


Course Outline

School:	Community and Health Studies
Department:	Community Services
Course Title:	Prevention, Harm Reduction and Health Promotion Interventions
Course Code:	AMHW 303
Course Hours/Credits:	42
Prerequisites:	AMHW 203
Co-requisites:	N/A
Eligible for Prior Learning, Assessment and Recognition:	Yes
Originated by:	Rahim Thawer, MSW, RSW
Creation Date:	Summer 2016
Current Semester:	Fall 2016
Approved by:	

Chairperson/Dean

Students are expected to review and understand all areas of the course outline.

Retain this course outline for future transfer credit applications. A fee may be charged for additional copies.

This course outline is available in alternative formats upon request.

Course Description

This course introduces students to a holistic approach to addiction and mental health work across a continuum of risk, recognizing that preventing addiction and mental health problems and promoting wellness are key aspects of addiction and mental health work. Diverse, illustrative case studies will be drawn from prevention and health promotion initiatives among First Nations, Metis, Inuit communities, as well as from specific populations identified as being at higher risk, including racialized and/or LGBTTTIQ/Q communities, to promote applied learning and analysis. Students will examine specific examples of prevention and health promotion initiatives in their own communities, and will critically reflect on and critique these examples through the lens of an anti-oppressive practice (AOP) framework. Students will also explore and reflect on a range of harm reduction approaches and interventions, recognizing and affirming clients' autonomy and the multiple paths to recovery and healing.

Program Outcomes

Successful completion of this and other courses in the program culminates in the achievement of the Vocational Learning Outcomes (program outcomes) set by the Ministry of Training, Colleges and Universities in the Program Standard. The VLOs express the learning a student must reliably demonstrate before graduation. To ensure a meaningful learning experience and to better understand how this course and program prepare graduates for success, students are encouraged to review the Program Standard by visiting <http://www.tcu.gov.on.ca/pepg/audiences/colleges/progstan/>. For apprenticeship-based programs, visit <http://www.collegeoftrades.ca/training-standards>.

Course Learning Outcomes

The student will reliably demonstrate the ability to:

1. Discuss what 'prevention' means in the context of mental health and substance use on societal and community levels
2. Differentiate harm reduction and abstinence perspectives; social, recovery, and medical models of intervention/progress
3. Debate controversial harm reduction interventions such as opiate substitution treatment, needle exchange programs, housing first programs, and supervised injection sites citing relevant readings and evidence-based sources
4. Formulate a mental health promotion initiative rooted in specific determinants of mental health using an interprofessional approach
5. Engage in interprofessional education through collaborative practice experience
6. Examine existing prevention and mental health promotion initiatives that are either population- or issue-based using a critical lens

Essential Employability Skills (EES)

The student will reliably demonstrate the ability to*:

1. Communicate clearly, concisely and correctly in the written, spoken, and visual form that fulfills the purpose and meets the needs of the audience.
2. Respond to written, spoken, or visual messages in a manner that ensures effective communication.
5. Use a variety of thinking skills to anticipate and solve problems.
6. Locate, select, organize, and document information using appropriate technology and information systems.

7. Analyze, evaluate, and apply relevant information from a variety of sources.
8. Show respect for diverse opinions, values belief systems, and contributions of others.
9. Interact with others in groups or teams in ways that contribute to effective working relationships and the achievement of goals.
10. Manage the use of time and other resources to complete projects.

**There are 11 Essential Employability Skills outcomes as per the Ministry Program Standard. Of these 11 outcomes, the following will be assessed in this course.*

Global Citizenship and Equity (GC&E) Outcomes

The student will reliably demonstrate the ability to*:

1. Identify one's roles and responsibilities as a global citizen in personal and professional life.
2. Identify beliefs, values and behaviours that form individual and community identities and the basis for respectful relationships.
3. Analyze issues of equity at the personal, professional, and global level.

**There are 6 institutional Global Citizenship & Equity outcomes. Of these 6 outcomes, the following will be assessed in this course.*

Methods of Instruction

In-class lectures, online discussion board.

Text and other Instructional/Learning Materials

Online Resource(s):

eCentennial Course Discussion Board.

Custom Courseware:

Purchase at bookstore.

