

Course Syllabus
EM25...H – Muslim Mental Health: Research, Policy & Practice
Emmanuel College
Toronto School of Theology
2019-2020

Instructor Information

Instructor: Farah Islam, PhD,
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Course Identification

Course Number: EMP25...H
Course Format: *In-class* or *Online*
Course Name: Muslim Mental Health: Research, Policy & Practice
“Special Topics” Elective in MPS, Spiritual Care & Psychotherapy Certificate program
Course Location: EM or IIT
Prerequisites: EMT 3610 Religious Thought and Spirituality in Islam

Course Description

This course introduces spiritual care and mental health professionals to research on Muslim mental health, mental health policy in Canada and its application to Muslim populations, and lastly, how spiritual and mental health care can effectively meet the needs of Muslim populations, particularly those living in the Toronto context. An intersectional, social determinants of health, and ecological/systems lens will be applied to glean a contextual understanding of the factors affecting Muslim mental health. Contextual factors such migration, gender, Islamophobia, and mental health issues experienced by Muslim youth populations will be examined in depth in this course.

Course Resources

Required Course Texts/Bibliography

- Ahmed, Sameera and Amer, Mona M. (Eds.). *Counseling Muslims: Handbook of Mental Health Issues and Interventions* (New York: Taylor and Francis Group, 2012)
- Isgandarova, Nazila. *Muslim Women, Domestic Violence, and Psychotherapy: Theological and Clinical Issues*. (New York: Routledge, 2018)
- Dwairy, Marwan. *Counselling and Psychotherapy with Arabs and Muslims: A Culturally Sensitive Approach* (New York: Teachers College Press, Columbia University, 2006)
- Rassool, G. Hussein. (Ed.) *Cultural Competence in Caring for Muslim Patients*. (Basingstoke, United Kingdom: Palgrave Macmillan, 2014)
- York Al-Karam, Carrie. *Islamically Integrated Psychotherapy* (West Conshohocken, PA: Templeton Press, 2018)

- Selected readings from journals such as:
 - *The Journal of Muslim Mental Health* (New York University. Center for Global Health)
 - *Mental Health, Religion & Culture* (Routledge)
 - *Transcultural Psychiatry* (SAGE Publications)
 - *Journal Of Religion & Spirituality In Social Work: Social Thought* (Haworth Press)

Course Website(s)

- Quercus: <https://q.utoronto.ca/>

This course uses Quercus for its course website. To access it, go to the UofT Quercus login page at <https://q.utoronto.ca/> and login using your UTORid and password. Once you have logged in to Quercus using your UTORid and password, look for the **My Courses** module, where you'll find the link to the website for all your Quercus-based courses. (Your course registration with ACORN gives you access to the course website in Quercus.) Information for students about using Quercus can be found at: <https://community.canvaslms.com/docs/DOC-10701> . Students who have trouble accessing Quercus should ask [insert college contact] for further help.]

Class Format

This course will be taught using the following formats:

Lectures will be designed to highlight important issues in the research, policy, and practice related to Muslim mental health. These lively, PowerPoint lectures will have built-in class discussion exercises to enhance learning.

Class dialogue will be encouraged throughout the class so students can learn from one other and share their experiences. Class discussion will be encouraged through class debates, small-group, peer presentations, and larger group brainstorming and discussions.

Course Learning Objectives/Outcomes

Emmanuel College

BD Level

Students successfully completing this course will be able to demonstrate the following learning outcomes. (Not all categories will be required for all courses.)

(A) IN RESPECT OF GENERAL ACADEMIC SKILLS

(B) IN RESPECT OF THE UNDERSTANDING OF THE CONTENT OF ONE OR MORE THEOLOGICAL DISCIPLINES

(C) IN RESPECT OF PERSONAL AND SPIRITUAL FORMATION

(D) IN RESPECT OF MINISTERIAL AND PUBLIC LEADERSHIP

The following MPS Learning Outcomes will be covered in this course:

Learning Outcomes

Religious Faith and Heritage

- Demonstrate knowledge of religious heritage, and articulate clearly their own theological positions (as related to spiritual practices).
 - Students will articulate key elements of the Islamic religious heritage at the nexus of mental health. They will identify their own positionality in relation to mental health and Islam.
- Interpret religious texts using a variety of methods, sources and norms.
 - Students identify and analyze verses and passages of Islamic texts which are relevant to the study of mental health (e.g. Qur'an, hadith, Prophetic history (seerah))
- Identify and respect the diversity of theological viewpoints and practices within their own religious tradition.
 - Differences of opinion within Islam in regards to mental illness and the treatment of mental illness will be recognised and assessed

