## The University of Kansas School of Social Welfare

#### INTEGRATIVE COURSE: MASTER SYLLABUS

SW 832: Social Work in Health and Mental Health

**Prerequisite:** Advanced Level MSW student

**Credit Hours:** 3

## I. COURSE RATIONALE

#### A. How the Course Relates to the School's Mission.

Social work practices are, in part, shaped by their contexts. All practitioners must be willing and able to adapt basic purposes, knowledge, values and skills for application in specific contexts. The mission of the University of Kansas, School of Social Welfare is to educate students, conduct scholarly inquiry and perform community service in order to promote an approach to social work practice that advances the empowerment and well being of individuals and communities.

Consistent with the mission of the School, in the Social Work in Health and Mental Health course, students will be able to demonstrate an integration of policy, research and practice in the particular areas of clinical practice, which occur in health and mental health settings. This knowledge base in both settings is integrative in that it cuts across policy, research, and human behavior. The expected result is for students to know how to actively and appropriately perform professional social work roles in organizations created to serve specific populations. Students enrolled in the Social Work in Health and Mental Health course will have a complementary advanced field practicum.

#### B. How this Course Links with Other Courses in the Curriculum

Social Work 832 builds on generalist practice, human behavior in the social environment, policy and research courses mastered in the foundation year of the program. At the advanced level, the course provides students with the opportunity to integrate and apply knowledge gained from other clinical concentration courses and their complimentary advanced level practicum.

Students will continue their examination of client problems within the context of the person and environment with specific attention to health and mental health agency settings. Emphasis on micro, mezzo and macro systems introduced in the generalist perspective will enhance integration of assessment, goal setting and intervention tasks. Students will strengthen engagement, assessment, planning, goal setting, interventions and evaluation skills as they apply to direct and indirect practice with persons in health and mental health settings. Support from individual and community human behavior courses will provide a knowledge base for examining normal developmental stages of persons with emphasis on strengths and challenges experienced within the family, the work environment, and the community. Policy content will be infused throughout the course as we examine specific laws and programs that affect services for health/mental health care, health services, and mental health programming for adults. Finally, knowledge of research will be strengthened as students critique and apply empirically based intervention strategies to their work.

#### C. How this Course Prepares Participants to be Advanced Level Practitioners

This course is designed to provide social work students with substantive knowledge in the Health and Mental Health areas of practice. Substantive knowledge includes 1) implications of the social, psychological, spiritual, economic, political, cultural, and biological variables (2) results of recent research which impacts interventions with a range of clients, (3) specific federal/state/local policies and programs, and how these policies and programs may impede or enhance social and economic justice for clients served, and (4) special attention is given to practice with diverse groups of clients, based on age, race, gender, sexual orientation, ability, culture and other distinguishing characteristics.

#### D. What This Course Covers

The course content includes the nature of current program designs, the range of health and mental health interventions with specific kinds of health/mental health conditions; and research documenting the efficacy of various primary, secondary, and tertiary health interventions and programs. In addition, various perspectives that affect the social worker's assessment and interpretation of health/mental health conditions are explored. For example, the influence of cultural factors, human diversity, labeling theory, social justice, empowerment, biomedical models of illness, social deviance, and stages of human development upon thoughts feelings and behavior will be discussed. The course emphasizes an ecological and strengths perspective, including the pros and cons of various ways of organizing and financing services, the philosophy of least restrictive forms of care, culturally competent practice, and the importance of measuring outcomes.

The rationale in individual instructors' syllabi should be exactly the same as in the master syllabus.

#### II. EDUCATIONAL OUTCOMES

By the end of the semester students will demonstrate knowledge of substantive areas of Health/Mental Health practice by:

- 1. Applying critical thinking skills and a critical perspective to the specific fields of health and mental health care. (Reflects Clinical Concentration Objectives 4, 5, 6)
- 2. Demonstrate the capacity to integrate research, policy, direct practice, and human behavior theory in considering issues central to the health/mental health practice. (Reflects Clinical Concentration Objectives 1, 4)
- 3. Identify, discuss, and analyze how research, ethics and social work values inform and define the best practices in health care and mental health settings. (Reflects Clinical Concentration Objectives 2, 3, 4, 5, 6, 7)
- 4. Analyze public policies, laws, and programs and the human values and social norms that shape them to determine their influence on goal setting, relationship development, and empowerment of clients at the direct service level. (Reflects Clinical Concentration Objectives 2, 3, 4, 5)
- 5. Explain how diversity issues manifest themselves in an array of health and mental health

