



School of Social Work

FACULTY OF ARTS

The UBC School of Social Work acknowledges that we are located on the traditional, ancestral, and unceded territory of the xʷməθkʷəy̓əm (Musqueam) people. The School logo designed by Ray Sims, a member of the Musqueam Nation, depicts Raven transforming into a human child. Raven is seen to be the most magical of all beings with the ability to shapeshift into anything at will. The most frequent form Raven takes is that of a human. Through adventures, Raven creates much of what we have around us. Humans learn much and acquire much knowledge of life and living through learning the orals associated with Raven's adventures and misadventures, for Raven intentionally, as well as inadvertently, has created much by making mistakes.

School Vision: Building upon a foundation of social justice and an ethic of care, we are a community of learners actively engaged in the development of critical, transformative knowledge for social work practice.

BSW Mission

The Bachelor of Social Work (BSW) program addresses issues of power and issues of discrimination based on age, race, gender, sexual orientation, class and culture. The educational objective of the BSW curriculum is to provide students with the knowledge, values and skills necessary for an initial level of professional practice, focusing on the interface between personal problems and public issues. Critical thinking and structural analysis are central to the learning experience offered by the School and to the promotion of social justice and human well-being.

MSW Mission

The MSW program offers an accessible, advanced professional degree focused on social work practice in the fields of child and family welfare, health and social care, and international and social development, using a social justice lens. The purpose of this MSW program is to prepare our graduates to be competent social work professionals, equipped with state-of-the-art knowledge and skills, a critical analytic lens, and a social justice orientation.

COURSE INFORMATION

Year/Term/Dates	Summer 2022, May 3–22, 2022 (plus pre-trip prep and post-trip debrief)
Course Title	SOWK 440J/571: Global Mental Health: Praxis in a Global Setting
Course Schedule	Tuesdays and Thursdays, 1-4pm
Course Location	Nairobi, Kenya

Instructor	Office Location	Office Phone	Email Address
Dr. Mohamed Ibrahim	Room 241	604.822.2100	mohamed.ibrahim@ubc.ca
Office Hours	By appointment		

Additional Contacts	Position	Phone	Email address
Tamara Baldwin	UBC ORICE - Director	1.604.827.3087	Tamara.baldwin@ubc.ca
Salim Mohamed	UBC ORICE - Kenya Representative	+254 (0) 723691695	Salim.mohamed@gmail.com

****Please expect some changes to be made to dates or order of activity as we progress in the planning****

Prerequisite and/or Corequisite

The course is cross listed for BSW and MSW students. Students across the university will be accepted subject to availability of seats for SOWK 440J/571. Please email Program Advisor Christine Graham (Christine.Graham@ubc.ca) and Course instructor Mohamed Ibrahim (mibrah02@mail.ubc.ca) for inquiries and registration.

Course Description

Global mental health: praxis course introduces to students an emerging and important global mental health field. Global mental health is an area of study, research, and practice that places a priority on improving mental health and achieving equity in health for all people worldwide (Patel, 2012). This elective will introduce students to advanced competencies in global health practice and research, such as the global burden of mental health, social and economic determinants of mental health, the globalization of biomedical psychiatry, global mental health governance, human rights, and equity. Students will discuss practical and ethical challenges in delivering care in low-resource settings, describe tools, and strategies to address the needs of specific vulnerable populations, especially urban refugees in resource limited countries. They will also examine cultural awareness and its importance in caring for a diverse population.

Rationale

According to the Global Burden of Diseases report, mental illness is considered to be among the top 20 diseases causing disability globally. Social workers practicing in international settings can play a role in policy development, health education and promotion, direct provision of psychosocial interventions, assessment, referral/linkage, and mobilization of self-help, mediation, advocacy, community development, public education and research. This premier global mental health course offered by UBC Social Work provides an opportunity for social workers to gain necessary knowledge and skills required to work as mental health practitioner in a global context.

Course Structure

Course Design - Course #1 (SOWK 440J)

This 3-credit course spans 4 weeks of intensive praxis to be held in Nairobi and Nakuru Kenya. It consists of on-site classroom learning and service -learning at partner organizations on a daily basis for four weeks. This course will provide the relational, cultural, experiential place-based learning

This course is being coordinated with the Office of Regional and International Community Engagement (ORICE). ORICE has facilitated curricular student placements in this region of Kenya since 2014 and has infrastructure to support student learning, reflection and logistics.

