



THE UNIVERSITY OF TEXAS AT ARLINGTON

School of Social Work

Semester/Year: Spring 2017

Course Title: Death and Dying

Course Prefix/Number/Section: SOCW 5318 (formerly SOCW 6366)-002

Instructor Name: Kim Rich-Rice, Ph.D.

Faculty Position: Adjunct

Faculty Profile: N/A

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Office Hours: Monday-Friday, by appointment

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

Location: SWCA 316

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

A. Description of Course Content

Topics vary from semester to semester depending on the needs and interest of the students. Prerequisite: permission of instructor.

B. Student Learning Outcomes

Children and Families Concentration

Educational Policy 2.1.1—Identify as a professional social worker and conduct oneself accordingly.

1. Advanced social workers in children and families practice active self-reflection and continue to address personal bias and stereotypes to build knowledge and dispel myths regarding diverse family structures, families with complex family dynamics and families with multiple challenges and issues.
2. Advanced social workers in children and families develop an action plan for continued growth including use of continuing education, supervision, and consultation.

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

1. Advanced social workers in children & families implement an effective decision-making strategy for deciphering ethical dilemmas specific to the multiple and diverse needs of families and children.

Educational Policy 2.1.4—Engage diversity and difference in practice.

Advanced social workers in children and families understand and can apply the relevant cultural, class, gender, race, age, disability, and other diversity issues to enhance the well-being of children and families from a

strengths perspective.

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

1. Advanced social workers in children and families recognize the stigma and shame associated with “family dysfunction.”
2. Advanced social workers in children and families recognize disparities in the distribution of resources across families.

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

1. Advanced social workers in children & families use advanced strategies to search, appraise, and select for application the most up to date evidence and evolving practice guidelines in the assessment and interventions with children and families.
2. Advanced social workers develop effective models, programs, policies and interventions and assess their effectiveness. They use valid and reliable assessments for identifying family problems, risks and protective factors, vulnerability and resilience factors and consequences for different family groups and family members.

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

1. Advanced social workers in children and families will be able to compare the various etiology and interventions relevant to children and families.
2. Advanced social workers in children and families understand the relevant organizational world-views and culture that influence how families function. They can relate social work perspectives, the evidence base, and related theories to practice with the multiple and complex issues that face families.

Educational Policy 2.1.10(a)-(d)—Engage, assess, intervene, and evaluate with individuals, families, groups, organizations, and communities.

Educational Policy 2.1.10(a)—Engagement

Social workers

- substantively and affectively prepare for action with individuals, families, groups, organizations, and communities;
 - use empathy and other interpersonal skills; and
 - develop a mutually agreed-on focus of work and desired outcomes.
1. Advanced social workers effectively use interpersonal skills to engage children and families in a collaborative therapeutic relationship.

Educational Policy 2.1.10(b)—Assessment

Social workers

- collect, organize, and interpret client data;
 - assess client strengths and limitations;
 - develop mutually agreed-on intervention goals and objectives; and
 - select appropriate intervention strategies.
1. Advanced social workers in Children and Families use multidimensional bio-psycho-social-spiritual assessment tools.

Educational Policy 2.1.10(c)—Intervention

1. Advanced social workers will be able to describe causes (empirically validated and theoretical), advanced

assessment methods, and the most effective interventions treatments for a variety of problems that effect children and families. Social workers critically analyze, monitor, and evaluate interventions.

Educational Policy 2.1.10(d)—Evaluation

1. Advanced social workers in children and families contribute to the theoretical knowledge base in the area of children and families through practice-based research, and use evaluation of the process and/or outcomes to develop best practices with children and families.

Direct Practice Mental Health/Substance Abuse Concentration:

Educational Policy 2.1.1—Identify as a professional social worker and conduct oneself accordingly.

1. Advanced social workers in DPMH practice active self- reflection and continue to address personal bias and stereotypes to build knowledge and dispel myths regarding mental health and mental illness.
2. Advanced social workers in DPMH develop an action plan for continued growth including use of continuing education, supervision, and consultation.

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

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

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

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

Educational Policy 2.1.4—Engage diversity and difference in practice.

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

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

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

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

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

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

1. Advanced social workers in DPMH distinguish mental health, mental illness, and mental well-being across the life span.

2. Advanced social workers in DPMH compare the various etiology and treatments for substance abuse and addiction.**Educational Policy 2.1.10(a)—Engagement**

Educational Policy 2.1.10(a)-(d)—Engage, assess, intervene, and evaluate with individuals, families, groups, organizations, and communities.

