

**WURZWEILER SCHOOL OF SOCIAL WORK  
YESHIVA UNIVERSITY  
MSW PROGRAM**

**Coping with Loss  
SWK 6702**

**COURSE DESCRIPTION**

Coping with Loss is an elective for students in either their foundation or advanced year. Loss is a pervasive phenomenon throughout the life cycle. The course is designed to explore aspects of social work practice with clients experiencing loss and grief in a variety of situations. The course builds on psychosocial theories of human development as well as the work of internationally recognized experts in grief and bereavement.

Since society generally associates grief with death, grief that accompanies life events such as separation from home (child welfare), divorce, immigration, retirement, homelessness or chronic illness, are frequently not addressed by clients or professionals. As with all human processes, the grieving processes are intertwined with each individual's place in their life span, their strengths, vulnerabilities, cultural orientations, values and resources.

Knowledge and skills concerning loss, grief and bereavement have been evolving in the helping professions rapidly in the last 30 years. Social work has contributed considerably to this evolution.

The focus of this course is to provide a theoretical base for understanding and addressing the psychosocial aspects of loss, death and bereavement. The use of contemporary knowledge for strengthening the coping skills of grieving individuals, families or groups is emphasized. Areas of study include skills of assessment and treatment which are explored using films and personal and case materials. Strategies and interventions in working with a culturally diverse array of vulnerable populations confronting loss, for whom services and programs need to be planned, are highlighted. The ethical dilemmas of disenfranchised grief associated with abortion, AIDS, suicide and physician-assisted suicide, and some stigmatized sexual relationships are also explored.

**I. COURSE COMPETENCY OUTCOMES**

This course will help students achieve the following competencies:

**Competency 1-Demonstrate Ethical and Professional Behavior**

Social workers understand the value base of the profession and its ethical standards, as well as relevant laws and regulations that may impact practice at the micro, mezzo and macro levels. Social workers understand frameworks of ethical decision-making and how to apply principles of critical thinking to those frameworks in practice, research, and policy arenas. Social workers recognize personal values and the distinction between personal and professional values. They also understand how their personal experiences and affective reactions influence their professional judgment and behavior. Social workers understand the professional history, its mission, and the roles and responsibilities of the profession. Social workers also understand the role of other professions when engaged in inter-professional teams. Social workers recognize the importance of life-long learning and are committed to continually updating their skills to ensure they are relevant and effective. Social workers also understand emerging forms of technology and the ethical use of technology in social work practice. Social workers make ethical decisions by applying standards of the NASW Code of Ethics, relevant laws and regulations, models for ethical decision-making, ethical conduct of research, and additional codes as appropriate in context.

Social workers use reflection and self-regulation to manage personal values and maintain professionalism in practice situations. Social workers demonstrate professional demeanor in behavior; appearance; and oral, written and electronic communication. Social workers use technology ethically and appropriately to facilitate practice outcomes, and social workers use supervision and consultation to guide professional judgment and behavior.

**MEASURE1A- Recognize and manage personal values in a way that allows professional values to guide practice.**

**MEASURE 1B- Make ethical decisions by applying standards of the NASW Code of Ethics.**

**MEASURE 1C- Do not tolerate ambiguity in resolving ethical conflicts.**

### **Competency 2- Engage Diversity and Difference in Practice**

Social workers understand how diversity and difference characterize and shape human experience and are critical to the formation of identity. The dimensions of diversity are understood as the intersectionality of multiple factors including but not limited to age, class, color, culture, disability and ability, ethnicity, gender, gender identity and expression, immigration status, marital status, political ideology, race, religion/spirituality, sex, sexual orientation, and tribal sovereign status. Social workers understand that as a consequence of difference, a person's life experiences may include oppression, poverty, marginalization, and alienation as well as privilege, power and acclaim. Social workers also understand the forms and mechanisms of oppression and discrimination and recognize the extent to which a culture's structures and values, including social, economic, political, and cultural exclusions, may oppress, marginalize, alienate, or create privilege and power.

Social workers apply and communicate understanding of the importance of diversity and difference in shaping life experiences in practice at the micro, mezzo and macro levels. Social workers present themselves as learners and engage clients and constituencies as experts of their experiences, and social workers apply self-awareness and self-regulation to manage the influence of personal biases and values in working with diverse clients and constituents.

## **II. LEARNING OBJECTIVES**

1. Discuss theories that underlie the issues of grief, loss and bereavement
2. Analyze reactions to bereavement and loss across the life cycle
3. Examine the impact of culture, ethnicity, and diversity on coping with death
4. Discuss assessment and treatment of grief reactions
5. Develop a self-care plan to prevent compassion fatigue/burnout

## **III. INSTRUCTIONAL METHODS**

Coping with Loss is designed as a lecture/discussion course. Students are expected to actively participate in critical discussions and present relevant material. Films, and professional literature will be used to provide case examples and relevant didactic content.

***\*Each session includes required and recommended readings. Your course instructor will inform you of priority required readings before each class.***

## **IV. COURSE EXPECTATIONS AND GRADING**

Students are expected to attend all classes and to be on time. Class participation is important and there is an expectation that all students will complete the required readings and be prepared for class discussion. Class discussions are meant to enhance the student understanding of content; reading assignments will not be summarized or reviewed in class.

Assignment	Grade Percentage	Due Date
Assignment 1: Personal Reflection Paper	10%	5 <sup>th</sup> Session
Assignment 2: Midterm	30%	9 <sup>th</sup> Session
Assignment 3: Final	35%	13 <sup>th</sup> Session
Class Attendance, Participation & Discussion	25%	Ongoing

A letter grade (A, A-, B+, B, B-, C+, C or F) will be given based on: Quality, scholarship and timeliness of papers & Quality of class participation.

Grading: A= 94-100; A- = 90-93; B+ = 87-89; B= 83-86; B-=80-82; C+ = 75-79; C=70-74 F<74

### COURSE GRADING RUBRIC

<b>Class Participation</b>	Contributes to class discussions by raising thoughtful questions, analyzing relevant issues, building on others' ideas, synthesizing across readings and discussions, expanding the class' perspective, and appropriately challenging assumptions and perspectives <b>33 points</b>	Attends class regularly and <i>sometimes</i> contributes to the discussion in the aforementioned ways. <b>30 points</b>	Attends class regularly but <i>rarely</i> contributes to the discussion in the aforementioned ways. <b>27 points</b>	Attends class regularly but <i>never</i> contributes to the discussion in the aforementioned ways. <b>23 points</b>
<b>Attendance</b>	Always arrives on time and stays for entire class; regularly attends class; all absences are excused; always takes responsibility for work missed; no deadlines missed. <b>33 points</b>	Minimal lateness; almost never misses a class; no unexcused absences. No deadlines missed. <b>30 points</b>	Late to class semi-frequently; misses deadlines. <b>27 points</b>	Late to class frequently misses deadlines <b>23 points</b>
<b>Comportment</b>	Demonstrates excellence in communication, interpersonal skill, respect for the ideas of others and the learning environment, engages in reflective thinking, exemplifies empathy, honesty and integrity, shows respect for diversity, demonstrates ethical conduct, and conducts oneself with a professional demeanor. <b>33 points</b>	Occasionally exhibits excellence in comportment; is almost always respectful towards peers, and the learning environment <b>30 points</b>	Recurring comportment issues behaves in ways that are not always respectful of peers, and the learning environment <b>27 points</b>	Consistent comportment concerns; is often disrespectful to peers and the learning environment <b>23 points</b>

### Texts and Readings for the Course

#### Required Text

Hooyman, N. & Kramer, B. (2008). *Living through loss: Interventions across the life span*. NY: Columbia University Press. ISBN-13: 978-0231122474.

