

**WURZWEILER SCHOOL OF SOCIAL WORK
YESHIVA UNIVERSITY**

**Social Work in Health Care
SWK 6241**

Christine Vyshedsky, PhD

COURSE DESCRIPTION

This course provides the student with a conceptual, ethical and practice framework for social work practice in health care. It provides an overview of the United States health care system, the unique knowledge and skill base of social work in health care, the biopsychosocial/spiritual impact of illness on patients and their family members/support system and the special psychosocial needs of populations most often served in medical social work. The course also provides an overview of common ethical dilemmas unique to social work practice in health care. This course is linked to course content in other first year courses such as Human Behavior in Social Environment, Foundations of Social Work Practice I & II, which aim to sensitize students to social contexts and their impact on individual, group and community functioning. There are no prerequisites for this elective.

I. LEARNING OBJECTIVES

At the conclusion of this course, students will be able to:

1. Describe how the health care system in the United States is organized.
2. Understand how health care systems in the United States are accessed and paid for.
3. Represent the unique role, skills, knowledge and value base of social work in the health care system.
4. Demonstrate the ability to apply the biopsychosocial/spiritual model in assessment and intervention.
5. Acknowledge the nature of chronic illness and its psychosocial impact on the individual and family.
6. Differentiate and recognize the diverse specialties and settings for the delivery of health care social work.

7. Explore the psychosocial impact and needs of clients and families experiencing specific illnesses and needs, including palliative and end of life care.
8. Examine the ethical issues confronting social workers in health care settings.

II. INSTRUCTIONAL METHODS

This course will include lecture material, case studies, and experiential group exercises, as well as independent research and writing. All students are expected to keep up to date with the reading assignments, which will serve as a background for lectures, class discussion and group activities.

III. COURSE EXPECTATIONS AND GRADING

There are two written assignments: a midterm and a final. There will also be class participation assignments that will be discussed in class. Basic requirements of assignments are included below. **Late papers can result in lower grades (reduction of half a grade per week).**

Please note that attendance is mandatory. Students missing more than two classes are at risk of failure for the course.

Format for Written Assignments

Papers should conform to APA 7th Edition (including page numbers, a title page and a reference page). Papers must draw from relevant literature in social work and other health care disciplines, and include citations and a reference page.

Each paper requires a minimum of 7 sources; at least 5 must be from non-assigned readings from the professional literature.

Grading Criteria

A letter grade (A, A-, B+, B, B-, C+, C or F) will be based on:

- Quality and scholarship of papers, including promptness and integration of materials: 80%
- Quality of class participation, including attendance: 20%

A breakdown of the total grade is as follows:

Assignment 1 – Midterm Paper & Presentation	40%
Assignment 2 – Final Paper	40%
Attendance & Participation	20%

Texts for the Course

- Beder, J. (2006). Hospital social work: The interface of medicine and caring (1st Ed.). New York: Routledge.
ISBN: 0415950678; Retail List Price: \$41.95 **Entire e-book available through YU Libraries**
- Moniz, C. & Gorin, S. (2014). Health care policy and practice: A biopsychosocial perspective (4th Ed.). New York: Routledge
ISBN: 978-1-3179-38286 **Entire e-book available through YU Libraries**
- Dziegielewski, S.F. (2013) The changing face of health care and social work: Opportunities and challenges for professional practice (3rd ED) New York: Springer
ISBN 978-0-8261-19842-1 **Entire e-book available through YU Libraries**
- Gehlert, S. & Browne, T.A. (2012). Handbook of Health Social Work. Hoboken (2ne ED) NJ: Wiley Publishers. **Entire e-book available through YU Libraries**

Note: All required article readings are on-line through electronic reserve (ERES). Your instructor will distribute the password and directions to access these readings.

Course Requirements

Each student is responsible for developing two assignments that address issues as they relate to a chosen healthcare topic/population. Both will explore the psychosocial tasks facing a particular population affected by the impact of illness, and the knowledge base that informs a biopsychosocial assessment of a person facing a particular illness. Some examples of topics and populations include:

- HIV/AIDS
- Palliative, hospice and end of life care
- Oncology (adult or pediatric)
- Elder/long term care
- COVID-19
- Women's issues
- LGBTQ community
- African American community
- Jewish community
- Latinx community

For both assignments, **your topic must be approved by the professor**. At the end of this syllabus is a bibliography of recommended references for the midterm and final papers.