- agency and institutional settings and how the attendant policies impact people of diverse backgrounds; leading to the development of culturally competent practice. (Reflects Clinical Concentration Objectives 2, 3, 4, 5)
- 6. Identify and discuss how the major themes of the school diversity, social justice, the strengths perspective, and a critical perspective apply to practice in health and/or mental health care settings. (Reflects Clinical Concentration Objectives 4, 6)
- 7. Compare and contrast the most common approaches for assessment and diagnosis in health care and mental health agencies, including the DSM IV. (Reflects Clinical Concentration Objectives 1, 4, 5)

The educational outcomes in individual instructors' syllabi should be exactly the same as in the master syllabus.

### III. CURRICULUM THEMES

The four themes that are foundational to the total curriculum of the School of Social Welfare are integrated throughout the *practice-centered approach* to secure the students' understanding of the concepts of empowerment and well-being. This course is practice-oriented because knowledge is applied to specific areas of practice in health and mental health settings. We define the themes are follows:

The *strengths perspective* is a humanistic, empowerment approach to social work practice in both health and mental health settings that recognizes, mobilized and supports the inherent strengths of individuals, families, neighborhoods, organizations and communities and operates on the assumption that all persons have untapped mental, physical, and emotional resources. Students are encouraged to extend their understanding of assessment, goal setting, design and selection of interventions, and evaluation practices in health and mental health practices, and to view themselves as collaborators in working with clients to achieve their chosen goals.

This course carries forth the School's commitment to the principles of securing *social justice* and honoring diversity through helping students develop an appreciation for multiculturalism, an awareness of how oppression limits human and community development, and how to foster economic and social justice that enables all persons to pursue their chosen goals. Students in the Social Work in Health and Mental Health course will examine and assess institutional policies, corresponding practice methods, and related research in accordance with these values.

Consistent with a *critical perspective*, students in the Social Work in Health and Mental Health course will be expected to engage in a deliberate and continuing examination of assumptions underlying the theories, methods and approaches used by social work in health and mental health settings through raising questions, reflecting upon and systematically evaluating and applying divergent theories and knowledge in these clinical settings.

Individual instructors' syllabi should be exactly the same as in the master syllabus

#### IV. THE LIBERAL ARTS PERSPECTIVE

The study of social work in health and mental health settings necessarily requires that students

draw on the following:

- Their knowledge of biological, social and behavioral sciences which provides the framework to understand the possible bearing that adults' physical, intellectual, social and emotional development has on their health and/or mental health statuses. Further, the study of persons from cultures different than one's own will emphasize variations in values.
- Their knowledge of economics, history and political science to understand the development of health/mental health policies, programs, and services provided to adults in our society.
- Their knowledge of ethics and philosophy that forms the foundation for an examination
  of their own values and enhances their understanding of social work values and the code
  of ethics.
- Throughout this course emphasis is placed on students' capacity to think and write clearly as well as to present oral arguments to support their positions. The course calls for students to be able to collect, analyze and synthesize knowledge from the social sciences and from the humanities in order to formulate appropriate responses to the complex problems found in practice in health and mental health settings.

Individual instructors' syllabi should be exactly the same as in the master syllabus

#### V. PROFESSIONAL PURPOSES AND VALUES

The person-environment focus is the basic framework for presenting the content of this course. Students are expected to demonstrate the ability to shift from the more typical person-oriented focus to one that reflects an ability to analyze human functioning in terms of both intrapsychic and environmental influences. In addition, the value assumptions of different theories, policies, and programs will be explored throughout this course and the implication of these assumptions on the professional assessment of client functioning will be discussed.

This is a practice/policy/research course on health and mental health. Consequently, the focus is on the strengths, capacities, and potentials of individuals and their environment — and on the political forces at play in the health care and mental health arenas. Public laws mandate the promotion of social justice, equal opportunity, inclusion, integration, individual rights and community responsibility, and we will spend time looking at these. Lecture, discussions, and written assignments demand the melding of these concepts in every aspect of learning.

