial phase of counselor training and are developing well towards being a professional counselor.
- 2: Sometimes Evident The student demonstrates the disposition sometimes or inconsistently. It is expected that students at the beginning of the program (i.e., first year for most students) will achieve this rank. Students at the beginning of the program are expected to be developing towards these professional dispositions as a part of their counselor training and preparation for their future as a professional counselor.
- 1: Seldom Evident The student demonstrates the disposition rarely or not at all. In some instances, this may also indicate a harmful demonstration of professional disposition(s). Students at the beginning of their program may achieve this rank, which can be developmentally appropriate as they learn the expectations for students and future professional counselors. Should this occur, students should expect to meet with their advisor, who will assist them in addressing the area of concern.
- N/A: Not Applicable An instructor or supervisor may use this to note that they did not have the opportunity to observe the disposition or that it was not relevant in the given context. This is most likely to occur at the beginning of the program when some dispositions may not be germane to the particular class.

Week	Date	Topic	Readings / Assignments Due	Course Obj. #	
Wk. 1	1/24/22	Introductions		1, 4	
		Review of Syllabus			
		Expectations & Cautions			
		Reflections on Experiences of Mental Illness			
		Cultural Implications around Diagnosis & Assessment			
Wk. 2	1/31/22		DSM-5- pp. 19-24	1, 2, 4	
		Introduction to Assessment & Diagnosis	Pocket Guide- pp. 3-31		
		History of the DSM Introduction to Use of the DSM-5	Tx Planner- Introduction		
		Treatment Planning Overview	Diagnosis and Treatment Planning Skills- Chapter 1		
Wk. 3	2/7/22	Neurodevelopmental Disorders - Intellectual Disability	DSM-5- pp. 31-86	2, 5	
Wk. 3	2/14/22	 Autism Spectrum D/O Attention-Deficit/Hyperactivity D/O Specific Learning Disorder Motor Disorders Diagnostic Criteria and Diagnostic Features Role-Play Triad 1: Schizophrenia Spectrum & Other Psychotic Disorders Schizotypal (Personality) D/O Delusional D/O Brief Psychotic D/O Schizophrenia Schizophrenia Schizophrenia Schizoaffective D/O Other Specified & Unspecified Schizophrenia Spectrum and Other Psychotic D/O 	Pocket Guide- pp. 59-67 Tx Planner- Attention Deficit Hyperactivity Disorder; Autism Spectrum Disorder; Intellectual Developmental Disorder Diagnosis and Treatment Planning Skills- Chapter 2 DSM-5- pp. 87-122 Pocket Guide- pp. 68-71 Tx Planner- Psychoticism Diagnosis and Treatment Planning Skills- Chapter 3	2, 5	
Wk. 4	2/21/22	Role-Play Triad 2: Bipolar & Related Disorders Bipolar I D/O Bipolar II D/O Cyclothymic D/O Other Specified & Unspecified Bipolar and Related D/O Psychopharmacological approaches	DSM-5- pp. 123-154 Pocket Guide- pp. 72-76 Tx Planner- Bipolar Disorder Diagnosis and Treatment Planning Skills- Chapter 4	2, 5	
		Role-Play Triad 3:	DUE: Treatment Plan #1		

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Wk. 5	2/28/22	Depressive Disorders	DSM-5- pp. 155-188	2, 5
		Major Depressive D/OPersistent Depressive D/O (Dysthymia)	Pocket Guide- pp. 77-81	
		Other Specified & Unspecified Depressive D/O	Tocket datae pp. 77 of	
		Other specified & Offspecified Depressive D/O	Tx Planner- Unipolar	
		Medical Referrals & Psychopharmacology	Depression; Low Self Esteem	
		Role-Play Triad 4:	Diagnosis and Treatment Planning	
			Skills- Chapter 5	
Wk. 6	3/7/22	Anxiety Disorders	DSM-5- pp. 189-233	2, 5, 4
		- Separation Anxiety D/O	D 1 G 11 02 04	
		- Specific Phobia	Pocket Guide- pp. 82-86	
		- Social Anxiety D/O (Social Phobia)	Tx Planner- Anxiety.	
		- Panic D/O	Panic/Agoraphobia; Social	
		- Agoraphobia	Anxiety; Specific Phobia	
		- Generalized Anxiety D/O		
		- Other Specified & Unspecified Anxiety D/O		
		Cultural Considerations for Mood & Anxiety		
		Related D/Os		
		Role-Play Triad 5:		
Wk. 7	3/21/22	Obsessive-Compulsive and Related	DSM-5- pp. 235-264	2, 5
,,,,,,	0/21/22	Disorders	BBM 5 pp. 255 26 1	2, 3
		- Obsessive-Compulsive D/O	Pocket Guide- pp. 87-89	
		- Body Dysmorphic D/O		
			Tx Planner- Obsessive-	
			Compulsive Disorder	
		- Hoarding D/O		
		- Trichotillomania		
		- Excoriation (Skin-Picking) D/O		
		- Other Specified & Unspecified Obsessive		
		Compulsive and Related D/O		
		Case Consultation & Referral		
		Role-Play Triad 6:		
		·		
Wk. 8	3/28/22	Trauma, Stressor-Related, and Dissociative,	DSM-5- pp. 265-290	2, 5
		Disorders	Pookst Guide no 00 04	
		Posttraumatic Stress D/OAcute Stress D/O	Pocket Guide- pp. 90-94	
			Tx Planner- Posttraumatic	
		- Adjustment D/O's	Stress Disorder (PTSD);	
		- Other Specified & Unspecified Trauma- and Stressor-Related D/O	Physical Emotional Abuse	
		- Dissociative Identity D/O	Victim; Sexual Abuse Victim	
		- Dissociative Amnesia		
		- Depersonalization/Derealization D/O	DUE: Cultural Interview	
		- Other Specified Dissociative D/O	Formation	
		- Unspecified Dissociative D/O		
		Case Consultation & Referral		
		Polo Play Tried 7:		
	L	Role-Play Triad 7:		

