

**THE UNIVERSITY OF TEXAS AT AUSTIN**  
**SCHOOL OF SOCIAL WORK**  
**Social Work Practice with Older Adults: Health and Mental Health Issues**

<b>Course Number:</b>	SW 387R23	<b>Instructor's name:</b>	Namkee G. Choi, PhD, MSW
<b>Unique Number:</b>	61957	<b>Office Number:</b>	3.122D
<b>Semester:</b>	Fall 2011	<b>Office Phone:</b>	(512) 232-9590
<b>Meeting Time/Place:</b>	T 8:30-11:20 AM SSW 2.140	<b>Office Hours:</b>	T 11:30-1:00 & by appointment
<b>Course TA:</b>	Sok An (ansok1@gmail.com)	<b>(Instructor's e-mail:</b>	<a href="mailto:nchoi@mail.utexas.edu">nchoi@mail.utexas.edu</a> * <a href="mailto:nchoi@austin.rr.com">nchoi@austin.rr.com</a> *

\*(Please send e-mail messages to both addresses for quick response.)

**Standardized Course Description:** This course is designed to integrate the theories and practice skills needed for effective social work with older adults with major physical and mental health concerns and the older adults' families. The course builds upon the basic theoretical foundations and the practice methods and skills the students have acquired in their introductory courses. Specific focus will be on in-depth understanding of the nature and course of chronic illnesses and mental health problems, including cognitive declines, utilization of interdisciplinary (multidimensional) geriatric assessment tools, and evidence-based intervention models and processes. Understanding the issues of vital aging, developmental processes, fostering an alliance, overcoming stigma, use of self, therapeutic bias, and ethical dilemmas with this population will also be studied. Emphasis will be placed on older adults at risk due to poverty, lack of informal social support, disability, and discrimination based on race/ethnicity, sexual orientation. The course will be conducted using lectures, class discussions, case analysis, role plays, presentations by expert community practitioners, films, and specialized practice assignments to actively engage students in learning practice.

**Standardized Course objectives:** At the completion of this course, the student will be expected to:

1. Demonstrate the ability to explore, identify, and resolve his or her biases, myths, and stereotypes about older adults and the aging process by engaging in self-reflection;
2. Analyze the impact of their own biases on practice with this population;
3. Demonstrate advanced knowledge of theories and practice concepts regarding the unique and diverse needs and capacities of older adults and their families;
4. Identify and understand the signs, symptoms, and trajectories of particular health and mental health problems of older adults;
5. Identify changes in cognitive functioning and address attendant challenges to independent living and safety issues;
6. Be able to select and utilize appropriate assessment and diagnostic methods, including comprehensive geriatric assessment tools (e.g., ADL/IADL check list; home safety check off list; Geriatric Depression Scale; mini-mental status exam);
7. Critique and identify the most effective treatment models and methods to employ for the identified health and mental health problems;
8. Identify gaps in community services that support older adults with health and mental health problems;
9. Demonstrate the capacity to assess the challenges faced by older adults' families caring for them;
10. Develop care plans to address the needs of the informal support system with psycho-educational and supportive model and by linking them to health and social service resources;
11. Demonstrate cultural sensitivity toward diverse population groups (e.g., gender; race/ethnicity; immigrant status; sexual orientation and gender expression) and utilize culturally sensitive approaches in assessment and intervention;
12. Demonstrate expertise in responding to ethical dilemmas common to aging, chronic illness, cognitive decline, and death and dying;

**I. Teaching/Learning Methods**

The primary means of instruction will be class discussions of the assigned reading materials (one easy-to-read book chapter and 4 short-to-medium length articles/chapters on average) and collaborative learning from active

student participation in class discussions. The instructor has carefully chosen each reading assignment based on its utility for enhancing students' knowledge base and social work practice skills. Students are required to have done the assigned reading before class and actively participate in class and collaborate with one another. Occasional guest speaker presentations and informal lectures will supplement the collaborative learning

**II. Required Text and Readings** (Students are responsible for the material in the assigned readings whether or not the material is discussed in class.)

**Required text:**

McInnis-Dittrich, K. (2009). *Social work with older adults: A biopsychosocial approach to assessment and intervention* (3<sup>rd</sup> Ed.) Boston, MA: Allyn & Bacon.

**Required journal articles:** All of the articles and book chapters (except those of the required textbook by McInnis-Dittrich) that are required readings as shown in **Section VI** are available on the course Blackboard.