Assignment 1 – Due Session 7 (Midterm Assignment)

Each student will be required to submit a midterm **paper** as well as participate in a brief **presentation** exploring a particular healthcare illness or issue.

Paper:

Respond to and provide the following information in your paper:

1. Provide relevant statistics/data on the scope and size of the illness/issue that is the focus of your paper.

Excellent sources of data and information are available from:

- US Centers for Disease Control and Prevention(CDC) (www.cdc.gov);
- The CDC's Morbidity and Mortality Weekly Report (MMWR)
<https://www.cdc.gov/mmwr/index.html> (www.cdc.gov.mmwr)
- The Robert Wood Johnson Foundation (www.rwjf.org)
- The Kaiser Family Foundation (www.kff.org).

2. How might the nature and scope of the illness/condition impact the patient?
3. How might the healthcare delivery system impact the patient's experience of the illness/condition?
4. How might sociocultural factors such as race, ethnicity, religion and/or gender, and/or intersectionality of these factors, impact the patient's experience of the illness/condition?
5. What might a biopsychosocial assessment for a patient facing this illness/condition include?
6. What role would a social worker play in the life of a patient facing this illness/condition?

Papers should be NO MORE than 6-8 pages. Please refer to the Course Expectations and Grading section above for number of sources and formatting information.

Presentation:

Provide a 5-7 minute presentation of your findings in understanding this issue/illness. Provide the following information:

1. Provide a few relevant statistics/data on the scope and size of the illness/issue that is the focus of your paper.
2. Provide some information on highlights of the sociocultural factors that may impact the patient's experience.
3. What was the most significant information that you learned while doing this research?
4. What would you like social workers to be aware of and take special consideration of while working with a patient experiencing this issue/illness?

You can create and share slides with the class as part of your presentation – remember the time limit!

Assignment 2 – Due Session 13 (Final Assignment)

Choose a specific population or community in need of comprehensive health care and an example of an illness/issue that impacts this specific population. (This should be different from the one on which you wrote your midterm paper). Please provide the following:

1. Describe the biological basis of the illness (briefly).
2. Discuss the sociocultural factors that impact an individual with this illness from this population or community.
3. Discuss the psychosocial impact of the illness for the individual and family/loved ones.
4. What should go into a social work assessment?
5. What should be anticipated as a possible treatment plan that would be most responsive to those facing this illness?
6. What potential ethical dilemmas might be present when working with this population or community?

STUDENTS WITH DISABILITIES

The Office of Disability Services (ODS) collaborates with students, faculty and staff to provide reasonable accommodations and services to students with disabilities.

<http://www.yu.edu/Student-Life/Resources-and-Services/Disability-Services/>

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.

Student Responsibilities

- Register with the Office of Disability Services (ODS).
- Provide current, written documentation from a qualified practitioner that describes the nature of the disability, functional limitations associated with the disability, severity of these limitations, and recommended reasonable accommodations.
- Review accommodation requests with ODS.
- Submit accommodation letters to faculty and discuss reasonable accommodations at the start of the semester.
- Communicate with faculty to arrange each exam accommodation at least ONE WEEK before the exam.
- File documentation with appropriate individuals to request accommodations for final exam period.
- Alert the Office of Disability Services if any difficulties are encountered regarding the implementation of accommodations.

Getting Started

Students in Yeshiva University who wish to receive accommodations must self disclose by registering with The Office of Disability Services (ODS). ODS has established the following process for registration:

- Complete an [Intake form](#).
- Gather and submit current documentation of your disability.
- To register as a student with a learning disability or ADD/ADHD, you must submit a current psycho-educational or neuro-psychological evaluation. For all other disabilities you may submit documentation completed by a qualified health professional/clinician. Please refer to our [Disability Documentation Guidelines](#) and choose the one specific to your disability to use as a guide.
- After you have submitted the Intake form and disability documentation, ODS will be happy to meet with you to discuss reasonable accommodations and other supports available to you at Yeshiva University.
- Each semester, you will meet with ODS to discuss accommodations for your courses and any accessibility needs. You will be given accommodation letters to submit to your professors.

Accommodation letters must be submitted to your professors as soon as they are received.

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),
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 or ereserves@yu.edu.

From Off-Campus

1. Go to the library’s online resources page:
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 or 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

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 apply sanction 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. Any student who can be shown to have plagiarized any part of any assignment in a course will automatically FAIL the course and will be placed on Academic Probation and will be referred to the Associate Dean for 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

www.dustball.com/cs/plagiarism.checker www.plagtracker.com

www.plagiump.com/

www.plagscan.com/seesources/

www.duplchecker.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).

