THE UNIVERSITY OF TEXAS AT AUSTIN
SCHOOL OF SOCIAL WORK

Course Number: SWN387R1	Instructor: Pamela Malone, Ph.D., LCSW
Unique Number: 94715	Email: pammalone@mail.utexas.edu
Semester: Summer 2012	Phone: 512-444-8889
Class Time: T & Th 1:30 – 4 pm 5/31/12-7/24/12	Office: SSW 3.104A
Meeting Place: Room 2.112	Office Hours: By appointment

LOSS AND GRIEF: INDIVIDUAL, FAMILY, AND CULTURAL PERSPECTIVES

I.   STANDARDIZED COURSE DESCRIPTION
This course will give students an opportunity to explore and understand their perceptions and beliefs about death and dying, and how individuals' cultural differences influence that experience and prepare them for working with clients on grief and loss.

II.   STANDARDIZED COURSE OBJECTIVES
By the end of the semester, students should be able to:
1. Demonstrate an understanding of the cultural factors involved in grief and loss.
2. Identify social work values and ethics involved in grief work.
3. Demonstrate a basic working knowledge of grief reactions experienced by children, adults, and the elderly within a cultural context.
4. Demonstrate an increased awareness of their own grief reactions and how this awareness can help them to develop skills and tools in grief work.
5. Demonstrate an ability to manage feelings of personal loss and client needs in a healthy way.

III.   TEACHING METHODS
This course is designed to include a variety of teaching/learning methodologies to achieve the course objectives. These activities will include readings, writings, discussions, lectures, speakers, videos, in-class group activities, student presentations, self-reflection and community experiences.

IV.   READINGS
Pomeroy, E., & Garcia, R. (2008). *The grief assessment and intervention workbook: A strengths perspective.* Belmont, CA: Brooks Cole.
Additional class readings are available on Blackboard.

V.   CLASS POLICIES AND PRACTICES
1. The class experience is co-constructed and students are expected to attend class regularly and to participate in an interactive framework between collegiate students and professor. Students are expected to **complete the readings prior to class** and should be well prepared to participate in discussions and experiential learning assignments. Failure to attend class and demonstrate through discussions that one has comprehended the readings will be considered in assigning the final grade.

Punctuality is an important professional practice. Class will begin promptly at 1:30 and end at 4:00. A student is considered absent if they arrive more than 10 minutes late to class, leave early, or are unable to come to class. Absences may result in a reduction by one letter grade. If a student

is going to be absent, efforts should be made to contact the professor in advance. Students are responsible for any material missed due to absence.

The classroom is an opportunity to practice professional demeanor and mutual respect. We share the class as a time to learn in a safe and nonjudgmental environment. Consequently, disrespect toward others is not tolerated and will be handled directly and in the context in which it occurs. In order to facilitate classroom communication and learning, phone calls, pagers, and other communication devices are restricted from being on or should be placed in 'silent' mode while in class.

2. Except in the case of extended 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 agreed upon due date **at the beginning of class.** Assignments turned in after class starts will be considered late.

If accepted, late assignments will be assessed point penalties at the rate of three (3) points each day late. If the due date is a problem, the student should see the professor and negotiate another due date well in advance.

3. If students are concerned about their class performance, the professor is more than willing to work with them to help improve their understanding of the class material of the assignments *prior to the end of the semester.* **Final grades assigned in the course are not negotiable.**

4. The ability to write in a professional manner is very important for social workers, particularly in the medical setting where they are working closely with physicians and other health care professionals. Written work must be typed, edited for grammatical, spelling and typographical errors. Work will be grade based on the American Psychological Association (APA- 6th edition) guidelines for references and citations.

5. Student feedback is welcome. Students are also encouraged to provide feedback during office hours, by phone, or appointment. The professor will return phone calls and emails within 24 hours.

6. All students are expected to maintain confidentiality regarding all shared professional and personal information related to agencies, clients or the experiences of other students, as required by Section 1.07 of the National Association of Social Workers Code of Ethics.

