

## Subject Description Form

<b>Subject Code</b>	APSS5771														
<b>Subject Title</b>	Psychopathology: Holistic and Humanistic Orientations														
<b>Credit Value</b>	3														
<b>Level</b>	5														
<b>Pre-requisite / Co-requisite/ Exclusion</b>	Nil														
<b>Assessment Methods</b>	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 40%;">100% Continuous Assessment</th> <th style="width: 30%;">Individual Assessment</th> <th style="width: 30%;">Group Assessment</th> </tr> </thead> <tbody> <tr> <td>1. Short Quiz</td> <td style="text-align: center;">20%</td> <td style="text-align: center;">0%</td> </tr> <tr> <td>2. Term Paper</td> <td style="text-align: center;">50%</td> <td style="text-align: center;">0%</td> </tr> <tr> <td>3. Seminar Presentation</td> <td style="text-align: center;">0%</td> <td style="text-align: center;">30%</td> </tr> </tbody> </table> <ul style="list-style-type: none"> <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>			100% Continuous Assessment	Individual Assessment	Group Assessment	1. Short Quiz	20%	0%	2. Term Paper	50%	0%	3. Seminar Presentation	0%	30%
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<b>Objectives</b>	<p>This subject embraces a humanistic and holistic orientation in perceiving and interpreting mental illness. Apart from learning diagnosis, etiology and prevalence of various types of mental illness, students are equipped with a humanistic and holistic grasp of various perspectives, in particular clients' subjective experiences in articulating and understanding persons with mental illness. They are able to recognize, analyze, articulate as well as criticize various perspectives in perceiving mental illness.</p>														
<b>Intended Learning Outcomes</b>	<p>Upon completion of the subject, students will be able to:</p> <ol style="list-style-type: none"> <li>a. possess knowledge of about etiology, prevalence, course and cause of different types of mental illness, particular attention will be focused on psychosis, affective disorders, personality disorders, substance abuse and anxiety disorders;</li> <li>b. develop interest and a critical articulation of various perspectives in describing, explaining and treating mental illness;</li> <li>c. nurture a holistic and humanistic understanding towards persons with mental illness;</li> <li>d. understand and critically articulate roles of various professionals in handling clients with mental illness</li> </ol>														
<b>Subject Synopsis/ Indicative Syllabus</b>	<ol style="list-style-type: none"> <li>1. Etiology, pharmacology, prevalence and course of mental illness               <ol style="list-style-type: none"> <li>a. Schizophrenia and psychosis</li> <li>b. Major depressive disorder</li> <li>c. Anxiety disorders</li> <li>d. Addictive disorders</li> <li>e. Personality disorders</li> </ol> </li> <li>2. Perspectives and concepts of mental illness               <ol style="list-style-type: none"> <li>a. Bio-medical perspective</li> </ol> </li> </ol>														

