The University of Texas at Austin Steve Hicks School of Social Work

Course Number: SW 360K Unique Number: 61480 Semester: Fall 2021

Synchronous (in person) Meeting

Time: W 5:30 - 7:30 pm

Asynchronous (online) class: 60 min.

Office: SSW 3.124B

(Please note this class will meet the first four weeks in The Utopia, which is the auditorium within the SHSSW. When you enter the main lobby, it is through

the doors on your left.)

Professor's Name: Dede Sparks, LMSW

Pronouns: she/her/hers

Email: dsparks@austin.utexas.edu Preferred Phone: 512-731-3705 Class Room: SHSSW 2.132

Office Hours: Wednesdays 4:00 – 5:00 pm And virtual by appointment (via Zoom)

PATIENT AND PROVIDER HEALING: TOPICS ON DEATH, DYING AND RESILIENCE

I. STANDARDIZED COURSE DESCRIPTION

Practitioners face palliative and end-of-life decisions with patients who are dying but are often ill equipped to cope with the intensity of the feelings and conversations around these decisions. This course will help students to reframe these challenging interactions as opportunities to form meaningful connections with patients, families and caregivers, and to understand the significance of self-care, self-compassion, and the cultivation of resilience in the face of difficult situations. The course will concentrate on cultural, historical and theoretical components of death, dying and resilience in healthcare; communicative, psychological, and sociological approaches to terminally ill patient communication and care; and methods of achieving wellness and resilience in the face of adversity.

II. STANDARDIZED COURSE OBJECTIVES

By the end of the semester, students should be able to:

- 1. Communicate an understanding of cultural, historical and theoretical perspectives of death, dying and resilience for both patients and healthcare providers.
- 2. Discuss significant concepts and vocabulary related to health, wellness, illness, death and dying as they relate to resilience.
- 3. Evaluate processes and practices surrounding end-of-life care for patients and self-care for practitioners.

- 4. Communicate an understanding of the impact of anticipatory grief and social support on resilience for patients, caregivers, and healthcare providers, and discuss the diversity of human responses regarding anticipatory grief.
- 5. Critically evaluate ethical issues around the intersection of healthcare systems, policies and practices and provider resilience and self-care.
- 6. Discuss essential elements of effective interprofessional communication.

III. TEACHING METHODS

This course is designed to include a variety of teaching and learning methodologies to achieve the course objectives. Course activities may include reading, writing, discussion, lecture, guest speakers, TED Talks, film, group activities and presentations, experiential exercises and self-reflection. This course will highlight issues specific to diverse populations, including health disparity and disproportionality, and diverse perspectives related to end of life care from both the patient, caregiver and provider's perception. Issues of the impact of race, ethnicity, religion, spirituality, gender, age, sexual orientation, and culture will be emphasized throughout the course, including reading materials, Ted Talks, lectures and guest speakers.

IV. REQUIRED TEXT AND MATERIALS

Required Text

Lipsky, L.V., Y Burk, C. (2009) *Trauma stewardship: An everyday guide to caring for self while caring for others*. San Francisco, CA: Berrett-Koehler. (available new, used and for e-readers on Amazon)

Additional readings will be available on Canvas. The reading list for this course was designed to explore issues of culture, diversity, equity and inclusion.

V. COURSE REQUIREMENTS

Class Attendance and Contribution

10 pts

Class contribution grade will be determined in two ways:

First, due to the format and content of the course, regular and punctual attendance is imperative. 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 had comprehended the readings will be considered in assigning the final grade. Punctuality is an important professional practice. Class will begin promptly at 5:30 pm. Students will be allowed one unexcused absence. If a student misses more than the allotted excused absence, the professor reserves the right to lower that student's grade by two points for each class missed beyond the one allowed. Communication with the professor will be key.