Learning Outcomes

1. Upon completion of this course students will be able to demonstrate knowledge outcomes, such as
 - Describe the major global causes of morbidity and mortality (global burden of disease)
 - Recognize and interpret the relationship between health and the social and economic determinants of health (e.g. education, occupation, income, social class, gender, age, and ethnicity)
 - Identify the major multinational efforts and collaborations (e.g. Millennium Development Goals, Sustainable Development Goal, and Mental Health Action Gap (mhGAP)) to improve health globally
 - Critically examine key aspects of globalizing western biomedical mental health to the Global South
 - Describe barriers to health and healthcare access in low-resource settings and for vulnerable populations
 - Understand the mental health system in the Kenyan and continental African context
 - Formulate and investigate a research question about current innovative mental health and psychosocial approaches implemented in East Africa

2. Students will be able to develop and demonstrate skills, such as:

- Identify and critically analyze health and social interventions and strategies that have been used to improve global mental health outcomes for individuals, families and communities
- Generate ideas and solutions to global health challenges faced by resource limited settings
- Acquire an understanding of cultural and ethical issues when working with underserved populations and be able to apply this to in psychosocial service provisions

Required Textbook(s) and Learning Materials

Students are required to access from UBC Library and other accessible databases

Required readings list (described in “Course Schedule” under each session)

Ash, S.L. and Clayton, P.H. (2009), “Generating, deepening, and documenting learning: the power of critical reflection in applied learning”, *Journal of Applied Learning in Higher Education*, Vol. 1 No. 1, pp. 25-48. (Accessible [here](#))

Ibrahim, M, & Morrow, M (2015). Weaning off colonial psychiatry in Kenya. *Journal in Ethics of Mental Health*. Open Volume 1:1-6

Ibrahim, M. (2017) Mental Health in Africa: Human rights approaches to decolonization. In Morrow, M & Malcoe, LH (Eds.). *Critical Inquiries: Theories and Methodologies for Social Justice in Mental Health*. University of Toronto Press. Toronto.

Kaaya, S., Eustache, E., Lapidos-Salaiz, I., Musisi, S., Psaros, C., & Wissow, L. (2013). Grand challenges: improving HIV treatment outcomes by integrating interventions for co-morbid mental illness. *PLoS medicine*, 10(5), e1001447.

Kenya Human Rights Commission. (2011). *Silenced minds: The systemic neglect of mental health system in Kenya*. Available at: <http://www.khrc.or.ke/>.

Kiima, D., & Jenkins, R. (2010). Mental health policy in Kenya-an integrated approach to scaling up equitable care for poor populations. *International Journal of Mental Health Systems*, 4(1), 19.

Mbwayo, A., Ndeti, D., Mutiso, V, & Khasakhala, L. (2013). Traditional healers and provision of mental health services in cosmopolitan informal settlement in Nairobi, Kenya. *African Journal of Psychiatry*, 16, 134-140.

Mohan, B. (2011). Rethinking international social work. In *Development, Poverty of Culture, and Social Policy* (pp. 131-144). Palgrave Macmillan, New York.

Mupedziswa, R, Rankopo, M & Mwansa, L.K (2019). **Ubuntu** as a Pan-African philosophical framework for social work in Africa. In Twikirize, JM & Spritzer, H eds. *Social work practice in Africa: indigenous and innovative approaches*.

Musyimi, C., Mutiso, V., Musau, A., Matoke, L., & Ndetei, D. (2017). Prevalence and determinants of depression among patients under the care of traditional health practitioners in a Kenyan setting: policy implications. *Transcultural psychiatry*, 54(3), 285-303.

Musyimi, C., Mutiso, V., Nayak, S., Ndetei, D., Henderson, D., & Bunders, J. (2017). Quality of life of depressed and suicidal patients seeking services from traditional and faith healers in rural Kenya. *Health and quality of life outcomes*, 15(1), 95. DOI 10.1186/s12955-017-0657-1

Musyimi, C., Mutiso, V., Ndetei, D., Henderson, D., & Bunders, J. (2017). Mental health outcomes of psychosocial intervention among traditional health practitioner depressed patients in Kenya. *Culture, Medicine, and Psychiatry*, 41(3), 453-465.

Musyimi, C.W., Mutiso, V.N., Nandoya, E.S., & Ndetei, D.M. (2016). Forming a joint dialogue among faith healers, traditional healers and formal health workers in mental health in a Kenyan setting: towards common grounds. *Journal of ethnobiology and ethnomedicine*, 12(1), 2-8.

Ndungu, E. M. (2019). The role of mobile phones in social work service delivery: a Kenyan perspective. : In Twikirize, JM & Spritzer, H eds. *Social work practice in Africa: indigenous and innovative approaches*.

Patel, V., & Prince, M. (2010). Global mental health: A new field comes of age. *Journal of American Medical Association*, 303(19), 1976-1977.

Pockett, R., & Beddoe, L. (2017). Social work in health care: An international perspective. *International Social Work*, 60(1), 126-139.

Rahman, A., Surkan, P. J., Cayetano, C. E., Rwagatare, P., & Dickson, K. E. (2013). Grand challenges: integrating maternal mental health into maternal and child health programmes. *PLoS Medicine*, 10(5), e1001442.