1. Advanced social workers in DPMH use strategies to establish a sense of safety for a collaborative therapeutic relationship.

Educational Policy 2.1.10(b)—Assessment

1. Advanced social workers in DPMH will be able to describe the structure of the DSM IV and conduct an assessment using the DSM criteria and structure.

Educational Policy 2.1.10(c)—Intervention

1. Advanced social workers in DPMH describe causes (empirically validated and theoretical), advanced assessment methods, and the most effective treatments for a variety of disorders: Mood, anxiety, cognitive, substance abuse, sexual, eating, psychotic disorders for adolescents, adults, and older adults.

Educational Policy 2.1.10(d)—Evaluation

1. Advanced social workers in DPMH contribute to the theoretical knowledge base in the area of mental health and mental illness through practice-based research, and use evaluation of the process and/or outcomes to develop best practices.

Direct Practice in Health Concentration

Educational Policy 2.1.1—Identify as a professional social worker and conduct oneself accordingly.

1. Advanced social workers in health practice active self-reflection and continue to address personal bias and stereotypes to build knowledge and dispel myths regarding health and health care services.
2. Advanced social workers in health develop an action plan for continued growth including use of continuing education, supervision, and consultation.

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

1. Advanced social workers in health implement an effective decision-making strategy for deciphering ethical dilemmas specific to the multiple and diverse needs in health care interventions and settings.

Educational Policy 2.1.4—Engage diversity and difference in practice.

1. Advanced social workers in health can understand the distribution of health and disease in populations by race/ethnicity, socioeconomic status, gender, gender identity, sexual orientation, religion, disability status, and other diversity issues.

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

1. Advanced social workers in health can identify ways in which power, privilege, gender, race, ethnicity, social class, age and other forms of social stratification and disenfranchisement influence the evaluation processes and outcomes.
2. Advanced social workers in health describe the distribution and determinants of health and disease and identify health disparities.

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

1. Advanced social workers in health synthesize and apply advanced strategies to search, appraise, select, and implement the most up to date evidence and implement practice guidelines in the assessment and interventions within health settings and clients with health issues.
2. Advanced social workers in health have the ability to critically assess and participate in research design and methodology related to health practice.

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

1. Advanced social workers in health describe the role of age, developmental processes, health disparities, and cultural diversity in the development and implementation of health interventions.
2. Advanced social workers in health use socio-epidemiological and life course theory to identify factors affecting health and disease.

Educational Policy 2.1.10(a)-(d)—Engage, assess, intervene, and evaluate with individuals, families, groups, organizations, and communities.

Educational Policy 2.1.10(a)—Engagement

Social workers

- substantively and affectively prepare for action with individuals, families, groups, organizations, and communities;
 - use empathy and other interpersonal skills; and
 - develop a mutually agreed-on focus of work and desired outcomes.
1. Advanced social workers in health implement participatory, collaborative, change-oriented communication, and engagement processes with clients, families, and other members of the health care team.

Educational Policy 2.1.10(b)—Assessment

Social workers

- assess client strengths and limitations;
 - collect, organize, and interpret client data;
 - develop mutually agreed-on intervention goals and objectives; and
 - select appropriate intervention strategies.
1. Advanced social workers in health demonstrate understanding of the bio-psycho-social-spiritual model of human development and conduct multiple domain assessments within health settings and the community.

Educational Policy 2.1.10(c)—Intervention

1. Advanced social workers in health will be able to describe empirically validated and theoretical causes, advanced assessment methods, and the most effective interventions treatments for a variety of problems that affect health.

Educational Policy 2.1.10(d)—Evaluation

Social workers critically analyze, monitor, and evaluate interventions.

1. Advanced social workers in health contribute to the theoretical knowledge base in the area of health and illness through practice-based research, and use evaluation of the process and/or outcomes to develop best practices.

Direct Practice in Aging Concentration

Educational Policy 2.1.1—Identify as a professional social worker and conduct oneself accordingly.

1. Advanced social workers in aging practice active self- reflection and continue to address personal bias and stereotypes to build knowledge to dispel myths regarding aging and stereotypes of older persons.
2. Advanced social workers in aging develop an action plan for continued growth including use of continuing education, supervision, and consultation.

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

1. Advanced social workers in aging implement an effective decision-making strategy for deciphering ethical dilemmas on behalf of all older clients.

