



Mental Health and Addictions 10L

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Course Title

Mental Health and Addictions 10L

Area of Study

Health Education

Recommended Prerequisites

Mental Health and Addictions 10L does not have a recommended prerequisite.

Course Description

The purpose of Mental Health and Addictions 10L is to educate students in understanding the history of mental health, learn common mental health issues including addictions, and study the short and long-term impact and effects of these issues, their contributing factors, and what can help. In addition, students will understand the risks associated with loss of culture, impact of Residential Schools, and how these losses impact mental health and often daily functioning.

Rationale

Mental health issues are common and prevalent within all communities including many First Nations communities. There are several contributing factors and history plays a significant part. Youth witness the impact and the role that mental illness plays in families' often without the skills to manage them. They are impacted by this and simultaneously they also experience common mental health issues. It is essential to provide a framework and opportunities for youth to learn healthy coping strategies and have the opportunity to practise what they learn. It's important that supportive caregivers reinforce healthy coping skills. In this course youth learn about common mental health issues and how to manage their impact while learning skills that will help them function well and are provided with opportunities to grow. The environment is safe and a place for them to share experiences and learn together.

This course will teach students to understand the history of mental health and addictions, learn common mental health issues, their contributing factors and ways to keep them in good health. In addition, the students will understand the risks associated with loss of culture, impact of Residential Schools, and how these losses can impact mental health and daily functioning.

Often, youth are exposed directly or indirectly to drugs and alcohol, family violence, caregivers with untreated mental. They have limited strategies to effectively manage emotions, self soothe, problem solve and find healthy solutions and stress experiences are often turned inwards.

It is the goal of this program to educate students about mental health issues including addictions and their impact. It is the belief that with adequate information on the different mental health issues and ongoing support, the students will be encouraged to make positive decisions that will benefit their well-being. Students will examine the short and long term effects of issues associated with mental health and addictions.

By incorporating Indigenous content within this program, students will learn how culture can assist in recovery of mental health issues and actualization of the Truth and Reconciliation Commission Calls to Action. Students will examine those who are suffering from mental health issues and utilize strategies and principles in their own lives to promote positive mental health. With a mental health committee dedicated to educating community, this community will serve as a voice for those who may be excluded or unaware of services available.

This course is multifaceted: it teaches mental health and additions information, it provides practical skills that can be used across a wide variety of situations and it gives students an opportunity to learn from members of the community.

“It is the vision of this program to promote healthy lifestyle choices and understand the factors that contribute to mental health disorders and addictions, to incorporate cultural components into daily practices, and assist those who suffer from addictions and disorders.” (Mental Health Team, 2013)

Student Target Group

Mental Health and Addictions 10L is designed to support students with a passion for well-being who wish to pursue interest in understanding mental health and Addictions, including the risks associated with loss of culture and impact of Indian Residential Schools, while and improving personal well-being.

Broad Areas of Learning

There are three Broad Areas of Learning that reflect Saskatchewan’s Goals of Education as per the Kindergarten to Grade 12 Health Education curriculum (Ministry of Education, 2012). These Broad Areas of Learning also apply to Mental Health and Addictions 10L. And, just as with the Health Education curriculum, Mental Health and Addictions contributes to the Goals of Education through the Broad Areas of Learning in helping students achieve knowledge, skills, and attitudes related to the following:

- **Lifelong Learners:** Students who are engaged in constructing and applying knowledge naturally build the skills and abilities to learn in health education. Throughout their learning, students gain understanding and confidences to apply knowledge to address health challenges.
- **Sense of Self, Community, and Place:** Students who possess a positive personal identity are able to establish and maintain meaningful relationships with others. Students benefit when deeper understanding results from learning about, with, and from others. In health education, students learn that through relationships, they can make a commitment to attain, maintain, and promote balance within the physical, mental, emotional, and spiritual aspects of humanness.
- **Engaged Citizens:** Students who build a capacity for active involvement, an ethical sense of personal agency, and connections to the health of self, family, community, and the environment will contribute to the sustainability of local and global communities. Making positive and informed decisions in health education broadens students’ understanding of, and responsibility for, stewardship of the natural environment and of the health of communities.

Cross-curricular Competencies

There are four interrelated Cross-curricular Competencies containing understandings, values, skills, and processes which are considered important for learning in all areas of study which are reflective of the Common Essential Learnings and are intended to be addressed as per the Science curriculum (Ministry of Education,

2012). These Cross-curricular Competencies also apply to Mental Health and Addictions 10L. These Cross-curricular competencies include the following:

- **Developing Thinking:** This competency addresses how people make sense of the world around them. Understanding develops by building on what is already known, and by initiating and engaging in contextual thinking, creative thinking, and critical reasoning through cultural, experiential, and inquiry processes. Health education is taught and learned through an inquiry process that recognizes the knowledge that students already possess, and teaches them to self-reflect and purposefully seek, evaluate, and use historical, contemporary, and evolving information.
- **Developing Identity and Interdependence:** This competency concerns the ability to act autonomously in an interdependent world. It requires the learner to be aware of the natural environment, of social and cultural norms and expectations, and of the possibilities for individual and group accomplishments. It assumes the possession of a healthy self-concept and the ability to live in harmony with others and with the natural and constructed worlds. Health education requires students to examine and demonstrate responsible and respectful behaviours in a variety of contexts, to positively influence the factors that affect relationships, and to develop a strong sense of identity in relation to their connection with others.
- **Developing Literacies:** This competency concerns a variety of ways, including the use of technology, to interpret the world and express understanding of it through words, numbers, images, sounds, and movements in various situations. Multiple literacies involve a continuum of interrelated skills, strategies, and knowledge that contribute to the development of an individual's ability to participate in a variety of roles and settings in the home, school, and community. Health education requires students to use different literacies effectively and contextually as they represent ideas and health information in multiple, flexible ways, as they identify and access supports to healthy living, and as they make healthy decisions and apply them in daily life.
- **Developing Social Responsibility:** This competency concerns how people contribute to their physical, social, and cultural environments. It requires the ability to participate with others in accomplishing shared or common goals. Health education supports students in applying decisions for individual, family, community, and environmental health and wellness. Students work toward common goals to improve the health of self, others, and the environment.