Special Accommodations for Students with a Disability
The University of Texas at Austin provides upon request appropriate academic accommodations for qualified students with disabilities. For more information, contact the Office of the Dean of Students at 471-6259; 471-4641 TTY. Please notify the professor of any special accommodations that you may need prior to the end of the second week of class.

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).

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 practice related to agency and/or community safety. Students should also notify instructors regarding any safety concerns.

V.   COURSE GRADING CRITERIA

Attendance and Participation	10%
Loss History Graph/Personal Awareness Paper	30%
Group Presentation Cultural Diversity	30%
Ethnographic Interview paper	30%
TOTAL	100%

VI.   GRADUATE 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
63 - 60 = D-
59 and below = F

Grades are assigned based on the following criteria: A grade of A is given for outstanding work that engages course materials with original thought and creativity or a mastery of technical skills. A grade of B is given for doing all of the work well. A grade of C is given for meeting all course requirements. To obtain a high grade, students must find the time to complete assignments in a way that **integrates and extends** readings, lectures, classroom discussions, and your own critical perspective on the topic.

VII. COURSE SCHEDULE
Tentative Class Schedule (subject to change due to the need to reschedule guest speakers):

Day/Date	Topic	Assignment
Th 5/31 Class 1	Introductions Review syllabus Discuss assignments Defining loss Personal awareness about loss and grief	Read: Pomeroy & Garcia, chapter 1; Blackboard pp. 17-102: Rando, Irish, Worden, Browning, Doka, Neimeyer.
T 6/5 Class 2	Funeral home visit Theoretical perspectives Practice models Assessing loss and grief	Read Blackboard pp. 545-569: Doka, Imber-Black. • *1:45 Meet at Cook Walden Funeral Home 6100 N. Lamar*

Th 6/7 Class 3	Assessment situations involving sudden and traumatic loss Normal vs. pathological grief Public tragedy	Read: Pomeroy & Garcia, chapter 2; Blackboard pp. 103-178 & 299-304: Rando, Osmont, Thompson & Holland, Armour, Aronson, Otis-Green, Schacter. **Due: Loss history timeline/personal reflection**
T 6/12 Class 4	Terminal and chronic illness Hospice End of life decisions	Read: Pomeroy & Garcia, chapter 3; Blackboard pp. 227-298: Bern-Klug et al., Csikai, Barrett, Miller & Hedlund, Gwyther et al., Kling & Quill. • *1:30-3 Guest speakers from Hospice Austin* • *3:30 Meet at Christopher House, 2820 E. MLK*
Th 6/14	**NO CLASS**	
T 6/19 Class 5	Grief in families 　Parents losing children 　Losing a spouse The elderly and loss	Read: Pomeroy & Garcia, chapters 5 & 6; Blackboard pp. 179-204 & 205-226: Boyd Webb, Goldman, Bouton, Christ et al.
Th 6/21 Class 6	Working with children and adolescents facing loss and grief 　Children who face terminal illness 　Losing a parent, sibling, or friend Grief in schools	Read Blackboard: Malone, pp. 485-505 & 507-543: Hutton et al., Jones, Sourkes et al. • *1:45 Meet at My Healing Place: 8401 Shoal Creek*
T 6/26 Class 7	HIV and AIDS Disenfranchised grief Mid-term evaluation	Read Blackboard pp. 355-395: Nord, Mitchell & Linsk, Owens. • *Guest speaker: Dr. David Weigle*
Th 6/28 Class 8	Grief and loss in specific populations	Read Pomeroy & Garcia, chapter 4 & 7; Blackboard pp. 397-407 & 409-457: Barrett, Murphy & Price, Thompson & Colon, Lawrence et al.
T 7/3 Class 9	Social support/support groups Responding to the unique needs 　of different populations	Read Blackboard pp. 305-353: Barlow & Coleman, Murphy et al., Sutton & Liechty.

