

**Psyc 6211 - Psychopathology of the Adult**  
**(January - April 2017)**

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**Instructor:** Dr. J. Tan, SN 1019, 346-7751  
**Day & time:** Wednesday 2:30-5:30 pm  
**Place:** SN 2011

**Course description:**

This course examines current theories and research of adult psychopathology and their link to clinical practice. Readings will be taken from selected articles, and clinical cases will be presented in discussions to demonstrate the link between practice and research. Grades will be based on assigned article readings and review handouts, an oral class presentation and a written term paper.

**Text:**

American Psychiatric Association (2013). *Diagnostic and statistical manual of mental disorders* (5<sup>th</sup> edition). Washington, D.C.: American Psychiatric Association.  
 plus  
 selected readings (see reading list at end of syllabus).

**\*Tentative schedule (depending on class progress):**

Jan 11	Organization of course
Jan 18,25	Set 1: Conceptualization of psychopathology: psychiatric and psychological approaches
Feb 1, 8	Set 2: Depression and anxiety
Feb 15	Set 3: Personality disorders (continues on March 8)
Feb 22	----- BREAK WEEK -----
Mar 1	Guest lecture & discussion on clinical psychological science
Mar 8	Set 3: Personality disorders
Mar 15	Set 4: Linking research and practice
Mar 22, 29, April 5	Oral presentations
<b><i>Apr 12</i></b>	<b><i>Written term paper due by 4:30 pm</i></b>

\*Please note that it may not be possible to adhere rigidly to the above proposed schedule, although all attempts to follow the timetable will be made.

## **Course requirements and grading**

There are 5 requirements in this course. Their detailed description, evaluation criteria, and marking scheme are provided below.

### ***(1) Assigned article readings and review handouts (50 points)***

There are 4 sets of readings in the course (see *Readings & Integrated Discussion Questions*). The first set examines the conceptualization of psychopathology. The second focuses on depression and anxiety, while the third covers personality disorders. The fourth examines how research and practice are linked and can be used to inform each other. For *each* set, a number of articles are selected for reading based on their currency and comprehensiveness of their review that would afford breadth and depth of information.

Except where indicated, all readings will be assigned to students. The student who is assigned a reading will share with the instructor and the class a written handout of the article. The handout would provide a concise summary with the key points noted, and a critical review of the article. The review would include what the student finds informative or provocative in the article, relevance and utility of the information to guide clinical research and practice, questions for further research, limitations of the article, among other informed opinions that the student would like to share. The student will go over the handout in the class (15 minutes max) and co-lead with the instructor a class discussion of the assigned reading itself. The rest of the class are expected to be familiar with the reading so that they have the knowledge to participate in thoughtful discussions. The discussions will not be graded.

The length of the handout is up to the student to whom the article is assigned as it depends on the article and its analysis by the student. Please avoid merely re-iterating the entire article. Focus on the primary message and key points, and own thoughts and reactions to the paper. The handout will be evaluated for its contents that should reflect the student's understanding of the article and critical thinking, its writing style, and adherence to APA publication style.

### ***(2) Integrated discussions of reading sets (not graded)***

Following all readings in a set, the class will engage in the *Integrated Discussion questions* (see *Readings & Integrated Discussion Questions*). The objective of this exercise is to contemplate questions that transcend individual articles and that address wider conceptual, theoretical and philosophical issues in the topic area. Students are encouraged to bring in their own readings and develop their own questions to enrich the discussions. The integrated discussions are not graded.

### ***(3) Clinical case discussions (not graded)***

Clinical cases with non-identifying information will be presented by the instructor and/or by students for class discussions throughout the course to examine and demonstrate the link between research and practice. The class is encouraged to utilize the readings from this course as well as their cumulative academic and clinical knowledge and experience to render the discussions as comprehensive and informed as possible.