The Common Essential Learnings can be integrated into all aspects of planning and instruction and are reflected in the Cross-curricular competencies listed above. It is through using these learnings that students can translate thoughts into actions. Refer to *Understanding the Understanding the Common Essential Learnings: A Handbook for teachers* (Saskatchewan Education, 1988) and *Renewed Objectives for Common Essential Learnings* (Ministry of Education, 2008).

Aim and Goals

The aim of Health Education curriculum and, in turn Mental Health and Addictions 10L, is to develop confident and competent students who understand, appreciate, and apply health knowledge, skills, and strategies throughout life.

The goals of Health Education curriculum and, in turn Mental Health and Addictions 10L, are as follows:

- **Understanding, Skills, and Confidences** - Students will develop the understanding, skills, and confidences necessary to take action to improve health.
- **Decision Making** - Students will make informed decisions based on health-related knowledge.
- **Apply Decisions** - Students will apply decisions that will improve personal health and/or the health of others.

Big Ideas and Questions for Deeper Understanding

It is important that teachers and students learn within meaningful contexts that relate to their lives, communities, and world. Teachers and students need to identify big ideas and questions for deeper understanding central to the area of study.

Big ideas are at the core of the subject; they need to be uncovered. The big ideas at the core of a subject are arrived at, sometimes surprisingly slowly, via teacher-led inquiries and reflective work by students. Big ideas encompass concepts, broad or overarching themes, skills, attitudes, and habits of mind which help students make sense of and apply what they learn. A big idea can be thought of as providing a focusing conceptual ‘lens’ for study; breadth of meaning by connecting and organizing many facts, skills, and experiences; serving as the linchpin of understanding; ideas at the heart of expert understanding; great transfer value and applying to many other inquiries and issues across subject areas and over time and both in the curriculum and out of school (Renewed Curricula: Understanding Outcomes, Ministry of Education, 2010).

Questions for deeper understanding are used to initiate and guide the inquiry and give students direction for developing deep understandings about a topic or issue under study. It is essential to develop questions that are evoked by student interests, have potential for rich and deep learning, are compelling and able to assist students to grasp important disciplinary or transdisciplinary ideas that are situated at the core of a particular curricular focus. These broad questions will lead to more specific questions that can provide a framework, purpose, and direction for the learning activities in a lesson, or series of lessons, and help students connect what they are learning to their experiences and life beyond school (Renewed Curricula: Understanding Outcomes, 2010).

*Refer to Course Overview for big ideas and questions for deeper understanding specific to Mental Health and Addictions 10L.

Outcomes and Indicators

The learning expected of students in Saskatchewan is defined by curriculum outcomes for each grade. As Saskatchewan students achieve the grade-specific outcomes identified in curricula, they will deepen their understanding of each area of study as a living field of knowledge. Outcomes define what a student is expected to know and be able to do at the end of the grade or secondary level course. Outcomes require that students develop a combination of factual, conceptual, procedural, and metacognitive knowledge and are developed based on current research to ensure coherence and rigor. Therefore, all curriculum outcomes are required. Indicators clarify the breadth and depth of each outcome and are examples of ways that students might be asked to demonstrate achievement of an outcome. They serve as examples of the type of evidence that teachers would accept to determine the extent to which students have achieved the desired learning results. When teachers are planning for instruction, they must be aware of the set of indicators to understand fully the breadth and depth of the outcome. Based on this understanding of the outcome, teachers may develop their own indicators that are responsive to their students’ interests, lives, and prior learning. These teacher-developed indicators must maintain the intent of the outcome (Renewed Curricula: Understanding Outcomes, Ministry of Education, 2010).

*Refer to Course Overview for outcomes and indicators specific to Mental Health and Addictions 10L.

Instruction

General

Students learn best when they are active, exploring, questioning/searching for meaning, investigating/ experimenting, looking for connections/relationships/patterns, sharing/discussing with others and reflecting. Considering how students learn, the optimal conditions for learning and the learning skills needed to develop an effective program that focuses on improved student learning. In addition, by beginning with a topic of deep interest to students, they are more willing to engage in activities which reinforce and build their skills.

When planning for instruction, care will be taken to

- ensure developmental stages, learning preferences styles, environment, and needs are considered
- create conditions for optimal learning by considering the full range of teaching and learning strategies.
- help students develop effective learning skills to participate in learning (e.g., working independently, self-assessment, setting goals and monitoring progress, adapting to change, inquiry skill), interact positively with others (e.g., self-management, getting along with others, social responsibility), and plan their present and future lives and to determine the learning required to implement the plan (e.g., self-assessment, exploring and obtaining information, awareness of opportunities).

Direct Instruction

Lecture: an oral presentation of facts or principles during which the learner is responsible for taking appropriate notes

Demonstrations/modelling: performing a skill or activity in order to show how to do it

Didactic Questions: guiding students to predetermined learning through the use of lower order questions

Drill and Practice: repetition of fundamental skills to enhance speed and accuracy of performance

Guides for Reading, Listening, and Viewing: structured formats intended to direct students to appropriate learning expectations in reading, listening, or viewing

Indirect Instruction

Problem Solving: an organized process for solving a problem

Research; gathering and interpreting data on a specific topic

Case Studies: investigation of a specific event, situation, or person to develop an understanding of factors that can be generalized to other situations

Concept Formation: an inductive thinking strategy in which students sort, classify, and/or group items, ideas, opinions, into categories to draw inferences, make generalizations, and develop concepts

Concept Attainment: clarifying a concept by providing positive and negative examples of that concept

Reflection: process of thinking about and connecting ideas, experiences, and learning

Debate: the presentation of opposing sides of an issue by two teams/individuals before an audience or judge

Interactive Instruction

Cooperative Learning: a variety of interdependent learning structures where students learn

in small heterogeneous groups

Jigsaw: Students are divided into “home” groups. Each student in the group moves into a different expert group to gather information (provided by the teacher or through research) and then goes back to the home group to share that information

Think/Pair/Share: Students begin thinking about a concept on their own, then work with a partner to share and discuss ideas

Snowballing: pairs of students begin sharing ideas. After a few minutes, the pairs join with another pair to form a group of four to share ideas. The groups continue to combine to form groups of eight, then 16. New ideas are added and discussed

Numbered Heads: Numbered heads is a structure whereby students number off, e.g., four in a group, and the teacher poses a problem and sets a time limit for each group to investigate. The teacher calls a number and the student with that number in each group responds.