Evaluation Scheme

- ⇨ Online Discussion Board: Two main reflection exercises, 3-4 single-spaced typed paragraphs each, plus 2 responses to other students' posts.

Reflect on

- a) personal biases toward/against harm reduction and any shifts as a result of course readings and class discussion; and
 - b) discuss specific determinants of mental health from the readings and how they are relevant in your experience of a community you belong to (e.g. racialized, newcomer, urban/suburban, LGBTTTIQ/Q, neighborhood, etc.).
- ⇨ Prevention Program Design: Select a context or community to work with: e.g. high school, college campus, ethnoracial community, survivors of domestic violence, newcomers, incarcerated people, etc. Design a substance use prevention program for this context or community and identify whether it's a primary, secondary or tertiary prevention model. Provide a rationale using course readings and other sources for this program. Discuss how harm reduction fits into this model, possible "concerns" you may receive from the community, and how you might address these.

3-5 pages, typed double-spaced.

- ⇨ Interprofessional health promotion initiative: Work with a partner or in a small group during your Interprofessional Education Day. This setting will include a mix of AMHW and Nursing students. Use

knowledge and perspectives in the dyad/group to respond to a mental health/substance use community case study and formulate a culturally appropriate mental health promotion initiative. Work collaboratively but submit your visioning notes individually to your professor via eCentennial. Be sure to rationalize the chosen initiative focus (e.g. develop policy/environment that reduces stress, provides adequate food for all, creates recreation opportunities) by connecting it directly to the challenges identified in the community case study.

1-2 typed pages, to be completed in-class (or submitted the same day).

- ⇒ Investigation & Analysis - Mental Health Promotion Program: Scan existing mental health promotion programs/initiatives in a community to which you belong (e.g. neighborhood, school, religious/faith-based, Aboriginal, LGBTQ, or other geographic/identity-based group). Select one of these initiatives (e.g. Black Lives Matter's Freedom School, Totally OUTRight, programs of Counselling Services, a skills enhancing mobile app, etc.) to analyze the objectives, how the program fits into McCollum's Model of Mental Health Education, and its level of cultural "competency" or appropriateness.

3-5 pages, typed double-spaced.

- ⇒ Tests: Midterm and Final Tests: multiple choice, covers all assigned course readings.

Evaluation Name	CLO(s)	EES Outcome(s)	GCE Outcome(s)	Weight/100
Online Discussion Board	1, 2	1, 2, 8	2	10
Prevention Program Design	1, 2, 3	1, 5, 7, 10	1, 3	20
Interprofessional health promotion initiative	4, 5	7, 9, 10	1	10
Investigation & Analysis - Mental Health Promotion Program	6	6, 7	3	20
Tests	1, 2, 3, 4, 5, 6	5, 7	2, 3	40
Total				100%

If students are unable to write a test they should immediately contact their professor or program Chair for advice. In exceptional and well documented circumstances (e.g. unforeseen family problems, serious illness, or death of a close family member), students may be able to write a make-up test.

All submitted work may be reviewed for authenticity and originality utilizing Turnitin®. Students who do not wish to have their work submitted to Turnitin® must, by the end of the second week of class, communicate this in writing to the instructor and make mutually agreeable alternate arrangements.

When writing tests, students must be able to produce official College photo identification or they may be refused the right to take the test or test results will be void.

Student Accommodation

It is College Policy to provide accommodation based on grounds defined in the Ontario Human Rights Code. Accommodation may include modifications to standard practices. Students with disabilities who require academic accommodations must register with the Centre for Students with Disabilities. Students requiring accommodation based on other human rights grounds should talk with their professors as early as possible. Please see the Student Accommodation Policy.

Use of Dictionaries

- Any dictionary (hard copy or electronic) may be used in regular class work.
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Program or School Policies

Written Work and Assignments

All assignments must be typewritten. Handwritten assignments will not be accepted unless explicitly requested by the course instructor.

Students are responsible for keeping copies of all assignments and submitted documents: please ensure that you save print or electronic copies of all assignments and/or other documents prior to submitting them for grading. Note that students may be required to re-submit print or electronic copies of assignments/other documents. A minimum 24 hour notification period will be provided if students are required to re-submit print or electronic copies of academic written work/other documents.