Culture and Context

- Demonstrate critical understanding for one's area of specialization of the relationship between faith practices and cultural contexts.
 - Students will demonstrate knowledge about how mental health issues are treated and dealt with amongst Muslim populations and the role faith plays in healing
- Employ diverse methods of analysis in relating to the cultural contexts of one's specialization.
 - Students will identify the differences between quantitative, qualitative, and mixed methods research and their applicability to the study of Muslim mental health. Students will conduct an in-depth literature review of a topic in Muslim mental health and write a Research Proposal based on their analysis of the gaps in the literature.
- Give evidence of critical self-awareness, with regard to their own – and others' – faith perspectives and practices of care and service.
 - Students will demonstrate awareness of their own positionality as researchers and mental health practitioners

Spiritual/Vocational Formation

- Display capacity for self-reflexive and spiritual practices within communities of faith.
 - Students will show knowledge of Islamic traditional healing. Students will demonstrate a self-reflexive approach to the study of traditional healing practices.

Practices of Area of Specialization

- Demonstrate initiative, responsibility and accountability in personal relationships and group contexts.
 - Students will brainstorm ways they can take accountability for their clients and show awareness of the important role of advocacy they need to take in order to make mental health care more accessible for their Muslim clients. Students will write a Self Reflexive paper to explore their role in dismantling mental health stigma in Muslim communities.

CPRO Entry-to-Practice Competencies			How the competency is demonstrated
1.1 Integrate a theory of human psychological functioning.			
a	Integrate knowledge of human development across the lifespan.	✓	<ul style="list-style-type: none"> Students will study Muslim mental health across the life course (early childhood, adolescence/emerging adulthood, etc.) Students will study the social determinants of Muslim mental health to understand the related contextual factors (e.g. migration, racism, gender) Students will learn about the systemic-level barriers Muslims face in accessing mental health care
b	Integrate knowledge of contextual and systemic factors that facilitate or impair human functioning.	✓	
c	Integrate knowledge of the psychological significance of spiritual, moral, social, emotional, cognitive, behavioural, sexual, gender, and biological development.	✓	
1.2 Work within a framework based upon established psychotherapeutic theory.			
a	Integrate the theory or theories upon which the therapist's practice is based.	✓	<ul style="list-style-type: none"> Students will develop their own culturally safe model of mental health care for Muslim populations based on existing theories of care Trauma in relation to abuse and migration will be examined in relation to their impact on Muslim mental health
b	Integrate knowledge of how human problems develop, from the viewpoint of the therapist's theoretical orientation.	✓	
c	Identify circumstances where therapy is contraindicated.		
d	Recognize the benefits, limitations, and contraindications of differing psychotherapeutic approaches.		
e	Establish a therapeutic relationship informed by the theoretical framework.		
f	Integrate a theory of change consistent with the therapist's theoretical orientation.	✓	
g	Integrate knowledge of the impact of trauma on psychological functioning.		
1.4 Integrate awareness of self in relation to professional role.			
a	Integrate knowledge of the impact of the therapist's self on the therapeutic process.	✓	<ul style="list-style-type: none"> Students will reflect on their own inherent biases Self-reflexivity in research will be discussed Students will learn Muslim mental health at the intersection of key contextual factors (migration, gender, etc.) so they can learn to empathize with their clients Stories of lived experience with mental illness and surviving the mental health care system will be shared from Muslim points of view to help students further develop
b	Recognize how the therapist's values and attitudes, both in and out of awareness, may impact diverse clients.	✓	
c	Recognize the cognitive, emotional and behavioural patterns of the therapist that may influence therapeutic relationship.	✓	
d	Recognize instances where the therapist's life experiences may enhance or compromise therapeutic effectiveness.	✓	

			<p>empathy towards Muslim clients</p> <ul style="list-style-type: none"> Students will write a Self-Reflection paper and explore their own role in advocating for Muslim mental health clients' rights, what they need to do in order to make the mental health care system more accessible, and how to eradicate mental health stigma in Muslim populations
1.5 Integrate knowledge of human and cultural diversity.			
a	Integrate knowledge of human diversity.	✓	<ul style="list-style-type: none"> The intersectional and social determinants lens of this course will challenge students to consider the intersecting layers of power dynamics and structural barriers Muslim populations face Students will reflect on how to bring cultural safety into their care and what cultural safety should look like when working with Muslim populations The intersectional approach will challenge students to reflect on systemic racism, Islamophobia, and oppression within the Canadian context and how this impacts Muslim mental health Students will write a Self-Reflection paper and explore their own role in advocating for Muslim mental health clients' rights, what they need to do in order to make the mental health care system more accessible, and how to eradicate mental health stigma in Muslim populations
b	Recognize how oppression, power and social injustice may affect the client and also the therapeutic process.	✓	
c	Adapt the therapist's approach when working with culturally diverse clients.	✓	
d	Recognize barriers that may affect access to therapeutic services.	✓	
e	Identify culturally-relevant resources.	✓	
2. Collegial & Inter-professional Relationships			
2.1 Use effective professional communication.			
a	Use clear and concise written communication.	✓	<ul style="list-style-type: none"> Students will have 2 written assignments – Research Proposal and Reflection Paper to hone their written communication skills Students will have 2 oral presentations to hone their oral communication skills The oral presentations will be 5 minutes each in order to develop concise and effective communication Students will be asked to attentively listen to their peers' presentations
b	Use clear and concise oral communication.	✓	
c	Use clear and concise electronic communication.		
d	Communicate in a manner appropriate to the recipient.	✓	
e	Use effective listening skills.	✓	
f	Differentiate fact from opinion.		
g	Recognize and respond appropriately to non-verbal communication.	✓	

