



THE UNIVERSITY OF TEXAS AT ARLINGTON

School of Social Work

Semester/Year: Fall 2016

Course Title: Social Policy and Mental Health

Course Prefix/Number/Section: SOCW 6319-001

Instructor Name: Christie Mosley-Eckler, LMSW

Faculty Position: Adjunct

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Office Hours: by appointment

Day and Time of Class (if applicable): Wed 7:00PM - 9:50PM

Location: PH 207

Equipment: A laptop computer with wireless capability or equivalent is required for all SSW classes.
Blackboard: <https://elearn.uta.edu/webapps/login/>

A. Description of Course Content

Studies programs and policies in the field of mental health. An analytical model is employed in the process of examining critical issues in the mental health arena. Prerequisite: SOCW 5303.

B. Student Learning Outcomes

EPAS core competencies and related advanced practice behaviors addressed in this course:

Educational Policy 2.1.2—Apply social work ethical principles to guide professional practice.

1. Advanced social workers in DPMHSA implement an effective decision-making strategy for deciphering ethical dilemmas in mental health treatment.

Recovery-oriented social workers apply thoughtful strategies of ethical reasoning to resolve dilemmas between individual self-determination and the ethical mandate to protect the client and others under the law.

Educational Policy 2.1.3—Apply critical thinking to inform and communicate professional judgments.

1. Advanced social workers in DPMHSA evaluate, select and implement appropriate assessment and treatment approaches to the unique characteristics and needs of diverse clients.

Recovery-oriented social workers: use a recovery-oriented framework, engage in professional curiosity, and offer their expertise to support the client's choices and preferences; analyze the medical/deficits model of assessment of the *Diagnostic and Statistical Manual of Mental Disorders* (DSM) with clients.

Educational Policy 2.1.4—Engage diversity and difference in practice.

1. Advanced social workers in MHSA understand and can apply the relevant cultural, class, gender, race, age, disability, and other diversity issues that influence the prognosis and treatment of persons with severe and persistent mental illness and substance use disorders, persons with other mental health/substance abuse issues, and persons with psychiatric disabilities, and their families and communities.

Recovery-oriented social workers attend to the potential for institutional bias in diagnosis by critically examining evidence of differences in diagnoses between and within groups (including race/ethnicity, gender, etc.)

Educational Policy 2.1.5—Advance human rights and social and economic justice.

1. Advanced social workers in MHSA understand the range of physical and mental health disease course and recovery issues associated with social stigma and marginalization of persons with mental health diagnoses and psychiatric disabilities, and incorporate them in their assessment and intervention.
2. Advanced social workers in mental health/substance abuse describe the distribution and determinants of mental health/substance abuse and illness and identify health disparities.

Recovery-oriented social workers:

Advocate within the profession and across the behavioral health system for recovery-oriented philosophy, progress, and practices;

“Help individuals understand and act on their legal, civil, and human rights” (AHP, 2011, p. 29), specifically those rights involving advance directives, informed consent and refusal for any particular mental health treatment, involuntary treatment, restraint and seclusion, and equal access to resources;

Advocate for an improvement in individuals’ daily living conditions and address the inequitable distribution of power, money, and resources that results in disadvantage and injustice for their clients;

Promote reduction and/or elimination of the use of physical and chemical restraints;

Confront oppression and injustices and engage in efforts to minimize and overcome stigma and discrimination toward individuals with psychiatric conditions;

Help professionals and others involved with individuals with lived experience of psychiatric diagnoses to replace demeaning, dehumanizing, and shame provoking language with recovery-oriented, strength-based, hope-building language and actions.

Educational Policy 2.1.6—Engage in research-informed practice and practice-informed research.

1. Advanced social workers in MHSA use advanced strategies to search, appraise, and select for application the most up to date evidence and evolving practice guidelines in the assessment and intervention with influence persons with severe and persistent mental illness and substance use disorders, persons with other mental health issues, and persons with psychiatric disabilities, and their families and communities.
2. Advanced social workers in mental health/substance abuse have the ability to critically assess and participate in research design and methodology related to practice with mental health/substance abuse service users.

