San José State University  
Department of Psychology  
Child Psychopathology, PSYCH211  
Spring 2018  

Course and Contact Information  
Instructor:  Matthew Capriotti, Ph.D.  
Office Location:  DMH 318  
Telephone:  (408) 924-5641  
Email:  Matthew.capriotti@sjsu.edu  
Office Hours:  Tuesday 9:55-11:55 AM  
Class Days/Time:  Wednesday 9AM-11:45 AM  
Classroom:  DMH 308  
Prerequisites:  Enrollment in MS Clinical Program  

Course Description  
This graduate level MS clinical psychology class covers child psychopathology. Students will be introduced to the study of childhood disorders from a developmental perspective. Descriptive psychopathology will also be covered, with a requirement that students learn the symptoms and syndromes of common childhood disorders. Empirical research will be reviewed to identify possible biological, familial, social-cultural and environmental factors associated with each disorder. Frequently used standardized assessments, and evidence-based treatments for each disorder will be reviewed.  

Learning Outcomes  

Course Learning Outcomes:  
Through this course, students will:  
CLO1: Learn the details of descriptive child psychopathology (i.e., the symptoms and syndromes in DSM-5).  
CLO2: Understand the biological and contextual processes (i.e., risk and protective factors) that impact the development and treatment of childhood disorders.  
CLO3: Identify and interpret standardized assessments for the major childhood disorders.  
CLO4: Identify and understand the therapeutic mechanisms associated with evidence-based treatments for childhood disorders  
CLO5: Develop individualized evidence-based treatment plans that integrate relevant clinical and contextual information to diagnose, assess, and treat a child or adolescent seeking clinical services.
Program Learning Outcomes (PLOs) and Licensing Learning Objectives (LLOs)

See Appendix B

Required Texts/Readings


Course Requirements and Assignments

Diagnostic criteria quizzes

10 points x 7 quizzes = 70 points

For 7 weeks of the semester, you will be quizzed on the diagnostic criteria for diagnoses listed in the syllabus for that week. If multiple diagnoses are listed, you may be tested on any or all of them. Quizzes will happen at the beginning of class. Each quiz will be worth 10 points. CLO1.

Clinical vignettes

50 points x 4 vignettes = 200 points

On four occasions, you will be required to respond to a clinical case vignette/study for a grade. Your response will be expected to demonstrate evidence-based approaches to diagnosis, case formulation, treatment planning, and process/progress monitoring, as well as an appreciation for contextual factors as they affect each of these. All graded vignette assignments will be completed outside of class. The first two will be untimed and submitted on Canvas. The other two will be timed assignments (120 min) completed on Canvas outside of class time.

Each response will be worth 50 points. You will need to use your laptop for this assignment if the computer lab is not available. Most often, you will email your response/document to me and I will confirm receipt. CLOs 1-5

Final vignette

100 points

For your final project, you will respond in detail to a vignette originally presented on the first day of class. In addition to completing standard vignette questions, you will respond to several other prompts related to the case. These additional portions will prompt you to highlight how your experience in this class has shaped the way you approach assessment and treatment of psychological problems in children. CLOs 1-5
Participation
50 points

You are expected to contribute to the class by sharing your thoughts and impressions about the readings, asking questions, and responding to questions. Participation is defined as doing the following for each class meeting:

a) Posting two questions about, or reactions to, the reading to Canvas 24 hours ahead of class. These should be 1-3 sentences each, in plain language, reflecting genuine questions or thoughts about the material. This is not evaluative (“seeing how smart of a question you can ask”), but rather meant to help catalyze group discussion that meets you where you and your peers are.

b) Contributing verbally to whole-group class discussion at least once per class

c) Participating in small-group activities as prompted during class periods

d) Behaving consistently with the classroom expectations defined in Appendix C

If you participate fully in all class meetings, as described above, you will earn 50 points toward your final grade. For ever class period in which you do not participate fully in the above, 3 points will be subtracted from your participation score. CLOs 2-5

Time Commitment and Expectations

“Success in this course is based on the expectation that students will spend, for each unit of credit, a minimum of 45 hours over the length of the course (normally 3 hours per unit per week with 1 of the hours used for lecture) for instruction or preparation/studying or course related activities including but not limited to internships, labs, clinical practica. Other course structures will have equivalent workload expectations as described in the syllabus.”

Final Examination or Evaluation

The culminating experience for this class will be the Final Vignette assignment, as described above.