Individual instructors' syllabi should be exactly the same as in the master syllabus

#### VI. PREPARATION FOR PRACTICE WITH DIVERSE POPULATIONS

Content on race, age, gender, sexual orientation, ability, culture and other distinguishing characteristics of populations service will be integral to this course, with examination of how membership in these groups influences health and mental health related issues and services. Content on these special populations will be included in both readings and lecture and students are expected to take this information into consideration in completion of all assignments in order to develop a culturally competent practice framework.

Individual instructors' syllabi should be exactly the same as in the master syllabus

## VII. TOPICS

## Required:

- 1. Historical roots of Health and Mental Health including the policy foundations for health / mental health care and systems.
- 2. Students are provided with bio-medical, psychodynamic, socio-cultural, behavioral/learning, and the strengths perspectives of mental illness and mental health, and how these perspectives are used in both health and mental health settings
- 3. Cycles of reform: the evolution of community health and mental health systems, the history of the government's response to people with medical and psychiatric disorders is reviewed.
- 4. Consumer Movement in Public Mental Health. "Consumerism" is examined. Mental health needs from the perspective of clients (consumers) and family members are considered.
- 5. Epidemiology and prevention practices in health and mental health settings.
- 6. Legislative Sanction for Community Health and Mental Health Services. Political forces have been instrumental in molding and shaping public policy and programmatic arrangements. Students will be able to identify legislation that provides sanction for funding and particular means of service delivery for both mental health services and health services for low income children and families. Special attention is given to the Kansas Mental Health Reform Act.
- 7. The organizational context of health and mental health service delivery is examined, including the manner in which public and private health and mental health services are organized, delivered and funded.
- 8. Accountability: Professional Responsibility. Ethical, moral, and potential legal conflicts in practice are examined. Specifically, documentation requirements, duty to warn, right to refuse treatment, right to treatment by the least restrictive method, confidentiality, informed consent, and self-determination are considered.
- 9. Interdisciplinary practices in health care and mental health settings.
- 10. Culturally sensitive and informed practice in health and mental health settings with Ethnic Minorities

**Indigenous Peoples** 

Disabled

Persons w/ Different Sexual Orientation

Aging

Women

Children/Adolescents

Seriously and Persistently Mentally III

**Dual Diagnosis Population** 

Women

Men

Homeless

11. Best practices in health and mental health settings.

#### Recommended

1. Case management in Health and Mental Health. Material is reviewed regarding the use of case management with at-risk populations.

- 2. The Organizational Context of Health and Community Mental Health Services. The manner in which public and private health and mental health services are organized, delivered and funded is examined. Specifically, Title XIX, ADAMHA grants, and private insurance provisions are explored.
- 3. Changing concepts of biology and environmental influences
- 4. Forensic services: involuntary commitment; voluntary commitment; outpatient commitment; client rights including right to refuse treatment; competency proceedings; sanity determinations; determination of least restrictive interventions
- 5. Professional obligations (duties, responsibilities, record-keeping, confidentiality / privacy)
- 8. Impaired mental health professionals
- 9. Special issues in health and mental health policy, research, and practice
  - a. spirituality,
  - b. policy, practice
- 10. The future of social work in health and mental health care

Individual instructors' syllabi should provide a topical outline for the course and provide adequate information to determine where and when the required topics are being covered

#### VIII. RECOMMENDED READINGS

#### **Texts**

- Moniz, C. & Gorin, S. (2007). *Health and Health Care Policy: A Social Work Perspective*, 2<sup>nd</sup> *Edition*. Boston, MA: Allyn & Bacon
- Sands, R. (2001). Clinical Social Work Practice in Behavioral Mental Health. A Postmodern Approach to Practice with Adults. Boston: Allyn & Bacon.
- Veeder, N.W. and Peebles-Wilkins, W. (2001). Managed *Care Services. Policy, Programs, and Research*. New York: Oxford University Press.