Th 7/ 5	**NO CLASS**	
T 7/10 Class 10	Religious and spiritual perspectives of death and their relationship to grief Ritual as an intervention	Read Blackboard pp. 459-484: Jacobs, Sinclair et al.
Th 7/12 Class 11	Cultural variations	**Group presentations**
T 7/17 Class 12	Cultural variations	**Group presentations**
Th 7/19 Class 13	Cultural variations	**Group presentations**
T 7/24 Class 14	Transcendence, transformation, and hope Care of self Personal awareness revisited Course wrap-up Evaluation	Read Pomeroy & Garcia, chapter 8; Blackboard pp. 571-605: Calhoun & Tedeschi, Figley, Renzenbrink, Clark. **Due: Ethnographic Interview paper**

Readings

AI, A.L., Cascio, T., Santangelo, L.K. & Evans-Campbell, T. (2005). Hope, meaning, and growth following the September 11, 2001 terrorist attacks. *Journal of InterpersonalViolence*, *20*(5), 523-548.

Armour, M. (2002). Meaning making in the aftermath of homicide. *Death Studies, 27*, 519-540.

Aronson, L. (2004). Social Work Consultation to mental health workers serving children and families affected by disasters. (pp. 664 – 674). *Living with Dying (LWD)*. Berzoff & Silverman (Eds.) Columbia University Press: New York.

Barlow, C.A. & Coleman, H. (2003). The healing alliance: How families use social support after suicide. Omega: Journal of Death and Dying, 47 (3), 187 – 201.

Barrett, R.K. (2005-2006). Dialogues in diversity: An invited series of papers, advance directives, DNRs, and end-of-life care for African-Americans. *Omega*, 52(3) 249-261.

Barrett, R. K. (1998). Sociocultural considerations for Working with Blacks Experiencing Loss and Grief. In K. Doka & J. Davidson (Eds.), *Living with grief: Who we are, how we grieve*. Hospice Foundation of America.

Bern-Klug, M., Forbes, S. & Gessert, C. (2001). The need to revise assumptions about the end of life: Implications for social work practice. *Health & Social Work*, 26(1), 38-48.

Bouton, B. (2003) Schools, children and public tragedy. . In *Living with grief: Coping with public tragedy*. (M. Lattanzi-Licht and K.Doka, Eds.) Hospice Foundation of America.

Boyd Webb, N. (2002): Chapter 1 and 2 in *Helping bereaved children: A handbook for practitioners.* New York: The Guilford Press.

Berzoff, J. & Silverman, P. (2004). Living with dying: A handbook for end-of-life care practitioners. New York: Columbia University Press.

Browning, D. (2004) Fragments of love: Explorations in the ethnography of suffering and

professional caregiving. In Berzoff & Silverman (Eds.) *Living with Dying.* Columbia University Press: New York.

Calhoun, L.G. & Tedeschi, R.G. (2002) Posttraumatic growth: The lessons of loss. In *Meaning Reconstruction and the Experience of Loss*, Neimeyer, R (Ed.) 2nd Ed. Washington, D.C.: American Psychological Association

Christ, G.H., Raveis, V.H., Siegel, K., Karus, D. & Christ A.E. (2005). Evaluation of a preventative intervention for bereaved children. *Journal of Social Work in End-of-Life & Palliative Care*, 1(3), 57-81.

Cincotta, N. (2004). The end of life at the beginning of life: Working with young children and their families. In *Living with Dying.* Berzoff & Silverman (Eds.) Columbia University Press: New York.

Clark, E.J. (2004). The future of social work in end-of-life care: A call to action. (pp. 838 – 847) In *LWD*.Colon, M. (2005). Hospice and Latinos: A review of the literature. *Journal of Social Work in End-of-Life &Palliative Care*, 1(2), 27-43.

Csikai, E.L. (2004) Social workers' participation in the resolution of ethical dilemmas in hospice care. *Health and Social Work*, 29(1), 67-76.

Del Rio, N. (2004). A framework for multicultural end-of-life care: Enhancing social work practice. In *Living with Dying.* Berzoff & Silverman (Eds.) Columbia University Press: New York.