Determination of Grades

Total points earned in the class will be divided by 420 and converted to a percentage. Percent grades will be converted to letter grades using the scale below. Grades will not be rounded; for example, a percentage grade of 96.9% would earn a final grade of A, not A+:

100-97%=A+, 96%-93%=A, 92-90%=A-, 89-87%=B+, 86-83%=B, 82-80%=B-, 79-77%=C+, 76-73%=C, 72-70%=C-, 69-67%=D+, 66-63%=D, 62-60%=D-, 59.9% and less = F.

Extra credit is not available.

Late work will not be accepted in this class.

Classroom Protocol and Etiquette

Students are expected to behave with professionalism, respect, and courtesy in all in-class and out-of-class communications with classmates and the instructor. This includes actively participating in class discussions. See Appendix C for detailed expectations for in-class behavior and professional communication.
Professional Communication
Email is a good medium to ask simple, clarifying questions about class material or logistics. Email is NOT a place to get extensive help with exam questions or with papers. If you have questions about a paper or larger assignment, you must come to office hours to discuss them; I will not read drafts of papers over email.

As a graduate student, you are encouraged to engage in professional communication with faculty, staff, and your fellow students. This is especially important over email. Though this seems simple at face, students (and professionals) often fail to communicate professionally via email. See Appendix C for specific expectations. If I notice you struggling to maintain a professional tone in your communications, I may point this out and suggest changes you might make. If this happens, please know that this is intended to further your professional development, and not out of anger, frustration, disdain, etc..

University Policies
Per University Policy S16-9, university-wide policy information relevant to all courses, such as academic integrity, accommodations, etc. will be available on Office of Graduate and Undergraduate Programs’ Syllabus Information web page at http://www.sjsu.edu/gup/syllabusinfo/"
# Appendix A: PSYC211/Child Psychopathology, Spring 2018, Course Schedule

Please note that assignments and readings may change with one week’s notice or more.