Recovery-oriented social workers:

Critically examine the evidence for newly identified “evidence-based” practices and services for clients, particularly with regard to the inclusion of clients’ voices in intervention development and evaluation;

Stay informed about emerging and promising approaches to recovery-oriented practice, especially in regard to how it can be applied and/or customized to the individual, family, groups, organization, and communities;

Use quantitative, qualitative, participatory action research, and first person accounts to show that people can and do recover from psychiatric conditions;

Promote the inclusion of service users and their viewpoints at multiple levels of the research process including evaluating the relevance of outcomes when compared to their lived experience of psychiatric diagnoses.

Educational Policy 2.1.7—Apply knowledge of human behavior and the social environment.

1. Advanced social workers in MHSA distinguish mental health/substance abuse, mental illness, and mental well-being across the life span. Advanced social workers in MHSA compare the various etiology and treatments for substance abuse and addiction.

Recovery-oriented social workers critically analyze the various ways of understanding the multiple factors influencing an individual's behavior.

Educational Policy 2.1.8—Engage in policy practice to advance social and economic well-being and to deliver effective social work services.

1. Advanced social workers in MHSA communicate to stakeholders the implication of policies and policy change in the lives of those with mental health concerns and mental illness.
2. Advanced social workers in MHSA advocate for policies that advance the social and economic well-being of those with mental health/substance abuse concerns and mental illness.

Recovery-oriented social workers:

Analyze, formulate, and promote structures and policies that contribute to the economic and social inclusion and well-being of individuals with psychiatric conditions and increase access to the services they need;

Work to eliminate barriers to full community participation, including barriers to employment, civic engagement, education, and housing;

Create multiple mechanisms for incorporating the voices and choices of persons with lived experience of psychiatric conditions (e.g. advisory boards, state planning boards, civic organizations, self-help groups, policy development and reform, policy forums) in community systems;

Critically examine public policy and service structures and influence recovery-informed policies at the local, state, and national levels (such as facilitating diversion from the criminal justice system, promoting wellness in inpatient settings, etc.);

Advocate for the integration of services to clients (e.g. co-occurring psychiatric conditions and substance abuse, co-occurring physical and behavioral health conditions) and ensure disparate services are working in accord with one another, with all efforts aiming toward the same set of client-determined goals.

Educational Policy 2.1.9—Respond to contexts that shape practice.

1. Advanced social workers in MHSA assess the quality of client's interactions within their social contexts.
2. Advanced social workers in MHSA develop intervention plans to accomplish systemic change that is sustainable.

Recovery-oriented social workers:

Practice with consideration for evolving contextual changes on macro and micro levels, innovations in science and technology, and nonlinear pathways to provide up-to-date services for persons with lived experience of psychiatric diagnoses.

Upon completion of this course, the participant will be able to:

1. Critically evaluate the substantive area of mental health policy [APB 2.1.3, 2.1.8(2)].
2. Identify and analyze selected policy issues in the field of mental health, including the dynamics and trends in U.S. social policy, applying the policy analysis model provided [APB 2.1.9(2)].
3. Examine the major arrangements for the delivery of mental health services. [APB 2.1.7(4)]
4. Evaluate recent, evidence-based mental health research findings [APB 2.1.6].
5. Synthesize the issues and dynamics involved in underserved populations and in international mental health, using a social justice approach [APB 2.1.5, 2.1.7(3)].
6. Analyze the critical issues affecting mental health care in Texas [APB 2.1.7(4), 2.1.9]

Objectives will be measured by academic performance on course assignments.

C. Required Textbooks and Other Course Materials

Mechanic, D. (2014). *Mental Health and Social Policy: Beyond Managed Care* (6th ed.). New York, NY: Pearson Education, Inc.

Rosenberg, J. & Rosenberg, S. (Eds.). (2013). *Community Mental Health: Challenges for the 21st Century*. New York: Routledge.

Clinical Evidence and Best Practice e-databases: The developing evidentiary base on mental health interventions contained in the Central Library e-databases *Clinical Evidence* and *Best Practice* will serve as another set of required "texts" in this course.