Saxena, S., Thornicroft, G., Knapp, M., & Whiteford, H. (2007). Resources for mental health: scarcity, inequity, and inefficiency. *The lancet*, 370(9590), 878-889.

United Nations. (2006). *The convention on the rights of persons with disabilities*. United Nations. [ONLINE]. Available at: <http://www.un.org/disabilities/convention/conventionfull.shtml>.

USP-Kenya. (2013). Studies on human rights violation of persons with psychosocial disabilities in Kenya.

USP-Kenya. Advancing the rights of persons with psychosocial disabilities in Kenya. Available at <http://www.uspkenya.org/wp-content/uploads/2017/08/Advancing-the-Rights-of-Persons-with-Psychosocial-Disability-Booklet-Sample.pdf>

WHO. (2010). *[M]hGAP: Mental Health Gap Action Program: Scaling up care for mental, neurological and substance use disorders*. WHO Geneva.

World Health Organization. (2015). *MhGAP Humanitarian Intervention Guide (mhGAP-HIG): Clinical Management of Mental Neurological and Substance Use Conditions in Humanitarian Emergencies*. World Health Organization.

Optional/Recommended Readings and materials

The Samaritan is a Kenyan based comedy film that exposes some of the ethical issues related to international aid. Since Kenya hosts numerous international organizations that provide humanitarian services, the “humanitarianism” and approach of these do-good organizations have been questioned at times. This film helps deconstruct such issues in a comical way.

Trailer: <http://www.aidforaid.org/>

The film will be available to students as part of the course reading at no-cost at the beginning of the semester.

Kenya National Bureau of Statistics, Ministry of Health/Kenya, National AIDS Control Council/Kenya, Kenya Medical Research Institute, National Council for Population and Development/Kenya, and ICF International. 2015. Kenya Demographic and Health Survey 2014. Rockville, MD, USA: Kenya National Bureau of Statistics, Ministry of Health/Kenya, National AIDS Control Council/Kenya, Kenya Medical Research Institute, National Council for Population and Development/Kenya, and ICF International. Retrieved from: <https://dhsprogram.com/pubs/pdf/FR308/FR308.pdf>

Course Schedule

***Please note that many factors will influence the order of the sessions below and that the schedule is subject to changes.**

Pre-Course Preparation

March–April 2022

ORICE pre-departure program – specific dates will be published

SOWK 440J students will join a cohort of UBC students undertaking academic placements in the region for a pre-departure preparation program. The program has a strong emphasis on learning about historical and current context, ethical engagement practices, and participatory practices among other topics, such as safety abroad and logistics. This program takes place in the Jan-April term leading up to departure.

Meeting with Instructor at UBC (late March/early April)

While students will have been meeting with ORICE for the pre-departure program in the winter term, we will have one class meeting prior to meeting in Nairobi, Kenya to review the syllabus and course expectations. We will review strategies to ensure students have access to course materials regardless of connectivity at any given time. Students will also be paired to take responsibility for leading a class activity and discussion on one of the assigned readings.

April 29–May 1, 2022

Onsite orientation by UBC ORICE Kenya staff and faculty

A comprehensive on-site orientation will be held in Nairobi the Friday before classes start

officially on May 2. Orientation will be provided by ORICE staff based in Nairobi, the faculty member, and other invited guests. This is an important way of beginning our month long learning. The orientation will touch on basic topics such as transportation, safety, food etc. We will also discuss our schedule in detail and make changes if necessary. Then, we will review experiential education and the role of reflexivity in learning. This will assist students in developing an appreciation of reflexivity on action and reflexivity in action. Moreover, it will support students to develop a critical approach to journaling.

The first day will also be an opportunity to talk a walk/ride together as team to see the neighborhoods and the part of the city where we will be based.

Required reading

Ash, S.L. and Clayton, P.H. (2009), "Generating, deepening, and documenting learning: the power of critical reflection in applied learning", *Journal of Applied Learning in Higher Education*, Vol. 1 No. 1, pp. 25-48. (Accessible [here](#))

SESSION 1:	May 3, 2022 9am-12:30pm
TOPIC:	<p>Global Health Inequalities: issues for service providers</p> <p>According to World Health Organization (WHO), it's estimated that majority of individuals dealing with mental illness in lower and middle income countries have no access to quality mental health services. Today's learning objectives include understanding the global burden of diseases.</p> <ul style="list-style-type: none"> • Overview of course, including course outline and assignments • The Global Burden of Disease: research, policy, and practice • Global health governance • Global health initiatives and success • The Kenyan healthcare system • Historical and contemporary practices of social work in the Kenyan context • Social service providers' role in addressing global health challenges
READING:	<p>Mupedziswa, R, Rankopo, M & Mwansa, L.K (2019). <i>Ubuntu</i> as a Pan-African philosophical framework for social work in Africa. In Twikirize, JM & Spritzer, H eds. <i>Social work practice in Africa: indigenous and innovative approaches</i>.</p> <p>Pockett, R., & Beddoe, L. (2017). Social work in health care: An international perspective. <i>International Social Work</i>, 60(1), 126-139.</p> <p>Ndungu, E.M. (2019). The role of mobile phones in social work service delivery: a Kenyan perspective. : In Twikirize, JM & Spritzer, H eds. <i>Social work practice in Africa: indigenous and innovative approaches</i>.</p> <p>Mohan, B. (2011). Rethinking international social work. In <i>Development</i>,</p>