<table>
<thead>
<tr>
<th>Week</th>
<th>Date</th>
<th>Didactic Topics, Readings, Assignments, Quizzes</th>
<th>In-class Activities Practice</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>1/24</td>
<td>Overview of Course, Biopsychosocial framework</td>
<td>Linh Vignettes (not graded)</td>
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<td></td>
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<td>F&amp;P: 1-2; Karam &amp; Sprenkle (2010)</td>
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<tr>
<td>2</td>
<td>1/31</td>
<td>General approaches to assessment of children</td>
<td>Interpreting test scores; interviewing kids?</td>
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<td>Linh Vignette due (practice, not graded but required to complete Final assignment)</td>
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<td>F&amp;P: 3; De los Reyes &amp; Kazdin (2005), focus on pp. 483-489; Ortiz et al. (2010); CBCL Website: aseba.org/schoolage.html</td>
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<tr>
<td>3</td>
<td>2/7</td>
<td>Attention-Deficit/Hyperactivity Disorder (ADHD) and ODD</td>
<td>Mini-Vignettes (including reward program practice)</td>
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<td>ADHD Criteria Quiz</td>
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<td>Vignette 1 due on Canvas</td>
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<td>ID/ASD/LD Criteria Quiz</td>
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<td>F&amp;P: Ch. 16 (maybe?) Mash &amp; Barkley chapter?</td>
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<td>4</td>
<td>2/14</td>
<td>Intellectual Disability (ID), Autism Spectrum Disorder (ASD), Learning Disabilities (LD)</td>
<td>Vignette 1 discussion</td>
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<td>Vignette 1 due on Canvas</td>
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<td>ID/ASD/LD Criteria Quiz</td>
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<td>F&amp;P: Chs. 11-12; DSM: ADHD, ODD</td>
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<td>ADHD Clinical Practice Guidelines (2011); Pfiffner &amp; Haack (2014); Steiner &amp; Ramsing (2007); Puckering (2009)</td>
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<td>5</td>
<td>2/21</td>
<td>Anxiety Disorders</td>
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<td>Separation Anxiety/Selective Mutism Criteria Quiz</td>
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<td>F&amp;P: Ch 6-8; DSM: 189-264; Connolly &amp; Bernstein (2007) Practice Parameter; Nilsen et al. (2013)</td>
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<td>6</td>
<td>2/28</td>
<td>Trauma and Stressor Related Disorders</td>
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<td>F&amp;P: Ch. 9, DSM: 265-290; Cohen et al (2010), Practice Parameter; Webb et al. (2014); Yasinski et al., (2016) article;</td>
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<td>Vignette 2 (Sep Anx) Due</td>
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<td>7</td>
<td>3/7</td>
<td>Depression, Bipolar Disorder, and Disruptive Mood Dysregulation Disorder</td>
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<td>DMDD Criteria Quiz</td>
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<td>F&amp;P: 4-5; DSM: 123-189, DMDD; Birmaher et al. (2007); McClellan et al. (2007); Copeland et al (2013)</td>
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<td>8</td>
<td>3/14</td>
<td>Conduct Disorder (CD); Adolescent Substance Use</td>
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<td>CD Criteria Quiz</td>
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<td>Vignette 3 (timed) due on Canvas</td>
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<td></td>
<td></td>
<td>F&amp;P: Ch. 11 &amp; 14, DSM: CD; CD reading</td>
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<td>Week</td>
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<td>Content</td>
<td>Notes</td>
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<td>9</td>
<td>3/21</td>
<td>Obsessive-Compulsive Spectrum Disorders&lt;br&gt;<strong>Criteria Quiz on Tic Disorders, Trichotillomania, Excoriation Disorder</strong>&lt;br&gt;F&amp;P: 9, 15; DSM: Tic Disorders, Obsessive-Compulsive and Related Disorders; Himle &amp; Capriotti (2016)</td>
<td>OCD Assessment and Exposure Practice&lt;br&gt;Mini Vignette</td>
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<td>10</td>
<td>4/4</td>
<td>Thought Disorders and Eating Disorders&lt;br&gt;F&amp;P: 13; M&amp;B: Ch 12; DSM-5: Review Psychotic Disorders; McClellan &amp; Stock (2013); Wunderink et al. (2013); Johns et al. (2004); Lock et al., (2007); Fairburn et al. (2003); Le Grange et al. (2016) article&lt;br&gt;Vignette 4 (timed) due on Canvas</td>
<td>REACH Guest Speaker?&lt;br&gt;Mini-vignettes</td>
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<td>11</td>
<td>4/11</td>
<td>Parent-Focused Interventions I; PCIT Modules 1-4; PCIT primer reading.</td>
<td>PCIT Intro and CDI (AKA, rapport and relationship building with kids)</td>
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<td>12</td>
<td>4/18</td>
<td>Parent-Focused Interventions II; PCIT Modules X-X; a couple of TO and compliance articles</td>
<td>PCIT PDI and Time-Out</td>
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<td>13</td>
<td>4/25</td>
<td>Reward-Based Interventions&lt;br&gt;Behavioral Pediatrics&lt;br&gt;<strong>Criteria Quiz on Encopresis, Enuresis</strong>&lt;br&gt;F&amp;P: 18 (sleep); DSM: Elimination disorders; Friman et al (2006); Kuhn (2014); PCIT Modules 1-4</td>
<td>Classroom Consultations&lt;br&gt;(Daily Report Cards)&lt;br&gt;Sleep Training</td>
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<td>14</td>
<td>5/2</td>
<td>Child-Focused Interventions I&lt;br&gt;DSM: 329-354; CC S 1-4; DRC readings</td>
<td>Coping Cat Session 1-4</td>
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<td>15</td>
<td>5/9</td>
<td>Child-Focused Interventions II&lt;br&gt;Gender Variance and Gender-Related Disorders; Sexual Orientation Development&lt;br&gt;Readings for SOGI&lt;br&gt;CC S 5-8; Child relaxation Materials</td>
<td>Coping Cat 5-8</td>
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<td>Final</td>
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<td>Final Vignette and Reflection due (Linh redux)</td>
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Appendix B: Program and Licensure Learning Outcomes

Upon successful completion of the MS in Clinical Psychology:

PLO1.1 – Students will demonstrate breadth of knowledge of a variety of psychotherapy theories and in-depth knowledge of one chosen theory of intervention.

PLO1.2 – Students will demonstrate knowledge of empirically supported clinical interventions and evidence ability to select treatments for individual clients given this literature.

PL02.1 – Students will demonstrate effective integration and communication of clinical case material.

PL02.2 – Students will demonstrate the ability to synthesize contextual and cultural variables into presentations of client materials.

PL02.3 – Students will effectively respond to queries about clinical material and engage in discussions about their clients with supervisors and peers.

PL02.4 – Students will be able to think and discuss cases other than their own, applying theories, principles, and relevant empirical findings to those cases.