D. Additional Recommended Textbooks and Other Course Materials

New Freedom Commission on Mental Health, *Achieving the Promise: Transforming Mental Health Care in America. Final Report*. DHHS Pub. No. SMA-03-3832. Rockville, MD: 2003. You can download a copy for free here: <http://www.mentalhealthcommission.gov/reports/FinalReport/toc.html>

Mental Health, United States, 2002. DHHS. Pub. No. SMA04-3938. Rockville, MD.
<http://www.mentalhealth.samhsa.gov/publications/allpubs/SMA04-3938/default.asp>

The Provision of Mental Health Services in Managed Care Organizations. DHHS Pub. No. SMA03-3797.
<http://www.mentalhealth.samhsa.gov/publications/allpubs/sma03-3797/default.asp>

Mental Health Recovery Bibliography:

Anthony, W. (2000). A recovery-oriented service system: Setting some system level standards. *Psychiatric Rehabilitation Journal*, 24(2), 159-167.

Bollini, P., Pampallona, S., Nieddu, S., Bianco, M., Tibaldi, G., & Munizza, C. (2008). Indicators of conformance with guidelines of schizophrenia treatment in mental health services. *Psychiatric Services*, 59(7), 782-791.

Carpenter, J. (2002). Mental health recovery paradigm: Implications for social work. *Health and Social Work*, 27(2), 86-95.

Chamberlain, R., Rapp, C., Ridgway, P., Lee, R., & Boezio, C. (1999). Mental health reform in Kansas: Cost containment and quality of life. *Psychiatric Rehabilitation Journal*, 23(2), 137-142.

Clark, C., & Krupa, T. (2002). Reflections on empowerment in community mental health: Giving shape to an elusive idea. *Psychiatric Rehabilitation Journal*, 25(4), 341-349.

Cohen, C. (1993). Poverty and the course of schizophrenia: Implications for research and policy. *Hospital and Community Psychiatry*, 44(10), 951-958. Mental Health Recovery Bibliography 15

- Corrigan, P., Steiner, L., McCracken, S., Blaser, B., & Barr, M. (2001). Strategies for disseminating evidence-based practices to staff who treat people with serious mental illness. *Psychiatric Services*, 52, 1598-1606.
- Cunningham, D., Stephan, S., Paternite, C., Schan, S., Weist, M., Adelsheim, S., et al. (2007). Stakeholders' perspectives on the recommendations of the President's New Freedom Commission on Mental Health. *Psychiatric Services*, 58(10), 1344-1347.
- Del Vecchio, P., & Fricks, L. (Eds.) (2007). Special issue on mental health recovery and system transformation. *Psychiatric Rehabilitation Journal*, 31(1).
- Isett, K., Burnam, M., Coleman-Beattie, B., Hyde, P., Morrissey, J., Magnabosco, J., et al. (2007). The state policy context of implementation issues for evidence-based practices in mental health. *Psychiatric Services*, 58(7), 914-921.
- Jacobs, D., & Moxley, D. (1993). Anticipating managed mental health care: Implications for psychosocial rehabilitation services. *Psychosocial Rehabilitation Journal*, 17(2), 5-14.
- Jacobson, N., & Curtis, L. (2000). Recovery as policy in mental health services: Strategies emerging from the states. *Psychiatric Rehabilitation Journal*, 23(4), 333-341.
- Morrison, D. (2004). Real-world use of evidence-based treatments in community behavioral health care. *Psychiatric Services*, 55(5), 485-487.
- Onken, S., Dumont, J., Ridgway, P., Dornan, D., & Ralph, R. (2002). *Mental health recovery: What helps and what hinders? A national research project for the development of recovery facilitating performance indicators*. Alexandria, VA: National Association of State Mental Health Program Directors.
- Ware, N. (2008). A theory of social integration as quality of life. *Psychiatric Services*, 59(1), 27-33.
- Yoder, A. L. (2013). Corrections officers, not clinicians. Mad in America. Retrieved from <http://www.madinamerica.com/2013/01/corrections-officers-not-clinicians-2/>

Note: The Instructor may assign additional readings throughout the semester.

E. Descriptions of Major Assignments and Examinations

1) Letter to Legislator (Objectives 1-6). - 10 points

Students will write and send a letter to a Texas Senator or Representative in their district.