			<ul style="list-style-type: none"> and provide peer evaluations For the Reflection Paper oral presentation, students will also need to develop discussion questions to pose to the class and moderate class discussion
2.2 Maintain effective relationships.			
a	Show respect to others.	✓	<ul style="list-style-type: none"> Students will be expected to interact professionally and respectfully with their peers Students will participate in peer evaluation to give them a chance to engage in providing constructive feedback to colleagues
b	Maintain appropriate professional boundaries.	✓	
c	Recognize and address conflict in a constructive manner.	✓	
d	Demonstrate personal and professional integrity.	✓	
2.3 Contribute to a collaborative and productive atmosphere.			
a	Create and sustain working relationships with other professionals encountered in practice.	✓	<ul style="list-style-type: none"> Students will engage in group discussion, group problem-solving, paired discussion, class debates, and peer evaluation in order to develop collegial relationships and promote collaboration between colleagues
b	Create and sustain working relationships with colleagues of diverse socio- cultural identities.	✓	
c	Initiate inter-professional collaborative practice.	✓	
3.2 Apply an ethical decision making process.			
a	Recognize ethical issues encountered in practice.	✓	<ul style="list-style-type: none"> Research ethics as well as ethics in relation to cultural safety in providing mental health care for Muslim populations will be discussed Ethical dilemmas in providing care to Muslim clients will be discussed during class problem-solving discussion exercises
b	Resolve ethical dilemmas in a manner consistent with legislation and professional standards.	✓	
c	Accept responsibility for course of action taken.	✓	
3.3 Maintain self-care and level of health necessary for responsible therapy.			
a	Maintain personal physical, psychological, cognitive and emotional fitness to practice.	✓	<ul style="list-style-type: none"> Students are encouraged to be self-aware of their own limitations Students will discuss their positionality and self-reflexivity in research and practice will be encouraged Students are encouraged to build a network of support Class activities and discussion will help build professional
b	Build and use a personal and professional support network.	✓	
c	Maintain personal hygiene and appropriate professional presentation.		

			networks
3.8 Assist client with needs for advocacy and support.			
a	Identify when advocacy or third-party support may be of value to the client, and advise client accordingly.		<ul style="list-style-type: none"> Mental health care access barriers will be covered in the class and students will write a Self Reflection paper on how they can effectively advocate for their clients' rights and mitigate service access barriers and mental health stigma
b	Support client to overcome barriers.	✓	
4. Therapeutic Process			
4.1 Orient client to therapist's practice.			
a	Describe therapist's education, qualifications and role.		
b	Differentiate the role of the therapist in relation to other health professionals.		
c	Explain the responsibilities of the client and the therapist in a therapeutic relationship.		

4.2 Establish and maintain core conditions for therapy.			
a	Employ empathy, respect, and authenticity.	✓	<ul style="list-style-type: none"> The intersectional approach and learning the contextual factors that impact Muslim mental health will help students learn how to empathize with their clients, respect their lived experiences, establish deeper rapport with their clients, take a non-judgmental stance, and greater sensitivity to Muslim clients
b	Establish rapport.	✓	
c	Demonstrate awareness of the impact of the client's context on the therapeutic process.	✓	
d	Demonstrate sensitivity to the setting in which therapy takes place.		
e	Assume non-judgmental stance.	✓	
f	Use theoretical concepts in terms the client can understand.		
g	Foster client autonomy.		
h	Maintain appropriate therapeutic boundaries.		
i	Demonstrate dependability.		
4.3 Ensure safe and effective use of self in the therapeutic relationship.			
a	Demonstrate awareness of the impact of the therapist's subjective context on the therapeutic process.	✓	<ul style="list-style-type: none"> Students will discuss their own personal biases, experiences, positionality and its impact upon the therapeutic process Power dynamics will be discussed and students will be encouraged to take an intersectional lens to understand their clients' context Effective verbal communication will be developed through oral presentations
b	Recognize the impact of power dynamics within the therapeutic relationship.	✓	
c	Protect client from imposition of the therapist's personal issues.		
d	Employ effective and congruent verbal and non-verbal communication.	✓	