Doka, K. (2002). Chapter 1: Introduction and Chapter 9: The role of ritual in the treatment of Disenfranchised grief. in *Disenfranchised grief: New directions, challenges, and strategies for practice*: Champaign, Illinois: Research Press

Figley, C. (1995). Compassion Fatigue as Secondary Stress Disorder: An Overview (pp. 1-20). In C. Figley (Ed.), *Compassion Fatigue: Coping with Secondary Traumatic Stress Disorder in Those Who Treat the Traumatized.* NY: Brunner/ Mazel.

Goldman, L. (2003). Talking to children about terrorism. . In *Living with grief: Coping with public tragedy*. (M. Lattanzi-Licht and K.Doka, Eds.) Hospice Foundation of America.

Gwyther, L.P. et. al (2005). Social work competencies in palliative and end-of-life care. *Journal of Social Work in End-of-Life Care*, 1(1), 87-120.

Hutton, N., Jones, B., & Hilden, J. (2006) From cure to palliation: Managing the transition. *Child and Adolescent Psychiatric Clinics of North America: Pediatric Palliative Medicine*. 15 (3). 575-584.

Imber-Black, E. (1991). Rituals and the healing process (pp.207-223). In F. Walsh & M. McGoldrick (Eds.) *Living Beyond Loss: Death in the Family*. NY: W.W. Norton & Co.

Irish (1993) Chapter 1: Cross cultural variation in the experience, expression, and understanding of grief. Chapters 2 and 3: personal reflections.

Jacobs, C. (2004). Spirituality and end-of-life care practice for social workers. In *Living with Dying.* Berzoff & Silverman (Eds.), New York: Columbia University Press.

Jones, B.L. (2006). Companionship, control and compassion: A social work perspective on the needs of children with cancer and their families at the end of life. *Journal of Palliative Medicine*, 9(3), 774-788.

King, D.A. & Quill, T. (2006). Working with families in palliative care: One size does not fit all. *Journal of Palliative Medicine*, 9(3), 704-715.

Lawrence, E., Jeglic, E.L., Matthews, L.T. & Pepper, C.M. (2005-2006). Gender differences in grief reactions following the death of a parent. *Omega*, 52(4), 323-337.

Malone, P.A. (2012). The impact of peer death on adolescent girls: An efficacy study of the Adolescent Grief and Loss group. *Social Work with Groups, 35*(1), 35-49.

Miller, P.J. & Hedlund, S.C. (2005). "We just happen to live here": Two social workers share their stories about Oregon's death with dignity law. *Journal of Social Work*

in End-of-Life Care, 1(1), 71-86.

Mitchell, C.G. & Linsk, N. L. (2004). A Multidimensional conceptual framework for understanding HIV/AIDS as a chronic long-term illness. *Social Work,* 49 (3). 469-477.

Murphy, P.A. & Price, D.M. (1998). Dying and grieving in the inner city. In K. Doka & J. Davidson (Eds.), *Living with grief: Who we are, how we grieve*. Hospice Foundation of America.

Murphy, S.A., Johnson, C. & Lohan, J. (2003). The effectiveness of coping resources and strategies used by bereaved parents 1 and 5 years after the violent deaths of their children. *Omega: Journal of Death and Dying*, 47(1), 25-44.

Neimeyer, R. A. (2002). Chapter 1 in *Meaning Reconstruction and the Experience of Loss,* 2nd Ed. Washington, D.C.: American Psychological Association

Nord, D. (1997). Chapter 5: Grieving Multiple Losses. In *Multiple AIDS-Related Loss: A Handbook for Understanding and Surviving a Perpetual Fall.* Washington, D.C.: Taylor & Francis.

Osmont, K. (1993). The value of viewing in grief work reconciliation: A psychotherapist's perspective. *The Forum Newsletter*. Association for Death Education and Counseling. November/December 1993

Owens, S. (2003). African American women living with HIV/AIDS: Families as sources of support and of stress. *Social Work,* 48 (2). 163-171.

Pomeroy, E., & Garcia, R. (2008). *The Grief Assessment and Intervention Workbook: A Strengths Perspective*. Brooks Cole.

Rando, T. (1993). Treatment of Complicated Mourning. Champaign, Illinois: Research Press

Renzenbrink, I. (2004). Relentless self care. In *Living with Dying.* Berzoff & Silverman (Eds.) Columbia University Press: New York.