This will entail: a) a one-page letter regarding his/her position regarding an important piece of mental health legislation, b) a one-page fact sheet, and c) a page of references. Students will provide a copy of the documents, as well as a copy of the response letter sent by the politician. Students will turn in letter and discuss in class on **September 7, 2016** [APB 2.1.8(10), (2)]

2) Three Critical Issues Assignment (Objective #1): - 25 points

Interview one person involved in the formal delivery of mental health services (phone or on-site). Elicit from them and list in rank order "the three most critical issues in mental health today." Have them describe these issues in some detail. Post on Blackboard Discussion Thread labeled *Three Critical Issues* with name, organization they are from, and their three topics. Due date: **September 21, 2016** [APB 2.1.3, 2.1.8]

3) Mental Health Policy in the News (Objectives 1, 2, and 6) - 25 points

Students are to look for a specific **mental health policy issue** in the news: TV, radio (NPR), newspaper,

and/or the internet. Students will present their policy issue on Blackboard in five different discussion threads labeled Mental Health Policy in the News (due dates on each discussion thread).

Students are encouraged to subscribe to *Today's Clips* (UT Austin) by sending an email to: Hogg-Communications@austin.utexas.edu.

Two other good resources for keeping informed about mental health policy are:

MHA/Mental Health America (aka National Mental Health Association):

<http://www1.nmha.org/newsroom/system/mhHeadline.main.cfm>

NIMH/National Institute of Mental Health: <http://www.nimh.nih.gov/tools/listserv.cfm>

[APB 2.1.3, 2.1.7(4), 2.1.8(2), 2.1.9(2)]

4) *Group Presentation on Selected Mental Health Research Report (Objective #4)*

In groups of 3-4 (group will be solidified and approved by instructor by **September 7, 2016**, present an oral report on a major mental health study. This review should include the following points: - **75 points** – **Presentation date: October 5, 2016**

1. Identification of the researcher's/author's credentials (e.g., position, education, experience).
2. Problem studied—why important?
3. Hypotheses of the study
4. Methodology
5. Findings
6. Conclusions—implications for policy and recovery-oriented practice in the mental health field
7. Critique of the study

Provide the Instructor with an outline of your presentation, including the title and authors. [APB 2.1.6]

5) *Field Visit to Psychiatric Program or Facility (Objectives #1, 3, 6). - 40 points*

Decide on a program or facility in consultation with the instructor, and make arrangements to conduct a field visit. You may do this in pairs or small groups of up to 4 if the shelter/facility staff is so willing. You may need to sign a release form in order to visit these sites. Write up a 1-page report on the experience and your observations, and share that experience during class **October 19, 2016** (10-15 minutes). [APB 2.1.3, 2.1.7(4), 2.1.8(2), 2.1.9]

6) *Reaction Paper on one of Rosenberg & Rosenberg textbook chapters (Objectives 1–6). - 25 points*

Students will write a reaction paper to one of the chapters covered in Rosenberg & Rosenberg textbook or one of the peer-reviewed papers listed under Additional Recommended Textbooks and Other Course Materials on syllabus above. Two pages, due **November 2, 2016**. [APB 2.1.3, 2.1.5, 2.1.6, 2.1.7(3)(4), 2.1.8(2), 2.1.9]

7) *Final Paper on Mental Health Policy Analysis (Objectives #2,5). - 200 points* – Paper to be uploaded to Blackboard by **November 30, 2016 at 7am**. Presentations will be **November 30 and December 7, 2016**

With the concurrence of the instructor, select a state or federal mental health policy. Thoroughly study the policy and the issues involved with the policy, identifying its relevancy, relation with recovery-oriented perspective, and significance. Using APA guidelines, the Karger/Stoesz policy analysis model, and additional parameters provided by the professor, present and analyze the policy. Include your including your recommendations related to the policy issue. The paper (and presentation of the paper) will be done in groups of four to five people.

Length: 8-10 pages, double-spaced. Minimum of 8 references, 4 of which must be from professional journal

articles. [APB 2.1.5, 2.1.7(3), 2.1.9(2)]

Give oral presentation (15 min.) of final paper, using Power Point. Please give the instructor an outline of your presentation. [APB 2.1.5, 2.1.7(3), 2.1.9(2)]

8) Participation – Attendance to Class and Blackboard Discussion Thread completions - 100 points

Mental Health Policy Analysis Paper (and grading weight) - Final Paper Total: 200 points

Introduction - 10 points In this section, briefly introduce and specific the policy. Be sure to include the dates of the policy, specific Code/Statute, and source of the policy within the governmental structure. Cite the specific Code/Statute. For Federal Codes, see: www.law.cornell.edu/uscode. For federal legislation that is pending in congress, see: www.thomas.gov.