	<i>Poverty of Culture, and Social Policy</i> (pp. 131-144). Palgrave Macmillan, New York.
SESSION 2:	May 4, 2022 9am-12pm
TOPIC:	<p>The emergence of global mental health as a field of research, practice, and policy</p> <ul style="list-style-type: none"> • The Lancet Report on the burden of mental health in lower and middle income countries • Scaling up of mental health services in Lower and Middle Income Countries (LMIC)
READING:	<p>Patel, V. (2012). Global Mental Health: From Science to Action, <i>Harvard Review of Psychiatry</i>, 20:1, 6-12 https://doi.org/10.3109/10673229.2012.649108</p> <p>Patel, V., & Prince, M. (2010). Global mental health: A new field comes of age. <i>Journal of American Medical Association</i>, 303(19), 1976-1977.</p> <p>Whiteford, H. A., Degenhardt, L., Rehm, J., Baxter, A. J., Ferrari, A. J., Erskine, H. E. & Burstein, R. (2013). Global burden of disease attributable to mental and substance use disorders: findings from the Global Burden of Disease Study 2010. <i>The lancet</i>, 382(9904), 1575-1586.</p> <p>World Health Organization. (2019). The WHO special initiative for mental health (2019-2023): universal health coverage for mental health. In <i>The WHO special initiative for mental health (2019-2023): universal health coverage for mental health</i>.</p> <p>Saxena, S., Thornicroft, G., Knapp, M., & Whiteford, H. (2007). Resources for mental health: scarcity, inequity, and inefficiency. <i>The lancet</i>, 370(9590), 878-889.</p> <p>Kiima, D., & Jenkins, R. (2010). Mental health policy in Kenya-an integrated approach to scaling up equitable care for poor populations. <i>International Journal of Mental Health Systems</i>, 4(1), 19.</p>
SESSION 3:	May 4, 2022 1-3pm
TOPIC:	<p>Addressing Global Mental Health Inequities –Guest speaker-CBM Africa Regional Representative-Michael Njenga</p> <ul style="list-style-type: none"> • Role of non-state actors and CSO in the African context • Bridging the GAP through LMIC based initiative: a review of evidence from the LMIC settings.

READING:	<p>Kaaya, S., Eustache, E., Lapidos-Salaiz, I., Musisi, S., Psaros, C., & Wissow, L. (2013). Grand challenges: improving HIV treatment outcomes by Integrating interventions for co-morbid mental illness. <i>PLoS medicine</i>, 10(5), e1001447.</p> <p>Rahman, A., Surkan, P. J., Cayetano, C. E., Rwagatare, P., & Dickson, K. E. (2013). Grand challenges: integrating maternal mental health into maternal and child health programmes. <i>PLoS Medicine</i>, 10(5), e1001442.</p> <p>WHO. (2010). <i>[M]hGAP: Mental Health Gap Action Program: Scaling up care for mental, neurological and substance use disorders</i>. WHO Geneva.</p> <p>Mbwayo, A., Ndetei, D., Mutiso, V, & Khasakhala, L. (2013). Traditional healers and provision of mental health services in cosmopolitan informal settlement in Nairobi, Kenya. <i>African Journal of Psychiatry</i>, 16, 134-140.</p> <p>Musyimi, C.W., Mutiso, V.N., Nandoya, E.S., & Ndetei, D.M. (2016). Forming a joint dialogue among faith healers, traditional healers and formal health workers in mental health in a Kenyan setting: towards common grounds. <i>Journal of ethnobiology and ethnomedicine</i>, 12(1), 2-8.</p>
SESSION 4:	May 5, 2022 9am-12pm
TOPIC:	<p>The Kamili Model-Community Mental Health Services in Kenyan context-Lecturer by-Melanie Blarke-Senior Mental Health Nurse and Founder of Kamili Organization</p> <ul style="list-style-type: none"> Innovative community mental health model that is locally situated and widely successful in the Kenya context
READINGS:	<p>Kamili Mental Health https://www.kamilimentalhealth.org/copy-of-about-us</p> <p>WHO. (2010). <i>[M]hGAP: Mental Health Gap Action Program: Scaling up care for mental, neurological and substance use disorders</i>. WHO Geneva.</p>
SESSION 4:	May 5 & 9, 2022
TOPIC:	<p>Field Visits</p> <p>For these 2 days, there will be a tour of different field sites. Students will be assigned placement sites.</p> <ul style="list-style-type: none"> Kamili Mental Health Organization - The largest and only community based mental health agency in Nairobi that primarily serves Kenyans of low-income status and living in the slums of the Western part of the city. Students will have the opportunity to practice and learn mental health services in a community setting. Students will work under the leadership of the community social worker and mental health nurse providing mental health services at a community setting.