Educational Policy 2.1.4—Engage diversity and difference in practice.

1. Advanced social workers in aging understand and can apply the relevant cultural, class, gender, race, age, disability, and other diversity issues to enhance the well-being of older adult clients from a strengths perspective.

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

1. Advanced social workers in aging understand social stigma and injustice with respect to older adults and advocate for clients' right to dignity and self-determination in their assessment and intervention strategies.
2. Advanced social workers in aging address any negative impacts of policies on practice with historically disadvantaged older populations.

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

1. Advanced social workers in aging synthesize and apply advanced strategies to search, appraise, and select for application the most up to date evidence and evolving practice guidelines in the assessment and interventions with older adults.
2. Advanced social workers in aging develop effective models, programs, policies and interventions and assess their effectiveness using valid and reliable measures specific to older adults.

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

1. Advanced social workers in aging apply conceptual frameworks and related theories consistent with social work perspectives and values to practice with older adults.
2. Advanced social workers in aging understand the heterogeneity of aging populations and distinguish the various influences and social constructions of aging well.

Educational Policy 2.1.10(a)-(d)—Engage, assess, intervene, and evaluate with individuals, families, groups, organizations, and communities.

Educational Policy 2.1.10(a)—Engagement

Social workers

- substantively and affectively prepare for action with individuals, families, groups, organizations, and communities;
 - use empathy and other interpersonal skills; and
 - develop a mutually agreed-on focus of work and desired outcomes.
1. Advanced social workers in aging use interpersonal skills to engage older clients in a collaborative, therapeutic relationship.

Educational Policy 2.1.10(b)—Assessment

Social workers

- collect, organize, and interpret client data;
- assess client strengths and limitations;
- develop mutually agreed-on intervention goals and objectives; and
- select appropriate intervention strategies.

1. Advanced social workers in aging conduct bio-psycho-social-spiritual assessments using standardized measures appropriate for use with older adults.

Educational Policy 2.1.10(c)—Intervention

1. Advanced social workers in aging describe empirically validated and theoretical causes, advanced assessment methods, and the most effective interventions for a variety of problems which effect older adults. Social workers critically analyze, monitor, and evaluate interventions.

Educational Policy 2.1.10(d)—Evaluation

1. Advanced social workers in aging contribute to the theoretical knowledge base in the area of aging through practice-based research, and use evaluation of the process and/or outcomes to develop best practices.

Student Learning Objectives

1. Identify the major theoretical premises driving the field of dying and death through readings and class lecture.
2. Identify and describe how social, cultural, and religious values influence how people grieve and respond to dying and death through readings, videos, speakers, written assignments, class discussion.
3. Demonstrate awareness of one's assumptions, beliefs, values, and behaviors with respect to dying, death, grief and one's own mortality through reflective journaling, written assignments, class discussion.
4. Define, differentiate, and critique concepts of loss, death, and grief and their theoretical perspectives within multi-cultural/ethnic contexts through written assignments and class discussion.
5. Understand the psychosocial and spiritual challenges and mental health implications faced by children, adolescents, families, middle- aged adults and older adults coping with life-limiting illness and death through readings, videos, speakers, written assignments, and class lecture.
6. Differentiate how contextual factors (e.g., type of death, attachment) are associated with grief and bereavement through readings, videos, written assignments, class discussion.
7. Apply evidence-based intervention strategies to intervene with children, adolescents, middle-aged and older adults facing dying and death through written assignments and class discussions.
8. Evaluate the professional roles and functions of the social worker in working with the dying and bereaved with particular regard to power differentials and social inequalities influencing individual, family, and professional staff interactions and behavior through written assignments, class discussions.
9. Evaluate and differentiate models of end-of-life care, including hospice and palliative care models and contrast with hospital-based death readings, videos, written assignments, reflective journal, class discussions.
10. Identify and analyze major legal and ethical issues with regard to end-of-life decisions with attention to social justice and advocacy through readings, written assignments, and class discussion.
11. Acquire knowledge about the history of dying and death in the U.S. and an understanding of its implications for practice, service delivery, and policy through readings, class lecture and discussions.

C. Required Textbooks and Other Course Materials

DeSpelder, L. A., & Strickland, A. L. (2015). *The last dance: Encountering death and dying*, 10th ed.,

Gutkind, L. (Ed.). (2012). *At the end of life: True stories about how we die*. Pittsburgh, PA: Creative Nonfiction Foundation.