Learning Circles: small groups of students who discuss a common test, topic, or problem in order to deepen understanding

Brainstorming: a group activity in which participants are encouraged to think uncritically about all possible ideas, approaches, or solutions

Role Playing: assuming the role of another and acting out a situation to develop understanding and insights

Peer Coaching: a structured situation where students teach and learn from each other

Experiential Learning: A situation requiring a high level of active involvement in his/her own learning that is inductive, learner centred and activity oriented. .

Independent Instruction

Independent Project: a formal assignment on a topic related to the curriculum

Learning Centres: a specially organized space containing specific resources and/or equipment

Learning Contracts: a plan of instruction allowing students to proceed at their own rate in learning specified material

Inquiry Instruction

Mini Inquiry: spontaneous inquiry for which students are provided the opportunity to ask questions, search for and find information relatively quickly, and satisfy curiosity

Curricular Inquiry: inquiry for which content and concepts are determined by provincial or locally developed outcomes.

Open Inquiry: inquiry for which students are provided the opportunity to select a topic of inquiry with teacher guidance

Project/Problem/Design-Based Learning (PBL/PBL/DBL): inquiry that results in the completion of an product, event, or presentation to an audience (project-based learning); define a problem and identify solutions (problem-based learning); or design and create an artifact that requires application and understanding (design-based learning)

Inquiry Continuum: ← Teacher Directed – Collaborative – Student Directed →
 ← Large Group – Small Group – Individual →
 ← Intra-disciplinary – Inter-disciplinary →
 ← Mini – Curricular – Open (PBL/PBL/DBL) →

Specific to Course

The outcome of this program is to educate students on common mental health issues including addictions. Due to the sensitivity of these topics and the close and direct impact of these issues student will learn and address many problems with a sense of safety, trust, empathy, confidence, and a non-judgemental approach.

Strategies incorporated will include:

- use meditation, relaxation, and mindfulness strategies as a way to self- manage
- understanding how culture can assist with managing mental health issues
- understand the medicine wheel
- understand the benefits of journaling
- understand the importance of asking for help
- understand the benefits of deep breathing exercises
- understand the connection between thoughts, feelings and behaviour
- understand what positive self-talk is and how negative self-talk is destructive
- build an self-esteem shield
- learn stress management skills
- understand that “talk therapy” helps
- understand about distorted thinking
- understand what unhealthy and healthy relationships are
- learn about the impact of addictions and where to go for help

The Instructor should:

- Utilize Elder support when discussing mental health and addictions. Elder should be knowledgeable in the area of mental health and associated strategies that support healthy recovery.
- Provide relative material and specific content presentations pertaining to topics covered throughout this course.
- Instructor should have some personal experience in dealing or treating mental health disorders and addictions.
- Understand how to deliver information in a sensitive manner and give valid responses to deep level questioning that students may have.
- Have clear and concise definitions of key terms used throughout the program.
- Extend invitation to community and Elder supports.

Assessment

General

Assessment and evaluation are ongoing and serve different purposes at different times.

	<i>Diagnostic Assessment</i>	<i>Formative</i>		<i>Summative Evaluation</i>
		<i>Assessment</i>	<i>Evaluation</i>	
<i>What?</i>	- assessing what students know and are able to demonstrate prior to instruction	- assessing what students know and are able to do as they progress through the learning and practice opportunities	- evaluating what students know and are able to do at certain points during the process of learning and practicing	- evaluating students' demonstration of what they know and are able to do at the end of the instruction
<i>When?</i>	- occurs before instruction begins	- is ongoing as students learn and practice	- occurs at one or more checkpoints throughout the process of learning and practicing	- occurs at the end of the instructional unit, e.g., unit, course, and will not be judged again in the course
<i>Why?</i>	- helps determine starting points and helps the teacher program appropriately for individual students	- provides ongoing meaningful feedback to help students improve as the learning/ practice builds, becomes more complex and connects with other learning	- provides a snapshot of students' achievement, e.g., mark, level at specific points in the course before the final demonstration (summative evaluation)	- provides students with the opportunity to synthesize knowledge and skills and demonstrate their achievement

	<i>Diagnostic Assessment</i>	<i>Formative</i>		<i>Summative Evaluation</i>
		<i>Assessment</i>	<i>Evaluation</i>	
<i>How?</i>	- assessment strategies to provide a holistic picture of the learning students have acquired in the past	- assessment strategies to provide opportunities for students to learn and practice	- strategies that are relevant to: a) the expected learning; b) the point students have progressed to in the learning process; c) the summative evaluation (demonstration) planned for the end of the instructional unit.	- strategies that: a) require students to synthesize and apply the key learnings; b) require students to demonstrate learning in new or unfamiliar context (but not new learning); c) present students with engaging, challenging problems; d) allow for individual student accountability.
<i>Note</i>	- information from diagnostic assessments must not count towards the final grade	- formative assessment may be taken into consideration in determining students' final grades	- formative evaluation may count towards students' final grades	- summative evaluation will always count towards students' final grades

Under each of these categories, there are various types of assessment strategies. Some examples have been listed above beside each assessment method.

One of the critical professional judgments teachers must make is to appropriately match the assessment strategy (ies) to the type(s) of learning being assessed. There are a wide variety of assessment strategies available to teachers. Assessment strategies are what the teacher will have the students doing to demonstrate their learning.