	<ul style="list-style-type: none"> • Shining Hope for Communities (SHOFCO) is an NGO based in the Mathare and Kibera slums providing health and social services to residents in these communities. Services include primary healthcare, reproductive and sexual health, outreach and mother and child health services • Nairobi County Health and Social Services-School Health Programs for children living with disabilities, Nairobi Metropolitan Health Services
SESSION 5:	May 6, 2022 9am-4pm
TOPIC:	<p>Mental Health & Psychosocial Interventions in humanitarian settings</p> <p>Kenya host hundreds of thousands of refugees from neighboring countries such as Somalia, South Sudan, and DR Congo. The county is home to some of the largest refugee camps in the world (Dadaab and Kakuma refugee camps). In addition, major Kenyan cities host thousands of urban refugees, with the majority in Nairobi. Due to its strategic position and stability, Nairobi also hosts multiple international organizations that work with refugees. During this week, we will discuss the scale of global conflict and its human impact. We will also cover specific refugee programs in Kenya supporting refugees.</p> <p>This session will cover</p> <ul style="list-style-type: none"> • Introduction to Mental Health Action Gap Program (mhGAP) • The global scale of refugees and internally displaced persons • International response to psychosocial care of refugees and IDPs • Evidence based psychosocial interventions for humanitarian settings
READING:	<p>World Health Organization. (2015). <i>MhGAP Humanitarian Intervention Guide (mhGAP-HIG): Clinical Management of Mental Neurological and Substance Use Conditions in Humanitarian Emergencies</i>. World Health Organization.</p> <p>Ibrahim, M., Rizwan, H., Afzal, M., & Malik, M. R. (2022). Mental health crisis in Somalia: a review and a way forward. <i>International Journal of Mental Health Systems</i>, 16(1), 1-12.</p> <p>Ibrahim, M., Malik, M. R., & Noor, Z. (2022). Investing in mental health in Somalia: harnessing community mental health services through task shifting. <i>Global Mental Health</i>, 1-5.</p> <p>Ibrahim, M & Ibrahim, HA (2022). Conflict resolution and peacebuilding: social work practice in humanitarian settings. <i>Journal of social work education and practice</i></p>

SESSION 6:	May 10 & 11, 2022 9am-4:30pm
TOPIC:	Field based learning at selected sites
SESSION 7:	May 12, 13 & 14, 2022 9am-12:30pm *Please note this is a class field trip to Nakuru – a smaller city in Kenya approximately 2-3 hours from Nairobi. Transportation, accommodation and meals will be arranged for all participants*
TOPIC:	<p>Service-users and peer-led mental health services in the Rift Valley Region-the case example of Psychiatric Disability Organization (PDO) Addressing access to services, human rights aspects and stigma of mental health-Guest Speakers from Psychiatric Disability Organization (PDO)</p> <p>Guest lecturer by PDO founder and director-Iregi Mwenja and team</p> <ul style="list-style-type: none"> • Individuals living with mental health challenges face communal, structural and interpersonal stigma, shame and discrimination on daily basis. For this session we will discuss the role the colonial past has shaped stigma within the mental health system. • We will also discuss the role international organizations, local peer-led non-profit, and self-help groups play in challenging harmful and discriminatory mental health laws, practices and systems. • Improving access to mental health and psychosocial services in a serve and non-stigmatizing environment • 2 day field based learning at PDO programs across Nakuru county
READING:	<p>Kenya Human Rights Commission. (2011). <i>Silenced minds: The systemic neglect of mental health system in Kenya</i>. Available at: http://www.khrc.or.ke/.</p> <p>United Nations. (2006). <i>The convention on the rights of persons with disabilities</i>. United Nations. [ONLINE]. Available at: http://www.un.org/disabilities/convention/conventionfull.shtml.</p> <p>The Pamoja Initiative (PDO Kenya). https://www.unaids.org/sites/default/files/media_asset/2020_community_innovations_en.pdf</p> <p>USP-Kenya. (2013). Studies on human rights violation of persons with psychosocial disabilities in Kenya.</p> <p>USP-Kenya. Advancing the rights of persons with psychosocial disabilities</p>

