

Subject Description Form

Subject Code	APSS531														
Subject Title	Mental Health Practice														
Credit Value	3														
Level	5														
Pre-requisite / Co-requisite/ Exclusion	Nil														
Assessment Methods	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%;">100% Continuous Assessment</th> <th style="width: 25%;">Individual Assessment</th> <th style="width: 25%;">Group Assessment</th> </tr> </thead> <tbody> <tr> <td>1. Seminar Presentation</td> <td style="text-align: center;">0 %</td> <td style="text-align: center;">20 %</td> </tr> <tr> <td>2. Attachment Report</td> <td style="text-align: center;">30 %</td> <td style="text-align: center;">0 %</td> </tr> <tr> <td>3. Term Paper</td> <td style="text-align: center;">50 %</td> <td style="text-align: center;">0 %</td> </tr> </tbody> </table> <ul style="list-style-type: none"> The grade is calculated according to the percentage assigned; The completion and submission of all component assignments are required for passing the subject; and Student must pass all the components if he/she is to pass the subject. 			100% Continuous Assessment	Individual Assessment	Group Assessment	1. Seminar Presentation	0 %	20 %	2. Attachment Report	30 %	0 %	3. Term Paper	50 %	0 %
100% Continuous Assessment	Individual Assessment	Group Assessment													
1. Seminar Presentation	0 %	20 %													
2. Attachment Report	30 %	0 %													
3. Term Paper	50 %	0 %													
Objectives	<p>The subject embraces a multidimensional perspective in understanding and articulating 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.</p>														
Intended Learning Outcomes	<p>Upon completion of the subject, students will be able to:</p> <ol style="list-style-type: none"> a. acquire the international trends and contemporary issues in mental health practice; b. recognize, articulate and evaluate the values, role, skills and intervention, in professional mental health practice, either in the clinical team or community; 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	<ol style="list-style-type: none"> 1. Critical Review of Concepts in Mental Health and Psychiatric Rehabilitation <ul style="list-style-type: none"> Concepts of mental health & mental disorder Concepts of psychiatric rehabilitation 														

	<p>Implications to psychiatric rehabilitation in Hong Kong Applications and interpretation in Chinese cultural context</p> <ol style="list-style-type: none"> 2. The International Trends of Mental Health Practice & Services <ul style="list-style-type: none"> From myth to institutional care From institutional care to de-institutionalization From de-institutionalization to community care Community care vs re-institutionalization Managed Care and Evidence Based Practice 3. Current Scene and Future Development of Mental Health Services in Hong Kong and in China <ul style="list-style-type: none"> Current Scene and Future development of mental health services in China and Hong Kong Dilemmas and Challenges in mental health service in China and Hong Kong. 4. Managerialism and Consumerism : Dilemma in Health Care Management in the Mental Health Services <ul style="list-style-type: none"> Health economics and the cost of mental illness Quality assurance and the quality of life of mental patients Medical dominance and consumer participation in mental health services Civic commitment and right of mental patients 5. Social Control vs Psychosocial Integration: The Dilemma & Struggle of Humanistic Professional Practice in Psychiatric Setting <ul style="list-style-type: none"> 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 6. Rights, Legislation and Advocacy <ul style="list-style-type: none"> The Principles for Protection by United Nations General Assembly Psychiatric Abuse and Political Control Advocacy and Empowerment Controversies in Forensic Psychiatry 7. Phenomenological and Empathetic Communication with Clients with Mental Problems <ul style="list-style-type: none"> The subjective paradigm of mental illness The ego impairment Subjective touch of feeling Empathetic understanding Reality orientated communication 8. Holistic Assessment <ul style="list-style-type: none"> Symptom diagnosis vs holistic assessment Skills and behavioural assessment Problem assessment and need assessment Hermeneutic mutual interpretation in assessment 9. A Strengths Based Orientation in Working with Clients with Mental Illness <ul style="list-style-type: none"> Strengths Based Assessment Strengths Based Client Work Transaction Developing Clients and Environmental Strengths for Recovery Strengths Based Assessment. 10. Skill Training and Vocational Rehabilitation
--	--

