



**SW 698: Social Work Practice in Mental Health**  
**Fall 2016**

**Section 001: Tuesday 6:00PM-9:00 PM**  
**Classroom B760**

**Section 003: Thursday 2:00 PM- 5:00 PM**  
**Classroom 2752**

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**1. Course Description**

This course teaches practice models and methods of intervention for effective social work practice in mental health care, including the promotion of mental health, the prevention of mental illnesses (with special emphasis on relapse prevention), and the delivery of psychosocial treatments and rehabilitation services. A major focus is on enabling individuals with mental health problems to increase their functioning in the least restrictive environments, with the least amount of ongoing professional intervention, so these individuals maximize their success and satisfaction. This course has a specific emphasis on services to individuals who suffer from severe and persistent mental illness, substance abuse in conjunction with mental illness (dual-diagnosis population) and/or who are recovering from the effects of severe traumatic events. Interventions relevant to these conditions help individuals develop/restore their skills and empower them to modify their environments so as to improve their interactions with their environments. A second major focus is on culturally competent and gender-specific interventions and special issues for groups who have been subject to oppression. Privilege and social justice concerns will be a major emphasis of the course. Mental health disparities will be considered in relation to diagnoses, treatment options and case disposition within the mental health system.

**2. Course Content**

The course will present practice methods for carrying out functional assessments, resource assessments, establishment of client preferences, development of plans to meet service needs, services to enhance client skill development, and the development and modification of relevant community and agency environments. The emphasis of the course is on approaches that enhance problem-solving and coping strategies and are empowering and supportive to consumers, both individually and in groups and families.

This course will provide students with models and methods for the promotion of mental health, the prevention of mental illness, the provision of effective treatment of psychiatric disabilities, with an emphasis on promotion of optimal adaptation when psychiatric disabilities are long lasting. Assessment and intervention strategies will be included for use at the individual, family, group, organizational, community, and societal levels. A special issue is the integration of services for individuals with multiple problems. The course, therefore, will emphasize the integration of micro and macro methods through which students learn to make social, behavioral, environmental, organizational, administrative, and policy assessments, with an emphasis on risks/strengths assessment and capacity-building.

Students will develop knowledge of empirically-based interventions and will be able to select and implement appropriate methods based on assessments and service plans. A major focus of this course will be gender specific and culturally competent interventions with and for groups who have been subject to oppression, such as people of color, women, lesbian/gay/bi/transgendered people, the aged, and people with disabilities.

### **3. Course Objectives**

Students who complete this course will be able to:

1. Assess the risks and strengths of individuals, families, groups, organizations, and/or communities for the purposes of promoting mental health, early intervention, treatment, and continuing service, with an emphasis on problems faced by people who suffer from severe and persistent mental illness, substance abuse, and/or who are recovering from the effects of severe traumatic events.
2. Plan or plan and conduct culturally competent, gender-specific individual, family, group, organizational, and community-based capacity building and preventive interventions
3. Identify and demonstrate understanding of the many components of the mental health system as team member, advocate, broker, community organizer, and program planner, in order to interact productively with the many components of the mental health system.
4. Build partnerships with key neighborhood and self-help organizations and institutions for the purpose of mental health promotion and disease prevention.
5. Incorporate social work values and ethical standards in practice in mental health.
6. Plan or plan and engage in advocacy at both micro and macro levels to help individuals overcome oppression, discrimination, and other barriers to access and quality of mental health services.

### **4. Course Design**

The course will include lectures, discussion, simulations, small group exercises, individual and group projects, guest speakers, and written assignments.

## **5. Relationship to Four Curricular Themes**

*Social Science and Behavioral Research* is presented throughout the course and includes findings from evaluation studies and intervention research in social work, psychiatry, psychology, anthropology, and sociology.

*Multiculturalism and Diversity* are integrated throughout the course especially in view of the fact that mental health problems are experienced very differently in various cultures, each of which has its own indigenous responses to healing. In addition, the stresses associated with mental health problems and accesses to appropriate services are differentially affected by gender, poverty, race/ethnicity and sexual orientation. The students must be aware of these issues and helped to develop culturally competent and gender-specific interventions and interventions to overcome oppression and discrimination as barriers to access to and quality of care.

*Social Justice Issues* have special relevance to the processes of psychosocial rehabilitation. Persons with psychiatric disabilities are often discriminated against with respect to access to education, employment, housing, and financial assistance. Health insurance plans often discriminate against persons with mental as opposed to physical disabilities. Social justice issues are often seen with respect to the processes of commitment, the rights of people in mental institutions, the rights to treatment (such as in the criminal justice system), access to attorneys, and the determination of competence to stand trial or when mental illness is offered as a defense in a criminal proceeding. The student will learn about these issues in the course as well as the role of social work in fighting for these and other rights.