	<p>in Kenya. Available at http://www.uspkenya.org/wp-content/uploads/2017/08/Advancing-the-Rights-of-Persons-with-Psychosocial-Disability-Booklet-Sample.pdf</p> <p>Ibrahim, M, & Morrow, M (2015). Weaning off colonial psychiatry in Kenya. <i>Journal in Ethics of Mental Health</i>. Open Volume 1:1-6</p>
SESSION 8:	May 16, 17, 19 & 20, 2022 9am-4:30pm
TOPIC:	Field-based learning
SESSION 9:	May 18, 2022 9am-12:30pm
TOPIC:	Working in the human social service sector in the Kenyan context–Guest speakers (TBD)
SESSION 10:	May 18, 2022 2-4pm
TOPIC:	Debrief and reflection on field-based practice
SESSION 11:	May 24, 26 & 27, 2022 9am-4:30pm
TOPIC:	Field-based learning
SESSION 12:	May 23, 2022 9am-12:30pm
TOPIC:	The Kamili Model-Community Mental Health Services in Kenyan context- Guest speakers from Kamili
READING:	Kamili Mental Health https://www.kamilimentalhealth.org/copy-of-about-us WHO. (2010). <i>[M]hGAP: Mental Health Gap Action Program: Scaling up care for mental, neurological and substance use disorders</i> . WHO Geneva.
SESSION 13:	May 23, 2022 2-4pm
TOPIC:	Debrief and reflection on field-based practice
SESSION 14:	May 25, 2022 9-4pm

TOPIC:	Academic catch-up/planning day Planning for final papers/reviewing 1-2 page research proposal- 1:1 meetings with the instructor
SESSION 15:	May 27, 2022
TOPIC:	Last day of field-based learning
SESSION 16:	May 27, 2022 5-9pm
TOPIC:	Wrap up, debriefing/reflection and celebration

Post-Trip Debrief

Re-entry Debrief with ORICE – date TBD between July-Aug.

All Students

Fall 2022 – Public Engagement event on campus to share research and experience on the topic of global mental health with UBC and external campus community.

Assignments

Assignment 1: An Observational Paper – 20%

Your first assignment will be based on your assigned field site. The paper will be a minimum of 2 pages and max of 4 pages (Double space, 12 point, Arial or Times New Romans, APA not necessary) ethnography of the assigned organization carried out during the first two weeks of your placement. Through observation identify the core services provided, organizational leadership and workforce structures, the strengths, challenges and resources, the success or the lack of it in delivering their mandate. It is important to focus on organizational practices and not 'personal' processes. Moreover, an observational paper requires you to observe evidence for how a behavior is understood in a particular context rather than simply assigning your own meaning to it. If you make a value judgement, explain what evidence supports it, and what your own biases may be. In suggesting you to undertake these practices, we aim for you to foster sensitivity to the everyday 'norms' of your work site and help you locate yourself in this context in a way that is respectful; this assignment must demonstrate a reflexive interpretation, *not* a judgmental interpretation.

Assignment due date: 4th week on Sunday @ 11:59 PM

Assignment 2: Reflexive Journals: 3 journals @ 10% for total of 30%

As a community based practice and research student, you will need to need to reflect on your

work and document and examine your experiential learning. As such, you will, submit 3 journals over the period of 4 weeks. They will be due at end of the 2nd, 3rd, and 4th week on Sundays at 11:59 PM. In your journals, you will critically reflect and share your practice and research based activities that you undertook: what you did, with whom, what did you hope to accomplish, why, challenges that you faced and how you addressed them, and what you learned (the agency, service users and yourself as a researcher). Importantly, you will consider your positionality and the many layers of power that are operating within the system in which your placement is located.

Your journals should be between 3 and 5 pages, double spaced.

Assignment 3: Research Paper – 30% (10% proposal, 20% final paper)

The 3rd assignment is a major comparative research paper. More often, western knowledge and ways of knowing is privileged and globalized to Global South. In the 3rd week of our class readings and discussions, we will discuss critical aspects of global mental health and how western approach to mental health is globalized and mainstreamed at the expense of Indigenous and local culturally and spiritually appropriate psychosocial and spiritual community wellbeing. In this paper, you are expected to research (formulate and investigate a research question about) one specific local mental health intervention(s) or advocacy program(s) in a Global South setting.

10% of the final paper grade: 1-2-page research proposal due on May 22 @ 11:59pm.

This proposal should include:

- Comparative research topic/question
- Paragraph of introduction to your topic.
- Definition/Explanation of any key terms.
- Description of what will be included in your research (i.e., Personal journals from placement; data sets, meeting notes, organization materials, academic literature, grey literature, etc.);
- Perceived/expected value of the research question/paper in Global South-to-North transfer;
- Preliminary literature sources (4 minimum);
- Questions for the course instructor.

Students will meet with the instructor to discuss and receive feedback on May 25.

20% - Final research paper - This paper is **July 15, 2022** and will be submitted on canvas as a word document.

In your final paper, provide existing literature (if any) on the program, discuss and/or interview specific individual(s) with knowledge of the specific interventions, program or models of approach. Provide the historical background, how the model/approach/intervention works, and its strengths and areas for improvement. Examine and assess the potential for mainstreaming such initiatives.