Discussion Questions 30 pts

The asynchronous part of our class is valuable to your learning in this course. Students will be required to watch videos, TED talks, recorded lectures, and complete readings relevant to the topics of that week. In order to integrate what is learned for that week, students will be required to complete a discussion question in Canvas. The discussion question will be assigned in Canvas at least one week in advance. Students should use critical thinking skills in answering the question. Student responses should be 150-250 words and should summarize observations, reflections, and any questions about the assigned materials. Students should also provide at least one 100-150 word response to one of their peer's answer(s) on the Discussion Board. Each Discussion Board Answer and Response will be worth a maximum of 2.5 points. There are 14 weekly Discussion Boards in all. Students may complete 12 Discussion Boards for full credit. This give you the option of not participating in two of the Discussion Boards at your discretion. *All Discussion Board posts will be due, at the latest, at 11:59pm on Mondays weekly.*

Introduction Video 5pts

Students will be expected to record a video introduction using Animoto and upload to Canvas. This video should include basic introductory information about the student (name, pronouns, hometown, family, pets, major, area of interest in social work, etc...) as well as some photos. Please discuss briefly why you chose to take this class. Videos will be used to get to know each other in this class.

Due 9/01/2021

Personal Reflection/Loss Autobiography Assignment

20 pts

(This assignment is modified from an existing assignment found in The Grief Assessment and Intervention Workbook by E. Pomeroy and R. Garcia (noted in bibliography).

Each of us develops our own unique style of coping with grief and loss. Understanding your beliefs, attitudes, values, reactions, grief issues, and cultural influences will be an important part of the work that you will do with clients who are terminally ill. The goal of this assignment is for you to describe how your own experiences and style of coping with loss may influence your clinical practice.

- A. Using a Loss History Graph as an Assessment Tool
 - a. Considering the broad definition of grief and loss discussed in class, construct a loss history graph that represents the loss events in your life. It can be as simple as a longitudinal graph or feel free to be as creative as you would like to be for this assignment to be meaningful for you.
 - b. 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 own practice with individuals who are dealing with issues of grief and loss, and to understand how your own loss history and grief responses affect your personal resilience.
- B. Describe Your Personal Style of Dealing with Loss

- a. How have you coped with these events?
- b. How have the following influenced your coping style:
 - i. People around you?
 - ii. Your cultural background, ethnicity, gender, religion?
 - iii. Your personal values, attitudes, and beliefs?
- C. Impact of Personal Experience on Clinical Practice
 - a. 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?
 - i. How might your experiences have an impact on your work?
 - 1. Do you think your experience will be helpful?
 - 2. Do you think your experiences might hinder your work in some way? ii. How might your own coping style influence the way you work with others?
 - iii. How was your own coping style influenced (positively or negatively) by your culture (remember that culture is broadly defined to include many aspects of oneself)?
- D. Potential Challenges and Dilemmas
 - a. Based upon your experiences, your personal belief system, and your own coping style:
 - i. Are there any specific issues or situations that might be challenging or difficult for you?
 - ii. Identify any value-oriented or ethical dilemmas related to grief and loss issues that may arise in the work you are hoping to do.
- E. Coping Strategies/Identification of Resources
 - a. Identify coping strategies and/or resources that could assist you in dealing with the dilemmas or challenges identified in Part D.

(If you have completed this assignment in another course, please notify Professor Sparks. You will be provided with an alternative assignment that will capture the intent of this one.)

Due 9/29/2021

Cultural Heritage Video Presentation

20 pts

As we will discuss in class, health, illness, dying and death are socially and culturally constructed. In order to assist you in your ability to learn about, understand and respect cultures other than your own, this assignment will allow you to go deeply into the experiences of a cultural group different than your own.

The goals of the assignment are:

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

2) To encourage all of us to remember that our cultural background can influence our perception of other cultures' experience of illness, health, and loss. Our cultural beliefs can influence our interactions with clients, our assessment, intervention planning and evaluation of interventions, and our participation in interprofessional teams.

Identify a population of interest that differs from your own background (i.e., different racial or ethnic heritage; different religious or spiritual background, different culture).