Stillion, J. M. & Attig, T. (Eds.) (2014). *Death, dying, and bereavement: Contemporary perspectives, institutions, and practices*. NY: Springer. ISBN-13: 978-0826171412.

## V. **COURSE REQUIREMENTS**

### **Assignment I: Personal Reflection of Loss** (Due Session 5, 10%)

This assignment requires that the student will write a personal reflection paper in which they are asked to consider a situation involving a personal loss. This may include but is not limited to termination, immigration, relationship termination, miscarriage, out of home placement, loss of employment, death of pet, incarceration, etc.

- 1.) Identify and discuss the major emotional components of this loss. What factors influenced the reactions of the grieving individual/family? (30 points)
- 2.) Identify the influences of diversity and culture on the experience. (30 points)
- 3.) Explain and explore the grief process as it unfolded. What religious, cultural, social understandings of loss helped you to explain/and/or negotiate the experience and the emotional components of the loss? (30 points)
- 4.) Grammar and Scholarly Writing (10 points)

#### **Guidelines:**

- Papers should be 3-4 pages
- You are not expected to use any professional literature in the writing of this paper; it is experiential and requires critical reflective thinking.
- The following criteria will be used for grading: completeness of the assignment; clarity of thought and communication correctness of the language; ability to apply course content; timely submission and use of APA style writing.

### **Assignment II: Analysis of Loss and Grief through Film** (Due Session 9, 30%)

In this midterm paper you are asked to select and view a film dealing with death or loss, in order to apply the concepts that we are learning in class to the film. The film must be approved by the professor and is the basis of the paper. Papers should be 4-6 pages with at least two professional references (this may include our course text or articles from the syllabus).

#### **1.) Discuss in detail your subjective reaction to the film (20 points)**

This requires tuning-in to self and reporting *your emotional reaction to the film*, which be sure to report your personal emotional response and DO NOT summarize the film or re-tell the storyline of the film

#### **2.) Choose a theme/topic that we have covered in class that is demonstrated in the film and explore the psychosocial issues involved, as well as elements of diversity (35 points)**

- a. Clearly report and define your theme/topic of loss or grief (5 points)
- b. What are the psychological, social and spiritual aspects of the loss and grief process as reflected in the film? (10 points)
- c. How do your personal and professional values inform the development of your understanding of the theme that is reflected in the film? (10 points)
- d. What relevant aspects of cultural diversity can you identify related to this theme through the film? (10 points)

- 3.) Imagine you are a social worker engaged in work with a client in the film (35 points)**
- Clearly identify who the client is and report why you chose this person/family/couple as the client (10 points)
  - What was the evidence of the client's need for help in negotiating the grief or mourning process? (10 points)
  - How would you approach working with this client and what approach would you take for your own self-care? (10 points)
  - Report any ethical considerations that you would attend to as the social worker (5)

**4.) APA, Grammar and Scholarly Writing (10 points)**

- Papers should be edited for grammatical errors and will be evaluated based on clarity of thought and critical thinking. This is a scholarly paper and should be written in essay format, which a clear introduction, body and conclusion. Headings may be incorporated into your paper, as permitted by APA guidelines.
- All papers must incorporate APA referencing within text using the author, date method. Papers should abide by APA 7<sup>th</sup> edition guidelines: [https://owl.purdue.edu/owl/research\\_and\\_citation/apa\\_style/apa\\_style\\_introduction.html](https://owl.purdue.edu/owl/research_and_citation/apa_style/apa_style_introduction.html)

**Assignment III: Social Work Assessment and Intervention with Loss and Grief**  
(Due session 13, 35%)

Your final assignment should be 5-7 pages with at least 3 references (i.e., empirical journal articles). You may use articles/text from our class syllabus or any other WWSW course syllabus.

**1.) Analyze a Situation of Loss (30 points)**

Choose a situation of loss to focus your paper on. The situation of loss may be related to a case you are working with, an event/experience that you are interested in researching or a personal experience. Examples include survivors of sexual assault/abuse, child of divorced parents, widow (loss of spouse), divorcee, persons with chronic illness/experiencing disability, retirees, suicide, loss related to a traumatic event such as a car accident, natural disaster, terrorist attack or war, etc.

- Identify and define ONE category of grief/loss from our class that applies to your chosen situation. Explain why your situation of loss is considered to be in this category, using empirical references. Examples include disenfranchised grief, traumatic grief/loss, ambiguous loss, complicated grief, caregiving stress. (15 points)
- Report the circumstances of the loss and surrounding aspects that are significant. Was this a sudden or anticipated loss? What social supports are in place? Are there prior losses or comorbid illness' that are impacting the situation of loss, and how so? Are there known attachment considerations? (15 points)

**2.) Assessment (30 points)**

Report your assessment of resilience related to the situation of loss, as per the framework developed by Hooyman & Kramer (2008). Be sure to include:

- Developmental considerations related to age
- Background characteristics (socioeconomic factors)
- Community and family capacities
- Cultural capacities

**3.) Intervention: Choose ONE of two options (answer either a or b, not both) (30 points)**

- Choose an evidence-based treatment intervention related to your situation of loss that you would recommend and explain why. Examples might include play therapy,

bereavement or support groups, survivors' groups, and individual interventions such as cognitive behavioral or narrative models of intervention.