For Texas State Statutes, see: www.capitol.state.tx.us/statutes/statutes.html. The website for the Texas Legislature also has links to federal policy: www.capitol.state.tx.us/.

The Historical Background of the Policy - 10 points

Description of the Problem that Necessitated the Policy - 10 points

Description of the Policy - 20 points

1. **Policy Goals.** What is the policy hoping to achieve?
2. **What are the Goals of the Policy:**
3. Realistic in attempts to solve the problem?
4. Just and Democratic?
5. Contributing to the Greater Social Equality?
6. Consistent with the Values of Professional Social Work?
7. Consistent with recovery-oriented social work practice?
8. **Strengths and Weaknesses of the Policy.**
9. Are there any **unintended consequences** of the policy?
10. Are there any **opposing viewpoints** (e.g. pro-faith-based programs vs. anti-faith-based programs)

Comparative and International Analysis: What Can Be Learned About This Problem from the Experiences of another country (other than the U.S.); **OR** another state (other than Texas)
15 points

Social Thought and Ideology - 10 points

1. What are the Major Ideological Suppositions Contained in the Policy?
2. What is the Perspective on the Role of Government, and the Nature of Society, as it Pertains to the Policy?

What Dynamics and Patterns of U.S. Social Policy are Evident in the Policy (from class lectures/activities)? **20 points**

Conclusion Provide a concise conclusion of your findings related to the Policy. **15 points**

Definitions of Key Terms These are listed on a separate piece of paper. Define terms that have a bearing on what you are writing about, e.g. “home health care”, “Safe Haven”, “Medicaid Carve-Out Program”. **20 points**

References These are listed on a separate piece of paper, following the text of the paper. Use APA guidelines. At least 8 references are required, 6 of which must be from peer-reviewed professional journals. **15 points**

Presentation of paper Give oral presentation (15 min.) of final paper, using Power Point. Please give the instructor an outline of your presentation. **50 points**

F. Grading

All papers must be grammatically correct. Papers with grammatical errors and misspellings will not receive a satisfactory grade.

Grading Policy: The course requirements provide a possible semester total of 500 points

The grading system is as follows:

- A 450 – 500 Points
- B 400 – 449 Points
- C 350 – 399 Points
- D 300 – 349 Points
- F 299 Points or less

The instructor reserves the right to give a grade of “F” for the course as a whole to any student found guilty of plagiarism of any assignment by the Office of Student Conduct.

Activity	Points
Letter to Legislator due by 9/7/2016 upload under Assignments on Blackboard	10
Three Critical Issues due by 9/21/2016 - posted on Blackboard under Discussion Thread with corresponding title	25
Mental Health Policy in the News due throughout semester on Blackboard – watch due dates on discussion thread	25
Mental Health Research Report due by 10/5/2016 – upload presentation to Blackboard under Assignments, hard copy to instructor, and presentation in class	75
Field Visit due by 10/19/ 2016 - upload report to Blackboard under Assignments and present in class	40
Reaction Paper due by 11/2/2016 - upload paper to Blackboard under Assignments	25
Final Paper on Mental Health Policy Analysis with presentations – paper and presentation to be uploaded on Blackboard under Assignments	200
Class Participation (In class attendance and blackboard participation)	100
Total	500

Students are expected to keep track of their performance throughout the semester and seek guidance from available sources (including the instructor) if their performance drops below satisfactory levels; see "Student Support Services," below.

G. Make-Up Exams

If a student waits until the last minute to complete an assignment, that student accepts

the risk that something may happen to impact their ability to submit the assignment by the deadline (illness, computer problems, personal emergency, etc.) No late papers will be accepted unless **verified extenuating circumstance is found**. If a student is absent for a scheduled presentations the student is responsible for re-scheduling their presentation with the instructor. **Late presentations will have an automatic deduction of ½ of the total points available for that assignment (in addition to any other deductions).**