**Recommended text:**

- Burns, A., Lawlor, B., & Craig, S. (2004). *Assessment scales in old age psychiatry* (2<sup>nd</sup> Ed.), New York: Martin Dunitz.
- Cress, C. J. (2011). *Handbook of geriatric case management* (3rd Ed.), Sudbury, MA: Jones and Bartlett Learning.
- Frazer, D. W., Hinrichsen, G. A., & Jongsma, A. E. (2011). *The older adult psychotherapy treatment planner* (2<sup>nd</sup> Ed.), New York: Wiley.
- Greene, R. R., Cohen, H. L., Galambos, C. M., & Kropf, N. P. (2007). *Foundations of social work practice in the field of aging: A competency-based approach*. NASW Press.
- Sahlins, J. (2010). *Social work practice in nursing homes: Creativity, leadership, and program development*. Chicago, IL; Lyceum.
- \*(Highly recommended) Zarit, S., & Zarit, J. (2007). *Mental disorders in older adults: Fundamentals of assessment and treatment* (2nd Ed.), New York: Guilford. (This book provides a very thorough overview of mental disorders and contains great case examples for treatment.)

**Useful Websites from the American Psychological Association, SAMHSA, and other sources**

Guidelines for psychological practice with older adults:

<http://www.apa.org/practice/guidelines/older-adults.pdf>

What practitioners should know about working with older adults:

<http://www.apa.org/pi/aging/resources/guides/practitioners-shouldknow.aspx>

Psychotherapy and older adults resource guide:

<http://www.apa.org/pi/aging/resources/guides/psychotherapy.aspx>

Psychological services for long-term care resource guide:

<http://www.apa.org/pi/aging/resources/guides/psychotherapy.aspx>

Depression and suicide in older adults:

<http://www.apa.org/pi/aging/resources/guides/depression.aspx>

Psychiatric evaluation of adults:

[http://www.psychiatryonline.com/pracGuide/pracGuideTopic\\_1.aspx](http://www.psychiatryonline.com/pracGuide/pracGuideTopic_1.aspx)

Treatment of major depressive disorder:

[http://www.psychiatryonline.com/pracGuide/pracGuideTopic\\_7.aspx](http://www.psychiatryonline.com/pracGuide/pracGuideTopic_7.aspx)

Assessment and treatment of suicidal behaviors:

[http://www.psychiatryonline.com/pracGuide/pracGuideTopic\\_14.aspx](http://www.psychiatryonline.com/pracGuide/pracGuideTopic_14.aspx)

Substance abuse relapse prevention for older adults: A group treatment approach:

<http://www.kap.samhsa.gov/products/manuals/pdfs/sarp4olderadults.pdf>

Promoting emotional health & preventing suicide: A toolkit for senior living communities:

<http://store.samhsa.gov/product/Promoting-Emotional-Health-and-Preventing-Suicide/SMA10-4515>

The Stanford's chronic disease self-management programs:

<http://patienteducation.stanford.edu/programs/>

<http://www.hmohelp.ca.gov/library/reports/news/AlvarezMarch12.pdf>

### **III. Grading and Course Requirements**

#### **Accumulated points and grading scale**

100-94 = A      93-90 = A-      89-87 = B+      86-84 = B      83-80 = B-  
79-77 = C+      76-74 = C      73-70 = C-      69-67 = D+      66-64 = D-      59 and below = F

#### **Course requirements and grade assignment:**

1. **Journal (Dates are noted in Section VI; 5 point each, 25 points total):** Self-reflections and exploration and articulation of our views, feelings, and experiences enhance our ability to grow from our experience and develop greater empathy for people around us. Each student is expected to turn in five journal entries in the following topical areas: (1) older people who influenced him/her in positive ways and older people who had influenced him/her in negative ways and why; (2) his/her thoughts and feelings about aging, including fears, expectations, and stereotypes; (3) the kind of gerontological social work he/she wants to engage in—aspirations, goals, and plans; (4) ageism: where it comes from and what we should do about it; and (5) one thing (policy and/or practice) that will have to change/improve in an aging society for the well-being of all members of the society. Each journal entry should be up to 2 single-spaced pages. References are not required for journal entries 1-3, but 2-3 references are required for entries 4 and 5.

2. **Chronic Disease Research Brochure and Presentation (15 points; due 10/25/11):** Each student is required to research 1 or 2 chronic medical conditions that have been associated with older adults. Please refer to the list of the most common medical conditions in late life below. The research will include etiologies, signs, and symptoms of the disease, its usual process, common treatments, and prognosis. Describe how each condition may affect activities or instrumental activities of daily living. Discuss common risks and benefits of treatment, including economic issues such as ongoing medication costs.