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.

FERPA

Wurzweiler's policies and procedures are in lie with FERPA regulations. In accordance with the provisions of the Family Educational Rights and Privacy Act of 1974, as amended (Section 438 of the General Educational Provisions Act, 20 USC 1232g), also

known as FERPA, the University has adopted policies to protect the privacy rights of its "Students" with respect to their "Education Records," in each case as defined below. FERPA affords Students certain rights of access to their Education Records and limits disclosure to third parties unless the Student provides written consent. In certain circumstances, disclosure is permitted without the Student's permission.

COURSE OUTLINE

UNIT I: INTRODUCTION TO THE US HEALTHCARE SYSTEM: ITS HISTORY AND WHERE WE STAND NOW (SESSIONS 1-3)

Learning objectives covered: 1, 2, 6

Learning Themes

This unit provides a historical overview of health care services in the United States, including its structure, organization and delivery of health care, managed care, Affordable Care Act and access to care.

Required Readings

Beder, J. (2006). *Hospital social work: The interface of medicine and caring*. New York: Routledge. Chapter 1

Moniz, C. & Gorin, S. (2014). *Health care policy and practice: A biopsychosocial perspective*. Boston: Allyn & Bacon. Chapters 1, 2, 4, 9

Dziegielewski, S.F, (2013). *The changing face of health care social work: Opportunities and challenges for professional practice* (3rd Ed.) Chapters 1 & 3

Recommended Readings

Moniz, C. & Gorin, S (2014). *Health care policy and practice: A biopsychosocial perspective*. Boston: Allyn & Bacon. Chapters 5, 6, 7

UNIT II: THE UNIQUE ROLE OF SOCIAL WORK IN HEALTH CARE (SESSIONS 4-6)

Learning objectives covered: 2, 3, 5, 6

Learning Themes

This unit focuses on a historical overview of social work in health care and a conceptual framework of social work in health care; also examined are the roles, responsibilities, and settings of social workers in the healthcare system.

Required Readings

Beder, J. (2006). *Hospital social work: The interface of medicine and caring*
Chapters 3 & 4

Gehlert, S., & Browne, T.A. (2012). *Handbook of health social work (2nd Ed.)*
Chapters 1, 2, 6

Dziewielewski, S.F. (2013) *The changing face of health care social work: Opportunities and challenges for professional practice (3rd Ed.)* Chapters 5 & 6

Recommended Readings

Cannon, I. (1951). Fifty years of medical progress: Medicine as a social instrument.
The New England Journal of Medicine, 244(53), 717-724.

McAlynn, M & McLaughlin, J. (2008). Key factors impeding discharge planning in hospital social work: An exploratory study. *Social Work in Health Care*, 46(3), 1-27.

UNIT III: BIOPSYCHOSOCIAL ASSESSMENT AND INTERVENTIONS CENTERED AROUND THE IMPACT OF ILLNESS (SESSIONS 7-9)

Learning objectives covered: 2, 3, 4, 5

Learning Themes

This unit focuses on understanding coping and adaptation related to illness. It will include an overview of the impact of acute and chronic illness, psychosocial assessment, diagnosis, treatment planning and intervention with the patient and family/support system.

REQUIRED READINGS

Gehlert, S. & Browne T.A. (2012). *Handbook of Health Social Work (2nd Ed.)*
Chapters 8, 10, 11, 13

Dziewielewski, S.F. (2013) *The changing face of health care social work: Opportunities and challenges for professional practice (3rd Ed.)* Chapters 5, 6, 8

Germain, C. (1984) *Social Work in Health Care: An ecological perspective*. Chapter 5

Recommended Readings

Leahy, M. (1985). Intervening with families with chronic illness. *Family Systems Medicine*, 3(1), 60-69.

Mailick, M. (1979). The impact of severe illness on the individual and family: An overview. *Social Work in Health Care*, 5(2), 117-125.

Schneider, R. (2007). Group bereavement support for spouses who are grieving the loss of a partner to cancer. *Social Work with Groups*, 29(2/3), 259-278.