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Wk. 9	4/4/22	Disruptive, Impulse-Control & Conduct Disorders	DSM-5- pp. 461-480; 715-727	2, 5, 3, 6
			Pookat Guida no 124 120.	
		- Oppositional Defiant D/O	Pocket Guide- pp. 124-128;	
		- Intermittent Explosive D/O	180-189	
		- Conduct D/O	T Di A G A I	
		- Pyromania	Tx Planner- Anger Control	
		- Kleptomania	Problems; Conduct Disorder/	
		- Other Specified & Unspecified Impulse	Delinquency; Oppositional	
		Control, and Conduct D/O	Defiant Disorder	
		,		
		Role-Play Triad 8:		
Wk. 10	4/11/22	Somatic Symptom and Related Disorders,	DSM-5- pp. 329-354	5
		Feeding and Eating Disorders, Elimination		
		Disorders Sleep-Wake Disorders	Pocket Guide- 101-104	
		- Pica	100100 00000 101 101	
		- Anorexia Nervosa	Tx Planner- Eating Disorders	
			TATILIMOT Eating Disorders	
		- Bulimia Nervosa		
		- Binge-Eating D/O	DUE: Treatment Plan #2	
		- Other Specified & Unspecified	DOE. Heatment Han #2	
		Feeding or Eating D/O		
		Case Consultation & Referrals		
Wk. 12	4/18/22	Sexual Dysfunctions, Gender Dysphoria, and	DSM-5- pp. 423-459; 685-705	5, 3, 6
		Paraphilic Disorders		
		- Delayed Ejaculation	Pocket Guide- pp. 201-218; 333-	
		- Erectile D/O	339	
		- Female Orgasmic D/O		
		- Female Sexual Interest/Arousal D/O	Tx Planner- Female Sexual	
		- Genito-Pelvic Pain/penetration D/O	Dysfunction; Male Sexual	
		- Male Hyperactive Sexual Desire D/O	Dysfunction; Sexual	
		- Premature (Early) Ejaculation	Abuse; Sexual	
			Identity Confusion-Adult	
		- Other Specified Sexual Dysfunction		
		- Unspecified Sexual Dysfunction		
		- Gender Dysphoria		
		- Other Specified Gender Dysphoria		
		- Unspecified Gender Dysphoria		
		- Voyeuristic D/O		
		- Exhibitionistic D/O		
		- Frotteuristic D/O		
		- Sexual Masochism D/O		
		- Sexual Sadism D/O		
		- Sexual Sadishi D/O - Fetishistic D/O		
		- Transvestic D/O		
		- Other Specified Paraphilic D/O		
		- Unspecified Paraphilic D/O		
		Role-Play Triad 9:		
Wk. 13	4/25/22	Personality Disorders	DSM-5- pp. 645-684	5
		- Cluster A Personality D/O's	rr. vie	
		_	Pocket Guide- pp. 165-175	
		- Cluster B Personality D/O's	- 13met 3mae pp. 100 170	
		- Cluster C Personality D/O's	Tx Planner- Runaway; School	
		D 1 D1 T1 110	Violence Perpetrator; Sexual	
		Role-Play Triad 10:	Promiscuity; Substance Abuse	

Wk. 14	5/2/22	Substance Use Disorders & Process Addictions	DSM-5- pp. 481-590	5, 7
		Substance Use CriterionDifferential Diagnosis	Pocket Guide- 199-202	
			Tx Planner- Substance Use	
		Etiology of addictions and addictive behaviors	Disorders	
Wk. 15	5/9/22	Wrapping Up - FINAL EXAM	DUE: Take-home final exam	
			(upload to Blackboard by 11:59PM)	

Note: Faculty reserves the right to alter the schedule as necessary, with notification to students.