For each condition, student will develop a one-page (front/back) brochure (that could be used to educate an older adult on the condition) that contains pertinent information regarding the chronic condition. This brochure will be shared with classmates and turned in for grade. Students have to keep the concepts of health literacy in mind when creating the brochure for older adults. However, during class presentation (10 minutes), they must impart necessary medical information and terms that social workers need to be equipped with in multidisciplinary team work settings (e.g., hospitals, health clinics, long-term care settings).

Most common chronic medical conditions in late life: Adult onset diabetes; Arthritis; Kidney and bladder problems; Parkinson's disease; Glaucoma and cataracts; Macular degeneration; Lung disease; Lung cancer; Osteoporosis; Enlarged prostate / Prostate cancer; Cardiovascular disease: HP, Heart disease and Stroke; Colon / Rectal cancer.

3. **Short Report on Aging Service Resources (5 double-spaced pages, 15 points, due when completed):** The purpose of this report is to encourage students to get to know aging service resources in the community. Students will be free to choose one of the following options for this short report: (1) visit an aging service agency (e.g., senior activity centers, nursing homes, assisted living facilities); (2) attend a monthly topical presentation of the InterAgency Council on Aging (meetings are held at the Shoal Creek Senior Center; please email Samantha Young at [young@s@nursesunlimited.com](mailto:young@s@nursesunlimited.com) to receive monthly meeting notice); (3) a bimonthly meeting of the Aging Services Council of Central Texas ([www.agingservicescouncil.org](http://www.agingservicescouncil.org); next meeting on October 6, 2011); or (4) interview an aging service provider of your choice (e.g., Capital Metro staff in charge of special transit services (STS), AAA regional office staff, RSVP staff). Students will be free to discuss with the instructor other ways to fulfill this report requirement. However, all students are required to have a list of questions before attending any meeting or speaking with an agency personnel in order to be able to write up the report. Please attach a written verification from the agency personnel of your visit/interview to your report. When you attended a meeting or presentation, please attach the handouts from the meeting/presentation to your report.

4. **Assessment and Intervention Plan Paper or Innovative Aging Service Program Review Paper & Presentation (10 double-spaced pages; 45 points; due 11/29/2011):** Student will be required to choose either one

of the following:

**Assessment and Intervention Plan Paper:** The student is expected to complete an interview of an older adult (age 60+ and not a relative). The goal of the interview is to allow the student the opportunity to practice assessment skills with an older adult who may have multiple physical and psychosocial problems. In addition to the interview with the older adult, the student is expected to interview (with the permission of the older adult) - a collateral contact, such as a service provider, friend or family member. After the interviews, the student will summarize the assessment findings and the most effective (evidence-based) and feasible intervention plans for this client, and identify gaps in community services that support older adults who have similar needs. Specific guidelines for the paper will be discussed in more detail in class.

The instructor will provide a copy of a basic assessment instrument (available in both English and Spanish)—including sociodemographic items, measures of chronic conditions and overall health status, ADL/IADL impairment, scales for depression, stressful life events, social service utilization, social engagement, and many other items—that she has used in her research/intervention projects. The student will have to revise and add questions and scales for his/her assessment with a specific client.

**Innovative Aging Service Programs Review Paper:** For this paper, the student is expected to research an innovative program/service for older adults and write a paper about the programs/services. To describe a program/service, the student will have to interview at least one major player for the program. For example, an innovative senior transportation program that started in Maine has received lots of support from the research as well as aging service practice communities. (Please check out ITNAmerica: <http://www.itnamerica.org>.) Given that the lack of senior transportation is a huge issue in our community, you may want to research about this program and interview/correspond with its founder and how this program may be implemented in our community and what will take to implement it. Other examples of innovation in services may be the use of technology to assist frail older adults with their activities of daily living and health and mental health services that promote training and deployment of lay/volunteer service providers. Specific guidelines for the paper will be discussed in more detail in class.

#### **IV. University and School Notices and Policies**

**The University of Texas Honor Code:** The core values of The University of Texas at Austin are learning, discovery, freedom, leadership, individual opportunity, and responsibility. Each member of the university is expected to uphold these values through integrity, honesty, trust, fairness, and respect toward peers and community.

**Professional Conduct in Class:** The professor expects students to act like professionals in class. This means students should arrive on time for class, be prepared to participate in the class discussion, and show respect for one another's opinions. We will not, nor should we, always agree with one another. In this environment we should be exposed to diverse ideas and opinions, and sometime we will not agree with the ideas expressed by others. However, the professor does require that students engage one another with respect and professionalism. Being a graduate student can be a stressful experience especially when you have multiple other roles such as being a spouse, parent, and adult child caregiver (role overload and role strain). As professionals, however, all of us must conduct ourselves within the boundaries of the accepted norms of civility, responsibility, and respect for others. Please at least be mindful of the negative impact of your unprofessional speech and conduct on your classmates and the professor.