UNIT IV: THE PSYCHOSOCIAL ISSUES AND NEEDS OF ILLNESSES FREQUENTLY SEEN IN MEDICAL SOCIAL WORK (SESSIONS 10-12)

Learning objectives covered: 3, 4, 5, 6, 7

Learning Themes

This unit examines the psychosocial impact of illness issues, highlighting specific illnesses and health conditions.

Required Readings

Beder, J. (2006). *Hospital social work: The interface of medicine and caring*. Chapters 5, 7, 8, 9, 12

Dziewielewski, S.F. (2013) *The changing face of health care social work: Opportunities and challenges for professional practice (3rd Ed.)* Chapters 9, 10, 11, 12

Recommended Readings

Gehlert, S. & Browne T.A. (2012). *Handbook of Health Social Work (2nd Ed.)* Chapters 18, 21, 22, 23

UNIT V: ETHICAL ISSUES FOR THE SOCIAL WORKER IN HEALTH CARE, INEQUALITY, AND CULTURAL COMPETENCY (SESSIONS 13-14)

Learning objectives covered: 3, 4, 5, 6, 7, 8

Learning Themes

This final unit examine medical advances in social work practice. It also explores ethical issues connected to life-sustaining treatments, confidentiality, HIPAA, quality assurance, supervision, advance care planning and life supports. Finally, it addresses and explores disparities in health care and explores the roles of social workers as advocates for change.

Required Readings

Dziewielewski, S.F. (2013) *The changing face of health care social work: Opportunities and challenges for professional practice* (3rd Ed.) Chapter 4

Gehlert, S. & Browne T.A. (2012). *Handbook of Health Social Work* (2nd Ed.) Chapter 3

Recommended Readings

Beckerman, N. L. (1996). Advanced medical technology: The ethical implications for social work practice with the dying. *Practice*, 8 (3), 5-18.

Moniz, C. & Gorin, S. (2014). *Health care policy and practice: A biopsychosocial perspective*. Chapters 9, 10, 11

BIBLIOGRAPHY

Altpeter, M. (1998). Promoting breast cancer screening in rural, African American communities. *Health & Social Work*, 23(2), 104-116.

Anonymous (1998). Social work after the Americans with Disabilities Act: New challenges and opportunities for social service professionals. *Adolescence*, 33(130), 500.

Auslander, W. (2000). The short-term impact of a health promotion program for low-income African Americans. *Research on Social Work Practice*, 10(1) 78-98.

Beauchamp, T., & Childress, J. (2001). *Principles of biomedical ethics*, 5th Edition. New York: Oxford University Press.

Beder, J. (1999). Evaluation research on the effectiveness of social work intervention with dialysis patients: The first three months. *Social Work in Health Care*, 30(1), 15-30.

- Beckerman, N.L., Gelman, S.R. (2000). A shift in HIV reporting practices: A biopolitical analysis. *Journal of Health & Social Policy*, 12(2), 78-87.
- Beckerman, N.L., Letteney, S., Lorber, K. (2000). Key emotional issues for couples of mixed HIV status. *Social Work in Health Care*, 31(4), 25-41.
- Berkman, B. (1999). Standardized screening of elderly patients' needs for social work assessment in primary care: Use of the SF-36. *Health & Social Work*, 24(1), 9-17.
- Bonuck, K. (1992). AIDS and families: Cultural, psychosocial and functional impacts. *Social Work in Health Care*, 18(2), 75-89.
- Choi, N.G. (1999). No longer independent: The dynamics of care arrangements for frail elderly parents. *Journal of Gerontological Social Work*, 32(3), 27.
- Cohen, M. & Gagin, R. (2005). Can skill development training alleviate burnout in hospital social workers? *Social Work in Health Care*, 40(4), 83-97.
- Cox, C. (1999). Race and caregiving: Patterns of service use by African American and white caregivers of persons with Alzheimer's disease. *Journal of Gerontological Social Work*, 32(2), 5-20.
- Davidson, T., Davidson, J., & Keigher, S. (1999). Managed care: Satisfaction guaranteed...Not! *Health & Social Work*, 24, 191-197.
- Didion, J. (2007). *The year of magical thinking*. New York: Vintage Books.
- Eliadis, E.E. (2006). The role of social work in the childhood obesity epidemic. *Social Work*, 51(1), 86-88.
- Finn, J. (1999). An exploration of helping processes in an online self-help group focusing on issues of disability. *Journal of Public Economics*, 24(3), 220-232.
- Frankel, A.J. & Gelman, S.R. (1998). *Case management: An introduction to concepts and skills*. Chicago, Ill: Lyceum Books.
- Galambos, C. (1999). Resolving ethical conflicts in a managed care environment. *Health & Social Work*, 24, 191-197.
- Gibelman, M., & Whiting, L. (1999). Negotiating and contracting in a managed care environment: Considerations for practitioners. *Health & Social Work*, 24, 180-190.