Specific to Course

Students will engage in lesson through discussion groups in which a participation rubric will be used. Student will be given opportunities for project based activities that focus on prevention strategies, self assessments, and survey student's knowledge, examine case studies, and create a student profile. Students will be given pretest and post tests for effectiveness of program. Student will be given the opportunity to create a presentation.

This program will serve as an initiative driven by the students to take ownership and responsibilities for choices made. This program will educate students in a forum that is safe, valuable and meaningful to everyone exposed to the signs and symptoms of mental health disorders.

Constant supervision and overview of strategies will play an essential part of development for students. The implementation and sequence of material presented to students is crucial and also the immediate consultation if necessary with division and/or schools professional supports. The teacher will lead the discussion and debates within the classroom and outline the essential rules to a bid by when discussing mental health and addictions.

Grading and reporting will comply with...

- case study scenarios of mental health disorders/addictions
- project based program addressing and highlighting present risk factors
- discussion groups and reporting periods after each unit
- cultural components incorporated into instruction and participation
- rubrics for participation and involvement

Infusion of First Nations, Metis, and Inuit Ways of Knowing and Treaty Education

First Nations, Metis, and Inuit content, perspectives, and ways of knowing are to be integrated into all curricula and embedded within the outcomes and indicators for each curriculum respectively. All students benefit from knowledge about the First Nations, Métis, and Inuit peoples and it is through such knowledge that misconceptions and bias can be eliminated. To that end, when completing various assignments, projects, portfolio components, etc., students are encouraged to address First Nations, Métis, and Inuit content and perspectives into their work. For further information, see *Inspiring Success: Building Towards Student Achievement* (Saskatchewan Ministry of Education, 2009).

The Saskatchewan Ministry of Education is committed to providing the appropriate supports and programs that reflect and affirm the unique status of First Nations and Métis people – Treaty Education. Four Treaty Education goals have been identified as the basis for building understanding and nurturing appreciation. These goals are based upon the Treaty Essential Learnings and are intended to be addressed through various subject areas, including Mental Health and Addictions 20L as able and appropriate, and include:

- Treaty Relationships: By the end of grade 12, students will understand that Treaty relationships are based on a deep understanding of peoples' identity which encompasses: languages, ceremonies, worldviews, and relationship to place and the land.
- Spirit and Intent of Treaties; By the end of grade 12, students will recognize that there is interconnectedness between thoughts and actions which is based on the implied and explicit intention of those actions. The spirit and intent of Treaties serve as guiding principles for all that we do, say, think, and feel.

- **Historical Context of Treaties:** By the end of grade 12, students will acknowledge that the social, cultural, economic, and political conditions of the past played and continue to play a significant role in both the Treaty reality of the present and the reality they have yet to shape.
- **Treaty Promises and Provisions:** By the end of grade 12, students will appreciate that Treaties are sacred covenants between sovereign nations and are the foundational basis for meaningful relationships that perpetually foster the well-being of all people

While each of the four Treaty Education goals is presented separately, these goals can only be understood when considered as parts of a whole. The outcomes and indicators at each grade level are designed to engage learners on a journey of inquiry and discovery. When meaningfully and thoughtfully incorporated into subject areas, Treaty Education moves beyond an idea to become actualized as a belief that benefits all learners. For further information, see Treaty Education Outcomes and Indicators (Saskatchewan Ministry of Education, 2013).

Adaptive Dimension

The Adaptive Dimension permeates all curricula, courses, and programs and is a necessary component of all education in Saskatchewan schools. Adaptive Dimension refers to the concept of and the teachers' authority and responsibility to differentiate and make adjustments in approved educational programs to accommodate and respond to diversity regarding students' learning strengths and needs, interests, backgrounds, life experiences, and motivations. Application of the Adaptive Dimension includes those practices the teacher undertakes to ensure the four variables of the Adaptive Dimension which include the learning environment, instruction, assessment, and resources are meaningful, appropriate as it relates to the extent and duration of each adaptation, and support individual student achievement. The Adaptive Dimension is a necessary component of all education in Saskatchewan schools. And, when applying the Adaptive Dimension, it is important to consider students' learning profile, cognitive development, interests, physical development, social-emotional development, and self-concept. Note that within the context of the Adaptive Dimension, curricular outcomes are not changed; adaptive variables are adjusted so that the curricular outcomes can be achieved.

Further to this, the Adaptive Dimension recognizes that students approach learning in multiple ways. The Adaptive Dimension supports the understanding that decisions about adaptations are best made by the professionals who are working with students on a daily basis. Teachers need to actively respond to the strengths and needs of individual students. Collaborative planning is fundamental to structuring adaptations of the four variables to maximize students' potential as independent learners. All students can learn and achieve as a result of effective assessment, planning and instruction.

For further information, see The Adaptive Dimension for Saskatchewan K-12 Students (Ministry of Education, 2017).

When addressing the adaptive dimension to meet student learning and behavioral needs, teachers are encouraged to refer to Actualizing a Need-Based Model and division based documentation and processes as they pertain to providing Tier 1, 2, and 3 supports with a focus on the provision and documentation of Tier 1 Universal School-Wide Classroom-wide Support.

For further information, see Actualizing a d Needs-Based Model (Ministry of Education, 2015).

All measures will be taken to adapt the learning environment, instruction, assessment, and resources to help make the learning in Mental Health and Addictions 10L meaningful and appropriate for each student. In so doing the following guidelines will be followed:

- Employing varied instructional techniques and strategies and the gradual release of responsibility model to ensure each student masters the outcomes being addressed.
- Introducing vocabulary inherent Mental Health and Addictions 10L in a variety of ways to address differentiated learning styles.
- Providing opportunities for enrichment, extension, and reinforcement.
- Soliciting student input in goal-setting, instruction, selection of learning materials, and assessment with decisions based on students' strengths and needs, interests, backgrounds, life experiences, and motivations.
- Employing a wide variety of assessment for, of, and as learning tools and processes and procedures, offering a variety of options when making assignments.
- Incorporating a resource-based learning approach when selecting appropriate resources and formats.