Create a 25 to 30-minute video presentation that addresses the following:

- Demographic and Geographic data
- Traditional health beliefs
- Definition of illness
- Definition of health
- Overall health attitude
- Beliefs about causes/sources of illness
- Methods of maintaining, protecting and restoring health
- Visits and use of medical practitioner or other health care provider
- Health care resources such as neighborhood health centers
- Anyone else in the community who looks after people such as traditional healers
- Child-bearing and child-rearing beliefs and practices
- Rituals and beliefs surrounding death and dying

(Please try to include information on at least 80% of the topics listed.)

• Your presentation should include a reference list of all sources of information used in your presentation. The reference list can be uploaded to CANVAS in the appropriate section and should be in APA style. Please make an attempt to ensure that at least 50% of the articles you include for this literature review are written by someone who identifies as being a part of the cultural group you are highlighting in this paper. If this is not possible, it is worth noting in your presentation. (For many marginalized populations, you may have difficulty meeting this request.)

Due10/27/2021

Cultural Presentation Peer Review

15 pts

Each student will choose 3 of the Cultural Heritage Video Presentations to review using a rubric that will be provided. Points will be assigned to individual students based on their comprehensive review and the thoroughness of feedback provided to the student author. Additional information and requirements for this assignment will be provided through Canvas.

Due 12/1/2021

VI. GRADES

Grading Scale Attendance and Participation Introduction Video

10%

Weekly Discussion Questions	30%
Personal Reflection/Loss Autobiography Assignment	20%
Cultural Heritage Video Presentation	20%
Cultural Presentation Peer Review	15%
TOTAL	100 %

GRADING SCALE

94.0 and Above	A
90.0 to 93.999	A-
87.0 to 89.999	B+
84.0 to 86.999	В
80.0 to 83.999	B-
77.0 to 79.999	C+
74.0 to 76.999	C
70.0 to 73.999	C-
67.0 to 69.999	D+
64.0 to 66.999	D
60.0 to 63.999	D-
Below 60.0	F

VII. CLASS POLICIES

Class Participation: Students are expected to attend class regularly and to participate in an interactive framework between collegiate students, professor and invited guest speakers. 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 (or attempted to understand) the readings will be considered in assigning the final grade. Students will be asked to keep video on during class. Any exceptions will need to be approved by the professor prior to turning off video option.

Attendance: Punctuality is one of the many important standards of professional behavior. Class will begin promptly at 5:30 p.m. A student may be 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 late or absent, efforts should be made to contact the professor in advance. Students are responsible for any material missed due to absence.

Late Assignments: 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 begins 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 can see the professor and negotiate another due date well in advance.

Writing Assignments: The ability to write in a professional manner is very important for healthcare practitioners, particularly in settings where they work as members of interdisciplinary teams. It is also important to be able to express yourself using your authentic voice. Written work must be typed, edited for grammatical, spelling and typographical errors. References and citations should be based on the American Psychological Association (APA) guidelines. All other aspects of your writing assignments should be based on what you, as an individual, prefer. Your thoughts are important to more important to me than the way you choose to record them. This is a class where you are encouraged to explore and embrace your culture and your individuality. The process is much more important than the product!

Class Performance: If students have concerns 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.

CLASSROOM SAFETY AND COVID-19 To help preserve our in person learning environment, the university recommends the following.

- •Adhere to university mask guidance.
- •Vaccinations are widely available, free and not billed to health insurance. The vaccine will help protect against the transmission of the virus to others and reduce serious symptoms in those who are vaccinated.
- •Proactive Community Testing remains an important part of the university's efforts to protect our community. Tests are fast and free.
- •Visit protect.utexas.edu for more information

VIII. UNIVERSITY POLICIES:

COVID-19 RELATED INFORMATION. The University's policies and practices related to the pandemic may be accessed at: https://protect.utexas.edu/

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.