e	Use self-disclosure appropriately.		
4.5 Structure and facilitate the therapeutic process.			
a	Communicate in a manner appropriate to client's developmental level and socio-cultural identity.	✓	<ul style="list-style-type: none"> This course is designed to help students understand the sociocultural identity of their Muslim clients Students will learn the sociocultural context of their Muslim clients to understand their strengths, vulnerabilities, resilience, and resources (e.g. how can the mosque be a mental health resource for clients?)
b	Identify and respond appropriately to client's strengths, vulnerabilities, resilience and resources.	✓	
c	Respond non-reactively to anger, hostility and criticism from the client.		
d	Respond professionally to expressions of inappropriate attachment from the client.		
e	Anticipate and respond appropriately to the expression of intense emotions and help the client to understanding and management.		
f	Recognize a variety of assessment approaches.		
g	Formulate an assessment.		
h	Develop individualized goals and objectives with the client.		
i	Formulate a direction for treatment or therapy.		
j	Practise therapy that is within therapist's level of skill, knowledge and judgement.		
k	Focus and guide sessions.		
l	Engage client according to their demonstrated level of commitment to therapy.		
m	Facilitate client exploration of issues and patterns of behaviour.		
n	Support client to explore a range of emotions.		
o	Employ a variety of helping strategies.		
p	Ensure timeliness of interventions.		
q	Recognize the significance of both action and inaction.		
r	Identify contextual influences.	✓	
s	Review therapeutic process and progress with client periodically, and make appropriate adjustments.		
t	Recognize when to discontinue or conclude therapy.		
4.6 Refer client.			
A	Develop and maintain a referral network.	✓	<ul style="list-style-type: none"> Muslim community mental health services and initiatives will be highlighted to provide students a list of services they could potentially refer their clients to
B	Identify situations in which referral or specialized treatment may benefit the client, or be required.		
C	Refer client, where indicated, in a reasonable time.		
4.7 Conduct an effective closure process.			
A	Prepare client in a timely manner for the ending of a course of therapy.		

B	Outline follow-up options, support systems and resources.		
5. Professional Literature & Applied Research			
5.1 Remain current with professional literature.			
A	Read current professional literature relevant to practice area.	✓	<ul style="list-style-type: none"> • Students will conduct a literature review for the Research Proposal assignment • Students will learn how to use the university research library database to access scholarly journal articles within the field • Students will need to critically analyze the research in the literature, determine the gaps, and devise their own research project based on their analysis • The readings in this course have been chosen to enhance students understanding of their Muslim clients
b	Access information from a variety of current sources.	✓	
c	Analyze information critically.	✓	
d	Determine the applicability of information to particular clinical situations.	✓	
e	Apply knowledge gathered to enhance practice.	✓	
f	Remain current with developments in foundational areas.	✓	
5.2 Use research findings to inform clinical practice.			
a	Integrate knowledge of research methods and practices.	✓	<ul style="list-style-type: none"> • Students will write a Research Proposal where they will need to carry out an in-depth literature review of a topic in Muslim mental health research • Students will integrate their knowledge of the present literature and devise their own novel research project to fill a gap in the field • Both the Research Proposal assignment and Self Reflection assignment are designed to help students learn about important issues in Muslim mental health and then reflect on their role in promoting mental health in Muslim populations in order to enhance their practice as therapists in the field
b	Determine the applicability of research findings to particular clinical situations.	✓	
c	Analyze research findings critically.	✓	
d	Apply knowledge gathered to enhance practice.	✓	

Evaluation

Requirements

The final grade for the course will be based on evaluations in [five] areas:

Graduate Students:

(1) *Participation (10%)* – In addition to participating in the regular activity of the class, including the reading of the required texts, students are expected to engage in class discussions, debates, and group

brainstorming and discussion activities. Students will be asked to listen attentively during their peer's presentations, ask questions, and offer constructive feedback for improvement (peer-grading).

(2) *Research proposal paper (30%)* – Students will be asked to write a 20-page research proposal on a topic of their choosing in the field of Muslim mental health. Students will need to design their own research project, conduct an extensive literature review on the topic, and outline the proposed methods that will be used for the research study.

(3) *Reflection paper (30%)* – Students will end the course by writing a 15-page reflection paper on future directions and innovations needed in order to advance the field of Muslim mental health and what role they will take in advancing the field forward.