Individual instructors must either select one of the texts listed or obtain approval from the faculty mentor for an alternative text

#### Books (supplementary to text)

- Abraham, L. K. (1994). *Mama Might be Better off Dead: The Failure of Health Care in Urban America*. Chicago: The University of Chicago Press.
- Fadiman, A. (1998). The Spirit Catches You and You Fall Down: A Hmong Child, Her American Doctors, and the Collision of Two Cultures. New York: Farrar, Straus & Giroux.
- Jamison, K. R. (1995). An Unquiet Mind: A Memoir of Moods and Madness. New York: Vintage Books.1

#### **Articles**

- Abramson, J. S. & Mizrahi, T. (1996). When social workers and physicians collaborate: Positive and negative interdisciplinary experiences. *Social Work, 41*(3), 270-281.
- Abramson, J. S. (1990). Enhancing patient participation: Clinical strategies in the discharge

- planning process. Social Work in Health Care, 14(4), 53-71.
- Auerswald, E. H. (1985). Thinking about thinking in family therapy. *Family Process*, 24(1), 1-12.
- Callahan, J. (1994). The ethics of assisted suicide. Health & Social Work, 19(4), 237-244.
- Connolly, L. (1996). Long-term care and hospice. The special needs of older gay men and lesbians. *Journal of Gay & Lesbian Social Services*, *5*(1), 77-91.
- Corrigan, P. (2007). How clinical diagnosis might exacerbate the stigma of mental illness. *Social Work*, 52(1), pp. 31 -37.
- Cousins, N. (1976). Anatomy of an illness (as perceived by the patient). *The New England Journal of Medicine*, 295(26), 1458-1463. Also Chapter 1 in N. Cousins (1979). *Anatomy of an Illness*. New York: Bantam Books.
- Davidson, J. R. & Davidson, T. (1996). Confidentiality and managed care: ethical and legal concerns. *Health & Social Work*, 21(3), 208-215.
- Davis, K.E. (1996). Primary health care and severe mental illness: The need for national and state policy. *Health and Social Work*, 21(2), 83-87.
- Ettelbrick, P. L. (1996). Legal issues in health care for lesbians and gay men. *Journal of Gay Lesbian Social Services*, 5(1), 93-109.
- Fadiman, A. (1986). The liberation of Lolly and Gronky. Life, 9(13), 71-94.
- Gardner, W., Lidz, C., Mulvey, E., & Shaw, E. (1996). Clinical versus actuarial predictions of violence in patients with mental illness. *Journal of Consulting and Clinical Psychology*, 64(3), 602.
- Gibelman, M. & Schervish, H.P. (1996). The private practice of social work: Current trends and projected scenarios in a managed care environment. *Clinical Social Work Journal*, 24(3), 323-338.
- Gorin, S. (1997). Universal health care coverage in the United States: Barriers, prospects, and implications. *Health & Social Work*, 22(3), 223-230.
- Gustavsson, S. S. (1992). Drug exposed infants and their mothers: Facts, myths, and needs. *Social Work in Health Care*, 16(4), 87-100.
- Gutman, D. (1991). The sleep of reason: How the insane were turned into the homeless. *American Scholar*, 60(3), 446-451.
- Healy, T. C. (2003). Ethical decision making: pressure and uncertainty as complicating factors. *Health and Social Work*, 28(4), 293-301.
- Hiday, V. (1995). The social context of mental illness and violence. The Journal of Health and Social Behavior, 36(2), 122.
- Kaufman, S. R., Shim, J. K. and Russ, A. J. (2004). Revising the biomedicalization of aging: Clinical trends and ethical challenges. *The Gerontologist*, 44(6), 731-738.
- Keigher, S. M. (1994). Health care reform and long-term care: Uneasy political partners. *Health & Social Work*, 19(3), 223-226.