**Policy on Scholastic Dishonesty:** Students who violate University rules on scholastic dishonesty are subject to disciplinary penalties, including the possibility of failure in the course and/or dismissal from the University. Since such dishonesty harms the individual, all students, and the integrity of the University, policies on scholastic dishonesty will be strictly enforced. For further information, the student may refer to the Web Site of the Student Judicial Services, Office of the Dean of Students (<http://www.utexas.edu/depts/dos/sjs/>).

**Documented Disability Statement:** Any student who requires special accommodations must obtain a letter that documents the disability from the Services for Students with Disabilities area of the Division of Diversity and Community Engagement (471-6259 voice or 471-4641 TTY for users who are deaf or hard of hearing). Present the letter to the professor at the beginning of the semester so that needed accommodations can be discussed. The student should remind the professor of any testing accommodations no later than five business days before an exam. For more information, visit <http://www.utexas.edu/diversity/ddce/ssd/>.

**Religious Holidays:** By UT Austin policy, students must notify the professor of a pending absence at least fourteen days prior to the date of observance of a religious holy day. If the student must miss a class, an examination, a work assignment, or a project in order to observe a religious holy day, the professor will give the student an opportunity to complete the missed work within a reasonable time after the absence.

**Use of E-Mail for Official Correspondence to Students:** Email is recognized as an official mode of university correspondence; therefore, students are responsible for reading their email for university and course-related information and announcements. Students are responsible to keep the university informed about changes to their e-mail address. Students should check their e-mail regularly and frequently—daily, but at minimum twice a week—to stay current with university-related communications, some of which may be time-sensitive. Students can find UT Austin’s policies and instructions for updating their e-mail address at <http://www.utexas.edu/its/policies/emailnotify.php>.

**Safety:** As part of professional social work education, students may have assignments that involve working in agency settings and/or the community. As such, these assignments may present some risks. Sound choices and caution may lower risks inherent to the profession. It is the student's responsibility to be aware of and adhere to policies and practices related to agency and/or community safety. Students should notify the professor regarding any safety concerns.

**Behavior Concerns Advice Line (BCAL):** If students are worried about someone who is acting differently, they may use the Behavior Concerns Advice Line to discuss by phone their concerns about another individual’s behavior. This service is provided through a partnership among the Office of the Dean of Students, the Counseling and Mental Health Center (CMHC), the Employee Assistance Program (EAP), and The University of Texas Police Department (UTPD). Call 512-232-5050 or visit <http://www.utexas.edu/safety/bcal>.

**Emergency Evacuation Policy:** Occupants of buildings on the UT Austin campus are required to evacuate and assemble outside when a fire alarm is activated or an announcement is made. Please be aware of the following policies regarding evacuation:

- Familiarize yourself with all exit doors of the classroom and the building. Remember that the nearest exit door may not be the one you used when you entered the building.
- If you require assistance to evacuate, inform the professor in writing during the first week of class.
- In the event of an evacuation, follow the professor’s instructions.
- Do not re-enter a building unless you’re given instructions by the Austin Fire Department, the UT Austin Police Department, or the Fire Prevention Services office.

**Feedback on Learning:** During this course the professor will ask students to provide feedback on their learning in informal as well as formal ways. It is very important for the professor to know the students’ reactions to what is taking place in class, so students are encouraged to inform the professor on how her teaching strategies are helping or hindering student learning, ensuring that together the professor and students can create an environment effective for teaching and learning.

## **V. Additional Class Policies Affecting Course Grade**

**Class Attendance and Participation Policies:** It is important for social work practitioners to be punctual in both meeting deadlines and in attendance. Thus, students are expected to attend all classes, if at all possible. Students are permitted **one** excused absence. A student will be considered absent if she or he arrives more than 15 minutes late



to class or does not come to class without medical documentation. Students who miss two classes, without medical documentation, during the semester will lose 3 points, those who miss three classes will lose 6 points, and those who miss more than three classes will lose 10 points. Leaving class early will be counted as an absence unless the student provides a reasonable cause for doing so in advance and receives the professor's permission.

For this class, it is critical that students complete assigned readings before the class time and actively participate in class discussions. The articles chosen for each class tend to be short and very practical and useful information for aging practice. Since the classes will be devoted to discussing the assigned articles, coming to class without reading the articles will be a waste of time.

**Late Assignment Policies:** Except in the case of extreme emergencies, and then only with the permission of the professor, late assignments will not be accepted without penalty. Students are expected to turn in all required assignments on the specified due date at the beginning of class. (If at all possible, please turn in paper copies of assignments. Electronic copies as e-mail attachments will be allowed only for late assignments and under special circumstances when the student cannot be present in class.) Students will lose 3 points for each day that an assignment is late. If the due date is a problem, then the student must contact the professor and negotiate another due date at least **48 hours PRIOR** to the date specified in the course syllabus.