Missed Tests, In-class Assignments and Take-home Assignments

Students who do not submit assignments by the required deadline, or students who miss in-class tests or assignments, must provide written documentation in order to be considered for make-up tests, assignments or extensions without penalty. Documentation is required to substantiate exceptional circumstances leading to missed tests/late assignments, and such requests are considered on a case-by-case basis by course faculty. In the case of an emergency, students are responsible for contacting the faculty as soon as possible after the missed test/assignment to request alternate arrangements/assignment extension. Failure to communicate in a timely manner (normally within 48 hours) could result in a failing grade on the assignment or test. Tests or assignments cannot be rewritten after the faculty has handed back the test or assignment. Please refer to the accommodation policies (<http://www.centennialcollege.ca/sitesearch.aspx?q=accomodation+policy>) for information regarding negotiated accommodation on medical, religious or family grounds. Student Relations is available to advise students of accommodation supports and services including how to access these support services (<http://www1.centennialcollege.ca/StudentRelationsOffice>).

***Written documentation is required to support claims of exceptional circumstances, i.e. illness, family emergencies, etc., or prior negotiation of accommodation in collaboration with the faculty member and the Centre for Students with Disabilities and/or Student Relations.**

Late Assignment Policy

Late assignments submitted without acceptable documentation or negotiated extensions are calculated at a 5% grade deduction per day late.

Course Policies

N/A

College Policies

Students should familiarize themselves with all College Policies that cover academic matters and student conduct.

All students and employees have the right to study and work in an environment that is free from discrimination and harassment and promotes respect and equity. Centennial policies ensure all incidents of harassment, discrimination, bullying and violence will be addressed and responded to accordingly.

Academic honesty is integral to the learning process and a necessary ingredient of academic integrity. Academic dishonesty includes cheating, plagiarism, and impersonation. All of these occur when the work of others is presented by a student as their own and/or without citing sources of information. Breaches of academic honesty may result in a failing grade on the assignment/course, suspension or expulsion from the college.

For more information on these and other policies, please visit www.centennialcollege.ca/about-centennial/college-overview/college-policies.

Students enrolled in a joint or collaborative program are subject to the partner institution's academic policies.

PLAR Process

This course is eligible for Prior Learning Assessment and Recognition (PLAR). PLAR is a process by which course credit may be granted for past learning acquired through work or other life experiences. The PLAR process involves completing an assessment (portfolio, test, assignment, etc.) that reliably demonstrates achievement of the course learning outcomes. Contact the academic school to obtain information on the PLAR process and the required assessment.

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Topical Outline (subject to change):

Week	Topics	Readings/Materials	Weekly Learning Outcome(s)	Instructional Strategies	Evaluation Name	Evaluation Date
1	Harm Reduction / Prevention	Collins, S. E., Clifasefi, S. L., Logan, D. E., Samples, L. S., Somers, J. M., & Marlatt, G. (2012). Chapter 1 - Current Status, Historical Highlights, and Basic Principles of Harm Reduction. In G. Marlatt, M. E. Larimer, & K. Witkiewitz (Eds.), Harm Reduction: Pragmatic Strategies for Managing High-Risk Behaviors (pp. 3-35). New York City, NY: The Guilford Press.	Understand and discuss harm reduction as a concept	Lecture and discussion		
2	Harm Reduction / Prevention	Csiernik, R. (2016). Chapter 6 - Prevention. In Substance Use and Abuse: Everything Matters (2nd ed., pp. 307-34). Toronto, ON: Canadian Scholars' Press. Waxman, M. B., & Csiernik, R. (2010). Chapter 4 - Culture as Prevention: A Case Study of Urban Canadian Jewish Male Students. In R. Csiernik & W. S. Rowe (Eds.), Responding to the Oppression of Addiction: Canadian Social Work Perspectives (2nd ed., pp. 47-62). Toronto,	Discuss primary, secondary and tertiary levels of prevention. Explore role of harm reduction and abstinence models. Reflect on protective factors including cultural systems.	Lecture and discussion		