Course Overview

Big Ideas and Questions for Inquiry

Big Ideas	Questions for Inquiry
<ul style="list-style-type: none">• Indigenous and Western Child and Adult Development• Feelings and Emotions• Self-Esteem• Communication• Relationships• Bullying• Mental Health Issues and Disorders• Addictions• Grief• Suicide• Therapeutic Modalities• Trauma	<ul style="list-style-type: none">• How do Indigenous and western teachings compare in relation to child and adult development? What factors impact child and adult development? How can child and adult development be enhanced?• What are feelings and emotions? What is self-esteem? How can feelings and emotions be identified, managed, and developed?• What is effective communication? What factors need to be considered when communicating with others? How can effective communication be improved?• What mental health issues and disorders and addictions are impacting our community? How can they be identified, treated, managed, and/or addressed from Indigenous, western, and multicultural points of view?• How are violence and anger in relationships, bullying, grief, suicide, and trauma impacting our community? How can these issues be identified, treated, managed, and/or addressed from Indigenous, western, and multicultural points of view?• How do Indigenous and western therapeutic modalities compare in relation to healing? What needs to be considered when selecting a therapeutic modality to address healing?

Course Overview

Outcomes and Indicators

Introduction	<ul style="list-style-type: none">• Identify the definition of Health and Mental Health• This course will begin with finding out what students would like to learn in this course along with goals and expectations. Students will be introduced to the outline of the course, explaining how each class will be taught, the possible emotional impacts of the course, the need for confidentiality and the limits of confidentiality. Students will highlight the different modules that will be covered and explain how students will be evaluated and the marking process• Students will be aware of the emotional, physical, mental, and spiritual impact this course will have upon overall well-being and build the knowledge about Mental Health in Canada and Addictions with youth
Outcomes: 1.1 Explore Indigenous and western developmental stages from childhood to adulthood, and examine how developmental milestones are achieved.	<ol style="list-style-type: none">a) Examine different Indigenous and western developmental theories and stages (i.e. Indigenous Cree teachings, TIPI Teachings, Medicine Wheel and Connection to Life Cycle, Freud and Erickson’s psychosocial development, Piaget’s stages of cognitive development, Maslow’s hierarchy of needs, etc.).b) Discuss that many of the above the founders of the above theories and stages developed those stages from Indigenous teachings.c) Identify and reflect upon where oneself and others fit in various stages.d) Analyze factors that enhance and interfere with the achieving developmental milestones and discuss how to further support and overcome barriers to achieving said milestones.e) Define intrinsic and extrinsic motivation and explain how various theories of motivation (i.e. instincts, drive reduction, self-efficacy, and social motives) impact one’s development.f) Describe birth order and its impact on one’s development (i.e. how one navigates life, how one interacts with others, etc.).

<p>Outcomes: 1.2 Recognize feelings and emotions of oneself and others, and express and manage them in healthily and respectfully.</p>	<ul style="list-style-type: none"> a) Identify a vast array of feelings and emotions, the sensations in their body that depict those feelings and emotions, and feelings and emotional risks and triggers. b) Discuss healthy and unhealthy expressions of feelings and emotions. c) Recognize feelings and emotions in others and know how to ask about them in a safe and healthy manner. d) Analyze the Indigenous and cultural perspectives in relation to how feelings and emotions are expressed, recognized, and perceived. e) Study and identify methods and skills in managing stress. f) Identify potential supports in their families, community and surrounding urban centers. g) Experience imagery exercise to help build a safe place. h) Invite an Elders, Knowledge Keeper, and/or Indigenous Advocate to share and discuss Indigenous methods of stress and anxiety management in addition to self-care (i.e. elder support, sweats, ceremonies, smudging, etc.). i) Implement a variety of stress and anxiety management and self-care practices and techniques in an effort to manage feelings and emotions resulting from the challenges and stressors of everyday life. (i.e. music exercise, spending time with family/friends, meditation, breathing, mindfulness, physical activities, journaling, etc.).
<p>Outcomes: 1.3 Recognize self esteem in oneself and others, examine the connections between personality type and self-esteem, and apply strategies as appropriate to build positive self-image.</p>	<ul style="list-style-type: none"> a) Examine self-esteem, how it is defined by Indigenous, western and other cultures, how it is developed, and how it is diminished. b) Identify indicators of high and low self esteem. c) Recognize that self-esteem is ever present, fluid, that one can have high self-esteem in one area and low esteem in another, and understand why. d) Study the pathological critic and critical inner voice, how it is developed, how it affects self-esteem and how to combat it. e) Identify one's strengths and limitations and learn how to accept them in oneself and others. f) Complete the Myers and Briggs personality test to determine one's personality type, understand there is no right or wrong, examine how personality type affects the way one interacts with the world and others g) Identify connections between self-esteem and personality type. h) Create a positive self-image in oneself and support others in doing the same.