PL03.1 – Students will demonstrate understanding of different assessment devices and strategies for assessing outcome over the course of treatment including standardized nomothetic and idiographic approaches.

PL04.1 – Students will demonstrate depth and breadth of understanding in areas including, but not limited to, psychotherapy theory, service delivery, ethics, assessment, research methods, family therapy, cultural diversity, psychopharmacology, and issues relevant to adult and child clinical populations. Students will be able to apply this knowledge to clinical cases.

PL05.1 – Students will demonstrate fulfillment of coursework and other pre-degree licensing requirements outlined by the Board of Behavioral Sciences.

This course meets the following Program Learning Outcomes: 1.1, 1.2, 2.1, 2.2, 2.3, 2.4, 3.1, 4.1.

Licensure Learning Outcomes (LLO)

Licensing requirements for academic coursework toward the MFT and/or LPCC will be met for this course in the following way:

LLO1: For the LPCC requirements, this course is designed to fulfill category: (H) Research and evaluation, including studies that provide an understanding of research methods, statistical analysis, the use of research to inform evidence-based practice, the importance of research in advancing the profession of counseling, and statistical methods used in conducting research, needs assessment, and program evaluation. per BPC Section 4999.12

1. LLO2: For the MFT requirements, this course includes instruction in Diagnosis, assessment, prognosis, and treatment of mental disorders, including severe mental disorders, evidence-based practices, psychological
testing, psychopharmacology, and promising mental health practices that are evaluated in peer-reviewed literature (BPC Section 4980.36(d)(2)(A))

This course will also cover aspects of the general MFT requirements that programs:

1. Integrate all of the following throughout its curriculum: (A) Marriage and family therapy principles, (B) The principles of mental health recovery-oriented care and methods of service delivery in recovery-oriented practice environments, among others, (C) An understanding of various cultures and the social and psychological implications of socioeconomic position, and an understanding of how poverty and social stress impact an individual’s mental health and recovery; (2) Allow for innovation and individuality in the education of marriage and family therapists; (3) Encourage students to develop the personal qualities that are intimately related to effective practice, including, but not limited to, integrity, sensitivity, flexibility, insight, compassion, and personal presence; and (4) Permit an emphasis or specialization that may address any one or more of the unique and complex array of human problems, symptoms, and needs of Californians served by marriage and family therapists.
Appendix C: Expectations for In-Class Conduct and Professional Communication

This is a graduate seminar, so I expect you to be attentive in meetings, participate in discussions, and limit other distractions. Most importantly, please be respectful of your classmates’ opinions, as this is a seminar course and we are likely to discuss topics for which students will have differing opinions. Also, if you discuss patient-related content in class, please be sure to protect that person’s confidentiality. Students are asked not to share these discussions outside of class.

In general, my expectation for students in class is that they participate actively, attentively, and respectfully. These issues are not typically a problem; that said, doing any of these will not be tolerated and will be grounds for dismissal from the class.

1. Be polite and respectful to the other people in the class, particularly when engaged in discussion. While I encourage an open discussion of many ideas, please refrain from using language that is prejudicial or hurtful to others.
2. Do not carry on conversations with others during class. (If you have a question or point to make, just say it so we can all hear it!)
3. Please turn off your cell phone for the time you are in class. If you need to receive an emergency call or monitor for an important message, let me know about it in advance. Never take a call and start talking during class.
4. Do not text message during class.
5. If you bring a laptop, please use it only for the purposes of the class (e.g., note-taking, referencing readings).
6. Attend to the class material. Do not work on any other course material during class, including studying for other exams.
7. Do not sleep during class.

Professional Communication Expectations (email)

1. In the Subject line, state what specific issue you are emailing about (e.g., exam 3, quiz 7, absence on 9/12/16).
2. Be clear in your statement about what you are asking for or of what you are informing the reader.
3. Consider your request before you make it. If you believe you can make that request in a professional way and support your reasons for your request, please ask. If you have overslept, are tired, hungover, etc., please do not make requests based on those reasons.
4. Use a polite and respectful tone.
5. Use complete sentences.
6. Do not use abbreviations for words that are often used in text messages.
7. Use upper and lower case letters.
8. Be sure to use correct grammar and spelling in your message.
9. If you need a reply to the email you have sent, please request that clearly. I strongly encourage you to request a response back if you send something that needs to be graded in a timely matter to be certain it was received.
10. If you do not hear back within a reasonable amount of time from the person you sent the email to, politely request a response and resend the original message (you can use the forward function here).
**Supplemental Reading List**