D. Additional Recommended Textbooks and Other Course Materials

American Psychological Association (2009). *Publication manual of the American Psychological Association* (6th ed.). Washington, DC: American Psychological Association.

E. Descriptions of Major Assignments and Examinations

1. Scrapbook/ Essay (70 pts) (Addresses DPCF/DPMH/DPH/DPA EP 2.1.1 - APB 1; DPCF/DPMH/DPH/DPA EP 2.1.3 - APB 1; DPCF/DPMH/DPH/DPA EP 2.1.4 - APB 1; Learning Objectives 2, 3, 4, 5, 6)

This assignment consists of two parts:

- Scrapbook. During the second half of the semester, students will submit 5 entries to their scrapbook. Collect items (e.g., printed or online media, photos, artwork) which serve as examples of cultural and societal portrayals of dying, death, and/or bereavement. These examples can come from popular magazines, sympathy cards, Internet, advertisements, etc. You may also include items from broadcast or visual media (e.g., audio interviews, recordings, song lyrics, you tube video, etc.). Be as creative as you care to be in keeping with the purpose of the assignment. Clip, print, or electronically save the item to your scrapbook, along with your personal reaction to it. Record your reaction to your scrapbook entry for the week explaining why you think the item appears, what it says about dying and death, and how you react to the message personally (minimum of one double-spaced typed page, maximum two pages per entry). Do make sure that this assignment is compiled in a form in which your instructor can review and grade it. (50 pts)
- Essay. Along with the above materials, write a 2-3 page essay which summarizes what you have learned about dying, death, and bereavement through this assignment and course. How is modern dying and death depicted? What values do your selections represent? Does culture (e.g. American) need to change in order to support people's well-being through dying, death, and bereavement? If so, how? How did the experience of examining media images of dying and death affect your personal views? Discuss this exercise's impact on you. (20 pts)

2. Weekly Journal (10 pts per entry/50 pts total): (Addresses DPCF/DPMH/DPH/DPA EP 2.1.1 - APB 1, 2; DPCF/DPMH EP 2.1.2 - APB 1; DPCF/DPMH EP 2.1.4 - APB 1; DPCF/DPMH/DPH/DPA EP 2.1.7 - APB 1, 2; Learning Objectives 2, 3, 4, 6)

- Students will maintain a reflective writing journal throughout the course. Your journaling will reflect on in-class activities and discussions, scheduled field trip(s), and assigned readings. Your final entry should include reflection on the following 1) how this class has increased your awareness of the values, attitudes, and beliefs you hold toward the process of dying and death, 2) how your values, attitudes, and beliefs might affect your assessment of, and relation with clients, families, and fellow staff members, 3) the ethical dilemmas you might face as a result of value and belief differences, and 4) your plan for continuing education, supervision, professional development for continued growth in working with dying, death, and bereavement in social work. Journal entries should be no more than three typed double-spaced pages. A printed copy of your weekly journal entry will be turned in at the beginning of each class. Journal entries should demonstrate reflection, depth, and critical thinking about the issues presented in this course.

3. Planning your Advance Directives (65 pts): (Addresses DPCF/DPMH/DPH/DPA EP 2.1.6 - APB 1; Learning Objectives 3, 7, 8, 10, 11)

- The purpose of this assignment is for you to 1) demonstrate knowledge about and differentiate between the various types of legal documents available for advance planning decisions, 2) demonstrate awareness

regarding your own preferences for end-of-life care by completing advance directives for yourself and communicating your preferences to your health care surrogate. First, you will complete the Thinking Ahead: My Way, My Choice, My Life at the End (PDF) as a guide to identifying your preferences. After completing the *Thinking Ahead* work sheets, record your decisions on the *Personal Requests Form* before completing the official legal documents on this website. For this assignment you will turn in your 1) *Thinking Ahead* work sheets including the *Personal Requests Form*, 2) *Advance Directive to Physicians and Family or Surrogates* form and *MEDPOA - Medical Power of Attorney* form, and 3) Reaction paper of no more than 3 pages in length, double-spaced reflecting on your experience of completing your advance directives and talking with your health care surrogate about your preferences.