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). A student should present the letter to the professor at the beginning of the semester so that needed accommodations can be discussed and followed. The student should remind the professor of any testing accommodations no later than five business days before an exam. For more information, visit: http://diversity.utexas.edu/disability/.

PROFESSIONAL CONDUCT AND CIVILITY IN THE CLASSROOM. The professor expects students to act as 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. A course brings together a group of diverse individuals with various backgrounds. Students are influenced and shaped by such factors as race, ethnicity, gender, sex, physical abilities, religious and political beliefs, national origins, and sexual orientations, among others. We expect to learn from each other in an atmosphere of positive engagement and mutual respect. This atmosphere includes working intentionally to recognize and dismantle racism, sexism, heterosexism, and ableism in the classroom. Social Work also deals with complex and controversial issues. These issues may be challenging and uncomfortable, and it would be impossible to offer a substantive classroom experience that did not include potentially difficult conversations relating to challenging issues. In this environment, we will be exposed to diverse ideas and opinions, and sometimes we will not agree with the ideas expressed by others.

Nevertheless, the professor requires that students engage one another with civility, respect, and professionalism.

UNANTICIPATED DISTRESS. Students may experience unexpected and/or distressing reactions to course readings, videos, conversations, and assignments. If so, students are encouraged to inform the professor. The professor can be responsive and supportive regarding students' participation in course assignments and activities, but students are responsible for communicating clearly what kind of support is desired. If counseling is needed, students may contact a service provider of their choosing, including the UT Counseling Center at 512-471-3515 or online at https://cmhc.utexas.edu/.

POLICY ON SOCIAL MEDIA AND PROFESSIONAL COMMUNICATION. Public social networks are not private. Even when open only to approved or invited members, users cannot be certain that privacy will exist among the general membership of sites. If social work students choose to participate in such forums, please assume that anything posted can be seen, read, and critiqued. What is said, posted, linked to, commented on, uploaded, subscribed to, etc., can be accessed and archived, posing potential harm to professional reputations and prospective careers.

Social work students who use social media (e.g. Facebook, Twitter, Instagram) and other forms of electronic communication (e.g. blogs) must be mindful of how their communication may be perceived by clients, colleagues, faculty, and others. Social work students are expected to make every effort to minimize material which could be considered inappropriate for a professional social worker in training. Because of this, social work students are advised to manage security settings at their most private levels and avoid posting information/photos or using any language that could jeopardize their professional image.

Students are asked to consider the amount of personal information posted on these sites and are obliged to block any client access to involvement in the students' social networks. Client material should not be referred to in any form of electronic media, including *any* information that might lead to the identification of a client or compromise client confidentiality in *any* way. Additionally, students must critically evaluate any material that is posted regarding community agencies and professional relationships, as certain material could violate the standards set by the

School of Social Work, the Texas Code of Conduct for Social Workers, and/or the NASW Code of Ethics.

Social work students should consider that they will be representing professional social work practice as well as The University of Texas at Austin School of Social Work program while in the classroom, the university community, and the broader area communities.

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://deanofstudents.utexas.edu/sjs/.

USE OF COURSE MATERIALS. The materials used in this course, including, but not limited to exams, quizzes, and homework assignments, are copyright protected works. Any unauthorized duplication of the course materials is a violation of federal law and may result in disciplinary action being taken against the student. Additionally, the sharing of course materials without the specific, express approval of the professor may be a violation of the University's Student Honor Code and an act of academic dishonesty, which could result in further disciplinary action. This sharing includes, among other things, uploading class materials to websites for the purpose of distributing those materials to other current or future students.

CLASSROOM CONFIDENTIALITY. Information shared in class about agencies, clients, and personal matters is considered confidential per the NASW Code of Ethics on educational supervision and is protected by regulations of the Family Educational Rights and Privacy Act (FERPA) as well. As such, sharing this information with individuals outside of the educational context is not permitted. Violations of confidentiality could result in actions taken according to the policies and procedure for review of academic performance located in sections 3.0, 3.1, and 3.2 of the Standards for Social Work Education.