	<ul style="list-style-type: none"> <li>b. Psychoanalytic perspective</li> <li>c. Phenomenological and existential perspective</li> <li>d. Cognitive and behavioral perspective</li> <li>e. Interpersonal perspective</li> </ul> <p>3. Subjective experiences of persons with mental illness</p> <ul style="list-style-type: none"> <li>a. Subjective experiences in manifestation of symptoms</li> <li>b. Subjective experiences in diagnosis</li> <li>c. Subjective experiences in treatment and rehabilitation</li> </ul> <p>4. The meaningfulness of symptoms in mental illness</p> <ul style="list-style-type: none"> <li>a. Meaningfulness in terms of needs and drives</li> <li>b. Meaningfulness in terms of unresolved emotional complexes</li> <li>c. Meaningfulness in terms of life experiences and personal beliefs</li> <li>d. Meaningfulness in terms of cultural, social and family contexts</li> </ul> <p>5. Professional articulation of humanistic and holistic orientation: Dynamics and dilemmas</p> <ul style="list-style-type: none"> <li>a. Diagnosis vs Understanding</li> <li>b. Control vs Empathy</li> <li>c. Categorization vs Communication</li> <li>d. Deficits vs Coping</li> </ul> <p>6. Living and Coping with Symptoms of Mental Illness</p>
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<b>Teaching/ Learning Methodology</b>	<p>The participation of students in both lectures and seminars are crucial for learning in this subject. By means of a reflective approach in teaching, students are required to articulate a holistic and humanistic understanding towards clients with mental illness. Apart from knowing symptoms, etiology and courses of various types of mental illnesses, they are required to acknowledge clients' own feelings, experiences, needs and unresolved past traumas behind symptoms and disorders through learning clients' subjective experiences through lectures, case studies and preparing mini-survey seminars. They are equipped with a critical mind to appreciate, analyze and criticize the pros and cons of various perspectives in understanding and explaining mental illness. A bio-psycho-social articulation of mental illness will enable them to nurture a humanistic and holistic in understanding, communicating and working with persons with mental illness.</p>
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<b>Assessment Methods in Alignment with Intended Learning Outcomes</b>	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">Specific assessment methods/tasks</th> <th rowspan="2">% weighting</th> <th colspan="4">Intended subject learning outcomes to be assessed (Please tick as appropriate)</th> </tr> <tr> <th>a</th> <th>b</th> <th>c</th> <th>d</th> </tr> </thead> <tbody> <tr> <td>1. Short Quiz</td> <td>20 %</td> <td style="text-align: center;">√</td> <td style="text-align: center;">√</td> <td style="text-align: center;">√</td> <td style="text-align: center;">√</td> </tr> <tr> <td>2. Term Paper</td> <td>50 %</td> <td style="text-align: center;">√</td> <td style="text-align: center;">√</td> <td style="text-align: center;">√</td> <td style="text-align: center;">√</td> </tr> <tr> <td>3. Seminar Presentation</td> <td>30 %</td> <td style="text-align: center;">√</td> <td style="text-align: center;">√</td> <td style="text-align: center;">√</td> <td style="text-align: center;">√</td> </tr> <tr> <td>Total</td> <td>100 %</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table> <p>Explanation of the appropriateness of the assessment methods in assessing the intended learning outcomes:</p> <p>Assessment will be based on seminar presentation chosen by the students and their participation in class. Students are also required to complete a quiz and an individual term paper for assessment. In the term paper, the students needed to connect the classroom</p>	Specific assessment methods/tasks	% weighting	Intended subject learning outcomes to be assessed (Please tick as appropriate)				a	b	c	d	1. Short Quiz	20 %	√	√	√	√	2. Term Paper	50 %	√	√	√	√	3. Seminar Presentation	30 %	√	√	√	√	Total	100 %				
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	teaching in analyzing the experiences of a person with mental illness with the implications to intervention and practice. In the term paper, they are required to examine, discuss and analyze related issues in psychopathology especially in facing the dilemmas of social control and humanistic concern.	
<b>Student Study Effort Expected</b>	Class contact:	
	▪ Lecture	27 Hrs.
	▪ Seminar and Tutorial	12 Hrs.
	Other student study effort:	
	▪ Reading	52 Hrs.
	▪ Group discussion outside class	12 Hrs.
	▪ Written assignment	20 Hrs.
	Total student study effort	123 Hrs.
<b>Reading List and References</b>	<p><b><u>Essential</u></b></p> <p>American Psychiatric Association. (2022). <i>Diagnostic and statistical manual of mental disorders: DSM-5-TR</i>. American Psychiatric Association.</p> <p>Breggin, P. R. (1994). <i>Toxic psychiatry</i>. St. Martin's Press.</p> <p>Karp, D.A. (1996). <i>Speaking of sadness: Depression, disconnection and the meanings of illness</i>. Oxford University Press.</p> <p>Laing, R. D. (1969). <i>The divided self</i>. Pantheon Books.</p> <p>Read, J., Mosher, L.R., &amp; Bentall, R.P. (Eds.). (2004). <i>Models of madness: Psychological, social and biological approaches to schizophrenia</i>. Brunner-Routledge.</p> <p>Yip, K. S. (2007). <i>Clinical practice for people with schizophrenia: A humanistic and empathetic encounter</i>. Nova Science Publishers.</p> <p>Yip, K.S. (2012). <i>Clinical practice with Chinese persons with severe depression: A normalized, integrated, communicative, holistic, and evolving hope (NICHE) recovery</i>. Nova Science Publishers.</p> <p><b><u>Supplementary</u></b></p> <p>Donahue, A. B. (2000). Riding the mental health pendulum: Mixed messages in the era of neurology and self help movement. <i>Social Work, 45</i>(5), 427-437.</p> <p>Flack, W. F., &amp; Laird, J. D. (Eds.). (1998). <i>Emotions in psychopathology: Theory and research</i>. Oxford University Press.</p> <p>Fonagy, P. &amp; Target, M. (2003). <i>Psychoanalytic theories: Perspectives from developmental psychopathology</i>. Brunner-Routledge.</p> <p>Gray, S.W. (2016). <i>Psychopathology A competency-based assessment model for social worker</i> (4<sup>th</sup> edition). Cengage Learning.</p> <p>Horowitz, L.M. (2004). <i>Interpersonal foundations of psychopathology</i>. American Psychological Association.</p> <p>Kirk, S.A. (Ed.). (2005). <i>Mental disorders in the social environment: Critical perspectives</i>. Columbia.</p>	

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- Romme, M.A.J., & Escher, A.D. (1989). Hearing voices. *Schizophrenia Bulletin*, 22, 209-210.
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- Strauss, J.S. (1994). The person with schizophrenia as a person II: Approaches to the subjective and complex. *British Journal of Psychiatry*, 164(suppl. 23), 103- 107.
- Tew, J. (Ed.). (2013). *Social perspective in mental health: Developing social models to understand and work with mental distress*. Jessica Kingsley.
- Tseng, W. S., & Wu, Y. H. (Eds.). (1985). *Chinese culture and mental health*. Academic Press.
- Yip, K.S. (1998). Humanistic understanding of psychotic experience. *Breakthrough*, 2(1), 7 – 19.
- Yip, K.S. (2004). The importance of subjective psychotic experiences: Implications on psychiatric rehabilitation of people with schizophrenia. *Psychiatric Rehabilitation Journal*, 28(1), 48-54.
- Yip, K.S. (2004). Understanding subjective depressive experiences of adolescents: Its implications to intervention. *Hong Kong Journal of Paediatrics*, 9, 354-360.