### ***(4) Oral presentation of term paper (50 points)***

Each student will select in consultation with the instructor a topic area and specific questions to research and present in class. Topics must be related to adult psychopathology, and must include theory and research, and not just assessment or intervention. Grading of the oral presentation will be based on its

comprehensiveness, depth, precision, organization, clarity of delivery, quality of critical thinking and analysis of the literature, and ability to answer questions competently from the audience. The oral presentation should not exceed 20 minutes and should be accompanied by a handout for the instructor and the class. Please provide a brief abstract of your intended topic area or question to the instructor by February 1 for approval. *A list of potential (but not prescriptive) topics is included at the end of the syllabus for your convenience.*

**(5) Written term paper (100 points)**

Each student will submit a written paper based on his/her presentation. The double-spaced paper should be typed in 12-size font with 1” margin around, written in APA-style, and not exceed 15 pages in length excluding title page, abstract, references, tables, and figures. The paper will be graded on depth, comprehensiveness, precision, organization, clarity, critical analysis of the literature, original thinking, and writing style. The paper is due on April 12 by 4:30 pm. It can be left in the instructor’s mailbox or slid under her office door. Papers that exceed the deadline will be given 3% penalty for part of each day that it is late.

**Hints for term paper:**

1. Keep your topic area and objectives of your paper tight and focussed.
2. Be precise and concise. Avoid superfluous writing that is void of meaning.
3. Avoid repetitions and overlaps.
4. Tabulate information if it enhances clarity and understanding.
5. Your paper should be more than a summary of a collection of previous works. It should provide new information or new perspectives.
6. Consult the instructor if you have questions or difficulties, and make sure that you have final approval before working on the term paper.
7. No plagiarism is allowed. It is very common and easy to unthinkingly copy sentences from articles with a word or two changed here or there because the original author expressed a concept so well.

***Please see remaining pages for the reading list and discussion questions for the course.***

## Readings & Integrated Discussion Questions

\*\*\*Asterisked articles below are meant for common reading and not to be assigned to specific students.

### January 18, 25. Set 1: Conceptualization of psychopathology: psychiatric and psychological approaches

- \*\*\*Blashfield, R. K., Keeley, J. W., Flanagan, E. H., & Miles, S. R. (2014). The cycle of classification: DSM-I through DSM-5. *Annual Review of Clinical Psychology, 10*, 25-51. doi: 10.1146/annurev-clinpsy-032813-153639
- Kraemer, H. (2014). The reliability of clinical diagnoses: State of the art. *Annual Review of Clinical Psychology, 10*, 111-130. doi: 10.1146/annurev-clinpsy-032813-153739
- Khoury, B., Langer, E. J., & Pagnini, F. (2014). The DSM: mindful science or mindless power? A critical review. *Frontiers in Psychology, 5*(Article 602), 1-8. doi: 10.3389/fpsyg.2014.00602
- Wakefield, J. C. (2016). Diagnostic issues and controversies in DSM-5: Return of the false positives problem. *Annual Review of Clinical Psychology, 12*, 105-132. doi: 10.1146/annurev-clinpsy-032814-112800
- Persons, J. B. (1986). The advantages of studying psychological phenomena rather than psychiatric diagnoses. *American Psychologist, 41*(11), 1252-1260. [www.apa.org](http://www.apa.org)

#### Discussion questions:

1. Synopsis and discussion questions for each article
2. Integrated discussion: What needs to be considered in the evaluation of a diagnosis? What functions do psychiatric diagnoses serve and how well have they been met by the DSMs? Contextualize your answers within the DSM-5 by considering its benefits and limitations.
3. Integrated discussion: What are the implications of conceptualizing psychopathology as psychological phenomena vis-à-vis psychiatric diagnoses?

### February 1, 8. Set 2: Depression and anxiety

- Joormann, J., & Quinn, M. E. (2014). Cognitive processes and emotion regulation in depression. *Depression and Anxiety, 31*, 308-315. doi: 10.1002/da.22264
- Liu, R. T., & Alloy, L. B. (2010). Stress generation in depression: A systematic review of the empirical literature and recommendations for future study. *Clinical Psychology Review, 30*, 582-593. doi: 10.1016/j.cpr.2010.04.010
- Van Bockstaele, B., Verschuere, B., Tibboel, H., De Houwer, J., Crombez, G., & Koster, E. H.