- i. Discuss your rationale for choosing this evidence-based intervention (10 points)
  - ii. Summarize the major components of the intervention (10 points)
  - iii. Identify cultural and diversity considerations for the intervention based on the situation of loss you have discussed (10 points)
- b.) Choose an existing community program related to your situation of loss that you would recommend and explain why. This might include bereavement programs, hospice, services for veterans of war, or mental health programs that address the situation of loss. You can use a ".org" or the website of an existing program as a reference for this part of your paper.
- i. Discuss your rationale for choosing this program as an intervention in this situation of loss (10 points)
  - ii. Summarize the major components of the intervention (10 points)
  - iii. Identify cultural and diversity considerations for the intervention based the situation of loss you have discussed (10 points)

#### **4.) APA, Grammar and Scholarly Writing (10 points)**

a.) Papers should be edited for grammatical errors and will be evaluated based on clarity of thought and critical thinking. This is a scholarly paper and should be written in essay format, which a clear introduction, body and conclusion. Headings may be incorporated into your paper, as permitted by APA guidelines.

b.) All papers must incorporate APA referencing within text using the author, date method. Papers should abide by APA 7<sup>th</sup> edition guidelines:

[https://owl.purdue.edu/owl/research\\_and\\_citation/apa\\_style/apa\\_style\\_introduction.html](https://owl.purdue.edu/owl/research_and_citation/apa_style/apa_style_introduction.html)

*Late papers are not accepted; tardiness is considered unprofessional behavior. If there is a need to have additional time to submit the work, discuss this with the professor with sufficient time for the professor to make accommodations. Do not wait until the last minute.*

**\*Grading Rubric for Papers:** Please see page 16 for Rubric

## **VI. EVALUATION**

Students are provided opportunity to evaluate doctoral courses. An evaluation form pertaining to the course and instructor will be conducted on-line. There will also be oral discussion of students' perspectives about the course. Evaluation is ongoing and students are encouraged to provide feedback about their learning needs throughout the semester.

**VII. OFFICE OF DISABILITIES SERVICES (ODS)** collaborates with students, faculty and staff to provide reasonable accommodations and services to students with disabilities. The purpose of reasonable academic accommodations is to assure that there is equal access to and the opportunity to benefit from your education at Wurzweiler. It is the student's responsibility to identify himself/herself to the Office of Disabilities Services (ODS) and to provide documentation of a disability. <http://www.yu.edu/Student-Life/Resources-and-Services/Disability-Services/>

## **VIII. E-RESERVES**

Access full text copies of most of the "on reserve" articles for a course from your home computer. You will need Adobe Acrobat to use this service. Your professor will provide you with a password. The link for e-reserves is <http://yulib002.mc.yu.edu:2262/er.php>. Most of the

articles mentioned in the curriculum are available on electronic reserve (E-reserves). You can access the full text articles from your home or from a university computer at no charge.

## ACCESSING E-RESERVES

### FROM CANVAS

1. Go to your class Canvas page.
2. Click the link "Library Resources & E-Reserves" (no password required)

### FROM CAMPUS

1. If you wish to access e-reserves from the library home page ([library.yu.edu](http://library.yu.edu)),
2. Use "**wurzweiler**" all lower case, as the password.
3. If you have problems accessing e-reserves, email: Stephanie Gross, Electronic Reserves Librarian: [gross@yu.edu](mailto:gross@yu.edu) or [ereserves@yu.edu](mailto:ereserves@yu.edu).

### FROM OFF-CAMPUS

1. Go to the library's online resources page: [http://www.yu.edu/libraries/online\\_resources.asp](http://www.yu.edu/libraries/online_resources.asp)
2. Click on E-RES; you will be prompted for your **Off Campus Access Service login** and password.
3. Use "wurzweiler" all lower case, as the password for all courses in all social work programs.
4. If you have problems accessing e-reserves, email: Stephanie Gross, Electronic Reserves Librarian: [gross@yu.edu](mailto:gross@yu.edu) or [ereserves@yu.edu](mailto:ereserves@yu.edu).

## USING E-RESERVES

1. Click on "Search E-RES" or on "Course Index," and search by instructor's name, department, course name, course number, document title, or document author.
2. Click on the link to your course.
3. When the article text or book record appears on the screen, you can print, email, or save it to disk. To view documents that are in PDF format, the computer you are using must have Adobe Acrobat Reader software. You can download it FREE at [www.adobe.com/products/acrobat/readstep2.html](http://www.adobe.com/products/acrobat/readstep2.html)

## IX. PLAGIARISM

All written work submitted by students is to be their own. Ideas and concepts that are the work of others must be cited with proper attribution. The use of the written works of others that is submitted as one's own constitutes **plagiarism** and is a violation of academic standards. The School will not condone **plagiarism** in any form and will impose sanctions to acts of **plagiarism**. A student who presents someone else's work as his or her own work is stealing from the authors or persons who did the original thinking and writing. **Plagiarism** occurs when a student directly copies another's work without citation; when a student paraphrases major aspects of another's work without citation; and when a student combines the work of different authors into a new statement without reference to those authors. It is also **plagiarism** to use the ideas and/or work of another student and present them as your own. It is **NOT plagiarism** to formulate your own presentation of an idea or concept as a reaction to someone else's work; however, the work to which you are reacting should be discussed and appropriately cited. If it is determined that a student has plagiarized any part of any assignment in a course, the student automatically **FAIL** the course. The student also will be placed on Academic Probation and will be referred to the Associate Dean for any additional disciplinary action which may include expulsion. A student may not submit the same paper or an assignment from another class for credit. If students or faculty are concerned that written work is indeed plagiarized, they can use the following "plagiarism checker" websites, easily accessible, and generally free on Google:

[www.grammarly.com/plagiarism\\_checker](http://www.grammarly.com/plagiarism_checker)

[www.dustball.com/cs/plagiarism.checker](http://www.dustball.com/cs/plagiarism.checker) [www.plagtracker.com](http://www.plagtracker.com)

[www.plagium.com/](http://www.plagium.com/)

[www.plagscan.com/seesources/](http://www.plagscan.com/seesources/)

[www.duplichecker.com/](http://www.duplichecker.com/)

As a Wurzweiler student, maintaining good standing in the program is dependent on developing and maintaining high standards of ethical and professional behavior. Students are required to adhere to the Code of Ethics promulgated by the National Association of Social Workers (NASW).

## **X. HIPAA**

In line with HIPAA regulations concerning protected health information, it is important that you understand that any case information you present in class or coursework will need to be de-identified. What this means is that any information that would allow another to identify the person must be changed or eliminated. This includes obvious identifiers such as names and birth dates but may also contain other information that is so unique to the person that it will allow for identification, including diagnosis, race/ethnicity or gender. If diagnosis, race/ethnicity or gender is directly related to the case presentation, it can be included if it will not allow for identification.

## **XI. FERPA & OTHER UNIVERSITY POLICIES**

Wurzweiler's policies and procedures are in compliance with FERPA regulations. Information about FERPA regulations can be found **here**.

Drug-Free University Policy can be found **here**.

Policy Statement on Non-Discrimination, Anti-Harassment, and Complaint procedures can be found **here**.

The University's Computer Guidelines can be found **here**.

## **XII. COURSE SCHEDULE**

### **SESSION 1: INTRODUCTION TO THE COURSE: PERSONAL AWARENESS**

- Contemporary views of death
- Bereavement through the life cycle
- The meaning of loss
- Self-assessment

### **Required Readings**

Attig, T. (2014). Seeking wisdom about mortality, dying, and bereavement. In J. M. Stillion & T. Attig, (Eds.). *Death, dying, and bereavement: Contemporary perspectives, institutions, and practices*. NY: Springer. Chapter 1.