<p>Outcomes: 1.4 Recognize communication styles of oneself and others, and communicate effectively and respectfully.</p>	<ul style="list-style-type: none"> a) Study different styles of communication (i.e. passive, aggressive, passive/aggressive, assertive, etc.). b) Classify methods of communication (i.e. non-verbal, verbal, etc.) and how methods of communication differ from Indigenous, western, and cultural perspectives. c) Address conflict and how people communicate or address conflict differently while identifying various conflict styles, their impact, and how to recognize conflict styles in oneself and others. d) Compare healthy and unhealthy styles of communication and identify barriers to communication and how to overcome these barriers. e) Discuss one's style of communication and analyze how it is affected by one's personality type as identified using the Meyers Briggs personality test. f) Develop communication skills and related understandings including but not limited to how to communicate on a deeper level, how to communicate with a variety of people including difficult ones, how decision making is affected by our communication and vice-versa, and how to communicate effectively in a group or on a team.
<p>Outcomes: 1.5 Develop understanding of violence and anger in relationships, study how to assess and manage violence and anger, and examine healthy relationships.</p>	<ul style="list-style-type: none"> a) Examine violence in relationships, the cycle of violence, and the role of both perpetrator and victim. b) Study the different styles of anger (i.e., bottle and cap, escalating and directing anger, etc.), which styles oneself and others use, and why. c) Research methods of addressing violence and anger from a variety of Indigenous, western, and other cultural perspectives. d) Compare anger management techniques and healthy expressions of anger including non-violent communication planning and how to break the cycles of violence. e) Examine how non-violent communication can be used to resolve unhealthy tension and conflict within relationships. f) Develop and implement an individual, small group, or class action plan to build awareness and/or manage anger and violence in relationships and the community. <i>Note: a similar indicator has been listed for Outcomes 1.5 and 1.6 and may be combined or revised if/as appropriate.</i>
<p>Outcomes: 1.6 Develop understanding of bullying, study how to assess and combat bullying, and examine ways to combat bullying.</p>	<ul style="list-style-type: none"> a) Define bullying, the varying roles one can play in a bullying situation, and types of and settings where bullying can occur (i.e. in the schools, in the workplace, cyber, lateral violence. etc.). b) Create a survey and/or examine survey data available (i.e. OurSchool, Thriving Schools and Communities, etc.) regarding bullying to assess and analyze bullying occurring in school. c) Examine supports available to children and youth to report bullying (i.e. PSST, Kid's Help Phone, Report Bullying Saskatchewan, etc.) d) Discuss approaches to assist children/youth (i.e. bullying shield) and parents/caregivers in combatting bullying. e) Develop and implement an individual, small group, or class, or school action plan to build awareness and/or combat one or more types or settings where bullying can occur. <i>Note: a similar indicator has been listed for Outcomes 1.5 and 1.6 and may be combined or revised if/as appropriate.</i>

<p>Outcomes: 1.7 Examine mental health issues and disorders, study assessment and diagnosis processes, and critique prevention and treatment supports available from a variety of Indigenous, western, and other cultural perspectives.</p>	<ul style="list-style-type: none"> a) Review mental health issues and disorder (i.e. DSM V – Diagnostic and Statistical Manual of Mental Disorders) and identify those which are prevalent among peers and/or in one’s community (i.e. anxiety, panic and phobias disorders, mood depression and bipolar disorders, eating and substance related disorders, schizophrenia and psychotic disorders, self-injury, etc.). b) Study several mental health issues and disorders from each category below identified as prevalent and/or of interest (i.e. psychological and physical symptoms, diagnosis and who can diagnose, causes, and treatments including and potential side-effects) <ul style="list-style-type: none"> a. Anxiety, panic, and phobia disorders (i.e. GAD- General Anxiety Disorder, Panic attack, Agoraphobia, Social Phobia, Separation Anxiety Disorder, OCD- Obsessive Compulsive Disorder, PTSD- Post Traumatic Stress Response, etc.). b. Mood, depression and bipolar disorders (i.e. depression, bipolar disorder, SAD – Seasonal Affective Disorder) c. Eating and substance related disorders identified as prevalent and/or of interest (i.e. Anorexia Nervosa, Bulimia Nervosa, Binge Eating, etc.). d. Schizophrenia and psychotic disorders identified as prevalent and/or of interest (i.e. Schizophrenia, Delusions, Hallucinations, Psychosis, Bi-polar, etc.). e. Self-Injury (i.e. cutting, burning, picking at wounds, hair-pulling, head-banging, etc.) c) Research the statistics regarding disorders studied and how they differ across the country, from one country to another, and/or across cultures. d) Investigate various Indigenous, western, and cultural mental health training and prevention programs and practices (i.e. Mental Health First Aid, SAFE Talk, ASIST, , SLAP and DIRT, Letting Go, etc.) e) Explore the impact, both positive and negative, that technology, social media, and various apps can have on mental illness and disorders including how to evaluate technology, social media, and various apps for objectivity, accuracy, reliability, credibility, and currency. f) Explore software and various apps that can be used in support of improved mental health g) Investigate various treatment and rehabilitation programs, practices, and personnel (i.e. CBT- Cognitive Behavior Treatment, Medicine Men and Women, Psychiatrists, Pharmacists, Physicians, Community Mental Nurses/Therapists, Elders Support from Community, Eagles Nest, Sobriety Home, etc.). h) Examine stigmas surrounding mental health issues and disorders and its resulting impact on an individual and create an action plan to break down stigmas. i) Organize and facilitate a school, family, and/or community engagement event, in collaboration with various community and Indigenous partners, to build awareness, create common understanding, identify needs and potential supports, and/or develop an action plan in support of Mental Health. <p><i>Note: a similar indicator has been listed for Outcomes 1.7 and 1.8 and may be combined or revised if/as appropriate.</i></p>
<p>Outcomes: 1.8 Examine addictions, study of assessment and</p>	<ul style="list-style-type: none"> a) Explore addictions (i.e. alcohol, drugs, gambling, etc.) in relation to how they are used to deal with feelings and emotions, self-esteem, communication, mental health issues and disorders, violence and anger in relationships, bullying and trauma.