**Computer and Other Electronic Device (NON)Use Policies:** Using laptop and handheld computers and other electronic equipment (e.g. cell phone, text messaging, ear buds) in class will **NOT** be permitted except in the case of extreme emergencies and special circumstances that have been pre-approved by the professor. Students frequently use laptop computers in class to conduct tasks that are not related to the course contents (e.g., working on papers for other classes, checking e-mails, surfing Internet news) and resort to cell-phone texting while in class. Such behaviors are unprofessional and disruptive to other students and the professor. All communication devices will be turned off while in class. Students who break the computer use and cell phone policies and who engage in any other tasks that are unrelated to the course (e.g., reading newspapers and articles for other classes, playing Sudoku and other games) will be asked to leave the classroom.

## VI. Course Schedule

Date	Session topics and readings	Reminder
Week 1 8/30/11	Introduction to course The Older Americans Act & aging service network Settings for gerontological social work Medicare/Medicaid Introduction (documentary: "Making ends meet: The Medicare generation") <b>Text/Readings:</b> McInnis-Dittrich, Ch. 1 & 13 DiNitto, D. (2011). Social Welfare: Politics and Public Policy. Chapter 8. Financing healthcare: Can all Americans be insured? (pp, 276-316)	
Week 2 9/06/11	Biopsychosocial changes; Theories of aging (e.g., life course theory; socioemotional selectivity theory; social/temporal comparison theory; everyday competence theory; continuity theory; self-transcendence theory; stress-coping theory; ...) Conducting a biopsychosocial assessment: Overview Selection of a disease for brochure Guest speaker: Sue Fielder, Manager, Contract Accountability and Oversight Unit, Access & Intake/Area Agencies on Aging Section, TX Department of Aging and Disability Services <b>Text/Readings:</b> McInnis-Dittrich, Ch. 2, 3,	<b>Journal 1 due</b>
Week 3 9/13/11	Mental health: Depression, anxiety, suicide: Signs & symptoms; Screening tools; pharmacotherapy; Overview of evidence-based psychosocial treatment <b>Text/Readings:</b> McInnis-Dittrich, Ch. 5 Heisel, M. J. & Duberstein, P. R. (2005). Suicide prevention in older adults. <i>Clinical Psychology: Science and Practice</i> , 12, 242-259.	

	<p>Mackin, R. S. &amp; Areán, P. A. (2005). Evidence-based psychotherapeutic interventions for geriatric depression. <i>Psychiatric Clinics of North America</i>, 28, 805-820.</p> <p>Ayers, C. R., Sorrell, J. T., Thorp, S. R., &amp; Wetherell, J. L. (2007). Evidence-based psychological treatments for late-life anxiety. <i>Psychology &amp; Aging</i>, 22, 8-17.</p>	
<p>Week 4 9/20/11</p>	<p>Mental Health: Suicide, depression and anxiety Evidence-based psychosocial treatment: Individual and group therapy (CBT, PST, DBT) PST demonstration by certified PST therapists, Mary Lynn Marinucci, LMSW &amp; Leslie Sirrianni., LMSW</p> <p><b>Text/Readings:</b> McInnis-Dittrich, Ch. 6 &amp; 7 Lynch, T. R., Chapman, A. L., Rosenthal, M. Z., Kuo, J. R., &amp; Linehan, M. M. (2006). Mechanisms of change in dialectical behavior therapy: Theoretical and empirical observations. <i>Journal of Clinical Psychology</i>, 62, 459-480. Comtois, K. A., Elwood, L., Holdcraft, L. C., Smith, W. R., &amp; Simpson, T. L. (2007). Effectiveness of dialectical behavior therapy in a community mental health center. <i>Cognitive and Behavioral Practice</i>, 14, 406-414.</p>	<p><b>Journal 2 due</b></p>
<p>Week 5 9/27/11</p>	<p>Mental health: Cognitive disorders: Delirium &amp; Dementia Mental status testing; Current status of medical/pharmacological treatment; Behavioral treatment; Reminiscence therapy; Brain exercise</p> <p><b>Text/Readings:</b> Zarit &amp; Zarit (2007). Ch.12: Treatment of dementia (pp. 299-320). McNicoll, L. et al. (2003). Delirium in the intensive care unit: Occurrence and clinical course in older patients. <i>Journal of the American Geriatrics Society</i>, 51, 591-598. Gräsel, E., Wiltfang, J., &amp; Kornhuber, J. (2003). Non-drug therapies for dementia: An overview of the current situation with regard to proof of effectiveness. <i>Dementia and Geriatric Cognitive Disorders</i>, 15, 115-125. Verkaik, R., van Weert, J. C. M., &amp; Francke, A. L. (2005). The effects of psychosocial methods on depressed, aggressive and apathetic behaviors of people with dementia: A systematic view. <i>International Journal of Geriatric Psychiatry</i>, 20, 301-314. Sahlins, J. (2010). Reminiscence and reminiscence groups, Ch. 3 of <i>Social work practice in nursing homes: Creativity, leadership, and program development</i> (pp. 37-63). Chicago, IL; Lyceum.</p>	
<p>Week 6 10/4/11</p>	<p>Dementia and Alzheimer's disease: Care giver support and education; Adult day services Guest speaker: Christian Wells, VP and Program Director, Alzheimer's Association Capital of TX Chapter.</p> <p><b>Text/Readings:</b> McInnis-Dittrich, Ch. 12 Respite for dementia caregivers: the effect of adult day service use on caregiving hours and care demands. <i>International Psychogeriatrics</i>, 15, 37-58. Valadez, A.A, Lumadue, B.G., &amp; de Vries-Kell, S. (2005). Family caregivers of impoverished Mexican American elderly women: The perceived impact of adult day care centers. <i>Families in Society</i>, 86, 384-392. Aranda, M., Villa, V, Trejo, L., Ramirez, R., &amp; Ranney, M. (2003). El Portal Latino Alzheimer's Project: model program for Latino caregivers of Alzheimer's disease-affected people. <i>Social Work</i>, 48, 259-272. Brodaty, H., Green, A., &amp; Koschera, A. (2003). Meta-analysis of psychosocial interventions for caregivers of people with dementia. <i>Journal of the American Geriatrics Society</i>, 51, 657-664.</p>	<p><b>Journal 3 due</b></p>
<p>Week 7</p>	<p>Mental health: Substance abuse in older adults:</p>	<p><b>Journal 4</b></p>