Schacter, S. (2003). 9/11: A Grief Therapists Journal *Living With Grief: Coping with Public Tragedy.* (M. Lattanzi-Licht and K.Doka, Eds.) Hospice Foundation of America.

Sinclair, S., Pereira, J. & Raffin, S. (2006). A thematic review of the spirituality literature within palliative care. *Journal of Palliative Medicine*, 9(2), 464-479.

Sourkes, B., Frankel, L., Brown, M., Contro, N., Benitz, W., Case, C., Good, J., Jones, L. Komejan, J., Modderman-Marshall, J., Reichard, W., Sentivany-Collins, S. & Sunde, C. (2005). Food, toys and love: Pediatric palliative care. *Current Problems in Adolescent Health Care*, 35, 35-386.

Sutton, A.L. & Liechty, D. (2004). Clinical practice with groups in end-of-life care. (pp. 508 – 533). In *LWD*. Thompson, D. and Holland, E. (2003). Meaning making in the wake of public tragedy. In *Living with grief:*

Coping with public tragedy. (M. Lattanzi-Licht and K.Doka, Eds.) Hospice Foundation of America.

Thompson, B. & Colon, Y. (2004). Lesbians nd gay men at the end of their lives: Psychosocial concerns. (p. 482– 498). In *LWD*. Worden (1991) Chapter 8: The counselor's own grief. In *Grief counseling and grief therapy*. NY: Springer.

Assignment #1
Loss History / Personal Awareness Assignment

Each of us develops our own unique style of coping with grief and loss. Understanding your attitudes, values, reactions and any remaining grief issues or unfinished business will be an important part of the work that you will do with clients experiencing grief. The goal of this assignment is for you to describe how your own experiences and style of dealing with loss may influence your clinical practice.

Due Date: **Thursday June 7, 2012**

Maximum length: 5-6 double-spaced pages (excluding loss history graph). Length should not be a problem if you focus on the questions. Please label each section of the paper with the underlined heading.

<u>Part I:</u> Using a Loss History Graph as an Assessment Tool

Considering the broad definition of loss discussed in class, construct a loss history graph which represents the loss events in your life. It can be as simple as this:

Loss at age four death of significant person divorce
_____/_____/_____/_____
dates and any other significant information.

If there are losses that you choose not to disclose, that is fine. The main goal is to learn to use the tool while thinking about how the losses in your life influence your clinical practice with individuals who are dealing with issues of grief and loss.

If you choose, you may be creative by adding symbols or graphics or anything you like! Use anything that you think will add meaning to this assessment tool. This is not required, but is encouraged.

<u>Part IIa:</u> Describe your personal style of dealing with loss.

*How have you coped with these events?
*How have the following influenced your coping style:
        -people around you?
        -your cultural background, ethnicity, religion?
        -your personal values, attitudes, and beliefs?

<u>Part IIb:</u> Impact of personal experience on clinical practice.

*How do you think that personal loss experiences (or the absence of them) have influenced your comfort level in working with others who are dealing with issues of grief and loss?

*How might your experiences have an impact on your work?
- -Do you think your experience will be helpful?
- -Do you think your experiences might hinder your work in some way?
- *How might your own coping style influence the way you work with others?

Part III: Potential challenges or dilemmas

Based upon your experiences or your personal belief system:

*Are there any specific issues or situations that might be challenging or difficult for you?

*Identify any value-oriented or ethical dilemmas related to grief and loss issues that may arise in your work.

Part IV: Coping Strategies / Identification of Resources

Identify coping strategies and / or resources that could assist you in dealing with the dilemmas or challenges identified in Part III.

Assignment #2

Group Presentation - Understanding Cultural Variation in Illness, Death and Grief

Due date: Thursday July 12, 2012

The goals of this assignment are:

1) To encourage you to seek information about issues related to illness, health, grief and loss in a culture different from your own.

2) To provide a forum for the class to benefit from the information and knowledge that you have gained.

3) To encourage all of us to remember that our cultural background can influence our perception of other cultures' expression of illness, grief, and loss.