	<p>11. Case Management for Clients with Mental Illness</p> <p>12. Family Caregiving and Family Intervention with Clients with Mental Illness</p> <p>13. Critical Review of Psychosocial Interventions with Clients with Mental Illness Dimensions of psychotherapies Handling emergencies Therapeutic community and group milieu Psychoeducation and community education</p> <p>14. Informal Community Care Formal and informal community care Mutual aid groups and peer-psychotherapy Networking</p> <p>15. Promotion of Mental Health and Well-being in Adulthood</p> <p>16. Holistic and Normalized Integration of Clients with Mental Illness</p>																																														
<p>Teaching/ Learning Methodology</p>	<p>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.</p>																																														
<p>Assessment Methods in Alignment with Intended Learning Outcomes</p>	<table border="1" data-bbox="437 1167 1477 1637"> <thead> <tr> <th rowspan="2">Specific assessment methods/tasks</th> <th rowspan="2">% weighting</th> <th colspan="6">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> <th>e</th> <th>f</th> </tr> </thead> <tbody> <tr> <td>1. Seminar Presentation</td> <td>20%</td> <td>√</td> <td>√</td> <td>√</td> <td>√</td> <td>√</td> <td>√</td> </tr> <tr> <td>2. Attachment Report</td> <td>30%</td> <td>√</td> <td>√</td> <td>√</td> <td>√</td> <td>√</td> <td>√</td> </tr> <tr> <td>3. Term Paper</td> <td>50%</td> <td>√</td> <td>√</td> <td>√</td> <td>√</td> <td>√</td> <td>√</td> </tr> <tr> <td>Total</td> <td>100 %</td> <td colspan="6"></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 an attachment report and a term paper. In the attachment report, the students need to attach to at least two different mental health service units for at least 2 sessions to observe and interact with both the workers and service users. They are then required to write a reflective report by applying the related ideologies. In the term paper, they are required to examine, discuss and analyze related issues in mental health practice.</p>	Specific assessment methods/tasks	% weighting	Intended subject learning outcomes to be assessed (Please tick as appropriate)						a	b	c	d	e	f	1. Seminar Presentation	20%	√	√	√	√	√	√	2. Attachment Report	30%	√	√	√	√	√	√	3. Term Paper	50%	√	√	√	√	√	√	Total	100 %						
Specific assessment methods/tasks	% weighting			Intended subject learning outcomes to be assessed (Please tick as appropriate)																																											
		a	b	c	d	e	f																																								
1. Seminar Presentation	20%	√	√	√	√	√	√																																								
2. Attachment Report	30%	√	√	√	√	√	√																																								
3. Term Paper	50%	√	√	√	√	√	√																																								
Total	100 %																																														
	<p>Class contact:</p>																																														