Hooyman, N. & Kramer, B. (2008). *Living through loss: Interventions across the life span*. NY: Columbia University Press. Preface and Introduction; Chapter 2, The grief process; Chapter 3, Resilience and meaning making.

Silverman, P.R. (2013). Lessons I have learned. *British Journal of Social Work*, 43, 216-232.

Zhai, Y. & Du, X. (2020). Loss and grief amidst COVID-19: A path to adaptation and resilience. *Brain, Behavior and Immunity* (87), 80-81.

### **Suggested Readings:**

Barbash, I.J. (2018). Silent space. *JAMA*, 320(11), 1105-1106.

Janssen, J.S. (2015). Deathbed phenomena in hospice care: The social work response. *Social Work Today*, 15(6), 26-32.

Murray, L. Connoly, H. Preston-Shoot & Wigley V. (2008) Constructing resilience: Social workers' understanding and practice. *Health Social Care Community* 16(3), 299-309.



## **SESSION 2 – CAREGIVER STRESS AND CONCERNS; SELF-CARE**

- Bereavement overload
- Compassion fatigue
- Prevention of burn-out
- Development of self-care plan

### Required Readings

- Holmes, M. R., Rentrop, C. R., Korsch-Williams, A., & King, J. A. (2021). Impact of COVID-19 Pandemic on Posttraumatic Stress, Grief, Burnout, and Secondary Trauma of Social Workers in the United States. *Clinical Social Work Journal*, 1-10.
- Hooyman, N. & Kramer, B. (2008). *Living through loss: Interventions across the life span*. NY: Columbia University Press. Chapter 14, Professional awareness and self-care.
- Lee, J. J., & Miller, S. E. (2013). A self-care framework for social workers: Building a strong foundation for practice. *Families in Society*, 94(2), 96-103.
- Vachon, M.L.S. (2014). Care of the caregiver: Professionals and family members. In J. M. Stillion & T. Attig, (Eds.). *Death, dying, and bereavement: Contemporary perspectives, institutions, and practices*. NY: Springer. Chapter 27.

### Suggested Readings:

- Allie, Z., Le Roux, E., Mahlatsi, K., Mofokeng, B., Ramoo, Z-A, Sibiyi, K., Joubert, G., & van Rooyen, J.P. (2018). Bereavement overload and its effects on, and related coping mechanisms of health care providers and ward administrators at National District Hospital in Bloemfontein, Free State. *African Journal of Primary Health Care & Family Medicine*, 10(1) a1652. <https://doi.org/10.4102/phcfm.v10i1.1652>
- Dosser, I. & Nicol, J.S. (2014). Difficult conversations in bereavement. *NRC*, 15(12). 693-697. <https://doi.org/10.12968/nrec.2014.16.12.693>
- Figley, C. R. (1995) Compassion fatigue as secondary traumatic stress disorder: An overview. In C. Figley (Ed), *Compassion fatigue: Coping with secondary traumatic stress disorder in those who treat the traumatized*. NY: Brunner-Routledge. 1-20.

## **SESSION 3 – THEORIES OF GRIEF AND LOSS: FRAMEWORKS AND MODELS;**

### **FACTORS INFLUENCING REACTIONS TO LOSS**

- Theoretical perspectives on loss and grief
- Grief as normal process
- The pathologizing of grief
- Impact of loss on spirituality

### Required Readings

- Hooyman, N. & Kramer, B. (2008). *Living through loss: Interventions across the life span*. NY: Columbia University Press. Chapter 1, Theoretical perspectives on grief.
- Neimeyer, R. (2001) Searching for the meaning of meaning: Grief therapy and the process of reconstruction. *Death Studies* (24), 541-558.
- Worden, J.W. (2014). Theoretical perspectives on loss and grief. In J. M. Stillion & T. Attig, (Eds.). *Death, dying, and bereavement: Contemporary perspectives, institutions, and practices*. NY: Springer. Chapter 7.

### Suggested Readings:

- Hamilton, I.J. (2016). Out of hours: Understanding grief and bereavement. *British Journal of General Practice*, 523. DOI: 10.3399/bjgp16X687325
- Silverman, P.R. (2000) Research, clinical practice and the human experience: Putting the Pieces together. *Death Studies*, 24(6), 469-478

Wilkie, D.J. & Corless, I.B. (2014). Science and practice: Contributions of nurses to end-of-life and palliative care. In J. M. Stillion & T. Attig, (Eds.). *Death, dying, and bereavement: Contemporary perspectives, institutions, and practices*. NY: Springer. Chapter 4.

#### **SESSION 4 – ETHICS AND ETHICAL DILEMMAS IN COPING WITH LOSS**

- Medical ethics
- Social work ethics
- Ethical dilemmas in end-of-life care

##### Required Readings

Attig, T. (2014). The ethics of caring for the dying and the bereaved. In J. M. Stillion & T. Attig, (Eds.). *Death, dying, and bereavement: Contemporary perspectives, institutions, and practices*. NY: Springer. Chapter 6.

Foster, L.&McLellan, M. (2002). Translating psychosocial insight into ethical discussions supportive of families in end-of-life decision-making. *Social Work in Health Care*. 35(3), 37-51.

##### Suggested Readings:

Werth, J.L. Jr. (2014). Legal issues in end-of-life decision making. In J. M. Stillion & T. Attig, (Eds.). *Death, dying, and bereavement: Contemporary perspectives, institutions, and practices*. NY: Springer. Chapter 5.

#### **SESSION 5 – CULTURE AND AFTER DEATH RITUALS**

- Cultural manifestations of grief and loss
- Impact of culture on responses to loss and grief
- Culture as protective or risk factor
- Death rituals and coping with loss

##### Required Readings

Doka, K.J. (2014). Spirituality: *Quo Vadis?* In J. M. Stillion & T. Attig, (Eds.). *Death, dying, and bereavement: Contemporary perspectives, institutions, and practices*. NY: Springer. Chapter 17.

Hardy- Bougere, M. (2008). Cultural manifestations of grief and bereavement: A clinical perspective. *Journal of Cultural Diversity*, 15(2),66-69.

##### Suggested Readings:

Dilmac, J.A. (2018). The new forms of mourning: Loss and exhibition of the death on the internet. *Omega—Journal of Death and Dying*, 77(3) 280–295. DOI: 10.1177/0030222816633240

Harris, J., Hook, M., & English, S. (2006). Different faiths, different perception of public tragedy. In M.E. Lattanzi-Licht & K.J. Doka, K. (Eds.). *Coping with Public Tragedy*. Washington, D.C. Hospice Foundation of America.

Rosenblatt, P.(2007). Grief: What we have learned from cross-cultural studies. In K. Doka, (Ed.). *Living with grief: Before and after the death*. pp. 123-137.