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 for keeping the university informed about a change of 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 timesensitive. Students can find UT Austin's policies and instructions for updating their e-mail address at http://www.utexas.edu/its/policies/emailnotify.php.

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, examination, work assignment, or 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.

TITLE IX REPORTING. In accordance with Title IX of the Education Amendments of 1972, the University of Texas at Austin is committed to maintaining a learning environment that is free from discriminatory conduct on the basis of sex https://titleix.utexas.edu/. Faculty, field instructors, staff, and/or teaching assistants in their supervisory roles are mandated reporters of incidents of sex discrimination, sexual harassment, sexual violence, stalking, dating violence, or any other forms of sexual misconduct. Students who report such incidents will be informed of University resources. Incidents will be reported to the University's Title IX Coordinator. Further information, including student resources related to Title IX, may also be found at https://titleix.utexas.edu/.

CAMPUS CARRY POLICY. The University's policy on campus carry may be found here: https://campuscarry.utexas.edu.

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 and COVID-19 ADVICE LINE (BCCAL). If students have concerns about their behavioral health, or if they are concerned about the behavioral health of someone else, students may use the Behavior Concerns and COVID-19 Advice Line to discuss by phone their concerns. This service is provided through a partnership between 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 https://safety.utexas.edu/behavior-concerns-advice-line. The Behavior Concerns and COVID-19 Advice Line has been expanded to support The University of Texas at Austin community during the COVID-19 pandemic. By calling 512-232-5050 - Option 2 for COVID-19, students, faculty and staff can be assisted in English and Spanish with COVID-19 support.

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 in the classroom and the building. Remember that the nearest exit door may not be the one you used when entering 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 are given instructions by the Austin Fire Department, the UT Austin Police Department, or the Fire Prevention Services office.

IX. COURSE SCHEDULE

Methods of teaching, such as assigned readings, TED talks and videos will be posted on Canvas and may be updated throughout the semester. Students are expected to check the Canvas modules on a regular basis for additionally assigned material. Please note that all

assignments will be posted on Canvas with requirements and instructions. Below are topics assigned to each class period. Please see the course CANVAS site for detailed modules for each week. Any changes to the course schedule will be noted on Canvas.

August 25th Creating a Common Language around Death, Dying & Resilience

The Importance of Meaning Making at the End of Life

What is Trauma Stewardship?

September 1st Historical & Theoretical Components of Death, Dying and

Resilience in Healthcare

Interprofessional Teams in Hospice and Palliative Care Compassion Fatigue, Trauma and Burnout in Healthcare

Discussion Question
Introduction Video due

September 8th Cultural and Spiritual Components of Death, Dying and Resilience in

Healthcare

Disenfranchised Grief: A Significant Barrier to Healing and Hope

Discussion Question

September 15th Communicating with Patients who are Terminally Ill, their Families &

Caregivers

Creating a Interprofessional Collaborative Culture for Teams Working

with Terminally Ill Patients

Discussion Question

September 22nd Defining Empathy for Practitioners Working with Patients who are

Terminally Ill

Person-Centered Care at End of Life

Practitioner-Centered Self-Care when Working in End of Life Care

Discussion Question

September 29th Balancing the Art and Science of Healthcare with Patients who are

Living with Chronic or Terminal Illness

End of Life Issues with Special Populations (Persons Experiencing Homelessness, Veterans, Persons Living with Mental Illness)

Discussion Question

Personal Reflection/Loss Autobiography Assignment Due

October 6th The Influence of Pain (Physical, Emotional and Spiritual) on

Patient and Provider Stress, Trauma and Resilience
The Impact of Health Disparities on Individual and Community
Resilience

