## **Subject Description Form**

Subject Code	APSS531					
Subject Title	Mental Health Practice					
Credit Value	3					
Level	5					
Pre-requisite / Co-requisite/ Exclusion	Nil					
Assessment Methods	100% Continuous Assessment  1. Seminar Presentation	Individual Assessment	Group Assessment			
	Reflection on mental health issues	10 %	30 70			
	2. Term Paper	60 %	0 %			
	<ul> <li>The grade is calculated according to the percentage assigned;</li> <li>The completion and submission of all component assignments are required for passing the subject; and</li> <li>Student must pass all the components if he/she is to pass the subject.</li> </ul> The subject embraces a multidimensional perspective in understanding and articulating					
Objectives	psychosocial interventions with adult clients with various types of mental illness, particular attention will be focused on working with clients with schizophrenia and depression. Students are equipped with macro as well as micro orientation in building up their practice competence in working with clients with mental illness.					
Intended Learning	Upon completion of the subject, students will be able to:					
Outcomes	<ul><li>a. acquire the international trends and contemporary issues in mental health practice;</li><li>b. recognize, articulate and evaluate the values, role, skills and intervention, in professional mental health practice, either in the clinical team or community;</li></ul>					
	c. understand psycho-social implications of mental illness and apply the relevant research findings in practical use;					
	d. acquire relevant knowledge about the recent development in multidisciplinary work and managerial trend in the mental health sessions;					
	e. develop practice competence, to develop skills and explore alternatives or innovative strategies in dealing with people with mental health problems;					

f. have a critical understanding on the ideologies on mental health practice.

### Subject Synopsis/ Indicative Syllabus

1. Critical Review of Concepts in Mental Health and Psychiatric Rehabilitation

Concepts of mental health & mental disorder

Concepts of psychiatric rehabilitation

Implications to psychiatric rehabilitation in Hong Kong

2. The International Trends of Mental Health Practice & Services

From myth to institutional care

From institutional care to de-institutionalization

From de-institutionalization to community care

Managed Care and Evidence Based Practice

3. Current Scene and Future Development of Mental Health Services in Hong Kong

Dilemmas and Challenges in mental health service in Hong Kong.

4. Social Control vs Psychosocial Integration: The Dilemma & Struggle of Humanistic Professional Practice in Psychiatric Setting

The value dilemma : patient vs person vs client

The identity crisis : social control agent vs humanizing agent The role ambiguity : role institutionalization of professional practice

role in multidisciplinary team work

The struggle in practice: institutionalized specialized training vs normalized

generic community integration

5. Recovery model and holistic mental health care

Symptom diagnosis vs holistic assessment

Skills and behavioural assessment

Problem assessment and need assessment

Strengths based approach in assessment and mental health practice

Recovery model and its application in local context

User involvement and co-production

Strengths Based Assessment

Strengths Based Client Work Transaction

Developing Clients and Environmental Strengths for Recovery

Strengths Based Assessment.

- 6. Family Caregiving and Family Intervention with Clients with Mental Illness
- 7. Critical Review of Psychosocial Interventions with Clients with Mental Illness

Third wave in psychotherapies for emotional disorders

Handling emergencies

Suicide and its management

Therapeutic community and group milieu

Psychoeducation and community education

	8. Critical review of psychiatry Diagnostic assessment and treatment Side effects of pharmacotherapy Non-compliance							
Teaching/ Learning Methodology	By means of a reflective approach in teaching, students are required to articulate a multi-dimensional perspective in Mental Health practice. Seminars in form of mini-surveys are used to make students aware of various contextual constraints in actual practice. Apart from lectures and seminars, reading materials are also allocated for students to enhance their knowledge in up-front research & literature in Mental Health practice. Also, students are encouraged to bring forth their own cases from their professional practice for discussion and illustration so that they can integrate what they have learnt in this subject in actual application.							
Assessment Methods in Alignment with Intended Learning	Specific assessment methods/tasks	% weighting	be ass		ed subject learning outcomes to essed (Please tick as riate)			
Outcomes			a	b	с	d	e	f
	Seminar Presentation	30%	√	V	√	V	<b>V</b>	V
	2. Reflection of mental health issues	10%	√	√	<b>V</b>	<b>V</b>	√	√
	3. Term Paper	60%	√	<b>V</b>	1	<b>V</b>	√	√
	Total	100 %						
	Explanation of the appropriateness of the assessment methods in assessing the intended learning outcomes:  Assessment will be based on:  (1) student will form groups and give a seminar presentation on a topic suggested by instructor, or chosen by the students with instructor's approval.  (2) Individual are required to write a 50 to 100 words of reflections about their new learning and comments on each topic of the lecture.  (3) In the term paper, students are required to examine, discuss and analyze related issues in mental health practice.							
Student Study	Class contact:							
Effort Expected	■ Lecture				27 Hrs.			
	Seminar and Tutorial				12 Hrs.			
	Other student study effort:							
	■ Reading						52	Hrs.