Finally, investigate the potential and possibility of Global South-to-North transfer of such initiatives and how it can benefit the diverse needs of Global North residents.

This paper should be APA (double space, 12 point, Times New Roman, in-text citation and reference page). There is a page limit of 18 pages and a minimum of 10 pages.

Assignment 4: Participation – 20%

For this class to be successful in reaching its goals, regular student attendance and a desire to actively participate in learning and teaching is critical.

Students will be asked contribute by:

- Attending all ORICE pre-departure sessions and actively participating to create a safe and generative learning environment.
- Attending all classes (and being punctual)
- Actively participating in the creation of a safe, positive learning environment in class seminars
- Reading all required materials and participating in an informed discussion in class
- Expressing constructive, thoughtful views on materials presented in the class
- Active participation in practice experiences and role plays
- Engaging other students with questions and ideas
- Respectfully engaging with guest speakers and field visit sites
- Giving and receiving constructive feedback

Links on how to write an academic paper:

- <http://wiki.ubc.ca/Library>: Getting_Started_with_your_Research_Paper
- <http://www.writing.utoronto.ca/advice/general/general-advice>
- https://umanitoba.ca/student/academiclearning/media/Writing_an_Academic_Paper_NE_W.pdf

Assignment Submission Process

Submitting Assignments

Assignments are due as noted in this course outline, unless otherwise informed by the instructor.

Return of Marked Student Assignments

All assignments are to be submitted via the UBC Canvas course site. Assignments will be marked with track changes and comments provided in the same manner.

Late Assignments

Generally, late assignments will not be accepted. In emergency situations, students must discuss any potential lateness with their instructor and be prepared to have a medical certificate available. Assignments submitted after the deadline with no documentation will be penalized by one percentage point per day.

Retaining Assignments

Students should retain a copy of all submitted assignments (in case of loss) and should also retain all their marked assignments in case they wish to apply for a Review of Assigned Standing. Students have the right to view their marked examinations with their instructor, providing they apply to do so within a month of receiving their final grades. This review is for pedagogic purposes. The examination remains the property of the university.

SCHOOL/COURSE POLICIES

Attendance

“Regular attendance is expected of students in all their classes (including lectures, laboratories, tutorials, seminars, etc.). Students who neglect their academic work and assignments may be excluded from the final examinations. Students who are unavoidably absent because of illness or disability should report to their instructors on return to classes.” (UBC Calendar)

If students miss three or more classes, they may be considered to have not met the requirements of the course. If students have valid reasons, they could be withdrawn from the course with the approval of the instructor – otherwise, they would fail the course.

The attendance policy is in the student handbook on page 8. You can find the student handbook on the Advising page of our website: <https://socialwork.ubc.ca/undergraduate/advising/>

The School considers class attendance to be an essential component of integrated learning in professional social work education. Therefore, regular attendance is required in all social work courses. Instructors may count repeated late arrivals or early departures as an absence, and a meeting should be setup to discuss this with the student. If students miss three or more classes, they may be considered to have not met the requirements of the course. If students have valid reasons, they could be withdrawn from the course with the approval of the instructor – otherwise, they would fail the course.

Other school policies can be accessed through the School of Social Work student handbook.

Accommodations

The University accommodates students with disabilities who have registered with Access and Diversity. Students, who will require accommodation for attendance due to disability, are encouraged to inform the instructor, and if necessary, to contact Access and Diversity preferably not later than the first week of class. The School will also accommodate religious observance, according to University Policy 65, and students are expected to inform the instructor. Students

who wish to be accommodated for unavoidable absences due to varsity athletics, family obligations, or other similar commitments, must notify their instructors in writing at least two weeks in advance, and preferably earlier. This reflects expectations for professional social workers in their place of employment.

Academic Integrity

In the UBC scholarly community at large, we share an understanding of the ethical ways in which knowledge is produced. A core practice of this shared value of academic integrity is that we acknowledge the contributions of others to our own work. It also means that we produce our own contributions that add to the scholarly conversation. We don't buy or copy papers or exams. We also don't falsify data or sources, or hand in the same work in more than one course.

Because it is so important that research be done ethically, we require students to meet these expectations. Any Instance of academic misconduct, whether intentionally or unintentionally, can and often will result in receiving at minimum grade of zero for the assignment, and these cases will be reported to the Department Head or Chair and the Faculty of Arts Associate Dean, Academic. For more information see the UBC Calendar entries on "[Academic Honesty](#)," "[Academic Misconduct](#)," and "[Disciplinary Measures](#)," and check out the [Student Declaration and Responsibility](#). Also see "[Tips for Avoiding Plagiarism](#)" from the Chapman Learning Commons and bookmark the [OWL](#) website for how to use APA citation style.