*Promotion/Prevention/Treatment/Rehabilitation* are addressed throughout the course. Mental disabilities often occur or are exacerbated as a result of stressful environmental conditions and the ways of seeking changes in these conditions or preventing them will be stressed.

## **6. Relationship of This Course to Social Work Values and Ethics:**

Virtually every topic of this course is related to issues of social work values and ethics, and these issues will be dealt with in this course. Examples of these issues are priorities assigned to various services and populations by mental health agencies and the role of social workers in molding these priorities, recognition of the right of self determination of consumers of mental health services, the principle of the utilization of the least restrictive environments for treatment of mental disorders, the values placed on preventive services, an understanding of the responsibility of workers to strive for less stressful environments in relationship to preventing mental problems, the creation of community respect for individuals in the community whose behavior, while lawful, departs from community norms, and promoting community awareness of the “not in my back yard” phenomenon.

### **7. Accommodation for Disability Statement**

Any student who feels that s/he may need an accommodation for any type of disability (physical, mental or learning, temporary as well as chronic), please feel free to contact me at any time during the semester so that we can discuss options that will enable you to complete the course responsibilities.

### **8. Writing Assistance**

For further assistance with writing, you may go to the Writing Workshop 1139 Angell Hall (734)764-0429.

### **9. Statement on Plagiarism and Academic Integrity:**

All academic dishonesty, including plagiarism, cheating, fabrication, and misrepresentation will be treated seriously. You will find a discussion of plagiarism and other violations academic integrity. Please consult your *Student's Guide to the Master's in Social Work Degree Program* (online).

### **Safety & Emergency Preparedness**

In the event of an emergency, dial 9-1-1 from any cell phone or campus phone.

All University of Michigan students, faculty and staff are required to familiarize themselves with emergency procedures and protocols for both inside and outside of the classroom. In the event of possible building closure (i.e. severe weather conditions, public health notices, etc.) you may contact (734)764-SSWB(7793) for up-to-date School closure information.

Be Prepared. Familiarize yourself with the emergency card posted next to the phone in every classroom/meeting room. Review the information on the emergency evacuation sign (located nearest the door) and locate at least (2) emergency exits nearest the classroom.

If you are concerned about your ability to exit the building in the case of an emergency, contact the Office of Student Services and/or email [ssw-ADAcompliance@umich.edu](mailto:ssw-ADAcompliance@umich.edu).

Office of Student Services  
School of Social Work | Room 1748  
[734-936-0961](tel:734-936-0961)

For more information view the annual Campus Safety Statement at <http://www.dpss.umich.edu/>.

Register for UM Emergency Alerts at <http://www.dpss.umich.edu/emergency-management/alert/>.

## Required Texts

1. Diagnostic and Statistical Manual of Mental Disorders-5<sup>th</sup> edition, American Psychiatric Association.
2. DSM-5 Clinical Cases, John W. Barnhill, M.D.,2013.
3. Social Work Desk Reference, Albert R. Roberts, Oxford Press 2009.

## Optional Texts

1. Cuellar, I., & Paniagua, F. (2000). *Handbook of Multicultural Mental Health: Assessment and Treatment of Diverse Populations*. San Diego, CA: Academic Press.
2. Miklowitz, D.J. (2002). *Bipolar disorder survival guide: What you and your family need to know*. Guildford.
3. Dulmas, C.N., & Rapp-Paglicci, L.A. (Eds). (2005) *Handbook of Preventive Interventions for Adults* (mental and physical disorders). NY: John Wiley & Sons.

## Helpful Websites

<http://www.mentalhealthpractices.org/>

For article downloads

<https://www.socialworkers.org/nasw/default.asp>

For access to practice related documents

<http://www.nimh.nih.gov/>

<http://www.nami.org/>

<http://www.samhsa.gov/>

<http://schizophrenia.com> - BLOG

## Course Assignments, Requirements, and Grading

**10% of your grade will be based on ACTIVE class participation. Class participation will be graded according to attendance, currency in reading, and participation in group discussions. The major assignments for the course will be articulated below.**

**Papers are expected to be handed in, hard copy on their due dates and papers must meet all academic standards for ethical documentation. Papers will be marked down 5% for every day late and are due at the beginning of class on the “due date.”**