#### **SESSION 6 – TRAUMATIC LOSS**

- Role of social work after disasters
- Unique features of traumatic loss
- Crisis intervention

### Required Readings

- Barlé, N., Wortman, C. B., & Latack, J. A. (2017). Traumatic bereavement: Basic research and clinical implications. *Journal of Psychotherapy Integration, 27*(2), 127.
- Parkes, C.M. (2014). Responding to grief and trauma in the aftermath of disaster. In J. M. Stillion & T. Attig, (Eds.). *Death, dying, and bereavement: Contemporary perspectives, institutions, and practices*. NY: Springer. Chapter 26.
- Pfefferbaum, B., Newman, E. & Nelson, S.D. (2014). Mental health interventions for children exposed to disasters and terrorism. *Journal of Child and Adolescent Psychopharmacology, 24*(1), 24-31.
- Rando, T.A. (2014). When trauma and loss collide: The evolution of intervention for traumatic bereavement. In J. M. Stillion & T. Attig, (Eds.). *Death, dying, and bereavement: Contemporary perspectives, institutions, and practices*. NY: Springer. Chapter 23.

### Suggested Readings:

- Heeke, C., Stammel, N., Heinrich, M., & Knaevelsrud, C. (2017). Conflict-related trauma and bereavement: Exploring differential symptom profiles of prolonged grief and posttraumatic stress disorder. *BMC Psychiatry, 17*(118), 1-10. DOI 10.1186/s12888-017-1286-2
- Rubin, S.S., Witzum, E. & Malkinson, R. (2017). Bereavement and traumatic bereavement Working with the two-track model of bereavement. *Journal of Rational-Emotive Cognitive Behavior Therapy, 24*, 78-87.
- Smid, G. E., Kleber, R. J., Rie, S. M. d. I., Bos, J. B. A., Gersons, B. P. R., & Boelen, P. A. (2015). Brief eclectic psychotherapy for traumatic grief (BEP-TG): Toward integrated treatment of symptoms related to traumatic loss. *European Journal of Psychotraumatology, 6*. doi:http://dx.doi.org.library.capella.edu/10.3402/ejpt.v6.27324

## **SESSION 7 – DISENFRANCHISED GRIEF AND GRIEVERS**

- Definition of disenfranchised grief
- Who are the disenfranchised grievers?
- Grief after life transitions
- Types of disenfranchised grief – pets, divorce, retirement, serious illness, missing person

### Required Readings

- Gitterman, A., & Knight, C. (2019). Non-death loss: Grieving for the loss of familiar place and for precious time and associated opportunities. *Clinical Social Work Journal, 47*(2), 147-155.
- Jordan, J.R. (2014). Grief after suicide: The evolution of suicide postvention. In J. M. Stillion & T. Attig, (Eds.). *Death, dying, and bereavement: Contemporary perspectives, institutions, and practices*. NY: Springer. Chapter 25.
- Patlamazoglou, L., Simmonds, J.G., & Snell, T.L. (2017). Same-sex partner bereavement: Non-HIV-related loss and new research directions. *Omega – Journal of Death and Dying, 1* 19. DOI: 10.1177/0030222817690160.
- Snow, R. (2017). Bereavement without a death. *BMJ, 357*. doi: 10.1136/bmj.j2012
- Ventriglio, A. & Bhugra, D. (2017). Frozen bereavement. *International Journal of Psychiatry, 63*(4), 285-286. DOI: 10.1177/0020764017693031

### Suggested Readings:

- Aloi, J.A. (2011). A theoretical study of the hidden wounds of war: Disenfranchised grief and the impact on nursing practice. *ISRN Nursing, 10*. doi:[10.5402/2011/954081](https://doi.org/10.5402/2011/954081)
- Bailey, E., Krysinska, K., O'Dea, B. & Robinson, J. (2017). Internet forums for suicide: A cross sectional survey of users. *Crisis, 38*(6), 393-402.

- Gray, J.A. & Abendroth, M. (2015). Perspectives of US direct care workers on the grief process of persons with intellectual and developmental disabilities: Implications for practice. *Journal of Applied Research in Intellectual Disabilities*, 29, 468-480.
- Mohanti, B.K. (2017). Grieving the loss of a pet needs the health system recognition. *Journal of Social Work in End-of-Life & Palliative Care*, 13(4), 215-218.
- Valentine, C., Bauld, L., & Walter, T. (2016). Bereavement following substance misuse: A disenfranchised grief. *Omega – Journal of Death and Dying*, 72(4), 283-301. DOI: 10.1177/0030222815625174

## **SESSION 8 – COMPLICATED GRIEF**

- Symptoms of complicated grief
- Risk factors for developing complicated grief
- Interventions for complicated grief
- Spirituality in complicated grief

### Required Readings

- Gesi, C., Carmassi, C., Cerveri, G., Carpita, B., Cremone, I. M., & Dell'Osso, L. (2020). Complicated grief: what to expect after the coronavirus pandemic. *Frontiers in psychiatry*, 11, 489.
- Klingspon, K.L., Holland, J.M., Neimeyer, R.A., & Licktenthal, W.G. (2015). Unfinished business in bereavement. *Death Studies*, 39, 387-398. DOI: 10.1080/07481187.2015.1029143
- Nakajima, S. (2018). Complicated grief: recent developments in diagnostic criteria and treatment. *Philosophical Transactions of the Royal Society B: Biological Sciences*, 373(1754), 20170273.
- Neimeyer, R.A. (2014). Treating complicated bereavement: The development of grief therapy. In J.M. Stillion & T. Attig, T. (Eds.). *Death, dying, and bereavement: Contemporary perspectives, institutions, and practices*. NY: Springer. Chapter 22.

### Suggested Readings:

- Ginzburg, Karni, Geron, Y. & Zolomon, Z. (2002). Patterns of complicated grief among bereaved parents. *Omega Journal of Death and Dying*, 45(2) 119-132.
- Kliem, S., Lohmann, A., Moble, R., Kroger, C., Brahler, E., & Kersting, A. (2018). The latent nature of prolonged grief – a taxometric analysis: Results from a representative population sample. *Psychiatry Research* 260, 400-405.
- Neimeyer, R. A., Burke, L. A., Mackay, M. M., & van Dyke Stringer, J. G. (2010). Grief therapy and the reconstruction of meaning: From principles to practice. *Journal of Contemporary Psychotherapy*, 40(2), 73-83.
- Neimeyer, R.A. & Burke, L.A. (2017). Spiritual distress and depression in bereavement: A meaning-oriented contribution. *Journal of Rational-Emotive Cognitive Behavior Therapy*, 35, 38-59. DOI 10.1007/s10942-017-0262-6
- Newsom, C., Schut, H., Stroebe, M.S., & Wilson, S. (2016), Initial validation of a comprehensive assessment instrument for bereavement-related grief symptoms and risk of complications: The indicator of bereavement adaptation. *PLoS ONE*11(10): e0164005. doi:10.1371/journal.