<p>diagnosis processes, and explore prevention and treatment and supports available from a variety of Indigenous, western, and other cultural perspectives.</p>	<ul style="list-style-type: none"> b) Identify and classify the psychological and physical symptoms of addiction and determine how to assess addiction (i.e. BIGLIPS - binges, impulsivity, gulping drinks, loss of control, inseparable, preoccupation, shame; social withdrawal, cognitive impairment, etc.). c) Study, contrast, and compare various treatment, rehabilitation, and step programs for addictions (i.e. inpatient and outpatient) as well as others within the one's circle of influence. d) Study addictions identified as prevalent among youth and/or in their community and/or of interest being sure to include statistical data. e) Investigate issues with addiction prior and after first contact. f) Identify addictions as contributing factors to mental health issues and disorders (i.e. risk factors for depression, risk factors for suicide, symptoms or signs of severe bullying, reasons for deliberate self-injury, drug and substance abuse to minimize stress, etc.) g) Increase awareness of addictions common among peers including short/long term affects of addition (i.e. common and current examples of alcohol and short/long term effects, common and current examples of drugs and short/long term effects – marijuana/cocaine/heroin/crystal meth/ecstasy/etc.) h) Invite presenter from support organization and/or prior person experiencing/having experienced addictions (i.e. how begins, who impacted, affect on youth, personal experience, etc.). i) Explore the impact, both positive and negative, that technology, social media, and various apps can have on addictions including how to evaluate technology, social media, and various apps for objectivity, accuracy, reliability, credibility, and currency. j) Organize and facilitate a school, family, and/or community engagement event, in collaboration with various community and Indigenous partners, to build awareness, create common understanding, identify needs and potential supports, and/or develop an action plan in relation to Addictions. <p><i>Note: a similar indicator has been listed for Outcomes 1.7 and 1.8 and may be combined or revised if/as appropriate.</i></p>
<p>Outcomes: 1.9 Recognize and assess the stages of grief, and investigate the barriers to overcoming grief and how to overcome them.</p>	<ul style="list-style-type: none"> a) Develop an understanding of loss and, in turn, grief and how it impacts one's life (i.e. keys, moving, death, etc.). b) Analyze that this loss and grief is healthy and necessary. c) Examine the stages of grief and the steps in processing grief. d) Explore cultural beliefs in relation to grief. e) Invite community members including Elders, Knowledge Keeper, and/or Indigenous Advocates to share and discuss perspective of grief and discussion of tears. f) Develop the steps required and understanding of necessity of letting go.
<p>Outcomes: 1.10 Recognize and assess the risk of suicide, and build awareness regarding how</p>	<ul style="list-style-type: none"> a) Determine the symptoms and indicators of suicide; physical, mental, emotional and spiritual. b) Investigate what causes suicidal thoughts and that when a person is feeling suicidal they are not thinking clearly and require help. c) Recognize how to assess a person for suicidal risk (i.e. ASIST - Applied Suicide Intervention Skills Training, SLAP – specific plan/lethality/availability/proximity and DIRT – dangerousness/impressions/rescue/timing, SAFETalk, etc.).

<p>to develop and/or provide peer support.</p>	<ul style="list-style-type: none"> d) Discuss the five basic actions of Mental Health First Aid (i.e. ALGEE- assess the risk and/or harm, listen non-judgementally, give reassurance and information, encourage the young person to get appropriate professional help, and encourage other supports.) e) Practice how to talk to a person who is suicidal and apply the dos and don'ts of support. f) Explore privacy, confidentiality, and safety and determine how it applies/does not apply suicidal thoughts have been shared. g) Identify the components of an effective peer support system and how to develop a peer support system in one's school or community.
<p>Outcomes: 1.11 Examine therapeutic modalities, critique therapeutic supports, and determine how appropriate supports can be accessed.</p>	<ul style="list-style-type: none"> a) Discuss various schools of thought and cultural perspectives regarding healing. b) Research, present, and demonstrate various therapeutic modalities (i.e. founder, guiding principles, techniques, outcomes, etc.). c) Critique (i.e. introduction, thesis statement, summary, analysis – agreement and defense/disagreement and refute/questions and concerns/etc., conclusion) or debate various therapeutic techniques. d) Identify professionals who might offer support and explore how to interview them to determine whether the professional's philosophy and skills are an appropriate fit and meet client's needs. e) Identify support organizations addressing issues of Mental Health and Addictions. f) Study Indigenous and cultural therapeutic supports, their significance, and their potential for positive impact in addressing Mental Health and Addictions (i.e. sweat lodge, doctoring of whole being - physical, spiritual, emotional, and mental, shaking of the tent, smudge, prayer, dynamics of whole creation and relationships, and relationship with between living and nonliving organisms, etc.).
<p>Outcome: 1.12 Recognize trauma, assess the impact of trauma including the impact of residential schools, and examine ways to overcome trauma.</p>	<ul style="list-style-type: none"> a) Determine the symptoms and indicators of trauma (i.e. physical, mental, emotional, spiritual, etc.). b) Understand Post Traumatic Stress Response (PTSR), how it can be caused, and its potential affects on an individual. c) Understand the impact of Adverse Childhood Experiences (ACEs) and over a lifespan and how resilience offsets it long lasting effects. d) Examine the connection between the residential school system and trauma and the affects that experience have on individuals today through intergenerational trauma. e) Discuss coping strategies and approaches that have been successful in helping people work through trauma. f) Discuss trauma and healing with an elder followed by individual reflection. g) Study the Truth and Reconciliation Commission Calls to Action and develop and present recommendations, through the lens of Mental Health and Addictions, as to how they might be actualized as an individual, small group, class, or school.

References

- Actualizing a Needs-Based Model (Ministry of Education, 2015)
- Adaptive Dimension for Saskatchewan K-12 Students (Saskatchewan Ministry of Education, 2017)
- Copyright Act (Government of Canada, 2012)
- Copyright Matters (Copyright Consortium of the Council of Ministers of Education, Canada, 2016)
- Education Ministers' Policy Statement on Fair Dealing (Copyright Consortium of the Council of Ministers of Education Canada, 2018)
- Fair Dealing Decision Tool (Copyright Consortium of the Council of Ministers of Education, Canada, 2018)
- Health Education Curriculum (Ministry of Education, 2009)
- Inspiring Success: Building Towards Student Achievement (Saskatchewan Ministry of Education, 2009).
- Learning Resources Evaluation Guidelines (Saskatchewan Ministry of Education, 2013)
- Objectives for the Common Essential Learnings (Saskatchewan Education, 1998)
- Renewed Objectives for Common Essential Learning (Ministry of Education, 2008)
- Renewed Curricula: Understanding Outcomes (Ministry of Education, 2010).
- Resource-Based Learning Policy, Guidelines and Responsibilities for Saskatchewan Learning Resource Centers (Saskatchewan Education, 1987)
- Selecting Fair and Equitable Learning Materials (Saskatchewan Education, 1991)
- Treaty Education Outcomes and Indicators (Saskatchewan Ministry of Education, 2013)
- Understanding the Common Essential Learnings: A Handbook for teachers (Saskatchewan Education, 1988)