Discussion Question

October 13th Stress and Resilience from a Systems Perspective

Healthcare Practices and Policies that Help and Hinder Resilience

For both Patients and Practitioners

End of Life Issues, Concerns and Care for LGBTQA+ Patients

And Their Caregivers

Discussion Question

October 20th Advanced Directives/Interventions that Support Healing,

Grieving and Building Resilience

The Significance of both Formal and Informal Support Groups

Discussion Question

October 27th Grief Issues with Perinatal Loss & Childhood Chronic Illness

And Death/Grief Issues for Children, Adolescents and Teens

Discussion Question

Cultural Heritage Video Presentation Due

Nov. 3rd The Influence of Stress Across the Lifespan

Ethical Practice for End of Life Care

The Effect of Social Media on Wellness, Illness, Dying and Death

Discussion Question

Nov. 10th The Effect of Race & Racism on End of Life Care

The Effect of Race & Racism on Patient Resilience
The Effect of Race & Racism on Practitioner Resilience

Discussion Question

Nov. 17th Trauma Stewardship

Discussion Question

Nov. 24th NO CLASS – UT THANKSGIVING HOLIDAY

December 1st Healing and Resilience/The Art & Science of Self-Care

Discussion Question

December 1st Cultural Presentation Peer Reviews Due

X. BIBLIOGRAPHY

- Allen, K. & Spitzer, W. (2016). Social work practice in health care: Advanced approaches and emerging trends. Los Angeles, CA: Sage Publishing.
- Badawi, G. (2012). Muslim attitudes toward end-of-life decisions. *The Journal of IMA, 43(3), 134-9*. Retrieved from: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3516109.
- Barros, C. (2012). Notes for the new hospice social worker, *Journal of Social Work in End-of-Life & Palliative Care*, 8(3), pages 207-210.
- Becze, E. (2013). *Cultural barriers keep african americans from using palliative care*. Retrieved from: https://voice.ons.org/news-and-views/cultural-barriers-keep-africanamericans-from-using-palliative-care.
- Braun, K.L, Pietsch, J.H., & Blanchette, P.L. (2000). *Cultural issues in end-of life decision making*, Los Angeles, CA: Sage Publication. Chapter 4, pages 37-54.
- Brody, J. (2009). Guide to the great beyond. New York, NY: Random House.
- Christ, G., Christ, A., and Siegel, K. (2002). Adolescent grief: "It never really hit me until it actually happened." *Journal of American Medical Association*, 10.
- Davenport, L. & Schopp, G. (2011). Breaking bad news: Communication skills for difficult conversations. *JAAPA: Journal of the American Academy of Physician Assistants*, 24 (2), 46-50.
- Davis-Berman, J. (2016). Serious illness and end-of-life care in the homeless: Examining a service system and a call for action for social workers. *Social Work and Society International Online Journal (vol. 14, no. 1)*. Retrieved from: https://www.socwork.net/sws/article/view/459/844.
- DiCorcia, J.A. & Tronick, E. ((2011). Quotidian resilience: Exploring mechanisms that drive resilience from a perspective of everyday stress and coping. Neuroscience & Biobehavioral Reviews, vol. 35 (7), 1593-1602.
- Dingfield & Kayser. (2017). Integrating Advance Care Planning into Practice. *Chest*, 151 (6), 1387-1393.
- Doka, K. (1989). *Disenfranchised grief: Recognizing hidden sorrow*. Massachusetts/Toronto: Lexington Books.
- Doka, K. (2002). Disenfranchised grief: New directions, challenges, and strategies for practice. Champaign, Illinois: Research Press.