- Keigher, S. M. (1994). Patient rights and dying: Policy restraint and the states. *Health & Social Work*, 19(4), 298-303.
- Keigher, S. M. (1995). Managed care's silent seduction of America and the new politics of choice. *Health & Social Work*, 20(2), 146-151.
- Keigher, S. M. (1997). America's most cruel xenophobia. *Health & Social Work*, 22(3), 232-237.
- Kerson, T. S. (2002). Developing an ecological perspective. *Boundary Spanning: An Ecological Reinterpretation of Social Work Practice in Health and Mental Health Systems*. New York: Columbia University Press, pp. 11-48.
- Kitchen, A. & Brook, J. (2005). Social work at the heart of the medical team. *Social Work in Health Care*, 40(4), 1-18.
- Kruzich, J. M. & Powell, W. E. (1995). Decision-making influence: An empirical study of social workers in nursing homes. *Health & Social Work*, 20(3), 215-222.
- Littrell, J. (1996). How psychological states affect the immune system: Implications for interventions in the context of HIV. *Health and Social Work*, 21(4), 287-295.
- Mercer, S. O. (1996). Navajo elderly people in a reservation nursing home: admission predictors and culture care practices. *Social Work*, 41(2), 181-189.
- Netting, F. E. & Williams, F. G. (2000). Expanding the boundaries of primary care for elderly people. *Health & Social Work*, 25(4), 233-242.
- Nobel, D. N., & Hamilton, A. K. (1983). Coping and complying: A challenge in health care. *Social Work*, 28(6), 462-466.
- Patel, K. (2004). Euthanasia and physician-assisted suicide policy in the Netherlands and Oregon: A comparative analysis. *Journal of Health & Social Policy*, 19(1), 37-55.
- Peterson, K. J. & Bricker-Jenkins, M. (1996). Lesbians and the health care system. *Journal of Gay & Lesbian Social Services*, 5(1), 33-47.
- Rapp, C. A. (1998). The active ingredients of effective case management: A research synthesis. *Community Mental Health Journal*, *34*(4), 363-380.
- Reese, D. J. and Sontag. M. A. (2001). Successful interprofessional collaboration on the hospice team. *Health & Social Work*, 26(3), 167-175.
- Resnick, C. and Tishe, E. (1997). The role of multidisciplinary community clinics in managed care systems. *Social Work*, 42(1), 91-98.
- Riffe, H.A. and Kondrat, ME. (1997). Social worker alienation and disempowerment in a managed care setting. *Journal of Progressive Human Services*, 8(1), 41-55.
- Roberts, C. S. (1989). Conflicting professional values in social work and medicine. *Health & Social Work, 14*(3), 211-218.
- Rose, S.J. & Keigher, S.M. (1996). Managing mental health: Whose responsibility? *Health and Social Work* 21(2).
- Shannon, B.D. (1998). The impact of the courts on mental health policy and services. In T.R.

- Watkins & J.W. Callicutt (Eds.) (1998), *Mental Health Policy and Practice Today*. Thousand Oaks: Sage, 49-68.
- Tarasoff v. Regents of University of California, 131 Cal.Rptr. 14, 551 P.2d 334 (1976).
- Uttaro, T., Riroozeh, V., Horwitz, A.V., and Henri, W.F. (1998). Primary therapists' view of managed care. *Psychological Reports*, 82, 459-464.
- Weick, A. (1984). The Concept of Responsibility in a Health Model of Social Work. *Social Work in Health Care*, 10(2), 13-25.
- Weick, A., Rapp, C.A., Sullivan, W.P. & Kisthardt, W.E. (1989). A strengths perspective for social work practice. *Social Work*.
- Wesley, C. A. (1996). Social work and end-of-life decisions: Self-determination and the common good. *Health & Social Work*, 21(2), 115-121.
- Wilk, R. (1994). Are the rights of people with mental illnesses still important? *Social Work*, 39(2), 167.
- Wilson, M. (2001). Black Women and Mental Health: Working Towards Inclusive Mental Health Services. *Feminist Review*, 68, 34-51.

#### Additional Books

- Fellin, P. (1996). *Mental Health and Mental Illness. Policies, Programs, and Services*. Itasca: F.E. Peacock Publishers, Inc.
- Gaw, A.C. (Ed.). (1993). *Cultural Ethnicity and Mental Illness*. Washington, DC: American Psychiatric Press, Inc.
- Johnson, A.B. (1990). Out of Bedlam. The Truth About Deinstitutionalization. New York: Basic Books.
- Mechanic, D. (1995). *Mental Health and Social Policy*. Third Edition. Englewood Cliffs, NJ: Prentice Hall.
- Saleebey, D. (Ed.). (2009). *The Strengths Perspective In Social Work Practice*, 5<sup>th</sup> Edition. Boston: Allyn Bacon/Pearson.
- Specht, H. & Courtney, M.E. (1994). Unfaithful Angels. New York: Free Press

For individual syllabus, remove the word "RECOMMENDED." In addition individual syllabi need to specify which readings are required and which are recommended. The entire list of "additional resources" does not need to be included in individual syllabi.