Key Resources

Recommended Resources

- Mental Health First Aid Canada, 2010 Mental Health Commission of Canada, University of Alberta, ORYGEN Research Centre, University of Melbourne, Parksville VIC 3052.
- Anxiety Disorders (psychological disorders), 2006 Infobase Publishing, Chelsea House, 132 West 31st Street, New York, NY 10001
- Mental Retardation, 2007 Thomson Gale, the Thomson Corporation, Lucent Books 27500 Drake Rd. Farmington Hills, MI 48331-35-35
- Straight Talk about...Post-Traumatic Stress Disorder: Coping with the Aftermath of Trauma, Kay Marie Porterfield 1996, Facts on File Incorporated, 11 Penza Plaza New York, NY 10001
- Suicide, 2009 The Rosen Publishing Group Incorporated, 29 East 21st Street, New York, NY 10010
- Self-Mutilating and Cutting, 2009 The Rosen Publishing Group Incorporated, 29 East 21st Street, New York, NY 10010
- Human Communication and its Disorders, 1993 Daniel R. Boone & Elena Plante, Prentice-Hall Incorporated, Simon and Schuster Company, Englewood Cliffs, New Jersey 07632
- Prisoners of Hate, 1999 Aaron T. Beck (M.D), Harper Collins Publishers Incorporated, 10 East 53rd Street, New York, NY 10022
- Personality Disorders (psychological disorders), 2006 Infobase Publishing, Chelsea House, 132 West 31st Street, New York, NY 10001
- Depression and Bipolar Disorders (psychological disorders), 2006 Infobase Publishing, Chelsea House, 132 West 31st Street, New York, NY 10001
- Bipolar Disorders (diseases and disorders), 2009 Reference Point Press Incorporated, PO Box 27779 San Diego CA 92198

- Teen Suicide, 1993 Jay Schleifer, The Rosen Publishing Corporation Incorporated, 29 East 21st Street, New York, NY 10010
- Youth with Alcohol and Drug Addiction, 2008 Mason Crest Publishers, Mason Crest Publishers incorporated, 370 Reed Road, Broomall, Pennsylvania 19008
- Nothing to Be Ashamed Of: Growing Up with Mental Illness in Your Family, 1989 Sherry H. Dinner Ph. D, The Continuum Publishing Company, 105 Madison Avenue, New York, NY 10016
- A Child Becomes Strong: Journeying Through Each Stage of the Life Cycle, 2010, Best Start Resource Centre, Suite 301 180 Dundas Street West, Toronto, Ontario, M5G 1Z8
- Healthy Relationships: High School Educators Toolkit, 2017, National Domestic Violence Hotline
- ExpectRespect: Promoting Healthy Teen Relationships, 2016, Barbara Ball, The Safe Alliance, P.O. Box 19454, Austin, Texas 78760
- Mental Health and High School Curriculum Guide, 2018, Dr. Stan Kutcher and Dr. Yifeng Wei, Teen Mental Health
- Trauma-informed: The Trauma Toolkit, 2013, Klinik Community Health Centre, 870 Portage Avenue, Winnipeg, Manitoba R3G 0P1

Recommended Support Organizations

- www.mentalhealthcommission.com (Mental Health Commission of Canada)
- www.kidshelpphone.ca (1-800-668-6868)
- www.mindyourmind.ca (Mind your Mind)
- www.griponline.ca (Grip-is a magazine written by youth, for youth, to express thoughts about issues)
- www.nimh.nih.gov (National Institute of Mental Health)
- www.alcoholics-anonymous.org (Alcoholics Anonymous)
- www.camh.net (Centre for Addiction and Mental Health)
- www.crufad.unsw.edu.au (Clinical Research Unit for Anxiety and Depression)
- www.suicideinfo.ca (Centre for Suicide Prevention)
- www.mooodisorderscanada.ca (Mood Disorders Society of Canada)
- www.nedic.ca (National Eating Disorder Information Centre)

Recommended Training and Certification

- Mental Health First Aid Training
- SAFE Talk Training
- ASIST Training
- Slap N Dirt Training
- Letting Go Training
- Just Breathe Training
- Mental Health and High School Curriculum Training

Copyright

In Canada, copyright is protected through the federal government's *Copyright Act* (Government of Canada, 2012) and was updated in 2012. In response to this revision, the Supreme Court of Canada made a decision on copyright and the educational use of fair dealing. And, with the support of the Copyright Consortium of the Council of Ministers of Education, Canada (CMEC), the *Education Ministers' Policy Statement on Fair Dealing* (Copyright Consortium of the Council of Ministers of Education Canada, 2018), was released in 2018.

Further to the above, and in support of copyright compliance and educator understanding of their rights and responsibilities regarding the *Copyright Act* (Government of Canada, 2012) and the *Education Ministers' Policy Statement on Fair Dealing* (Copyright Consortium of the Council of Ministers of Education Canada, 2018), a number of supports have been developed by the CMEC and are available on the CMEC website. These supports include: *Copyright Matters* (Copyright Consortium of the Council of Ministers of Education, Canada, 2016), *Fair Dealing Guidelines* (Copyright Consortium of the Council of Ministers of Education Canada, 2018), and the *FairDealingDecisionTool*. (Copyright Consortium of the Council of Ministers of Education, Canada, 2018).

Evaluation of the Locally Developed Course of Study

Following the completion of this Locally Developed Course, instructors will complete and submit the following questionnaire within two weeks of completing the course. Completed questionnaires can be faxed to:

Supervisor of Instruction
Regina Public Schools
Phone (306) 523-3136

Fax (306) 523-3031

1. Enrollment in this course?

- a) How many students enrolled in this course?
- b) How many students successfully completed this course?
- c) Which semester did you offer this course in?

2. Reflection

- a) What successes were experienced in the teaching and learning of this course?
Explain.
- b) What challenges were experienced in the teaching and learning of this course?
Explain.

3) Interpretation

- a) How might successes identified be enhanced? What supports might be required?
Explain.
- b) How might challenges identified be overcome? What supports might be required?
Explain.
- c) What revisions, Additions, deletions, would you recommend be made to this course as currently developed? Explain.