4. Major Paper (100 pts): (Addresses DPCF/DPMH/DPH/DPA EP 2.1.3 - APB 1; DPCF/DPMH/DPH/DPA EP 2.1.4 - APB 1; DPCF/DPMH/DPH/DPA EP 2.1.6 - APB 1; DPCF/DPMH/DPH/DPA EP 2.1.7 - APB 1, 2; DPCF/DPMH/DPH/DPA EP 2.1.10(a) - (d); Learning Objectives 1, 2, 3, 5, 6, 7)

- You will be required to write a paper pertinent to social work practice and issues of dying, death, and bereavement using one of several case vignettes provided by your instructor. The purpose of this paper is for students to demonstrate an understanding of the helping process regarding problems or issues faced by individuals who are dying, who are caring for those who are dying, or who have experienced the death of someone close to them for which social work intervention is needed. You will choose one case and address the following areas: Engagement, Data Collection, Assessment and Planning, Intervention, Evaluation, Termination, Follow-up, Summary. This paper should be no longer than 15 pages, but no less than 10 excluding your references. A minimum of 10 peer-reviewed professional journal articles are required. A detailed rubric is located on Blackboard.

Readings:

Readings will be assigned from the textbook(s) and may be augmented with class handouts. Additional readings will be assigned that are relevant to course material and will enhance student learning. A combination of lecture, discussion and in-class and out-of-class exercises (individual and small group) will highlight the major concepts covered in the course.

Written Assignments:

A primary goal of this course is to provide assignments which further awareness and understanding of your values, attitudes, and beliefs regarding dying and death. In addition, these assignments are intended for you to recognize *how* your values, attitudes, and beliefs may influence your social work practice and relationships with clients and client systems. Reflect on what the material means to you. Address your personal reactions. Did you learn anything about yourself? Note any indication of your own concerns, biases, and stereotypes. Assess personal attitudes related to your own eventual aging and death and the aging and death of people important to you. Comment on how your personal reactions might affect your practice, and how you might be able to address them. Consider the following:

- What am I learning?
- What insights am I gaining about others, society, and myself?
- How comfortable am I in thinking about my own aging and death?
- How will this experience affect my work with people who are dying and their families? With people who are bereaved?

All written assignments are to be formatted using APA 6th edition including cover page, in text citations, reference page. Grammar, spelling, clarity, and comprehension of writing assignments will also be included in grading assignments. Timely submission of assignments is expected. All course work must be completed within the semester in which the course is offered. Refer to the assignment rubrics on Blackboard for additional details.

F. Grading

Assignments	Points		Grade Scale	
Scrapbook and Essay Narrative	70 pts.		270-300	A
Weekly Journal 5@10pts. each	50 pts.		269-240	B
Advance Directive	65 pts.		239-210	C
Paper	100 pts.		209-180	D
Attendance/Participation (lectures and guest speakers)	15 pts.		179 and below	F
Total	300 pts.			

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

G. Make-Up Exams

Arranged on an individual basis with students.

H. Attendance

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

ATTENDANCE AND PARTICIPATION - 15 pts.

Points will be based on class attendance/participation, and attendance/participation when guest speakers are scheduled.

I. Course Schedule

Session	Date	Topics and Readings	Assignment Date
Session 1	01-17	<i>Attitudes Toward Death: A Climate of Change</i>	
<ul style="list-style-type: none">• Introductions, Review of syllabus and course• DeSpelder & Strickland Chapter 1 <p>Readings for next week:</p> <ul style="list-style-type: none">• DeSpelder & Strickland Chapter 2			