## **SESSION 9 – TREATMENT APPROACHES**

- Psychotherapy for loss and grief
- Group methods of support
- Non-traditional modalities for coping with loss and grief

### Required Readings

- Bertman, S. (2014). Using the arts and humanities with the dying, bereaved...and ourselves. In J. M. Stillion & T. Attig, (Eds.). *Death, dying, and bereavement: Contemporary perspectives, institutions, and practices*. NY: Springer. Chapter 18.
- Nickrand, H.L. & Brock, C.M. (2016). Culinary grief therapy: Cooking for one series. *Journal of Palliative Medicine*, 20(2), 181-183.
- Trueland, J. (2017). Online bereavement support. *Nursing Standard*, 31(34). 22-23.

#### Suggested Readings:

- Caltabino, N. (2008). The effectiveness of a community group intervention program on adjustment to separation and divorce. *Journal of Divorce & Remarriage*, 48(3), 145-168.
- Griese, B., Burns, M. & Farro, S.A. (2018). *Pathfinders: Promoting healthy adjustment in bereaved children and families*. *Death Studies*, 42(3), 1340142.
- Psaros, C., Kagan, L., Shifren, J.L., Willett, J., Jacquart, J., Alert, M.D., et al. (2015). Mind-body group treatment for women coping with infertility: A pilot study. *Journal of Psychosomatic Obstetrics and Gynecology*, 36(2), 75-83.

### **SESSION 10 – GRIEF AND FAMILIES**

- Needs of grieving families
- Interventions for grieving families
- Caring for the grieving caregiver

#### Required Readings

- Kissane, D.W. (2014). Family support for the dying and bereaved. In J. M. Stillion & T. Attig, (Eds.). *Death, dying, and bereavement: Contemporary perspectives, institutions, and practices*. NY: Springer. Chapter 19.
- Stroebe, M. & Schut, H. (2015). Family matters in bereavement: Toward an integrative intra interpersonal coping model. *Perspectives on Psychological Science*, 10(6), 873-379.

#### Suggested Readings:

- Markin, R.D. & Zilcha-Mano, S. (2018). Cultural processes in psychotherapy for perinatal loss: Breaking the cultural taboo against perinatal grief. *Psychotherapy*, 55(1). 20-26.
- O'Mallon, M.O. (2014). Bereavement: Exploring perceived social support and family relationship of selected family caregivers. *Journal of Hospice and Palliative Nursing*, 116(5), 304-311.

### **SESSION 11 – GRIEF AND CHILDREN**

- Grief and loss in childhood
- Interventions for grieving children
- Interventions for parents of grieving children

#### Required Readings

- Goldman, L. (2014). Supporting grieving children. In J. M. Stillion & T. Attig, (Eds.). *Death, dying, and bereavement: Contemporary perspectives, institutions, and practices*. NY: Springer. Chapter 20.
- Hooyman, N. & Kramer, B. (2008). *Living through loss: Interventions across the life span*. NY: Columbia University Press. Chapter 4, Grief and loss in childhood; Chapter 5, Interventions for grieving children.

#### Suggested Readings:

- Grassetti, S.N., Williamson, A.A., Herres, J., Kobak, R., Layne, C., Kaplow, J.B., & Pynoos, R.S. (2018). Evaluating referral, screening, and assessment procedures for middle school trauma/grief-focused treatment groups. *School Psychology Quarterly*, 33(1), 10-20.
- Lytje, M. (2017). The success of a planned bereavement response – a survey on teacher use of bereavement response plans. *Pastoral Care in Education*, 35(1), 28-38.
- Sharp, K.M., Barrera, M., Fairclough, D.L., Hogan, N., Russell, C., Keim, M., et al. (2018). Grief and growth in bereaved siblings: Interactions between different sources of social support. *School Psychology Quarterly*, 33(3), 363-371.
- Silverman, P.R. & Worden, J.W. (1992). Children's reactions in the early months after parental loss. *American Journal of Orthopsychiatry*, 62(1). 93-104.

## **SESSION 12 – GRIEF AND ADOLESCENTS**

- Grief and loss in adolescence
- Interventions for grieving adolescents
- Interventions for parents of grieving adolescents

### Required Readings

- Hooyman, N. & Kramer, B. (2008). *Living through loss: Interventions across the life span*. NY: Columbia University Press. Chapter 6, Grief and loss in adolescence; Chapter 7, Interventions for grieving adolescents.
- Keenan, A. (2014). Parental loss in early adolescence and its subsequent impact on adolescent development. *Journal of Child Psychotherapy*, 40(1), 20-35.
- Worden, J.W. (2008). Grieving children and adolescents. Lessons from the harvard bereavement study pp 125-137. In K.J. Doka & A. Tucci (Eds) *Living with grief: Children and adolescents*. Washington DC. Hospice Foundation of America.

### Suggested Readings:

- Andriessen, K., Mowll, J., Lobb, E., Draper, B., Dudley, M., & Mitchell, P.B. (2018). "Don't bother about me." The grief and mental health of bereaved adolescents. *Death Studies*, 42(10), 607-615.
- Hansen, D.M., Sheehan, D.K., Stephenson, P.S., & Mayo, M.M. (2016). Parental relationships beyond the grave: Adolescents' descriptions of continued bonds. *Palliative and Supportive Care*, 14, 358-363.

## **SESSION 13 – GRIEF AND YOUNG ADULTS**

- Grief and loss in young adulthood
- Interventions for grieving young adults
- Interventions for parents of grieving young adults

### Required Readings

- Hooyman, N. & Kramer, B. (2008). *Living through loss: Interventions across the life span*. NY: Columbia University Press. Chapter 8, Grief and loss in young adulthood; Chapter 9, Interventions for grieving young adults.
- Murphy, S.A., Johnson, L., Clark & Weber, N.A. (2002) Coping strategies following a child's violent death: How parents differ in their responses. *Omega Journal of Death and Dying*, 45(2), 99-118.
- Wright, P.M. (2015). Adult sibling bereavement. *Illness, Crisis & Loss*, 24(1), 34-34.

### Suggested Readings:

- Brown, J.M. (2013). Recurrent grief in mothering a child with an intellectual disability to adulthood: Grieving is the healing. *Child & Family Social Work*, 113-122. doi:10.1111/cfs.12116.
- Jaffe, J. (2017). Reproductive trauma: Psychotherapy for pregnancy loss and infertility clients from a reproductive story perspective. *Psychotherapy*, 54(4), 380-385.

### **SESSION 14 – GRIEF AND OLDER ADULTS**

- Grief and loss in adulthood
- Interventions for grieving adults
- Interventions for children of grieving adults

### Required Readings

- Hooyman, N. & Kramer, B. (2008). *Living through loss: Interventions across the life span*. NY: Columbia University Press. Chapter 10, Grief and loss in middle adulthood, Chapter 11, Interventions for grieving midlife adults, Chapter 12, Grief and loss in old age, Chapter 13, Interventions for grieving older adults.
- Silverman, P.R. & Thomson, S. (2018). When men grieve: Widowers' stories of coping with their wives' deaths. *Omega-Journal of Death and Dying*, 77(2), 133-153.
- Wallace, C. L., Wladkowski, S. P., Gibson, A., & White, P. (2020). Grief during the COVID-19 pandemic: considerations for palliative care providers. *Journal of pain and symptom management*, 60(1), e70-e76.