H. Attendance

At The University of Texas at Arlington, taking attendance is not required but attendance is a critical indicator in student success. Each faculty member is free to develop his or her own methods of evaluating students' academic performance, which includes establishing course-specific policies on attendance. However, while UT Arlington does not require instructors to take attendance in their courses, the U.S. Department of Education requires that the University have a mechanism in place to mark when Federal Student Aid recipients "begin attendance in a course." UT Arlington instructors will report when students begin attendance in a course as part of the final grading process. Specifically, when assigning a student a grade of F, faculty report the last date a student attended their class based on evidence such as a test, participation in a class project or presentation, or an engagement online via Blackboard. This date is reported to the Department of Education for federal financial aid recipients. As the instructor of this section,

The role of the instructor in this seminar is to provide structure and direction, lecture, and serve as a consultant, coordinator and resource person to the seminar members. Active participation by students is expected in order to promote peer learning through thoughtful reading, thinking, and discussion. Therefore, attendance is mandatory.

It is expected that you attend class and participate in class discussion. One missed class is a significant loss of instruction.

A sign-in sheet will be provided for each class meeting. **It is your responsibility to sign in to receive credit for attending each week and for being able to earn participation points. Sign-in is not available after the class meeting ends.**

Students who miss half or more of a class meeting will not receive any attendance credit for that class period.

1. Students are expected to be on time, attend all class sessions, and stay until the completion of the class.
2. Students are to complete reading assignments and be prepared to participate in class discussions and small group activities.
3. No papers or assignments may be resubmitted once a grade is given.
4. **There will be no opportunities provided for extra credit for this class.**

I. Course Schedule

Class Date	Class Content	Required Readings
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8/31	Introduction and Course Overview Dynamics and Trends in U.S. Social Policy	Rosenberg & Rosenberg Chapters 1, 2 New Freedom Commission on Mental Health, U.S. Mental Health, 2002
9/7	Mental Health & Mental Health Professions - Letter to Legislator Due Notify Instructor of Group Research Team & Selection of M. H. Research Report	Mechanic, Chapters 1, 2
9/14	Overview of Mental Illness & Services	R&R Chapters 3, 4
9/21	Psychological Disorders & Treatment Three Critical Issues due on Blackboard	Mechanic, Chapters 3, 4, 6
9/28	Approaches to Policymaking and Analysis Best Practices in Community Mental Health	Karger & Stoesz, pp. 31-37 chapter 2: Policy Analysis Model R&R Chapters 6, 7, 8, 9
10/5	Group Presentations on Mental Health Research Report	
10/12	Development of Mental Health Policy Innovations in Mental Health Services	Mechanic, Chapters 5, 9, 10
10/19	Field Visit Paper/Presentations	
10/26	The Financing & Delivery of M.H. Services; Neuropsychiatric Perspectives on MH treatment Selected Ethical & Legal Issues No Face to Face Class today! Blackboard Discussion Thread Assignment	Mechanic Chapter 7, 8 The Provision of Mental Health Services in Managed Care Orgs. (DHHS Report) DSM
11/2	Children & Adolescent Mental Health Community Mental Health with Underserved Populations Reaction Paper Due	R&R Chapter 5 R&R Chapters 9 - 13
11/9	Mental Illness and Homelessness	R&R Chapters 14 - 16
11/16	The Future of Mental Health	
11/23	No Face-to-Face class	See Blackboard Discussion Thread
11/30	Final Policy Paper is Due Policy Paper Presentations	
12/7	Policy Paper Presentations Wrap up	

As the instructor for this course, I reserve the right to adjust this schedule in any way that serves the educational needs of the students enrolled in this course.

J. Expectations for Out-of-Class Study

Beyond the time required to attend each class meeting, students enrolled in this course should expect to spend at least an additional three hours (for each hour of class or lecture per week) of their own time in course-related activities, including reading required materials, completing assignments, preparing for assignments and exams, and reviewing online content, etc.

K. Grade Grievances

See BSW Program Manual at: https://www.uta.edu/ssw/_documents/bsw/bsw-program-manual.pdf

Or MSW Program Manual at: http://www.uta.edu/ssw/_documents/msw/msw-program-manual.pdf

L. Student Support Services

UT Arlington provides a variety of resources and programs designed to help students develop academic skills, deal with personal situations, and better understand concepts and information related to their courses. Resources include [tutoring](#), [major-based learning centers](#), developmental education, [advising and mentoring](#), personal counseling, and [federally funded programs](#). For individualized referrals, students may visit the reception desk at University College (Ransom Hall), call the Maverick Resource Hotline at 817-272-6107, send a message to resources@uta.edu, or view the information at <http://www.uta.edu/universitycollege/resources/index.php>.