- Emmons, K. (2001). Motivational Interviewing in Health Care Settings: Opportunities and limitations. *American Journal of Preventative Medicine*, 20(1), 68-74.
- Figley, C.F., Huggard, P., & Rees, C.E. (2013). First do no self-harm: Understanding and promoting physician stress resilience. New York, NY: Oxford University Press.
- Fombuena, M., Galiana, L., Barreto, P., Oliver, A., Pascual, A., & Soto-Rubio, A. (2016). Spirituality in patients with advanced illness: The role of symptom control, resilience, and social network. *Journal of Health Psychology*, vol. 21(12) 2765-2774.
- Gawande, A. (2014). *Being mortal: Medicine and what matters in the end.* New York, NY: Metropolitan Books.
- Gregory, E.M., & Rutledge, P.B. (2016). *Exploring positive psychology: The science of happiness and well-being*, ABC-CLIO, LLC. ProQuest Ebook Central. Retrieved From: http://ebookcentral.proquest.com/lib/utxa/detail.action?docID=4676715.
- Grubbs, V. (2017). Hundreds of Interlaced Fingers. Thorndike, ME: Center Point Publishing.
- Kalanithi, P. (2016). When breath becomes air. New York, NY: Random House.
- Kapoulitsas, M. & Corcoran, T. (2015). *Compassion fatigue and resilience: A qualitative analysis of social work practice*. Qualitative Social Work, Vol. 14(1) 86-101.
- Kastenbaum, R.K. (2016). *Death, society, and human experience* (11th ed.). New York, NY: Routledge.
- Lam, V. (2017). *LGBTQ at the end-of-life: Needs and challenges*. Pallimed (blog) 11-13-2017. Retrieved from: https://www.pallimed.org/2017/11/lgbtq-at-end-of-life-needs-and.html.
- Lopez, S.A. (2011). Culture as an influencing factor in adolescent grief and bereavement. *The Prevention Researcher*, 18(3), 10-13.
- Malone, P., Pomeroy, E., and Jones, B. (2011). Disoriented grief: A lens through which to view the experience of Katrina evacuees. *Journal of Social Work in End-Of-Life and Palliative Care*, 7:23, 241-262.
- Marchioli, J. (2008). African American Outreach Guide. *National Hospice and Palliative Care Organization*, pgs. 1-35. Retrieved from: https://www.nhpco.org/sites/default/files/public/Access/African American Outreach GuideFull.pdf.
- Marchioli, J. (2009). Disabilities Outreach Guide. National Hospice and Palliative

- Care Organization, pgs. 1-21. Retrieved from: https://www.nhpco.org/sites/default/files/public/Access/Outreach Disabilities.pdf.
- NASW Healthcare Standards. Retrieved from: https://www.socialworkers.org/LinkClick. aspx?fileticket=fFnsRHX-4HE%3D&portalid=0.
- National Academies of Sciences, Engineering, and Medicine (2017). *Communities in action: Pathways to health equity.* Washington, D.C: The National Academies Press. Doi: 10.177226/24624, pages 57-88; 99-164.
- Neenan, M. (2017). *Developing resilience: A cognitive-behavioral approach* (2nd ed.). New York, NY: Routledge.
- Pomeroy, E.C., & Garcia, R.B. (2009). *The grief assessment and intervention workbook: A strengths perspective*. Belmont, CA: Brooks/Cole.
- Smith, A, Sudore, R. & Perez-Stable, E. (2009). Palliative care for latino patients and their families: Whenever we prayed, she wept. *JAMA (301) 1047-57*. E1.10.1001/jama. 2009.308. Retrieved from: file:///C:/Users/Dell/Downloads/SmithPalliativeCare%20 (3).pdf.
- Weinstein-Moser, E. (2008). Spirituality in social work the journey from fringe to mainstream. Social Work Today, vol. 8(2), pg.32. Retrieved from: www.socialworktoday.com/archive/marapr2008p32.shtml.
- Wilkie, D.J., Judge, M.K.M., Brown, M.A., Shannon, S., Farber, S., Corless, I. (2002). Grief module. Toolkit for nurturing excellence at end-of-life transition. Retrieved from: http://www.tneel.uic.edu/tneel-ss/demo/grief/frame1.asp.
- Wolfet, A.D. (2007). *Growing through grief: The role of support groups*. Center for Loss and Life Transition. Retrieved from: http://griefwords.com/index.cgi?action=articles%2F growing.html&site id=2.
- Zayas, L. (2011). Latinas attempting suicide: When cultures, families and daughters collide. (pp. 133-158). New York, NY: Oxford University Press.