#### Web Based Resources

- NASW Center for Workforce Studies (2007). Parity Mental Health Benefits: What is the Impact on Client Access to Services and Systems of Care? <a href="http://workforce.socialworkers.org/studies/MHBenefits.pdf">http://workforce.socialworkers.org/studies/MHBenefits.pdf</a>
- U.S. Department of Health and Human Services (1999). Mental Health: A Report of the Surgeon General. Rockville, MD: U.S. Department of Health and Human Services, Substance Abuse

and Mental Health Services Administration, Center for Mental Health Services, National Institutes of Health, National Institute of Mental Health. Chapter 2 pg. 49-63, Chapter 7, Chapter 6 pg.418-430. Available on the Internet at: <a href="https://www.surgeongeneral.gov/library/mentalhealth/toc.html">www.surgeongeneral.gov/library/mentalhealth/toc.html</a>

- U.S. Department of Health and Human Services (2001). Culture Race and Ethnicity: A Supplement to Mental Health: A Report of the Surgeon General. Rockville, MD: U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Center for Mental Health Services. Chapters 1 and 2, 3-48. Available on the Internet at: <a href="https://www.surgeongeneral.gov/library/mentalhealth/cre/">www.surgeongeneral.gov/library/mentalhealth/cre/</a>
- U.S. Department of Health and Human Services (2008). Framework for Improving Racial and Ethnic Minority Health and Eliminating Racial and Ethnic Health Disparities (Framework). Available on the Internet at: www.omhrc.gov/npa/images/78/PrintFramework.html

#### IX. RECOMMENDED ASSIGNMENTS

Assignments are designed to (1) provide a broad look at clinical social work practices in health and mental health settings, and (2) create an understanding of the confluence and the implications of policies, practices and research in Health and Mental Health settings, and (3) provide students with an opportunity to pursue learning in one specific substantive area of social work practice in health and or mental health settings. Suggested assignments are "grouped" and the instructor should select assignments that cover all of the learning objectives for the course.

Please remember that class discussions and personal disclosures are confidential. We have an obligation to respect the privacy of our colleagues, our agencies, and our clients.

# #1. Exploration into Agency Policy & Practice. 2-parts: Small Group Discussion and Written Synopsis (Educational Outcomes 1, 2, 4, 7)

Explore with a supervisor and other administrators in your field education/work agency a contemporary human services issue that is impacting the agency's functioning. With emphasis on its administrative and/or service delivery functions:

- **A.** Paper: Write a 10-12 page research paper, double-spaced, APA style paper due on .
  - 1. Identify and define the issue (why is it an "issue" or problem?),
  - 2. Discuss how it developed (e.g. federal or state legislation; court decision, subsequent to a "critical incident"),
  - 3. Determine what external policies are driving the agency's reaction(s) to the issue,
  - 4. Identify and discuss the agency's internal policies that address the issue,
  - 5. Determine what information exists in the professional literature (a minimum of 5 refereed publications), including the research, if any, that supports these external and internal policies, and
  - 6. Discuss the implications for social work practice, including the impact on "special needs populations" (i.e., persons in need of mental or physical health treatments who

have hearing challenges, have co-occurring disorders, are members of oppressed populations) and "targeted populations" (those with severe and persistent mental illnesses, children with severe emotional disorders, older adults who have mental illnesses, patients with physical disabilities and progressive degenerative diseases). In other words do these policies exclude or in some way disadvantage specific groups of people.