**The following criteria will be taken into account when papers are graded:**

- **Systematic and logical presentation of arguments;**
- **Appropriate use of evidence;**
- **Familiarity with and appropriate use of relevant literature and concepts;**
- **Clarity and coherence of presentation;**
- **Originality and creativity;**
- **Conformity with the requirements of the assignment;**
- **APA style for final paper**

*Course Overview*

*The course will be guided by four important themes:*

*A) Understanding people with mental illness from multiple perspectives (including gender, race, ethnicity, culture, privilege, oppression, social justice)*

*B) Understanding the mental health practitioner roles of social workers*

*C) Understanding the best evidence practice methods for our work with individuals with severe and persistent mental illness*

*D) Developing intolerance for poor practices or treatment of mentally ill persons and their families and to acquire the skills and muster the courage to “do things differently” if it will aid these courageous persons to have better lives (Mary Ann Test)*

*Graded Work*

**Course Grades will be based on three papers, a group presentation and on class participation.**

*Diagnostic Group presentation*

**Due: TBD**

**30% of Grade**

**Throughout the semester, students will gain experience with a variety of skills that are critical for working in mental health settings.**

**On the first day of class we will form small groups who will be responsible to present on assigned diagnostic category. Class time will be allocated for preparing for this presentation each week. Presentations are to be approximately 45-60 minutes long and should include:**

**First part of your presentation:**

- 1. Detail the history of your diagnostic category. Evolution of continued research on this category.**
- 2. Prevalence of this diagnostic category; significance as it relates to gender, orientation, race, ethnicity, age etc.**
- 3. Describe the signs and symptoms of the diagnostic category/specific disorder. Be VERY detailed in your description.**
- 4. Subtypes; If applicable.**
- 5. Considerations for special populations that should be taken into account, (LGBT, Elderly, Women, People of color etc.). When approaching the determination of the best EBP and level of care, what considerations should be considered?**
- 6. Suggested treatment options for this disorder/s. (i.e. CBT, DBT, Motivational Interviewing, etc.) The group will provide an overview of this treatment technique/model as it applies to the presenting case. Each group will provide a brief fact sheet on the diagnostic category and treatment modality chosen.**

**Second part of your presentation:**

- 1. Use a case example to illustrate this diagnostic category.**

**Format:**

- 1. A biopsychosocial introduction to your client – demographics, initial diagnostic impressions based on your intake (with a detailed explanation of what led you to these determinations.)**
- 2. Initial treatment plan: 3 treatment goals with corresponding objectives, interventions and a sample Progress Note which all meet reporting/auditing requirements.**
- 3. Your plan to engage family/Significant others, (Or an explanation of why this is not needed or not possible).**
- 4. Your plan to coordinate with other services outside of your agency. (Or an explanation of why this is not needed or not possible).**
- 5. A discussion of which aspects of the case require additional self-education or research (e.g. utilizing journal articles, conferences, outside experts, agency contacts, etc.) in order for you to feel competent in providing effective treatment services to your client. This could include issues having to do with your client's cultural/ethnic background; applying non-western/alternative healing approaches to treatment; investigating the most efficacious modalities of treatment for a particular mental disorder (e.g. cognitive-behavioral therapy versus psychodynamic therapy for depression); the**

- problems of violence and mental illness; problems related to dual diagnoses; services for families and caregivers; availability or access to community-based services for the mentally-ill; the impact of insurance and managed care on service delivery; the challenges of working in multidisciplinary teams on client needs and services (e.g. collaborating on treatments, including medications, psychotherapy, psychiatric emergencies; etc.)
6. What Group insights developed based on your work with the case and diagnosis. What did you learn about yourself?

*Paper 1 (Looking at a personal memoir through a “cultural lens”)*

**10% of grade.**

**Length 7-9 pages.**

**Due: October 6<sup>th</sup> or 8<sup>th</sup>**

Select a minimum of three peer reviewed scholarly journal articles that discuss the interplay between culture, ethnicity, religion, sexual orientation, gender expression and or gender, and or age etc. on diagnosis of a mental illness. Discuss how this interplay may affect seeking treatment, perceptions of treating professionals regarding understanding the symptoms of mental illness including access and challenges of securing acceptance and support from family/friends. Address your reactions to the articles and consider the following questions:

- a. Why did you pick this population to research? What are your personal responses to the authors construction of how the “interplay” effects the reception and the methods of treatment this population may receive?
- b. Using approaches to understanding the intersections of culture and mental illness in class, discuss how the author’s experience, idioms of distress, and efforts to accept or resist labeling and treatment reflect cultural values, folkways, and attitudes about psychological suffering. Also discuss how this author’s experience may differ from your cultural values, folkways, etc.
- c. How does gender, race, class, historical context etc. influence the experience of this population ?
- d. What stands out to you as especially significant, helpful, and not helpful? What is missing? What are the challenges for this population in relationship to the article and how well were these challenges managed? Were recommendations presented? If so what were they?
- e. You will present a brief overview of your findings in class on the date the assignment is due.