The IDEAS Center (2nd Floor of Central Library) offers **free** tutoring to all students with a focus on transfer students, sophomores, veterans and others undergoing a transition to UT Arlington. To schedule an appointment with a peer tutor or mentor email IDEAS@uta.edu or call (817) 272-6593.

The UT Arlington School of Social Work community is committed to and cares about all of our students. If you or someone you know feels overwhelmed, hopeless, depressed, and/or is thinking about dying by suicide or harming oneself or someone else, supportive services are available. For immediate, 24-hour help call MAVS Talk at 817-272-TALK (817-272-8255). For campus resources, contact Counseling and Psychological Services (817-272-3671 or visit <http://www.uta.edu/caps/index.php>) or UT Arlington Psychiatric Services (817-272-2771 or visit <https://www.uta.edu/caps/services/psychiatric.php>) for more information or to schedule an appointment. You can be seen by a counselor on a walk-in basis every day, Monday through Friday, from 8:00 AM to 5:00 PM in Ransom Hall, Suite 303. Getting help is a smart and courageous thing to do - for yourself and for those who care about you.

M. Librarian to Contact

The Social Sciences/Social Work Resource Librarian is John Dillard. His office is in the campus Central Library. He may also be contacted via E-mail: dillard@uta.edu or by Cell phone: **(817) 675-8962**, below are some commonly used resources needed by students in online or technology supported courses: <http://www.uta.edu/library/services/distance.php>

The following is a list, with links, of commonly used library resources:

Library Home Page..... <http://www.uta.edu/library>
Subject Guides..... <http://libguides.uta.edu>
Subject Librarians..... <http://www.uta.edu/library/help/subject-librarians.php>
Course Reserves..... <http://pulse.uta.edu/vwebv/enterCourseReserve.do>
Library Tutorials <http://www.uta.edu/library/help/tutorials.php>
Connecting from Off- Campus..... <http://libguides.uta.edu/offcampus>
Ask a Librarian..... <http://ask.uta.edu>

N. Emergency Exit Procedures

Should we experience an emergency event that requires us to vacate the building, students should exit the room and move toward the nearest exits, which are the stairwells located at either end of the adjacent hallway. When exiting the building during an emergency, one should never take an elevator but should use the stairwells. Faculty members and instructional staff will assist students in selecting the safest route for evacuation and will make arrangements to assist individuals with disabilities.

O. Drop Policy

Students may drop or swap (adding and dropping a class concurrently) classes through self-service in MyMav

from the beginning of the registration period through the late registration period. After the late registration period, students must see their academic advisor to drop a class or withdraw. Undeclared students must see an advisor in the University Advising Center. Drops can continue through a point two-thirds of the way through the term or session. It is the student's responsibility to officially withdraw if they do not plan to attend after registering. **Students will not be automatically dropped for non-attendance.** Repayment of certain types of financial aid administered through the University may be required as the result of dropping classes or withdrawing. For more information, contact the Office of Financial Aid and Scholarships (<http://wweb.uta.edu/aao/fao/>).

P. Disability Accommodations

UT Arlington is on record as being committed to both the spirit and letter of all federal equal opportunity legislation, including *The Americans with Disabilities Act (ADA)*, *The Americans with Disabilities Amendments Act (ADAAA)*, and *Section 504 of the Rehabilitation Act*. All instructors at UT Arlington are required by law to provide “reasonable accommodations” to students with disabilities, so as not to discriminate on the basis of disability. Students are responsible for providing the instructor with official notification in the form of **a letter certified** by the Office for Students with Disabilities (OSD). Only those students who have officially documented a need for an accommodation will have their request honored. Students experiencing a range of conditions (Physical, Learning, Chronic Health, Mental Health, and Sensory) that may cause diminished academic performance or other barriers to learning may seek services and/or accommodations by contacting:

The Office for Students with Disabilities, (OSD) www.uta.edu/disability or calling 817-272-3364.

Information regarding diagnostic criteria and policies for obtaining disability-based academic accommodations can be found at www.uta.edu/disability.