### Suggested Readings:

- Fried, E.J., Arjadi, R., Amshoff, M., Tuerlinckx, F., Bockting, C., Borshoom., D., Cramer, A.O.J., Epskamp, S., & Carr, D. (2015). From loss to loneliness: The relationship between bereavement and depressive symptoms. *Journal of Abnormal Psychology*, 124(2), 256-265.
- Prior, A., Fenger-Gron, M., Davydow, D.S., Olsen, J., Li, J., Guldin, M.B., & Vestergaard, M. (2017). Bereavement, multimorbidity and mortality: A population-based study using bereavement as an indicator of mental stress. *Psychological Medicine*, 48, 1437-1443.

## Grading Rubric for Papers:

	<b>Advanced Competence</b> (A= 94-100; A- = 90-93)	<b>High Competence</b> (B+ = 87-89; B= 83-86)	<b>Fair Competence</b> (B-=80-82; C+ = 75-79)	<b>Pre- Competence</b> (C=70-74 F<74)
<b>Intro &amp; conclusion</b>	The intro guides the reader smoothly and logically into the paper with a clear organized structure. The conclusion synthesizes key points suggesting perspectives relevant to the theme.	The intro clearly identifies the central theme and provides a good organizational structure. The conclusion synthesizes key points.	The intro identifies the central theme though not sufficiently and does not guide the reader into the paper. The conclusion restates the same points as the intro paragraph without reframing.	The intro does not have a discernable theme and does not guide the reader into the body of the paper. The conclusion is missing, or restates the intro paragraph verbatim.
<b>Content &amp; depth of analysis</b>	Paper goes beyond the assignment exploring the topic with depth. Paper shows a strong grasp of social work principles; with clear integration of theory and practice.	Paper fully meets the parameters of the assignment but does not exceed them. Paper demonstrates a good integration of theory and practice but with some awkwardness.	Paper does not address some aspects of the assignment; and/or demonstrates a somewhat shaky grasp of social work principles.	Paper does not address the assignment, and demonstrates a very basic understanding of social work principles.
<b>Integration of class discussions and course readings</b>	Paper evidences course readings & discussions. Demonstrating a firm understanding of course content and readings.	Paper shows some evidence of course readings and discussions.	Paper shows some evidence of course readings and discussions though not clearly; with minor inaccuracies.	Paper misrepresents class discussions and readings
<b>Literature</b>	Literature supporting central points is detailed and well-chosen. The discussion and literature are integrated with some opposing views considered.	Literature supporting central points is well chosen, but somewhat weak. The discussion and literature articulate opposing viewpoints.	There are minimal citations and the literature chosen is not particularly relevant. There is little connection between the discussion and the literature.	There are few citations and the literature chosen is not relevant to the discussion
<b>Organization &amp; Clarity</b>	Organization is logical and apparent with connections among paragraphs clearly articulated. Transitions between paragraphs are smooth. Wording is unambiguous. Sentence structure is clear.	Organization is logical and apparent, but transitions between paragraphs are not consistently smooth; all but a few paragraphs connect with clarity. Paper is unambiguous. Sentence structure is mostly clear.	Organization can only be discerned with effort. Not all parts of the paper fit the organizational structure. There is no logical connection between many paragraphs. Wording is ambiguous Sentence structure confusing.	Organization of the paper as a whole is not logical or discernable. Throughout the paper, wording is ambiguous. Sentence structure is consistently confusing.
<b>Mechanics</b>	Paper is formatted well. Grammar is perfect. Quotes are all properly attributed and cited.	Minor spelling or grammatical errors. Quotes are all properly attributed and cited.	Many spelling and grammatical errors. In a few places, quotes are not attributed and cited.	Paper is unacceptably sloppy. And quotes are frequently not attributed or improperly cited.

### XIII. BIBLIOGRAPHY

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Allie, Z., Le Roux, E., Mahlatski, K., Mofokeng, B., Ramoo, Z-A, Sibiyi, K., Joubert, G., & Rooyen, J.P. (2018). Bereavement overload and its effects on, and related coping mechanisms of health care providers and ward administrators at National District Hospital in Bloemfontein, Free State. *African Journal of Primary Health Care & Family Medicine*, 10(1) a1652. <https://doi.org/10.4102/phcfm.v10i1.1652>

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- the impact on nursing practice. *ISRN Nursing*, 10. doi:10.5402/2011/954081  
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- Aoun, S.M., Breen, L.J., Howling, D.A., Rumbold, B., McNamara, B., & Hegney, D. (2015). Who needs bereavement support: A population based survey of bereavement risk and support need. *PLoS ONE*, 10(3): e0121101. doi:10.1371/journal.pone.0121101
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- Attig, T. (2014). The ethics of caring for the dying and the bereaved. In J. M. Stillion & T. Attig, (Eds.). *Death, dying, and bereavement: Contemporary perspectives, institutions, and practices*. NY: Springer. Chapter 6.
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- Beale, L. (2010) Dealing with grief and loss in war. Trauma and Awareness Treatment Center <http://www.traumaawareness.org/id32html>.
- Beder, J. (2004) *Voices of bereavement: A casebook for grief counselors*. NY: Brunner Routledge.
- Benore, E. R., & Park, C. L. (2004). Death-specific religious beliefs and bereavement: Belief in an afterlife and continued attachment. *The International Journal for the Psychology or Religion*, 14(1), 1-22.
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- Bluebond-Langer. (2000). *In the shadow of illness: Parents and siblings of the chronically ill child*. N.J.: Princeton, University Press.
- Bonnano, G. A (2004). Loss, trauma and human resilience. Have we underestimated the human capacity to thrive after extremely aversive events.? *American Psychologist* 59(1) 20-28.
- Bonanno, G.A. (2010). *The other side of sadness: What the new science of bereavement tells us about life after loss*. NY: Basic Books; Reprint edition (December 28, 2010).
- Bowlby J. (1980) *Attachment and Loss*, Volume 3: Loss. Hogarth Press, London. Brown, J.M. (2013). Recurrent grief in mothering a child with an intellectual disability to adulthood: Grieving is the healing. *Child & Family Social Work*, 113-122. doi:10.1111/cfs.12116.