4) To interview someone of a different community than yours to facilitate understanding of a culture other than your own.

Part I:
Identify a population of interest that differs from your own background (i.e., different racial or ethnic heritage; different religious or spiritual background). Form a group of students to work collectively on this assignment. You will be required to meet outside of class to complete the assignment and will receive a grade as a group. Group members will decide how to divide the assignment as well as how to divide responsibilities for the class presentation.

Each group will have one hour for their presentation.

Part II:
Identify a member of the community that you have selected that you will be able to conduct a 30-60 minute interview with to facilitate your understanding of this population.

Assignment #3
Ethnographic Interview & Paper

Due: Tuesday, July 24, 2012

Learning objectives: It is expected that by completing this assignment, the student will gain an understanding of what it means to "live with" grief and loss from the perspective of the person, also known as the informant, who has experienced a death or non-death loss.

In ethnography, since informants are living day-to-day with their loss, they are considered the "experts", and you should approach the interview from the position of a naïve learner. It is important to let the informant teach you about his/her experience and to identify what he/she thinks is important for you to learn about the daily life of one who is living with grief.

Part A:
1. Select an informant who is NOT related to you and is currently experiencing or has experienced a loss, or someone who has a chronic/serious physical illness.

2. Unlike a clinical interview which focuses on gaining information for assessment and intervention, the ethnographic interview approach focuses on three main dimensions from the informant's viewpoint:
> (1) The meaning of the loss;
> (2) The types of strategies used to cope with the loss;
> (3) The way in which the informant organizes his/her world in the context
> of the loss.

3. Confidentiality must be upheld and discussed with the informant before the interview occurs; assure the informant that her/his name will not be used in any way in your verbal or written work.

4. Interviews are generally 1 to 2 hours long; you may take detailed handwritten notes during the session IF agreeable to the informant BUT you may not tape record the interview. The interview should be fairly open, yet focused enough so that you can develop an understanding of what it is like to live with the person's loss or illness/disability/ or terminal illness.

5. Acquaint yourself with the informant's type of loss PRIOR to the interview.

6. Develop an interview guide to help you during the interview. The following are suggestions for what you might want to cover/include in your interview guide:
> • How did the informant find out about the loss event?
> • What were the informant's initial feelings/response to the loss event?
> • How has the informant attempted to make sense of his/her loss (i.e., what kinds
> of explanations/theories about "why me?")?

• How does the informant's culture, ethnicity, age, gender, race, socioeconomic class, philosophical or religious beliefs affect his/her grief experience?
• How does she/he cope with the loss on a daily basis?
• What is the impact of the loss and /or medical treatment on self, family life, work, career plans, social relationships, etc. ?
• What is her/his experience of accessing grief/bereavement services and of interactions with service providers?

Part B: **Written assignment of the Interview**

Summarize the informant's experience as you uncovered/discovered/understood it from your interview in 5 double-spaced typed pages (removing all identifying names) including at least 5 direct quotes from the informant, and 5 relevant citations from the grief and loss literature included in the syllabus or from a literature search and address ALL the questions below:

1. What is your brief understanding of the loss experience of the informant? List the sources you utilized to gain that understanding.

2. Discuss the impact on the psychosocial life of the informant from her/his viewpoint. How does she/he cope with the loss/what strategies does he/she use to cope with/adapt to/live with the loss?

3. What was the most compelling thing you learned about the informant's experience from an insider's perspective? How will you incorporate this learning in your practice as a professional social worker?

4. In retrospect, in general, how well do you think you elicited information from the informant about his/her loss experience? Looking back, (a) what areas do you wish you had covered in the interview but did not? (b) how "connected" did you feel to the informant and why, and (c) what part of the interview was most difficult for you to "stay with", and why?

5. How were the service delivery system(s)/provider agency(s)/managed care system(s) barriers and/or resources for the informant and/or family? Analyze how these systems enhanced, challenged, or were neutral influences on the well-being of the consumer and family.

6. Given the grief and loss literature and the speakers in class, what recommendations would you make to help this person or their family?

7. Attach your interview guide to your paper and submit both to the instructor.