(4) *Research Presentation (15%)* – Students will present their research proposal to the class in a formal 5-min seminar presentation. Peers will be asked to offer written constructive feedback.

(5) *Reflection Paper Presentation (15%)* – Students will present their thoughts on what innovations and practices are needed in order for the field of Muslim mental health needs to be advanced in a formal 5-min seminar presentation. The presenter will be asked to prepare a thoughtful discussion question to engage their peers after their presentation.

Grading System - Basic Degree Students

1000, 2000 and 3000 level courses use the following numerical grading scale (see section 11.2 of the BD Handbook):

90-100 (A+)	Exceptional
85-89 (A)	Outstanding
80-84 (A-)	Excellent
77-79 (B+)	Very Good
73-76 (B)	Good
70-72 (B-)	Acceptable
0-69 (FZ)	Failure

Grading System - Graduate Degree Students

5000, 6000 and 7000 level courses use the following alpha grading scale;

A+	(90-100)	Profound & creative
A	(85-89)	Outstanding
A-	(80-84)	Excellent
B+	(77-79)	Very Good
B	(73-76)	Good
B-	(70-72)	Satisfactory at a post-baccalaureate level
FZ	(0-69)	Failure

Please see the appropriate handbook for more details about the grading scale and non-numerical grades (e.g. SDF, INC, etc).

Late work (BD). Basic Degree students are expected to hand in assignments by the date given in the course outline. [The instructor should stipulate the penalty for late work.] The absolute deadline for the course is the examination day scheduled for the course or the last day of exam week for the semester in which the course is taught, whichever is sooner.

This penalty is not applied to students with documented medical or compassionate difficulties or exceptional reasons (e.g., a death in the family or a serious illness); students facing such difficulties are kindly requested to consult with their faculty adviser or basic degree director, who should make a recommendation on the matter to the instructor and request an SDF. The absolute deadline for obtaining an SDF for the course is the examination day scheduled for the course or the last day of examination week, whichever is sooner. An SDF must be requested from the registrar's office in the student's college of registration no later than the last day of exam week in which the course is taken. The SDF, when approved, will have a mutually agreed upon deadline that does not extend beyond the conclusion of the following term. If a student has not completed work but has not been granted an SDF, a final mark will be submitted calculating a zero for work not submitted.

Late work (Graduate). The prima facie deadline for the completion of work in a course is the last day of the examination week for the trimester in which the course is taken. Students are expected to meet the course deadlines of the instructor offering the course and are advised to plan their research projects accordingly. Students who find themselves unable to meet deadlines for completing coursework can, under certain conditions, receive extensions for completing the work after the dates set by the college in which the course is offered.

The authority to grant an extension for the completion of work in a course beyond the original TST or college deadline (whichever is earlier) for that course rests with the student's college Graduate Director, not the instructor of the course. Nevertheless, the instructor's signature is required for course extension requests to be processed. Students will petition their college Graduate Director for extensions, using a standard form provided by TST on its website. See Section 7.11 of the Conjoint Graduate Degree Handbook.

Course grades. Consistently with the policy of the University of Toronto, course grades submitted by an instructor are reviewed by a committee of the instructor's college before being posted to ACORN. Grades are not official until they are posted to ACORN. Course grades may be adjusted where they do not comply with University Assessment and Grading Practices Policy found at www.governingcouncil.utoronto.ca/Assets/Governing+Council+Digital+Assets/Policies/PDF/grading.pdf, policies found in the TST conjoint program handbooks, or college grading policy.

Emmanuel College Attendance Policy

Attendance is mandatory.

A high rate of attendance is key to student success, given the nature of theological education and the importance of classroom interaction and learning at Emmanuel College. Students should not accept significant outside obligations during the academic term.

For a regular course, students who register and miss two (2) classes may receive a lower or failing grade for the course. In order to avoid this penalty, students must notify their instructor with a valid reason for any absence before class. Students missing twenty-five (25) percent or more of a course will be automatically withdrawn from that course.

For an intensive course, full attendance is mandatory.

Policies

Accessibility. Students with a disability or health consideration, whether temporary or permanent, are entitled to accommodation. Students in conjoint degree programs must register at the University of Toronto's Accessibility Services offices; information is available at <http://www.accessibility.utoronto.ca/>. The sooner a student seeks accommodation, the quicker we can assist.