Session 2	01-24	Historical & Cultural Perspectives on Dying & Death	Journal entry 1 due
Readings for next week: <ul style="list-style-type: none"> • DeSpelder & Strickland Chapter 3 • McGoldrick, M., Schlesinger, J. M., Lele, E., Hines, P. M., Chan, J., Almeida, R., et al. (2004). Mourning in different cultures. In F. Walsh & M. McGoldrick (Eds.), <i>Living beyond loss. Death in the family</i> (2nd ed., pp. 119-160). New York: Norton. • Braun Rhea Nichols, K. L. (1997). Death and dying in four Asian American cultures: A descriptive study. <i>Death studies</i>, 21(4), 327-359. 			
Session 3	01-31	Historical and Sociocultural Perspectives on Dying & Death	Journal entry 2 due
Readings for next week: <ul style="list-style-type: none"> • DeSpelder & Strickland Chapter 4 • Kaufman, S. R., Mueller, P. S., Ottenberg, A. L., & Koenig, B. A. (2011). Ironic technology: Old age and the implantable cardioverter defibrillator in US health care. <i>Social Science & Medicine</i>, 72(1), 6-14. • Bern-Klug, M. (2004). The ambiguous dying syndrome. <i>Health & Social Work</i>, 29(1), 55-65. 			
Session 4	02-07	Death Systems: Mortality and Society	Journal entry 3 due
Readings for next week: <ul style="list-style-type: none"> • DeSpelder & Strickland Chapter 5 • O'Malley, P. et al. (2014). Death of a child in the emergency department. <i>Journal of Emergency Nursing</i>, 40, e83-e101. • Waldrop, D. P., & Kusmaul, N. (2011). The living-dying interval in nursing home-based end-of-life care: Family caregivers' experiences. <i>Journal of Gerontological Social Work</i>, 54(8), 768-787. 			
Session 5	02-14	Healthcare: Patients, staff and institutions	Journal entry 4 due
Readings for next week: <ul style="list-style-type: none"> • DeSpelder & Strickland Chapter 6 • Cagle, J., & Kovacs, P. (2009). Education: A complex and empowering social work intervention at the end of life. <i>Health & Social Work</i>, 4(1), 17-27. • Miller, P., & Hedlund, S. (2005). Two social workers share their stories about Oregon's death with dignity law. <i>Journal of Social Work in End-of-life & Palliative Care</i>, 1(1), 71-86. 			
Session 6	02-21	End-of-life issues and decisions	Journal entry 5 due
Readings for next week: <ul style="list-style-type: none"> • DeSpelder & Strickland Chapter 8 • Drayton, J. (2013). Bodies-in-life/bodies-in-death: Social work, coronial autopsies and the bonds of identity. <i>British Journal of Social Work</i>, 43, 264-281. • Collins, W. L., & Doolittle, A. (2006). Personal reflections of funeral rituals and spirituality in a Kentucky African American family, <i>Death Studies</i>, 30(1), 957-969. 			
Session 7	02-28	Last Rites: Funerals and Body Disposition	Advance directives assignment

Readings for next week:

- DeSpelder & Strickland Chapter 9
- Root, B. L., & Exline, J. J. (2014). The role of continuing bonds in coping with grief: Overview and future directions. *Death Studies*, 38(1), 1-8.
- Keene, E. A., Hutton, N., Hall, B., & Rushton, C. (2010). Bereavement debriefing sessions: An intervention to support health care professionals in managing their grief after the death of a patient. *Pediatric Nursing*, 36(4), 185-189.
- Harrington LaMorie, J. (2011). Operation Iraqi Freedom/Operation Enduring Freedom: Exploring wartime death and bereavement. *Social Work in Health Care*, 50(7), 543-563.

Session 8	03-07	Survivors: Understanding the experience of loss & grief	
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Readings for next week:

- DeSpelder & Strickland Chapters 7 & 10
- Gutkind *The Resurrection of Wonder Woman*, p. 233 - 246
- Sarwar, S. R., Mangewala, V., & Baron, R. (2013). Helping the angels: A review of understanding and helping dying children. *Innovations in Clinical Neuroscience*, 10(3), 31-34.
<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3638843/>
- Mitchell, L. M., Stephenson, P. H., Cadell, S., Macdonald, M. E. (2012). Death and grief on-line: Virtual memorialization and changing concepts of childhood death and parental bereavement on the Internet. *Health Sociology Review*, 21(3), 413-431.

Session 9	03-14	Spring Break	
Session 10	03-21	Facing death: living with life-threatening illness Death in the lives of children and adolescents	

Readings for next week:

- DeSpelder & Strickland Chapter 11
- Gutkind *The General*, p. 37-50
- [Hahm, C. H., Chang, S., Tong, H., Meneses, M. A., Yuzbasioglu, R., & Hien, D. \(2014\). Intersection of suicidality and substance abuse among young Asian-American women: Implications for developing interventions in young adulthood, *Advances in Dual Diagnosis*, 7\(2\), 90-104.](#)

Session 10	03-28	Death in the lives of adults	
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Readings for next week:

- DeSpelder & Strickland Chapter 12
- Gutkind *the Deep Truth*, p. 219-232.
- Kvale, E. A., Williams, B. R., Bolden, J. L., Padgett, C. G., & Bailey, F. A. (2004). The Balm of Gilead project: A demonstration project on end-of-life care for safety-net populations. *Journal of Palliative Medicine*, 7(3), 486-493.
- Pash, L., & Arterian, B. M. (2009). Letting go: The experience of dying from cancer in middle-age. In B. Arterian, T. Giske, & P. H. Cone (Eds.), (pp. 109-124). New York, NY: Springer.