10/11/11	<p>Motivational Interviewing; other interventions  <b>Guest speaker:</b> Dr. Diana DiNitto  <b>Text/Readings</b>  McInnis-Dittrich, Ch. 8  Sorocco, K. H. &amp; Ferrell, S. W. (2006). Alcohol use among older adults. <i>Journal of General Psychology</i>, 133, 453-467.  Choi, N. G. &amp; DiNitto, D. M. (2011). Heavy/binge drinking and depressive symptoms in older adults: Gender difference. <i>International Journal of Geriatric Psychiatry</i>, 26 (8), 860-868  DiNitto, D. M. &amp; Choi, N. G. (2011). Marijuana smoking among older adults: User characteristics and patterns of use. <i>International Psychogeriatrics</i>, doi:10.1017/S1041610210002176</p>	<b>due</b>
Week 8 10/18/11	<p>HIV/AIDS in late life  Gays and lesbians: Still long way to go  <b>Guest speaker:</b> TBD  <b>Text/Readings</b>  Levy-Dweck, S. (2005). HIV/AIDS Fifty and older: A hidden and growing population. <i>Journal of Gerontological Social Work</i>, 46 (2), 37-49.  Emlet, C. &amp; Poindexter, C. (2004). Unserved, unseen, and unheard: Integrating programs for HIV-infected and HIV-affected older adults. <i>Health &amp; Social Work</i>, 29, 86-96.  Donahue, P. &amp; McDonald, L. (2005). Gay and lesbian aging: Current Perspective and future directions for social work practice and research. <i>Families in Society</i>, 86 (3), 359-366.</p>	<b>Journal 5 due</b>
Week 9 10/25/11	<p>Chronic disease/MH disorder presentation  Social worker roles in chronic disease management  Stanford Chronic Care Model  <b>Text/Readings</b>  Claiborne, N. &amp; Vandenberg, H. (2001). Social workers' role in disease management. <i>Health &amp; Social Work</i>, 26, 217-225.  Christ, G. &amp; Diwan, S. (nd). Chronic illness and aging: Section 2: The role of social work in managing chronic illness care. Available: Gero-Ed Center, Council on Social Work Education.  Funnell, M. M. et al. (2008). National standards for diabetes self-management education. <i>Diabetes Care</i>, 31, S87-S94.  Newman, S., Steed, L., &amp; Mulligan, K. (2004). Self-management interventions for chronic illness. <i>Lancet</i>, 364: 1523-37.</p>	<b>Chronic disease brochure due</b>
Week 10 11/1/11	<p>Older adults as caregivers: Kinship care  <b>Guest speaker:</b> Holly Vinella, TX Dept of Family and Protective Services, Region 7 Service Program Administrator  <b>Text/Readings</b>  Leder, S., Grinstead, L. N., &amp; Torres, E. (2007). Grandparents raising grandchildren: Stressors, social support, and health outcomes. <i>Journal of Family Nursing</i>, 13, 333-352.  Fuller-Thomson, E. &amp; Minkler, M. (2005). American Indian/Alaskan Native grandparents raising grandchildren: Findings from the Census 2000 Supplementary Survey. <i>Social Work</i>, 50(2); 131-139.</p>	
Week 11 11/8/11	<p>Institutionalized and incarcerated older adults  <b>Text/Readings</b>  Choi, N. G., Ransom, S. &amp; Wyllie, R. (2008). Depression in Older Nursing Home Residents: The Influence of Nursing Home Environmental Stressors, Coping, and Acceptance of Group and Individual Therapy. <i>Aging &amp; Mental Health</i>, 12, 536-547.  Choi, N. G., Wyllie, R. &amp; Ransom, S. (2009). Risk Factors and Intervention Programs</p>	