Plagiarism. Students submitting written material in courses are expected to provide full documentation for sources of both words and ideas in footnotes or endnotes. Direct quotations should be placed within quotation marks. (If small changes are made in the quotation, they should be indicated by appropriate punctuation such as brackets and ellipses, but the quotation still counts as a direct quotation.) Failure to document borrowed material constitutes plagiarism, which is a serious breach of academic, professional, and Christian ethics. An instructor who discovers evidence of student plagiarism is not permitted to deal with the situation individually but is required to report it to his or her head of college or delegate according to the TST *Basic Degree Handbook* and the Graduate program Handbooks (linked from <http://www.tst.edu/academic/resources-forms/handbooks> and the University of Toronto *Code of Behaviour on Academic Matters* <http://www.governingcouncil.utoronto.ca/AssetFactory.aspx?did=4871>). A student who plagiarizes in this course will be assumed to have read the document "Avoidance of plagiarism in theological writing" published by the Graham Library of Trinity and Wycliffe Colleges http://www.trinity.utoronto.ca/Library_Archives/Theological_Resources/Tools/Guides/plag.htm.

Other academic offences. TST students come under the jurisdiction of the University of Toronto Code of Behaviour on Academic Matters <http://www.governingcouncil.utoronto.ca/policies/behaveac.htm>.

Back-up copies. Please make back-up copies of essays before handing them in.

Obligation to check email. At times, the course instructor may decide to send out important course information by email. To that end, all students in conjoint programs are required to have a valid utoronto email address. Students must have set up their utoronto email address which is entered in the ACORN system. Information is available at www.utorid.utoronto.ca. The course instructor will not be able to help you with this. 416-978-HELP and the Help Desk at the Information Commons can answer questions you may have about your UTORid and password. *Students should check utoronto email regularly* for messages about the course. **Forwarding** your utoronto.ca email to a Hotmail, Gmail, Yahoo or other type of email account is not advisable. In some cases, messages from utoronto.ca addresses sent to Hotmail, Gmail or Yahoo accounts are filtered as junk mail, which means that emails from your course instructor may end up in your spam or junk mail folder. Students in non-conjoint programs should contact the Registrar of their college of registration.

Email communication with the course instructor. The instructor aims to respond to email communications from students in a timely manner. *All email communications from students in conjoint programs must be sent from a utoronto email address.* Email communications from other email addresses are not secure, and also the instructor cannot readily identify them as being legitimate emails from students. The instructor is not obliged to respond to email from non-utoronto addresses for students in conjoint programs. Students in non-conjoint programs should only use the email address they have provided to their college of registration.

Course Schedule

Week 1

Day, Date Course Introduction: Muslim Mental Health
- Muslim populations in Toronto & mental health issues

Required Readings:

Hankir, A. "Islam, mental health and being a Muslim in the West." *Psychiatria Danubina* 27 Suppl 1.Suppl 1 (2015): 53-9.

Ahmed, S. & Amer, M.M. (Eds.). *Counseling Muslims: Handbook of Mental Health Issues and Interventions*. Part I.

Huber, J. (2018, Aug 28). Stanford psychiatrist focuses on mental health needs of Muslims. Retrieved from <https://scopeblog.stanford.edu/2018/08/28/stanford-psychiatrist-focuses-on-mental-health-needs-of-muslims/>

Week 2

Day, Date Topic: Muslim Mental Health: Migration
- Intersectionality
- Migrant Muslim mental health
- Muslim refugee mental health
- Overview of current trends in Muslim mental health research
Assignment: Research proposal + presentation

Required Readings:

Ahmed, S. & Amer, M.M. (Eds.). *Counseling Muslims: Handbook of Mental Health Issues and Interventions*. Ch. 15 "Refugees."

Phillips, D. & Lauterbach, D. (2017). American Muslim Immigrant Mental Health: The Role of Racism and Mental Health Stigma. *Journal of Muslim Mental Health*, 11(1).

Recommended Readings:

Collins, P. H. (2000). *Black feminist thought: Knowledge, consciousness, and the politics of empowerment* (2nd ed.). NY: Routledge.

McCleary, J.S. & Chaudhry, S. Ethical Considerations For Social Workers Working with Muslim Refugees. *Social Work in Public Health*, 32(8).

Siriwardhana, C., Abas, M., Siribaddana, S. et al. (2015). Dynamics of resilience in forced migration: a 1-year follow-up study of longitudinal associations with mental health in a conflict-affected, ethnic Muslim...*BMJ Open*, 5(2).

Week 3

Day, Date Topic: Muslim Mental Health: Gender
- Muslim women's mental health, men's mental health
- Addictions
- Conducting a literature review
- Writing a research proposal

Required Readings:

Ahmed, A., Bowen, A. & Feng, C.X. (2017). Maternal depression in Syrian refugee women recently moved to Canada: a preliminary study. *BMC Pregnancy and Childbirth*, 17(1).

Douki, S. "Women's mental health in the Muslim world: Cultural, religious, and social issues." *Journal of Affective Disorders* 102.1 (2007): 177-189.