7. Come to a conclusion about the soundness of the practice and your recommendations, if any, for change.

**Examples include**: record-keeping and/or information-sharing and/or access to records practices; deployment of differently credentialed practitioners (nurses, social workers, counselors); differences in physical environments for certain client populations; the efficacy and rationale of certain program elements; differential treatment of persons based on diagnosis, race, color, ethnicity, gender, ability, sexual orientation, age. *If you are unsure of an idea, please feel free to talk with me about it.* 

**B.** *Presentation:* You will *present your findings* in groups of three-four for approximately 1 hour during class (week before paper is due)

*Value and Grading:* Presentation: Specify number of points; Paper: Specify number of points. The paper will be evaluated based on: Specify criteria for evaluation of paper.

# #2. Three Options (Educational Outcomes 1, 2, 3, 4, 5, 6, 7) Option 1: Debate (3-part assignment) (

Students are assigned a particular debate topic on the basis of their policy/practice/research interests as they are articulated in the first and second classes. Students are required to prepare to argue either side of the issue, covering the policy, practice, and research knowledge and implications relevant to their debate topics. Citations of authority and support for assertions are required. **Annotated Bibliography**. During preparations for the debates, complete an exhaustive professional literature review of the topic. Prepare an annotated bibliography of those articles from the *professional* literature (as opposed to popular press) that present compelling theoretical, conceptual, or empirical evidence for either side of the issue to be debated. This bibliography is submitted to the instructor with copies to every student in the class, on the assigned day of the debate.

*Option 2: Reaction Papers.* This option is comprised of a <u>weekly</u> reaction paper, 2-3 pages in length. The paper should focus on the class readings and discussions and how these relate to the student's present and / or prior experiences 1) in practicum and 2) with the health care or mental health system. Papers should be *analytical* rather than descriptive.

Option 3: Research Paper. An 18-20 page research paper (typewritten and double-spaced) on a major issue facing the social work practitioner and consumer in health and / or mental health care today (e.g., rising health care costs as related to decreased resources; bioethics; technology and the quality of life; chronic illness and the quality of life; managed care; respite care of caregivers of the elderly, etc.). The paper should include an overview of the issue, an analysis of the issue from a social work perspective, and a discussion of the implications for social work practitioners and health or mental health care consumers.

## #3 Best Practices with Persons diagnosed with Health/Mental Health Conditions (Educational Outcomes 1, 2, 3, 4, 5)

This paper is designed to increase your knowledge of the research about practice with a specific population with whom you are working in your field practicum. For example, you may be working with adults with COPD, clients diagnosed as having major depression, or homeless people with substance abuse problems.

Select a specific practice issue/population with which you are working, in consultation with your field supervisor and address the following:

- 1. Identify the population, the nature of the problems and needs of the group;
- 2. Review the literature for research on this population and intervention approaches which are most effective;
- 3. Identify the barriers to mental health and/or health care services faced by this group; and
- 4. Develop recommendations (modification of an existing program, or development of a new program) for enhancing services at your agency specifically targeted for this population.

It is expected that students will cite a minimum of 10 referred journal articles and/or books authored by experts in the field.

Length: Specify page length, double-spaced, APA style paper.

Value and Grading: Specify points assigned and criteria for grading.

# #4: Culturally Sensitive Practice with Health / Mental Health Conditions (Educational Outcomes 1, 2, 3, 4, 5)

This paper is designed to increase your awareness of and sensitivity to "special needs populations" (persons in need of mental or physical health treatments who have hearing challenges, have co-occurring disorders, have AIDS or are HIV +, have co-existing developmental disabilities, are gay or lesbian, are members of racial or ethnic minority populations, are incarcerated) and "targeted populations" (those with severe and persistent mental illnesses, children with severe emotional disorders, older adults who have mental illnesses, patients with physical disabilities and progressive degenerative diseases) who are seen in the community mental health or health care systems. You are to integrate policy, practice and research knowledge as they impact and are impacted by your practicum agency.

Select one of the targeted or special needs populations and address the following: (1) via a literature review and exploration with your field supervisor, identify the scope and nature of the problems and needs of the group, (2) identify the barriers to mental health or health care services faced by this group, (3) identify your recommendations for enhancing services at your agency specifically for this group.

#### X. GRADING

What Grades Mean (plus and minuses are assigned at instructors' discretion)

A = Exceptional work: outstanding: this grade will be assigned to work that shows extensive use of the literature as well as wide use of concrete examples from practice.