■ Group discussion outside class	24 Hrs.
Total student study effort	115 Hrs.

# Reading List and References

### **Essential**

- American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders: DSM-5*. American Psychiatric Association.
- Barlow, D.H., et al. (2018). Unified protocol for transdiagnostic treatment of emotional disorders, therapist guide (2<sup>nd</sup> ed.). Oxford University Press.
- Barrett, L.F. (2016). *How emotions are made: The secret life of the brain*. Houghton Mifflin Harcourt.
- Bentall, R. P., de Sousa, P., Varese, F., Wickham, S., Sitko, K., Haarmans, M., & Read, J. (2014). From adversity to psychosis: pathways and mechanisms from specific adversities to specific symptoms. *Social psychiatry and psychiatric epidemiology*, 49, 1011-1022.
- Corcoran, J. & Walsh, J.M. (2011). *Mental health in social work: A casebook on diagnosis and strengths based assessments.* (2<sup>nd</sup> ed.). Pearson.
- Davidson, L, Tondora, J. & Lawless, M.S. et al (2009). *Practical guide to recovery-oriented practice: Tools for transforming mental health care*. Oxford University Press.
- Harrison, P., Cowen, P., Burns, T., & Fazel, M. (2017). *Shorter Oxford Textbook of Psychiatry*, 7<sup>th</sup> ed. Oxford University Press.
- Saleebey, D. (Ed.). (2013). *The strengths perspective in social work practice*. Pearson Education.
- Yalom, I.D., & Yalom, M. (2022). A matter of death and life: Love, loss and what matters in the end. Piatkus.
- Yip, K.S. (Ed.). (2008). Strength-based perspective in working with clients with mental illness: A Chinese cultural articulation. New York: Nova Science Publishers.

### **Supplementary**

- Beresford, P. & Carr, S. (2012). *Social care, service users and user involvement*. Jessica Kingsley.
- Bhugra, D., & McKenzie, K. (2010). Expressed emotion across cultures. In Bhattacharya, R., Cross, S., & Bhugra, D. (Eds.). *Clinical topics in cultural psychiatry (pp.52-67)*. The Royal College of Psychiatrists.
- Franci, A.P. (Ed). (2014). Social work in mental health: Contexts and theories for Practice. SAGE Inc.
- Gould, N. (2010). Mental Health Social Work in Context. Routledge.
- Kim, S. Y., De Vries, R. G., & Peteet, J. R. (2016). Euthanasia and assisted suicide of patients with psychiatric disorders in the Netherlands 2011 to 2014. *JAMA Psychiatry*, 73(4), 362-368.
- Lefley, H.P. (2009). Family psychoeducation for serious mental illness. Oxford University Press.
- Oliver, K., Kothari, A., & Mays, N. (2019). The dark side of coproduction: do the costs outweigh the benefits for health research? *Health Research Policy and Systems*, 17(1), 1-10.
- Palmer, V. J., Weavell, W., Callander, R., Piper, D., Richard, L., Maher, L., ... & Robert, G. (2019). The Participatory Zeitgeist: an explanatory theoretical model of change in an era of coproduction and codesign in healthcare improvement. *Medical humanities*, 45(3), 247-257.
- Proot, C. & Yorke, M. (2021). *Challenges and choices for patient, carerand professional at the end of life: Living with uncertainty.* Routledge.

Woods, A., Jones, N., Alderson-Day, B., Collard, F., & Fernyhough, C. (2015). Experiences of hearing voices: analysis of a novel phenomenological survey. *Lancet Psychiatry*, 2, 323-331. 新生精神康復會(2016) 改變幻聽的世界, 經濟日報出版