	<p>for Depression in Nursing Home Residents: Nursing Home Staff Interview Findings. <i>Journal of Gerontological Social Work</i>, 52(7), 668-683.</p> <p>Sterns, A. A., Lax, G., Sed, C., Keohane, P., &amp; Sterns, R. S. (2008). The growing wave of older prisoners: A national survey of older prisoner health, mental health, and programming. <i>Corrections Today</i>, 70(4), 70-72 &amp; 74-76.</p> <p>Linder, J. F. &amp; Meyers, F. J. (2007). Palliative care for prison inmates: "Don't let me die in prison." <i>JAMA</i>, 298, 894-901.</p> <p>Williams, B. A. (2010). Medication prescribing practices for older prisoners in the Texas prison system. <i>American Journal of Public Health</i>, 100, 756-761.</p>	
Week 12 11/15/11	<p>Elder abuse and neglect; Guardianship</p> <p><b>Guest Speaker: Beth Johnson and Joy Lawrence, Adult Protective Services, TX Dept of Family and Protective Services</b></p> <p><b>Text/Readings</b></p> <p>McInnis-Dittrich, Ch. 9</p> <p>Choi, N. G., Kim, J. &amp; Asseff, J. (2009). Self-Neglect and Neglect of Older Adults and Poverty: Re-examination of Etiology. <i>Journal of Gerontological Social Work</i>, 52(2), 1-17.</p> <p>Thibault, J. (2007). Analysis and treatment of self-neglectful behaviors in three elderly female patients. <i>Journal of Elder Abuse and Neglect</i>. 19(3/4), 151-166.</p> <p>Osgood, N. &amp; Manetta, A. (2002). Physical and sexual abuse, battering and substance abuse: Three clinical cases of older women. <i>Journal of Gerontological Social Work</i>, 38(3), 99-112.</p>	
Week 13 11/22/11	<p>Spirituality</p> <p>End of life, hospice, advance directives</p> <p><b>Text/Readings</b> McInnis-Dittrich, Ch. 10 &amp; 11</p> <p>Daaleman, T. P., Usher, B. M., Williams, S. W., Rawlings, J., &amp; Hanson, L. C. (2008). An exploratory study of spiritual care at the end of life. <i>Annals of Family Medicine</i>, 6, 6 pgs.</p> <p>DeLisser, H. M. (2010). How I conduct the family meeting to discuss the limitation of life-sustaining interventions: a recipe for success. <i>Blood</i>, 116, 1648-1654.</p> <p>Teno, J. M. (2004). Family perspectives on end-of-life care at the last place of care. <i>JAMA</i>, 291, 88-93</p> <p>Demiris, G., Oliber, D. P., Wittenberg-Lyles (2009). Assessing caregivers for team interventions (ACT): A new paradigm for comprehensive hospice quality care. <i>American Journal of Hospital and Palliative Care</i>, 26, 128-134.</p> <p>Casarett, D. J. (2007). Is it time to redesign hospice? End-of-life care at the under interface. Syracuse University Center for Policy Research Policy Brief #35.</p>	
Week 14 11/29/11	<b>Paper presentation</b>	<b>Final Paper due</b>

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## **Caregiving**

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## **Alzheimer's disease**

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## **Elder abuse**

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## **Substance abuse**

### *SAMHSA TIP 26: Substance Abuse Among Older Adults*

Directions for downloading or ordering publications from the Substance Abuse and Mental Health Services Administration (SAMHSA). If you have not ordered the full publications at the beginning of the quarter, cited chapters can be read on-line or downloaded by following these directions:

Visit: <http://www.Treatment.org>

Select: Documents (pull-down menu)

CSAT TIPS

Scroll down and choose TIP 26: Substance Abuse Among Older Adults

Read Chapter 4: Identification, Screening, and Assessment & Chapter 5: Referral and Treatment Approaches

Blow, F.C., Oslin, D.W., & Barry, K.L. (2002). Misuse and abuse of alcohol, illicit drugs, and psychoactive medication among older people. *Generations (20)*1, pp. 50-54.