Week	Topics	Readings/Materials	Weekly Learning Outcome(s)	Instructional Strategies	Evaluation Name	Evaluation Date
		ON: Canadian Scholar's Press.				
3	Harm Reduction / Prevention	Buchanan, J. (2005). Chapter 5 - Problem Drug Use in the 21st Century: A Social Model of Intervention. In T. Heinonen & A. Metteri (Eds.), Social work in health and mental health: Issues, developments, and actions (pp. 65-84). Toronto, ON: Canadian Scholar's Press.	Differentiate between the social model and medical model of prevention/intervention. Discuss utility and shortfall of medical models.	Lecture and discussion.	Online discussion - A (5%)	
4	Harm Reduction / Prevention	Wardman, D. (2014). Chapter 8 - Harm Reduction. In P. Menzies & L. F. Lavallée (Eds.), Journey to Healing: Aboriginal People with Addiction and Mental Health Issues (pp. 101-116). Toronto, ON: Centre for Addiction and Mental Health. Reece, R. (2013). Chapter 8 - Razors, Rigs and Rights: HIV Prevention and the Case for Harm Reduction Strategies in Women's Prisons. In J. Gahagan (Ed.), Women and HIV Prevention in Canada: Implications for Research, Policy, and Practice (pp. 175-94). Toronto, ON: Women's Press/Canadian	Discuss the role of harm reduction in specific communities, including Aboriginal communities and in prisons. Acknowledge the problems that arise with abstinence models in these communities.	Lecture, video and discussion.		

Week	Topics	Readings/Materials	Weekly Learning Outcome(s)	Instructional Strategies	Evaluation Name	Evaluation Date
5	Harm Reduction / Prevention	<p>Scholars' Press.</p> <p>Rowe, W. S., & Gonzalaz, C. (2010). Chapter 3 - Supervised Injection Sites: Harm Reduction and Health Promotion. In R. Csiernik & W. S. Rowe (Eds.), Responding to the Oppression of Addiction: Canadian Social Work Perspectives (2nd ed., pp. 35-46). Toronto, ON: Canadian Scholar's Press.</p> <p>Methadone maintenance treatment: Client handbook (2008). Toronto, ON: Centre for Addiction and Mental Health. Retrieved from https://www.porticonetwork.ca/documents/489955/0/MethadoneMaintenanceTreatmentClientHandbook%20PDF/e04600c3-d0c1-47e1-9a25-346a66967a77</p>	<p>Explore personal bias, values, questions and concerns in application of harm reduction strategies.</p> <p>Clarify myths and review evidence of success/challenges with supervised injection sites and opioid substitution treatment.</p>	Lecture, video, discussion.		
6	Mental Health Promotion	<p>Sharma, M., Artri, A., & Branscum, P. (2013). Chapter 1 - Mental Health, Mental Illness, and Historical Perspectives. In Foundations of Mental Health Promotion (pp. 1-6 and 19-22). Burlington, MA: Jones & Bartlett Learning.</p> <p>Sharma, M., Artri, A., &</p>	Differentiate between health education and health promotion.	Lecture, in-class group work, and discussion.	Prevention Program Design (20%)	

Week	Topics	Readings/Materials	Weekly Learning Outcome(s)	Instructional Strategies	Evaluation Name	Evaluation Date
		Branscum, P. (2013). Chapter 2 - Roles of Health Educators and Health Promoters in Mental Health Promotion. In Foundations of Mental Health Promotion (pp. 29-44). Burlington, MA: Jones & Bartlett Learning.				
7	Test 1 and Mental Health Promotion Cont'd	Sharma, M., Artri, A., & Branscum, P. (2013). Chapter 3 - Determinants of Mental Health. In Foundations of Mental Health Promotion (pp. 47-75). Burlington, MA: Jones & Bartlett Learning. Suggested: Quality of Life Research Unit, University of Toronto. (n.d.). The Quality of Life Model. Retrieved from http://sites.utoronto.ca/qol/qol_model.htm	Discuss and reflect on determinants of mental health as they apply to us personally and to our communities.	Lecture and discussion.	Test 1 (20%)	
8	Mental Health Promotion	Goldner, E. M., Jenkins, E., Palma, J., & Bilsker, D. (2011). Chapter 15 - Mental Health and Substance Use: Opportunities to Improve Population and Public Health. In A Concise Introduction to Mental Health in Canada (pp. 277-96). Toronto, ON: Canadian Scholar's Press.	Consider what it means to foster a cultural landscape that promotes mental health with community/geographic level.	Lecture and discussion.	Online discussion - B (5%)	