B = Fully meets graduate standards: this grade will be assigned to work in which all aspects of assignments are completed satisfactorily, showing a combination of accurate use of theory and principles, and precise descriptions of practice.

C = Overall performance is unsatisfactory, below graduate standards, although all aspects of assignments were completed.

F = Failure: overall quality of work is unsatisfactory, or some aspect of assignments not done.

**Incomplete grades**. A temporary grade of Incomplete may be assigned to a student who, for a reason beyond the student's control, has been unable to complete the required work in a course on time. It is the student's responsibility to request an Incomplete from the instructor. A request signed by the student and the faculty member must be on file when grades are submitted. A student may not enroll in a course sequential to one in which he or she has an I or F letter grade. An incomplete not removed by the end of the next semester will be changed to an F.

## Individual instructors' syllabi should specify the following:

- A. The weighting of each assignment in the course and the dates by which they are done.
- B. For every assignment, explain the standards used for grading.
- C. If class participation is part of the grade indicate what this means. For example, if 10 points are awarded for class participation, one point will be deducted for every class missed.
- D. Indicate the policy on late assignments, e.g., they are not accepted and treated as an "F" grade or the grade is reduced by \_\_\_\_ for each day, week, etc.
- E. Indicate how final grades will be determined

## **ATTENDANCE POLICY**

Students are expected to attend class (and be on time), which is essential for learning skills, learning from lecture and class discussion and for socialization to the profession of social work. Students may miss two classes only without penalty. A third absence will result in deduction of a full letter grade in the class. Additional absences will result in the student being asked to withdraw from the course or be assigned a failing grade.

Individual instructors' syllabi should be exactly the same as in the master syllabus.

## XI. SPECIAL CONSIDERATIONS

For example: If there are any circumstances, which require that I and/or the class adapt to your special needs, please consult with me. Circumstances include such things as a disability or a family emergency that may interfere with your completing the assignments as assigned, or meeting the due dates for assignments. The University of Kansas has supportive programs in place to

assist those students who have special learning needs with successfully meeting course expectations.

Please notify me if your religious observances conflict with class or due dates for class assignments so we can make appropriate arrangements.

Individual instructors' syllabi should be exactly the same as in the master syllabus

## XII. RECORDING AND SHARING RECORDINGS OF LECTURES

Course materials prepared by the instructor, together with the content of all lectures and review sessions presented by the instructor are the property of the instructor. Video and audio recording of lectures and review sessions without the consent of the instructor is prohibited. On request, the instructor will usually grant permission for students to audio tape lectures, on the condition that these audio tapes are only used as a study aid by the individual making the recording. Unless explicit permission is obtained from the instructor, recordings of lectures and review sessions may not be modified and must not be transferred or transmitted to any other person, whether or not that individual is enrolled in the course.

Individual instructors' syllabi should be exactly the same as in the master syllabus

#### XIII. HIPAA REGULATIONS

The Health Insurance Portability and Accountability Act (HIPAA) requires that any personal information that may identify a person must be removed to protect confidentiality. Confidentiality applies to both classroom discussions and to written work. Please follow these simple, yet essential guidelines:

- Always disguise the name and other personal identifying information when you speak and write about a person, following the guidelines established by HIPAA.
- If writing in great detail about a client, ask permission from the client.
- Share nothing about specific clients, agencies or other students outside of the classroom.

Any information shared with the class/instructor will be confidential, within the limits defined by the Code of Ethics and state guidelines.

Individual instructors' syllabi should be exactly the same as in the master syllabus.

#### XIV. <u>INSTRUCTOR AVAILABILITY</u>

Provide students with information on how to see and/or reach you.

## XV. <u>INCLEMENT WEATHER POLICY</u>

In the event of inclement weather students should call Lawrence: the University (785) 864-SNOW, or if hearing impaired and have

TTY/TDD equipment, (800) 766-3777

Edwards Campus: (913) 897-8499 KCKCC Campus: (913) 334-1100

to determine if classes have been cancelled. Class will be held if classes have not been cancelled, and students should contact the instructor if weather or driving conditions

make it impossible for them to get to class