Student Study 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.
Medium of Instruction	English	
Medium of Assessment	English	
Reading List and References	<p><u>Essential</u></p> <p>American Psychiatric Association. (2000). <i>Diagnostic and statistical manual of mental disorders: DSM-IV-TR</i>. Washington, DC: American Psychiatric Association.</p> <p>American Psychiatric Association. (2013). <i>Diagnostic and statistical manual of mental disorders: DSM-5</i>. Arlington, VA: American Psychiatric Association.</p> <p>Breggin, P.R. (1997). <i>The heart of being helpful: Empathy and the creation of a healing presence</i>. New York: Springer Pub.</p> <p>Morsher, L., Hendrix, V., & Fort, D. C. (2004). <i>Soteria: Through madness to deliverance</i>. US: Xlibris.</p> <p>Saleebey, D. (Ed.). (2013). <i>The strengths perspective in social work practice</i>. Upper Saddle River, N.J.: Pearson Education.</p> <p>Yip, K.S. (1998). A historical review of mental health service in Hong Kong. <i>International Journal of Social Psychiatry</i>, 44(1), 46–55.</p> <p>Yip, K.S. (Ed.). (2008). <i>Strength-based perspective in working with clients with mental illness: A Chinese cultural articulation</i>. New York: Nova Science Publishers.</p> <p>Yip, K.S. (2011). <i>Psychiatric social work: Beliefs, theory and practice (in Chinese)</i>. Taipei: Psychological Publishing Co. Ltd.</p> <p>Yip, K.S. (2012). <i>Emotionality and mental illness: A multi-dimensional model</i>. New York: Nova Science Publishers.</p> <p>Yip, K.S. (2014). <i>Emotionality and mental illness volume I: Blunt affect of schizophrenia and angry feelings of depression</i>. New York: Nova Science Publishers.</p> <p>Yip, K.S. (2014). <i>Emotionality and mental illness volume II: Sense of dissociative fear in post-traumatic stress disorder and loneliness mood in borderline personality disorder</i>. New York: Nova Science Publishers.</p> <p><u>Supplementary</u></p> <p>Cutler, D.L., Bevilacqua, J., & McFairland B.H. (2003). Four decades of community mental health: A symphony in four movement. <i>Community Mental Health Journal</i>, 39(5), 381-398.</p> <p>Goldman, H., & Dixon, L. (2004). Forty years of progress in community mental health: The role of evidence based practices. <i>Administration and Policy in Mental Health</i>, 31(5), 381-392.</p> <p>Hong Kong Government. (1989). <i>Laws of Hong Kong. Chapter 136, Mental health ordinance</i>. Hong Kong: Government Printer.</p>	

- Lefley, H.P. (1996). *Family caregiving in mental illness*. Thousand Oaks, Calif.: Sage Publications.
- Liberman, R.P. (Ed). (1992). *Handbook of psychiatric rehabilitation*. New York: Macmillan Pub. Co.
- Person V. (1995). *Mental health care in China*. Gaskell: The Royal College of Psychiatrists.
- Sadler, J.Z., Wiggill, O.P., & Schwartz, M.D. (Eds.). (1994). *Philosophical perspectives on psychiatric diagnostic classification*. Baltimore, Md.: The Johns Hopkins University Press.
- Tseng, W.S. & Wu, D.Y.H. (Eds.). (1985). *Chinese culture & mental health*. Orlando: Academic Press.
- Yip, K.S. (1991). *Contemporary Issues of Mental Health in Hong Kong (in Chinese)*. Hong Kong: Kam Ling Publisher.
- Yip, K.S. (1999). Normalized vocational counselling for clients with schizophrenia. *International Journal of Mental Health*, 28(1), 89–100.
- Yip, K.S. (2001). Informal community care for mental health consumers in Hong Kong. *Psychiatric Rehabilitation Journal*, 25(1), 69 – 73.
- Yip, K.S. (2002). Sullivan’s approach to inner psychotic experiences: A case illustration. *Clinical Social Work Journal*, 30(2), 245-263.
- Yip, K.S. (2003). Traditional Chinese religious beliefs and superstitions in delusions and hallucinations of Chinese schizophrenic patients. *International Journal of Social Psychiatry*, 49(20), 97–111.
- Yip, K.S. (2004). Political dominance of mental health services in the People’s Republic of China. *Administration and Policy in Mental Health*, 31(6), 495-502.
- Yip, K.S. (2007). *Mental health service in the People's Republic of China: current status and future developments*. New York: Nova Science Publishers.
- Yip, K.S., & Gao, W.H. (Eds.). (2012). *Mental health and social work in China: Challenge and future development*. Beijing: Social Sciences Academic Press (China)
- Yip, K.S. (2013). *Social work practices in Chinese culture: conceptualization and implementation*. New York: Nova Science Publishers.