Counseling and Psychological Services, (CAPS) www.uta.edu/caps/ or calling 817-272-3671 is also available to all students to help increase their understanding of personal issues, address mental and behavioral health problems and make positive changes in their lives.

Q. Non-Discrimination Policy

The University of Texas at Arlington does not discriminate on the basis of race, color, national origin, religion, age, gender, sexual orientation, disabilities, genetic information, and/or veteran status in its educational programs or activities it operates. For more information, visit uta.edu/eos.

R. Title IX Policy

The University of Texas at Arlington (“University”) is committed to maintaining a learning and working environment that is free from discrimination based on sex in accordance with Title IX of the Higher Education Amendments of 1972 (Title IX), which prohibits discrimination on the basis of sex in educational programs or activities; Title VII of the Civil Rights Act of 1964 (Title VII), which prohibits sex discrimination in employment; and the Campus Sexual Violence Elimination Act (SaVE Act). Sexual misconduct is a form of sex discrimination and will not be tolerated. *For information regarding Title IX, visit www.uta.edu/titleIX or contact Ms. Jean Hood, Vice President and Title IX Coordinator at (817) 272-7091 or jmhood@uta.edu.*

S. Academic Integrity

Students enrolled all UT Arlington courses are expected to adhere to the UT Arlington Honor Code:

I pledge, on my honor, to uphold UT Arlington’s tradition of academic integrity, a tradition that values hard work and honest effort in the pursuit of academic excellence.

I promise that I will submit only work that I personally create or contribute to group collaborations, and I will appropriately reference any work from other sources. I will follow the highest standards of integrity and uphold the spirit of the Honor Code.

UT Arlington faculty members may employ the Honor Code in their courses by having students acknowledge the honor code as part of an examination or requiring students to incorporate the honor code into any work submitted. Per UT System *Regents' Rule* 50101, §2.2, suspected violations of university's standards for academic integrity (including the Honor Code) will be referred to the Office of Student Conduct. Violators will be disciplined in accordance with University policy, which may result in the student's suspension or expulsion from the University. Additional information is available at <https://www.uta.edu/conduct/>.

T. Electronic Communication

UT Arlington has adopted MavMail as its official means to communicate with students about important deadlines and events, as well as to transact university-related business regarding financial aid, tuition, grades, graduation, etc. All students are assigned a MavMail account and are responsible for checking the inbox regularly. There is no additional charge to students for using this account, which remains active even after graduation. Information about activating and using MavMail is available at <http://www.uta.edu/oit/cs/email/mavmail.php>.

U. Campus Carry

Effective August 1, 2016, the Campus Carry law (Senate Bill 11) allows those licensed individuals to carry a concealed handgun in buildings on public university campuses, except in locations the University establishes as prohibited. Under the new law, openly carrying handguns is not allowed on college campuses. For more information, visit <http://www.uta.edu/news/info/campus-carry/>

V. Student Feedback Survey

At the end of each term, students enrolled in face-to-face and online classes categorized as “lecture,” “seminar,” or “laboratory” are directed to complete an online Student Feedback Survey (SFS). Instructions on how to access the SFS for this course will be sent directly to each student through MavMail approximately 10 days before the end of the term. Each student's feedback via the SFS database is aggregated with that of other students enrolled in the course. Students' anonymity will be protected to the extent that the law allows. UT Arlington's effort to solicit, gather, tabulate, and publish student feedback is required by state law and aggregate results are posted online. Data from SFS is also used for faculty and program evaluations. For more information, visit <http://www.uta.edu/sfs>.

W. Final Review Week

For semester-long courses, a period of five class days prior to the first day of final examinations in the long sessions shall be designated as Final Review Week. The purpose of this week is to allow students sufficient time to prepare for final examinations. During this week, there shall be no scheduled activities such as required field trips or performances; and no instructor shall assign any themes, research problems or exercises of similar scope that have a completion date during or following this week *unless specified in the class syllabus*. During Final Review Week, an instructor shall not give any examinations constituting 10% or more of the final grade, except makeup tests and laboratory examinations. In addition, no instructor shall give any portion of the final examination during Final Review Week. During this week, classes are held as scheduled. In addition, instructors are not required to limit content to topics that have been previously covered; they may introduce new concepts as appropriate.