UNIVERSITY POLICIES

UBC COVID-19 Protocols for in-class learning

COVID-19 Safety: You are required to wear a non-medical mask during our class meetings, for your own protection and the safety and comfort of everyone else in the class. For our in-person meetings in this class, it is important that all of us feel as comfortable as possible engaging in class activities while sharing an indoor space. Non-medical masks that cover our noses and mouths are a primary tool for combating the spread of COVID-19. Further, according to the provincial mandate, masks are required in all indoor public spaces including lobbies, hallways, stairwells, elevators, classrooms and labs. There may be students who have medical accommodations for not wearing a mask. Please maintain a respectful environment.

If you are sick, it is important that you stay home.

If you miss class because of illness:

- Except for sessions involving guest lecturers, lecture components of each session will be recorded, but group discussions and other interactive activities will not. You are encouraged to find a "buddy" in class who can update you on any discussion you might have missed.
- Be sure to consult the class resources on Canvas.
- If you are concerned that you will miss a key activity due to illness, contact the instructor to discuss.

If I (the instructor) am feeling ill: If I am unwell, I will not come to class. I will make every reasonable attempt to communicate plans for class as soon as possible by email. Our classroom will still be available for you to sit in and attend an online session. In this instance:

- If I am well enough to teach, but am taking precautions to avoid infecting others, we may hold the class online. If this happens, you will receive an email informing you how to join the class.
- If I am not well enough to teach I may ask you to do an activity or read something in place of class time

Learning Resources

UBC Learning Commons has a variety of tools and information such as; borrowing equipment, academic integrity (**APA Citation Guide**), writing support, skills for class, skills for life and academic support to assist students in their learning. <https://learningcommons.ubc.ca/>

Support

UBC provides resources to support student learning and to maintain healthy lifestyles but recognizes that sometimes crises arise and so there are additional resources to access including those for survivors of sexual violence. UBC values respect for the person and ideas of all members of the academic community. Harassment and discrimination are not tolerated nor is suppression of academic freedom. UBC provides appropriate accommodation for students with disabilities and for religious observances. UBC values academic honesty and students are expected to acknowledge the ideas generated by others and to uphold the highest academic standards in all of their actions.

Details of the policies and how to access support are available at:
<https://senate.ubc.ca/policies-resources-support-student-success>

Mental Health

During your time in this course, if you encounter medical, emotional, or other personal problems that affect your attendance or academic performance, please notify us, as well as your Academic Advisor. Please refer to the UBC Calendar for a discussion of academic concession. UBC Students are allocated up to seven personal counselling appointments via their student fees. To set up an off-campus counseling appointment, contact Empower Me at **1.844.741.6389**. This number will put you directly in touch with a counselor, who either talk with you via phone or skype when on international placements.

Early Alert Program

We participate in the Early Alert Program which helps me support students who are facing difficulties that are interfering with school. If you are feeling stressed, please notify one of the instructors and indicate that you would like assistance. While we are not trained to help with personal problems, we can connect you with support from people who can assist you. Any information that they receive from you or us is strictly confidential and is in the interest of your academic success and wellbeing. For more information, please visit earlyalert.ubc.ca.

Learning Analytics

Learning analytics includes the collection and analysis of data about learners to improve teaching and learning. No learning analytics are being used in this course.

Copyright

All materials of this course (course handouts, lecture slides, assessments, course readings, etc.) are the intellectual property of the Course Instructor or licensed to be used in this course by the copyright owner. Redistribution of these materials by any means without permission of the copyright holder(s) constitutes a breach of copyright and may lead to academic discipline.

Students may not record class or group discussions without prior permission of all individuals in attendance.

GRADING CRITERIA

Letter Grade	Percent Range	Mid-Point	
A+	90-100	95	Represents work of exceptional quality. Content, organization and style are all at a high level. Student demonstrates excellent research and reference to literature where appropriate. Also, student uses sound critical thinking, has innovative ideas on the subject and shows personal engagement with the topic.
A	85-89	87	
A-	80-84	82	
B+	76-79	77.5	Represents work of good quality with no major weaknesses. Writing is clear and explicit and topic coverage and comprehension is more than adequate. Shows some degree of critical thinking and personal involvement in the work. Good use of existing knowledge on the subject.
B	72-75	83.5	
B-	68-71	69.5	
C+	64-67	65.5	Adequate and average work. Shows fair comprehension of the subject, but has some weaknesses in content, style and/or organization of the paper. Minimal critical awareness or personal involvement in the work. Adequate use of literature.
C	60-63	62.5	
C-	55-59	57	
D	50-54	52	Minimally adequate work, barely at a passing level. Serious flaws in content, organization and/or style. Poor comprehension of the subject, and minimal involvement in the paper. Poor use of research and existing literature.
F	0-49		Failing work. Inadequate for successful completion of the course or submitted beyond final date of acceptance for paper.