Session 11	04-04	Death in the lives of adults	
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Readings for next week:

- Durkee, T., Hadlaczy, G., Westerlund, M., & Carli, V. (2011). Internet pathways in suicidality: A review of the evidence. *Int. J. Environ. Res. Public Health*, 8, 3938-3952.
- Johnson, C., & Sachmann, M. (2014). Familicide-suicide: From myth to hypothesis and toward understanding. *Family Court Review*, 52(1), 100-113.

Session 12	04-11	Suicide	
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Readings for next week: <ul style="list-style-type: none"> • DeSpelder & Strickland Chapter 13 • Christ, G. (2010). Social work contribution to a comprehensive model of mourning: The experience of bereaved families of fire-fighters killed on 9/11/01. <i>Progress in Palliative Care</i>, 18(4), 228-234. • Holst-Warhaft, G. (2000). Disappearances. In <i>The cue for passion: Grief and its political uses</i> (pp. 104-123). Cambridge, MA: Harvard University Press • Gutkind <i>Do You Remember</i>, p. 165-176 			
Session 13	04-18	<i>Risk, perils, and traumatic death</i>	Scrapbook (5 entries) and Essay due
Readings for next week: <ul style="list-style-type: none"> • DeSpelder & Strickland Chapter 14 • Way, P. (2013). A practitioner's view of children making spiritual meanings in bereavement. <i>Journal of Social Work in End-Of-Life & Palliative Care</i>, 9(2-3), 144-157. • McCormick, A. J. (2013). Buddhist ethics and end-of-life care decisions. <i>Journal of Social Work in End-Of-Life & Palliative Care</i>, 9(2-3), 209-225. • Gutkind <i>Yellow Taxi</i>, p. 51-64 			
Session15	04-25	<i>Beyond death/After life</i>	
Readings for next week: <ul style="list-style-type: none"> • DeSpelder & Strickland Chapter 15 • Payne, M. (2010). Inequalities, end-of-life care and social work. <i>Progress in Palliative Care</i>, 18(4), 221-227. • Gutkind, <i>The Business of Grief</i>, p. 177-186 			
Session 16	05-02	<i>The path ahead: Personal and social choices</i>	Last day of classes
Finals Week	05-09	<i>No Final exam</i>	Major paper due

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

J. Expectations for Out-of-Class Study

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

K. Grade Grievances

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

L. Student Support Services

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

The IDEAS Center (2nd Floor of Central Library) offers **free** tutoring to all students with a focus on transfer

students, sophomores, veterans and others undergoing a transition to UT Arlington. To schedule an appointment with a peer tutor or mentor email IDEAS@uta.edu or call (817) 272-6593.

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

M. Librarian to Contact

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

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

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

N. Emergency Exit Procedures

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

O. Drop Policy

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

P. Disability Accommodations

UT Arlington is on record as being committed to both the spirit and letter of all federal equal opportunity legislation, including *The Americans with Disabilities Act (ADA)*, *The Americans with Disabilities Amendments Act (ADAAA)*, and *Section 504 of the Rehabilitation Act*. All instructors at UT Arlington are required by law to provide "reasonable accommodations" to students with disabilities, so as not to discriminate on the basis of

disability. Students are responsible for providing the instructor with official notification in the form of a **letter certified** by the Office for Students with Disabilities (OSD). Only those students who have officially documented a need for an accommodation will have their request honored. Students experiencing a range of conditions (Physical, Learning, Chronic Health, Mental Health, and Sensory) that may cause diminished academic performance or other barriers to learning may seek services and/or accommodations by contacting:

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

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

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

Q. Non-Discrimination Policy

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

R. Title IX Policy

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

S. Academic Integrity

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

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

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

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

T. Electronic Communication

UT Arlington has adopted MavMail as its official means to communicate with students about important deadlines and events, as well as to transact university-related business regarding financial aid, tuition, grades, graduation, etc. All students are assigned a MavMail account and are responsible for checking the inbox regularly. There is no additional charge to students for using this account, which remains active even after

graduation. Information about activating and using MavMail is available at <http://www.uta.edu/oit/cs/email/mavmail.php>.

U. Campus Carry

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

V. Student Feedback Survey

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

W. Final Review Week

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