*Paper 2*  
*Self-Exploration in relation to the readings*

**Paper 2 is in the form of a Readings Journal. This paper will provide an opportunity to consider the readings in light of your own experiences and should respond to at least three of the readings, from the Social Work Desk Reference or DSM 5 Casebook, in depth. You can consider personal and practice experience as well as current dilemmas you may now face in your work.**

**Length: 6-8 pages.**

**20% of Course Grade**

**Due: November 15th or 17th**

**Throughout the semester we will attempt to become aware of the beliefs and biases that shape our intellectual and emotional responses to work with people who present symptoms of or have been diagnosed with mental illnesses. These beliefs and biases are deeply embedded in our culture's mythology and ideology regarding:**

- **acceptable feelings and behaviors**
- **what we define as civilized conduct**
- **what are appropriate expressions of one's gender identity, age, familial role, citizenship**
- **illness, disease, and impairment**
- **the role of the helper**
- **who may become a client/patient/consumer**
- **the long term consequences of being psychiatrically-labeled and treated in the mental health system**

**These same biases have influenced the ways in which psychiatry, social work, and psychology have organized systems of diagnosis, treatment, and care-giving. As we read, we will attempt to uncover some fundamental assumptions about normality, "humanness," and illness/disease that underlie our practices as social workers in mental health care roles and settings, as well as speculate about who these practices may serve or disserve. You may want to use these ideas as ways to approach your own reading and journaling.**

**In general, try to answer the following:**

**a--Describe your personal responses to the reading. What are the central ideas that seems most salient or significant to you? Why? Which are appealing, problematic, troubling?**

**b--What questions do the readings pose for you or answer for you?**

**c--How do the perspectives described make claims about health or illness that are adequately or inadequately inclusive, stigmatizing, and/or potentially empowering to clients?**

***Paper 3 – Reviewing a case – Diagnosis, assessment, treatment strategies and cultural implications for treatment***

**30% of grade**

**Length 8-10 pages**

**Due: December 6<sup>th</sup> or 8<sup>th</sup>**

**Each student will choose an individual case which will involve clinical diagnostic assessment, diagnosis, consideration and understanding cultural implications and identifying intervention strategies and resources. Examples of challenges related to treatment and service delivery in the case might include:**

- Violence and mental illness**
- Treatment of dual disorders**
- Challenges of working on an interdisciplinary team**
- Incorporating alternative and complementary treatments**
- Services for families and care-givers**
- Innovative community-based treatments and restrictions to executing those evidence-based treatments**

**The paper will have 5 parts:**

- 1. Define/describe the severe and persistent mental health disorder represented in your case.**
- 2. Choose an empirically focused treatment for that disorder – use something from class presentations or something we have not covered that you feel is a good fit. You may talk about complementary or alternative treatments for this case. You should justify your choices in terms of the disorder as you defined it.**
- 3. Adjust and alter the delivery of the treatment for a particular ethnic group, gender, orientation, developmental life-stage, socio-economic group that is presented in your case e.g. a Latino male in prison with severe depression and substance abuse).**
- 4. Discuss who you are as a practitioner – your characteristics and what you bring as the ‘treater’ in this therapeutic relationship.**

## **Class Schedule and Readings**

**The chapters and articles are to be read by the date under which they are listed in the schedule unless re-negotiated in class.**

**September 6<sup>th</sup> or 8<sup>th</sup>**

*A Cultural Framework for Understanding Mental Illness and Mental Health/The Importance of Evidence-Based Practice*

- *Introductions*
- *Course overview*
- *Terminology*
- *Group formation*

**Readings:**

**DSM 5- Chapter 1**

**Clinical Cases DSM 5- Chapter 1**

*Begin your article and/or memoir search and begin reading.*

**September 13<sup>th</sup> or 15<sup>th</sup>**

**A Cultural/Strengths-based Framework for Assessing and Treating Mental Illness  
Video: “The Way Home”**

**Readings:**

**Social Work Desk Reference Chapters 2 and 14**

**Part 1 Ethical issues, welcoming environment, safety concerns.**

**Presentation -Group time,**

**September 20<sup>th</sup> or 22<sup>nd</sup>**

*Social Justice and Psychiatric Disability/The Power of “Recovery”*

**Homelessness/Housing/Legal Issues/Mental Illness & Jail  
Psychosocial Rehabilitation/Assertive Community Treatment and others**