- Caltabino, N. (2008). The effectiveness of a community group intervention program on adjustment to separation and divorce. *Journal of Divorce & Remarriage*, 48(3), 145-168
- Carter, L. (2016). *Understanding our role in bereavement. International Journal of Childbirth Education*, 31(4), 28-30.
- Christ, G. H., Siegel, K., & Christ, A. E. (2002). Adolescent grief: 'it never really hit me...until it actually happened'. *JAMA: Journal of the American Medical Association*, 288(10), 1269-1278.
- Clute, M.A. (2017). Living disconnected: Building a grounded theory view of bereavement for adults with intellectual disabilities. *Omega-Journal of Death and Dying*, 76(1), 15-34.
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- Degeneffe, C., Lee, G. (2010). Quality of life after traumatic brain injury: Perspective of adult siblings. *Journal of Rehabilitation*, 76(4), 27-36.
- Dilmac, J.A. (2018). The new forms of mourning: Loss and exhibition of the death on the internet. *Omega—Journal of Death and Dying*, 77(3) 280–295. DOI: 10.1177/0030222816633240
- Doka, K.J. (Ed.). (2002). *Disenfranchised grief: New Directions, challenges and strategies practice*. Champaign, IL. Research Press.
- Doka, K. J. (2004). *Living with grief: Alzheimer's disease*. Washington DC: Hospice q Foundation of America.
- Doka, K.J. (Ed) (2007). *Living with grief: Before and after the death*. Washington, DC: Hospice Foundation of America.
- Doka, K.J. & Martin T.L. (2010). *Grieving beyond gender: Understanding the ways men and women mourn*. Revised edition. NY: Routledge, pp. 4-12.
- Doka, K.J. (2014). Spirituality: *Quo Vadis?* In J. M. Stillion & T. Attig, T. (Eds.). *Death, dying, and bereavement: Contemporary perspectives, institutions, and practices*. NY: Springer. Chapter 17.
- Dosser, I. & Nicol, J.S. (2014). Difficult conversations in bereavement. *NRC*, 15(12). 693-697. <https://doi.org/10.12968/nrec.2014.16.12.693>
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- Ferrell, B. (2018). Grief and bereavement. *Journal of Hospice & Palliative Nursing*, 20(4), 319-320. DOI: 10.1097/NJH.0000000000000473.
- Ferszt, G. G., Salgado, D., DeFedele, S., & Leveillee, M. (2009). Houses of healing: A group intervention for grieving women in prison. *The Prison Journals*, 89(1), 46-64
- Field, N.P.

- Gao, B., & Paderna, L. (2005). Continuing bonds in bereavement: An attachment theory-based perspective. *Death Studies, 29*, 277-299.
- Figley, C. R. (1995) Compassion Fatigue as secondary traumatic stress disorder: An overview. In C. Figley (Ed), *Compassion Fatigue: Coping with secondary traumatic stress disorder in those who treat the traumatized*, pp 1-20. NY: Brunner-Routledge.
- Foster, L.&McLellan, M. (2002). Translating psychosocial insight into ethical discussions supportive of families in end-of-life decision-making. *Social Work in Health Care, 35*(3), 37-51.
- Fried, E.J., Arjadi, R., Amshoff, M., Tuerlinckx, F., Bockting, C., Borshoom., D., Cramer, A.O.J., Epskamp, S., & Carr, D. (2015). From loss to loneliness: The relationship between bereavement and depressive symptoms. *Journal of Abnormal Psychology, 124*(2), 256-265.
- Ginzburg, Karni, Geron, Y. & Zolomon, Z. (2002) Patterns of complicated grief among bereaved parents. *Omega Journal of Death and Dying, 45*(2) 119-132.
- Goldman, L. (2014). Supporting grieving children. In J. M. Stillion & T. Attig, T. (Eds.). *Death, dying, and bereavement: Contemporary perspectives, institutions, and practices*. NY: Springer. Chapter 20.
- Grassetti, S.N., Williamson, A.A., Herres, J., Kobak, R., Layne, C., Kaplow, J.B., & Pynoos, R.S. (2018). Evaluating referral, screening, and assessment procedures for middle school trauma/grief-focused treatment groups. *School Psychology Quarterly, 33*(1), 10-20. Gray, J.A. &
- Abendroth, M. (2015). Perspectives of US direct care workers on the grief process of persons with intellectual and developmental disabilities: Implications for practice. *Journal of Applied Research in Intellectual Disabilities, 29*, 468-480.
- Griese, B., Burns, M. & Farro, S.A. (2018). *Pathfinders: Promoting healthy adjustment in bereaved children and families. Death Studies, 42*(3), 1340142.
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- Hamilton, I.J. (2016). Out of hours: Understanding grief and bereavement. *British Journal of General practice, 523*. DOI: 10.3399/bjgp16X687325
- Hansen., D.M., Sheehan, D.K., Stephenson, P.S., & Mayo, M.M. (2016). Parental relationships beyond the grave: Adolescents' descriptions of continued bonds. *Palliative and Supportive Care, 14*, 358-363.
- Hardy- Bougere, M. (2008). Cultural manifestations of grief and bereavement: A clinical perspective. *Journal of Cultural Diversity, 15*(2),66-69.
- Harris, J., Hook, M., & English, S. (2006). Different faiths, different perception of public tragedy. In M.E. Lattanzi-Licht & K.J. Doka, K. (Eds.). *Coping with Public Tragedy*. Washington, D.C. Hospice Foundation of America.

- Heeke, C., Stammel, N., Heinrich, M., & Knaevelsrud, C. (2017). Conflict-related trauma and bereavement: Exploring differential symptom profiles of prolonged grief and posttraumatic stress disorder. *BMC Psychiatry*, 17(118), 1-10. DOI 10.1186/s12888-017-1286-2
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- Hope, R. M., & Hodge, D. M. (2006). Factors affecting children's adjustment to the death of a parent: The social work professional's viewpoint. *Child & Adolescent Social Work Journal*, 23(1), 107-126.
- Jaffe, J. (2017). Reproductive trauma: Psychotherapy for pregnancy loss and infertility clients from a reproductive story perspective. *Psychotherapy*, 54(4), 380-385.
- Janssen, J.S. (2015). Deathbed phenomena in hospice care: The social work response. *Social Work Today*, 15(6), 26-32.
- Jaycox, L.H., & Tanielian, T. (2008) *Invisible wounds of war; Psychological and cognitive injuries, their consequences, and services to assist recovery*. Santa Monica, CA: RAND Corporation.
- Jordan, J.R. (2014). Grief after suicide: The evolution of suicide postvention. In J. M. Stillion & T. Attig, T. (Eds.). *Death, dying, and bereavement: Contemporary perspectives, institutions, and practices*. NY: Springer. Chapter 25.
- Keenan, A. (2014). Parental loss in early adolescence and its subsequent impact on adolescent development. *Journal of Child Psychotherapy*, 40(1), 20-35.
- Kissane, D.W. (2014). Family support for the dying and bereaved. In J. M. Stillion & T. Attig, T. (Eds.). *Death, dying, and bereavement: Contemporary perspectives, institutions, and practices*. NY: Springer. Chapter 19.
- Klasen, M., Bhar, S.S., Ugalde, A. & Hall, C. (2017). Clients' perspectives on outcomes and mechanisms of bereavement counselling: A qualitative study. *Australian Psychologist*, 52, 363-371.
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