Week	Topics	Readings/Materials	Weekly Learning Outcome(s)	Instructional Strategies	Evaluation Name	Evaluation Date
		Pederson, A., Frankish, J., Hume, C., Krausz, M., Patterson, M., Strehlau, V., Somers, J., Edwards, P., Plouffe, L., Vissandje´e, B., Hyman, I., Janczur, A., Villefranche, M., Poole, N., and Fraser, T. (2012). Chapter 9 - Population Approaches to Health Promotion in Canada. In I. Rootman, S. Dupe´re´, A. Pederson, & M. O’Neill (Eds.), Health Promotion in Canada: Critical Perspectives on Practice (3rd ed., pp. 138-159). Toronto, ON: Canadian Scholar’s Press.				
9	IPE	Interprofessional Education Day	Collaborative problem solving and innovation.	Group work.	MH promotion initiative (10%)	
10	Interventions	Tarasevich, S. L. (2014). Chapter 11 - Facebook, Cell Phones, and Mental Health Communications. In C. I. Fertman (Author) & M. M. Delgado (Ed.), Promoting Child and Adolescent Mental Health (pp. 245-74). Burlington, MA: Jones & Bartlett Learning. Boasso, A., Kadesch, H., & Litz, B. T. (2014). Internet-Based Interventions for PTSD. In M. J. Friedman, T. M. Keane, & P. A. Resick	Discuss mental health needs for children and adolescents. Review concept of trauma and PTSD and contemplate appropriate interventions. Explore the use of technology as an intervention.	Lecture, social media exploration (bring your phones!) and discussion.		

Week	Topics	Readings/Materials	Weekly Learning Outcome(s)	Instructional Strategies	Evaluation Name	Evaluation Date
		(Eds.), Handbook of PTSD: Science and Practice (2nd ed., pp. 557-70). New York City, NY: The Guilford Press.				
11	Interventions / Measuring Change	<p>Anthony, W. A. (1993). Recovery from mental illness: The guiding vision of the mental health service system in the 1990s. <i>Psychosocial Rehabilitation Journal</i>, 16(4), 11-23.</p> <p>Linklater, R. (2014). Indigenous Strategies for Helping and Healing. In <i>Decolonizing Trauma Work: Indigenous Stories and Strategies</i> (pp. 132-57). Halifax, NS: Fernwood Publishing.</p>	<p>Discuss the Recovery model.</p> <p>Explore other cultural lenses and language for "interventions".</p>	Lecture, video, discussion.		
12	Interventions	Tsembaris, S. & Henwood, B. (2013). Chapter 9 - Housing First: Homelessness, Recovery, and Community Integration. In V. L. Vandiver (Ed.), <i>Best Practices in Community Mental Health</i> (pp. 132-50). Chicago, IL: Lyceum Books.	<p>Discuss/debate the housing first model.</p> <p>Consider housing as a form of harm reduction.</p>	Lecture, discussion, group work (review editorial news articles).		
13	Interventions (for co-occurring issues)	Rafferty, M. S., & Drake, R. E. (2013). Chapter 1 - Integrated Treatment for People with Co-occurring Mental Illness and	<p>Analyze the history and trajectory of our service system.</p> <p>Discuss the importance of an integrated system.</p>	Lecture and discussion.	Investigation & Analysis (25%)	

Week	Topics	Readings/Materials	Weekly Learning Outcome(s)	Instructional Strategies	Evaluation Name	Evaluation Date
		<p>Substance Use Disorders. In V. L. Vandiver (Ed.), Best Practices in Community Mental Health (pp. 3-14). Chicago, IL: Lyceum Books.</p> <p>Bressi Nath, S. (2013). Chapter 4 - Best Practices for Improving the Mental Health of Persons with Serious Mental Illness and Comorbid Physical Health Conditions. In V. L. Vandiver (Ed.), Best Practices in Community Mental Health (pp. 47-64). Chicago, IL: Lyceum Books.</p>				
14	Final Test	N/A	N/A	N/A	Test 2 (20%)	