W. (2014). A review of current evidence for the causal impact of attentional bias on fear and anxiety. *Psychological Bulletin*, 140(3), 682-721. doi: 10.1037/a0034834

Mathew, A. R., Pettit, J. W., Lewinsohn, P. M., Seeley, J. R., & Roberts, R. E. (2011). Co-morbidity between major depressive disorder and anxiety disorders: shared etiology or direct causation? *Psychological Medicine*, 41, 2023-2034. doi:10.1017/S0033291711000407

Drost, J., Van der Does, A. J. W., Antypa, N., Zitman, F. G., Van Dyck, R. & Spinhoven, P. (2012). General, specific, and unique cognitive factors involved in anxiety and depressive disorders. *Cognitive Therapy and Research*, 36, 621-633. doi: 10.1007/s10608-011-9401-z

Discussion questions:

1. Synopsis and discussion questions for each article
2. Integrated discussion: How are anxiety disorders different and similar to depression, and what are the implications for research, assessment, and treatment?

**February 15, March 8. Set 3: Personality disorders**

Krueger, R. F., & Markon, K. E. (2014). The role of the DSM-5 personality trait model in moving toward a quantitative and empirically based approach to classifying personality and psychopathology. *Annual Review of Clinical Psychology*, 10, 477-501. doi: 10.1146/annurev-clinpsy-032813-153732

Morey, L. C. & Hopwood, C. J. (2013). Stability and change in personality disorders. *Annual Review of Clinical Psychology*, 9, 499-528. doi: 10.1146/annurev-clinpsy-050212-185637

Links, P. S. & Eynan, R. (2013). The relationship between personality disorders and Axis 1 psychopathology: Deconstructing comorbidity. *Annual Review of Clinical Psychology*, 9, 529-554. doi: 10.1146/annurev-clinpsy-050212-185624

Kotov, R., Gamez, W., Schmidt, F., & Watson, D. (2010). Linking “Big” personality traits to anxiety, depressive, and substance use disorders: A meta-analysis. *Psychological Bulletin*, 136(5), 768-821. doi: 10.1037/a0020327

Discussion questions:

1. Synopsis and discussion questions for each article
2. Integrated discussion: What are the links between PD and other psychiatric disorders (particularly depression, anxiety, and trauma)? How might clinicians recognize the presence of PD in patients? When do traits become a disorder? What are the issues in PD assessments and diagnosis? What adaptive functions might PD serve, if any?

**March 1: Guest lecture & discussion on clinical psychological science**

Please read the article below and come prepared with your thoughts and questions for a discussion on clinical neuroscience with the guest lecturer.

\*\*\*Panksepp, J., Wright, J. S., Döbrössy, M. D., Schlaepfer, T. E., & Coenen, V. A. (2014). Affective neuroscience strategies for understanding and treating depression: From preclinical models to three novel therapeutics. *Clinical Psychological Science*, 2(4), 472-494. doi: 10.1177/2167702614535913

**March 15. Set 4: Linking research and practice**

Beck, A. T., & Haigh, E. A. P. (2014). Advances in cognitive theory and therapy: The generic cognitive model. *Annual Review of Clinical Psychology*, 10, 1-24. doi: 10.1146/annurev-clinpsy-032813-153734

Foa, E. B., & McLean, C. P. (2016). The efficacy of exposure therapy for anxiety-related disorders and its underlying mechanisms: The case of OCD and PTSD. *Annual Review of Clinical Psychology*, 12, 1-28. doi: 10.1146/annurev-clinpsy-021815-093533

Discussion questions:

1. Synopsis and discussion questions for each article.
2. Integrated discussion: Reflect and provide your thoughts and reactions to the issue of how theories and empirical findings can best be used to guide clinical practice in real-world settings. Comment on their value, challenges in transferring the knowledge to real clinical cases that are heterogeneous and complex, and ways of addressing the challenges. Comment on how information on clinical cases can be used to inform research.

**Some potential term paper topics (students are free to modify these topics or choose outside of this list):**

1. Neuroticism as common dimension in internalizing disorders
2. Theory of mind & psychopathology such as schizophrenia, ADHD, bipolar disorder
3. Comparison of bipolar, ADHD, and borderline personality disorder with implications for differential diagnosis
4. Worrying and generalized anxiety disorder – etiological factors and pathogenesis
5. Moderating effects of age in psychopathology (select specific disorder or disorders to focus on)
6. Gender issues in psychopathology
7. Contagion effects in psychopathology
8. Models of disordered eating
9. Mechanisms underlying different kinds of addictions – similarities and differences
10. Trauma and psychosis
11. Transdiagnostic factors in psychopathology