**Readings: Handouts: Legal terminology. Social Work role in the legal system.**

**Video “The New Asylum”**

**Group discussion**

September 27<sup>th</sup> or 29<sup>th</sup>

1. **Biopsychosocial assessment - History to present day.**
2. **Diagnosis and the role of the Social Worker.**
3. **DSM IV-R -DSM 5**
4. **Practice- skill development**

October 4<sup>th</sup> or 6<sup>th</sup>           **“Cultural Sensitivity paper due”**

**-Informal presentation**

**DSM 5 pgs 709-732**

***Developing Goals, Objectives. interventions and Progress Note- Handouts  
Class practice cases.***

1. **Determination of the level of care  
-ASAM criteria**
2. **Master Treatment Planning**

**Practice- skill development**

October 11<sup>th</sup> or 13<sup>th</sup>

1. **Treatment planning continued.**
2. **Aftercare and discharge planning**

**Practice- skill development**

October 18<sup>th</sup> No class Fall break- Enjoy!!!

October 25<sup>th</sup> or 27<sup>th</sup>

**Substance Abuse Disorders and Dual Disorders Treatment**

1. **Models of treatment**
2. **Diagnostic assessment**
3. **Dual disorders**
4. **Screening tools**

**Practice cases-skill development.**

***Readings: SAMHSA ACT Workbook***

**SW Desk Reference chapters 11 and 12**

**Center for Substance Abuse Treatment [CSAT]. (2005). *Substance Abuse Treatment for Persons With Co-Occurring Disorders*. Treatment Improvement Protocol (TIP) Series 42. DHHS Publication No. (SMA) 05-3922. Rockville, MD: Substance Abuse and Mental Health Services Administration. - you do not need to read in its entirety!**

Drake, Robert, O'Neal, Erica. (2008). "A systematic review of psychosocial research on psychosocial interventions for people with co-occurring severe mental and substance use disorders" *Journal of Substance Abuse Treatment*, 34, 123-138.

DSM 5 pgs 481-590  
DSM 5 Clinical Cases chapter 16

November 1<sup>st</sup> or 3<sup>rd</sup>

1. Motivational interviewing  
-Stages of Change

Practice scenarios- skill development

*Disorders of Mood*  
*1<sup>st</sup> Presentation*

1. Major Depression
2. Bipolar Disorders I and II
3. Post Partum Depression

Readings

DSM 5 pgs 123-188  
DSM 5 Clinical Cases Chapters 3 and 4  
SW Desk Reference, Chapters 4 and 8

Small group discussion

November 8<sup>th</sup> or 10<sup>th</sup>

*Medication Management in Psychiatry/Cultural Sensitivity in Medication Use.*

*SAMHSA. Family psychoeducation workbook. Bethesda: (A great resource – you only need to skim over for class)*

*Small group discussion*

1. *Treatment planning. Engagement exercises with families.*

November 15<sup>th</sup> or 17<sup>th</sup> “Self Exploration “ paper due  
-Informal presentation

2<sup>nd</sup> Presentation

Personality Disorders/Dialectical Behavior Therapy/Family Psycho Education

1. Borderline Personality disorders
2. Anti-Social Personality
3. Histrionic Personality
4. Narcissistic Personality

Readings:

DSM 5 pgs 645-684

SW Desk Reference, chapters 18

1. Trauma Assessment and Treatment.
2. Screening Tools
3. Dissociative Disorders

Readings: DSM 5 pgs. 265-308

DSM 5 Clinical Cases chapters, 7 and 8

November, 22<sup>nd</sup>

1. Eating Disorders
2. Gender Dysphoria

Guest presenters

Readings: DSM 5 pgs. 451-459

DSM Clinical Cases chapters 14

-Discussion

November 29<sup>th</sup> or December 1<sup>st</sup>

3<sup>rd</sup> and 4<sup>th</sup> Presentation

Discussion

December 6<sup>th</sup> or 8<sup>th</sup> “ Case Review” Paper Due

-Informal discussion

- 5<sup>th</sup> Presentation

-Discussion

December 13<sup>th</sup>

Wrap up!