Rassool, G. Hussein. (Ed.) *Cultural Competence in Caring for Muslim Patients*. (Basingstoke, United Kingdom: Palgrave Macmillan, 2014), Ch. 12-13.

Recommended Readings:

Sandelowski, J. "Writing the proposal for a qualitative research methodology project." *Qualitative health research* 13.6 (2003): 781-820.

Vivar, Cristina G G. "Getting started with qualitative research: developing a research proposal." *Nurse researcher* 14.3 (2007): 60-75.

Holtmann, C. & Tramonte, L. (2014). Tracking the Emotional Cost of Immigration: Ethno-religious Differences and Women's Mental Health. *Journal of International Migration and Integration*, 15(4).

Ahmed, S. & Amer, M.M. (Eds.). *Counseling Muslims: Handbook of Mental Health Issues and Interventions*. Part V.

Isgandarova, N. (2018). *Muslim Women, Domestic Violence, and Psychotherapy: Theological and Clinical Issues*. (New York: Routledge, 2018)

Week 4

Day, Date

Topic: Muslim Mental Health: Islamophobia

- History of Islamophobia, sociopolitical context
- Present sociopolitical context (post-9/11)

Required Readings:

Wilkins-Laflamme, S. Islamophobia in Canada: Measuring the Realities of Negative Attitudes Toward Muslims and Religious Discrimination: Islamophobia in Canada. *Canadian Review of Sociology/Revue canadienne de sociologie*, 55(1).

Samari, G., Alcalá, H.E. & Sharif, M. Islamophobia, Health, and Public Health: A Systematic Literature Review. *American journal of public health*, 108(6).

Week 5

Day, Date

Topic: Muslim Mental Health through the Life Course

- Muslim youth mental health, older adult mental health, early childhood mental health
- Muslim convert/revert mental health
- Conducting a literature review
- Writing a research proposal

In-class presentations of Research Proposal start this week

Required Readings:

Ahmed, S. & Amer, M.M. (Eds.). *Counseling Muslims: Handbook of Mental Health Issues and Interventions*. Ch. 14 "Adolescents and Emerging Adults."

York Al-Karam, Carrie. (2018). *Islamically Integrated Psychotherapy* (West Conshohocken, PA: Templeton Press, 2018). Ch. 8 "Marrying Islamic Principles with Western Psychotherapy for Children and Adolescents: Successes and Challenges."

Recommended Readings:

Ali-Faisal, S. (2016). What's Sex Got to Do with It? The Role of Sexual Experience in the Sexual Attitudes, and Sexual Guilt and Anxiety of Young Muslim Adults in Canada. *Journal of Muslim Mental Health*, 10(2).

Chrisman, A.K. & Balkozar, A. (2016). Mental health challenges for american muslim youth in an age of terrorism. *Journal of the American Academy of Child and Adolescent Psychiatry*, 55(10).

Stuart, J. & Ward, C. (2018). The relationships between religiosity, stress, and mental health for Muslim immigrant youth. *Mental Health, Religion & Culture*, 21(3).

Islam, F., Multani, A., Hynie, M., Shakya, Y. & McKenzie, K. (2017). Mental health of South Asian youth in Peel Region, Toronto, Canada: a qualitative study of determinants, coping strategies and service access. *BMJ Open*, 7(11).

Week 6

Day, Date

Topic: Creating Canada's Muslim Mental Health Policy

- Canada's mental health strategy and its application to Muslim mental health
 - Social determinants of health perspectives – adding the Muslim context
- In-class presentations of Research Proposal will continue

Required Readings:

Mental Health Commission of Canada. (2012). *Changing directions, changing lives: The mental health strategy for Canada*. Calgary, AB: Author. Mental Health Commission of Canada; 2012.

Mikkonen, J., & Raphael, D. (2010). *Social determinants of health: The Canadian facts*.

Toronto: York University School of Health Policy and Management; 2010.

Week 7

Day, Date

Topic: Dismantling Muslim Mental Health Stigma

- Overview of community initiatives in Toronto and abroad
- In-class presentations of Research Proposal will end this week
Assignment: Reflection paper + presentation

Required Readings:

Ciftci, A. (2013). Mental Health Stigma in the Muslim Community. *The Journal of Muslim mental health*, 7(1).

Hankir, A., Khalil, S., Wadood, Q., et al. (2017). The Federation of Student Islamic Societies programme to challenge mental health Stigma in Muslim communities in England: The FOSIS...*Psychiatria Danubina*, 29(3).

Week 8

Day, Date

Topic: Community and School-Based Muslim Mental Health Initiatives

- Highlight community initiatives, services, and programs

Required Readings:

Hena, Din. (2017). Pathways to wellness: Exploring Muslim mental health promotion in the digital age. *Journal of religion & spirituality in social work*, 36(1), 96 -116.