Cuijper, P., Steunenbergh, B. van Straten, A. (2006). When the children of problem drinkers grow old: Does the increased risk of mental disorders persist? *Addictive Behaviors, 31*2; 2284-2291.

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## **Nursing home residents**

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### **Spirituality, End-of-Life care, Grief & loss**

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### **Wisdom**

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### **Aging Web Sites**

- Administration on Aging <http://www.aoa.dhhs.gov>
- Administration on Aging Elderspage <http://www.aoa.gov/eldfam/eldfam.asp>
- Age of Reason [links to sites of interest to the over 50 age group] <http://www.ageofreason.com/>
- AGE-SW <http://www.agesocialwork.org/>
- Aging Parents and Elder Care <http://www.aging-parents-and-elder-care.com/>
- American Association of Homes and Services for the Aging <http://www.aahsa.org/>
- AARP Guide to Internet Resources Related to Aging <http://www.aarp.org/cyber/guide1.htm>
- Alzheimer's Association <http://www.alz.org/>
- American Society on Aging <http://www.asaging.org/>
- ARCH Respite Main Page <http://www.archrespite.org/>
- Association for Gerontology in Higher Education <http://www.aghe.org/site/aghewebsite>
- CareScout: Elder Care resources—nursing homes and assisted living facilities <http://www.carescout.com/>
- Centers for Medicare and Medicaid <http://www.CMS.gov/>
- Centre for Policy on Ageing <http://www.cpa.org.uk/>
- Children of Aging Parents (CAPS) <http://www.caps4caregivers.org/>
- Commission on Accreditation of Rehabilitation Facilities (CARF) <http://www.carf.org/>
- Council on Social Work Education Gero-Ed Center <http://www.cswe.org/CentersInitiatives/GeroEdCenter.aspx>
- Dementia Research Group <http://dementia.ion.ucl.ac.uk/>
- Elder Abuse Law Center <http://www.elder-abuse.com/>
- Elder Care of Wisconsin <http://elderc.org/cms/home.php>
- Elderhostel <http://www.elderhostel.org/>
- Elder Law Answers <http://www.elderlawanswers.com/>
- Family Caregiver Alliance <http://www.caregiver.org/>
- Friends and Relatives of Institutionalized Aged <http://www.fria.org/>
- Geriatric Social Work Initiative (GSWI) <http://www.gswi.org/>
- Home Care Companion - Training and Tools for Caregivers <http://www.homecarecompanion.com/>
- Hospice Web <http://www.hospiceweb.com/>
- Medicare: the official U.S. Government Site for Medicare information <http://www.medicare.gov/>
- Medicare Rights <http://www.medicarerights.org/>
- National Adult Day Services Association (NADSA) <http://www.nadsa.org/publications/default.asp>
- National Aging Information Center <http://www.aoa.dhhs.gov/naic/>
- National Alliance for Caregiving <http://www.caregiving.org/>
- National Association of Professional Geriatric Care Managers <http://www.caremanager.org/>
- National Center on Elder Abuse <http://www.elderabusecenter.org/>

National Citizens' Coalition for Nursing Home Reform <http://www.nccnhr.org/>  
National Council on the Aging <http://www.ncoa.org/>  
National Institute on Aging–Aging and Alcohol Abuse <http://www.nia.nih.gov/>  
National PACE Association <http://www.npaonline.org/website/article.asp?id=4>  
National Resource Center on Nutrition, Physical Activity and Aging <http://nutritionandaging.fiu.edu/>  
Native Elder Research Center <http://www.uchsc.edu/ai/nerc/>  
North/Eastside Senior Coalition <http://www.nescoinc.org/>  
Plan of Action on Rural Aging [http://www.hsc.wvu.edu/coa/publications/pa ra/PARA2004.asp](http://www.hsc.wvu.edu/coa/publications/pa%20ra/PARA2004.asp)  
Resource Centers for Minority Aging Research <http://remar.musc.edu/>  
SABE: Salud, Bienestar, y Envejecimiento <http://www.ssc.wisc.edu/sabe/home.html>  
Social Security Administration <http://www.SSA.gov/>  
Social Work Leadership Institute <http://www.socialworkleadership.org/>  
Today's Seniors <http://www.todaysseniors.com/>