Counseling Mission Statement

The Counseling Program is committed to preparing counselors who promote the social, psychological, physical, and spiritual health of individuals, families, communities, and organizations in order to contribute to the advancement of global well-being. The program strives for national and international excellence in implementing a counseling perspective which provides a foundation in basic counseling skills and focuses on social justice, multiculturalism, international, advocacy and leadership. It is our belief that a global perspective on development across the life span, and an understanding and appreciation of multiculturalism, diversity, and social justice are integral to the preparation of professional counselors, requiring that professional counselors are prepared to assume leadership roles, be proactive change agents and become advocates for social, economic and political justice. The program is committed to accomplish this mission by working through interdisciplinary teams as well as promote the interconnectedness of teaching, research, service and professional practice. Through this mission faculty will facilitate a continued tradition of international, national and regional leadership through the development of collaborative partnerships and projects, research, publications, presentations, consultation, and training.

Core Values Commitment

The College of Education and Human Development is committed to collaboration, ethical leadership, innovation, research-based practice, and social justice. Students are expected to adhere to these principles: http://cehd.gmu.edu/values/.

GMU Policies and Resources for Students

Policies

- Students must adhere to the guidelines of the Mason Honor Code (see https://catalog.gmu.edu/policies/honor-code-system/).
- Students must follow the university policy for Responsible Use of Computing (see https://universitypolicy.gmu.edu/policies/responsible-use-of-computing/).
- Students are responsible for the content of university communications sent to their Mason email account and are required to activate their account and check it regularly. All communication from the university, college, school, and program will be sent to students **solely** through their Mason email account.
- Students with disabilities who seek accommodations in a course must be registered with George Mason University Disability Services. Approved accommodations will begin at the time the written letter from Disability Services is received by the instructor (see https://ds.gmu.edu/).
- Students must silence all sound emitting devices during class unless otherwise authorized by the instructor.

- Questions or concerns regarding use of Blackboard should be directed to https://its.gmu.edu/knowledge-base/blackboard-instructional-technology-support-forstudents/.
- For information on student support resources on campus, see https://ctfe.gmu.edu/teaching/student-support-resources-on-campus

Notice of mandatory reporting of sexual assault, interpersonal violence, and stalking:

As a faculty member, I am designated as a "Responsible Employee," and must report all disclosures of sexual assault, interpersonal violence, and stalking to Mason's Title IX Coordinator per University Policy 1202. If you wish to speak with someone confidentially, please contact one of Mason's confidential resources, such as Student Support and Advocacy Center (SSAC) at 703-993-3686, Counseling and Psychological Services (CAPS) at 703-993-2380, or the 24-Hour Sexual and Interpersonal Violence Crisis Line at (703) 380-1434. You may also seek assistance from Mason's Title IX Coordinator by calling 703-993-8730 or emailing titleix@gmu.edu.

For additional information on the College of Education and Human Development, please visit our website https://cehd.gmu.edu/students/.

Assessment Rubric:

EDCD 656 Treatment Plan Rubric (Key Assignment: KPI A.9-CMHC.b.1; CACREP 5.C.3.b, 5.C.2.j)

	Exceeds	Meets	Approaching	Below
	Standards 4	Standards 3	Standards 2	Standards 1
1.Diagnosis	Diagnosis fully	Diagnosis captures	Diagnosis captures	No evidence that the diagnosis captures the symptoms
KPI A.9-CMHC.b.1;	captures all	most of the	some of the	
CACREP 5.C.3.b	symptoms	symptoms	symptoms	
2. Behavioral Definition of Problems KPI A.9-CMHC.b.1; CACREP 5.C.3.b; 5.C.2.j	Includes four behavioral definitions that are conceptualized from the case vignette and include relevant cultural factors	Includes three behavioral definitions that are conceptualized from the case vignette and include relevant cultural factors	Includes two behavioral definitions that are conceptualized from the case vignette and include relevant cultural factors	Includes one or fewer behavioral definitions that are conceptualized from the case vignette
3. Goals for	Includes four goals	Includes three goals	Includes two goals	Includes one or fewer goals for change that are conceptualized from the case vignette
Change	for change that are	for change that are	for change that are	
KPI A.9-CMHC.b.1;	conceptualized from	conceptualized from	conceptualized from	
CACREP 5.C.3.b	the case vignette	the case vignette	the case vignette	

4. Therapeutic Interventions KPI A.9-CMHC.b.1; CACREP 5.C.3.b	Includes four therapeutic interventions that are conceptualized from the case vignette	Includes three therapeutic interventions that are conceptualized from the case vignette	Includes two therapeutic interventions that are conceptualized from the case vignette	Includes one or fewer therapeutic interventions that are conceptualized from the case vignette
5. Outcome Measures	Includes four outcome measures that are conceptualized from the case vignette	Includes three outcome measures that are conceptualized from the case vignette	Includes two outcome measures that are conceptualized from the case vignette	Includes one or fewer outcome measures that are conceptualized from the case vignette