Baobaid, Mohammed, and Lynda M. Ashbourne. *Enhancing Culturally Integrative Family Safety Response in Muslim Communities*, Routledge, 2016.

Recommended Readings:

Puolakka, K. (2014). Mental Health Promotion in a School Community by Using the Results From the Well-Being Profile. *Health promotion practice*, 15(1), 44-54.

Ojio, Y. "Effects of school-based mental health literacy education for secondary school students to be delivered by school teachers: A preliminary study." *Psychiatry and clinical neurosciences* 69.9 (2015): 572-9.

Goforth, A.N., Nichols, L.M., Stanick, C.F. et al. (2017). School-Based Considerations for Supporting Arab American Youths' Mental Health. *Contemporary School Psychology*, 21(3).

Ahmed, S. & Amer, M.M. (Eds.). Counseling Muslims: Handbook of Mental Health Issues and Interventions. Part III.

Week 9

Day, Date

Topic: Creating a Model of Culturally Safe Muslim Mental Health Care
Reflection paper presentations start this week

Required Readings:

Keshavarzi, H. & Haque, A. (2013). Outlining a Psychotherapy Model for Enhancing Muslim Mental Health Within an Islamic Context. *Information*, 23(3), 230To-249.

Rassool, G. & Hussein H. (2015). Cultural Competence in Counseling the Muslim Patient: Implications for Mental Health. *Archives of psychiatric nursing*, 29(5), 321-325.

Recommended Readings:

Dykeman, C. "Counseling Muslim Americans: Cultural and Spiritual Assessments." *Journal of counseling and development* 89.4 (2011): 387-396.

Ahmed, S. "Understanding the Mental Health Needs of American Muslims: Recommendations and Considerations for Practice." *Journal of multicultural counseling and development* 35.4 (2007): 207-218.

Eltaiba, N. & Harries, M. (2015). Reflections on Recovery in Mental Health: Perspectives From a Muslim Culture. *Social Work in Health Care*, 54(8).

Ahmed, S. & Amer, M.M. (Eds.). Counseling Muslims: Handbook of Mental Health Issues and Interventions. Part II.

Dwairy, M. (2006). *Counselling and Psychotherapy with Arabs and Muslims: A Culturally Sensitive Approach* (New York: Teachers College Press, Columbia University, 2006)

Rassool, G. Hussein. (Ed.) Cultural Competence in Caring for Muslim Patients. (Basingstoke, United Kingdom: Palgrave Macmillan, 2014), Ch. 17.

York Al-Karam, Carrie. (2018). *Islamically Integrated Psychotherapy* (West Conshohocken, PA: Templeton Press, 2018). Ch. 4-8.

Week 10

Day, Date

Topic: Role of Mosque and Imam in Muslim Mental Health Promotion
Reflection paper presentations will continue this week

Required Readings:

Jozaghi, E., Asadullah, M. & Dahya, A. (2016). The role of Muslim faith-based programs in transforming the lives of people suffering with mental health and addiction problems. *Journal of Substance Use*, 21(6).

Abu-Ras, W., Gheith, A. & Cournos, F. (2008). The Imam's Role in Mental Health Promotion: A Study at 22 Mosques in New York City's Muslim Community. *Journal of Muslim Mental Health*, 3(2).

Recommended Readings:

Ali, O.M., Milstein, G. & Marzuk, P.M. (2005). The Imam's Role in Meeting the Counseling Needs of Muslim Communities in the United States. *Psychiatric Services*, 56(2).

Al-Krenawi, A. (2016). The role of the mosque and its relevance to social work. *International Social Work*, 59(3).

Week 11

Day, Date

Topic: Controversies in Muslim Mental Health
- In-class debates

Reflection paper presentations will end this week

Required Readings:

Ally, Y. & Laher, S. (2008). South African Muslim Faith Healers Perceptions of Mental Illness: Understanding, Aetiology and Treatment. *Journal of Religion and Health*, 47(1).

Dein, S., Malcolm, A. & Napier, A.D. (2008). Jinn, Psychiatry and Contested Notions of Misfortune among East London Bangladeshis. *Transcultural Psychiatry*, 45(1).

Recommended Reading:

Islam, F. & Campbell, R.A. (2014). "Satan Has Afflicted Me!" Jinn-Possession and Mental Illness in the Qur'an. *Journal of Religion and Health*, 53(1), 229-43.

Week 12

Day, Date

Topic: Creating a Coalition of the Willing

- Future directions in Muslim mental health
- Service access barriers and mental health stigma
- What will be your role?

Reading

Synthesize all readings from the course

Exam Week

TBD