- Goren, S. & Clark, E.J. (2006). The 2005 White House Conference on Aging: A social work perspective. *Health and Social Work*, 31(2), 137-144.
- Herman, J. (1992). *Trauma and recovery*. New York: Basic Books.
- Hughes, W. (1999). Managed care, meet community support: Ten reasons to include direct support services in every behavioral health plan. *Health & Social Work*, 24, 103-111.
- Itkin Zimmerman, S. (1999). Short-term persistent depression following hip fracture: A risk factor and target to increase resilience in elderly people. *Social Work Research*, 23(3), 187-197.
- Lens, V. & Pollack, D. (2000). Advance Directives: Legal remedies and psychosocial interventions. *Death Studies*, 24, (5), 377-399.
- Leukefeld, C.G., & Welsh, R. (1995). Health services systems policy. *Encyclopedia of Social Work*, Wash. DC: NASW Press. pp.1206-1213.
- Mechanic, D. (1989). *Painful choices: Essays on health care*. New Brunswick, N.J.: Transaction Press.
- Moody, H.R. (1998). The cost of autonomy, the price of paternalism. *Journal of Gerontological Social Work*, 29(2-3), 111-128.
- Morrow-Howell, N. (1998). Evaluating an intervention for the elderly at increased risk of suicide. *Research on Social Work Practice*, 8(1), 28-47.
- Naleppa, M.J. (1998). Task-centered case management for the elderly: Developing a practice model. *Research on Social Work Practice*, 8(1), 63-86.
- Palley, H.A. (2000). Long-term care for people with developmental disabilities: A critical analysis. *Health & Social Work*, 25(3), 181-190.
- Parish, S. & Huh, J. (2006). Health care for women with disabilities: Population-based evidence of disparities. *Health & Social Work*, 31(1), 7-15.
- Pilsecker, C. (1987). A patient dies: A social worker reviews his work. *Social Work in Health Care*, 13(2), 35-45.
- Starr, P. (1982). *The social transformation of American medicine*. New York: Basic Books.

Walker, R.G., Pomeroy, E.C., McNeil, J.S., & Franklin, C. (1996). Anticipatory grief and AIDS: Strategies for intervening with caregivers. *Health and Social Work, 21*(1), 49-57.

RECOMMENDED REFERENCES FOR MIDTERM & FINAL PAPERS

HIV/AIDS

Andriote, J.M. (2011, November 30). AIDS: Still a gay disease in America. *The Atlantic*. Retrieved from <http://www.theatlantic.com/life/archive/2011/11/aids-still-a-gaydisease-in-america/249242/>.

Andriote, J.M. (2011, December 2). Is there still an AIDS crisis in the U.S. It depends on who you are. *The Atlantic*. Retrieved from: <http://www.theatlantic.com/life/archive/2011/12/is-there-still-an-aids-crisis-in-the-usit-depends-on-who-you-are/249304/>.

Auerbach, C., & Beckerman, N. (2010). HIV/AIDS prevention in New York City: Identifying sociocultural needs of the community. *Social Work in Health Care, 49*(2), 109-133.

El-Bassel, N., Caldeira, N.A., Ruglass, L.M., & Gilbert, L. (2009). Addressing the unique needs of African American women in HIV prevention. *American Journal of Public Health, 99*(6), 996-1001.

Gable, L., Gostin, L., & Hodge, J. (2008). HIV/AIDS, reproductive and sexual health, and the law. *American Journal of Public Health, 98*(10), 1779-1786.

Gruskin, S., Firestone, R., MacCarthy, S., & Ferguson, L. (2008). HIV and pregnancy intentions: Do services adequately respond to women's needs? *American Journal of Public Health, 98*(10), 1746-1750.

Hampton, T. (2010). HIV study shines spotlight on women. *Journal of the American Medical Association, 304*(3), 257-258.

Owens, S. (2004). African American women living with HIV/AIDS: Families as a source of support and stress. *Social Work, 48*(2), 163-194.

Peterson, J.L., & Jones, K.T. (2009). HIV prevention for black men who have sex with men in the United States. *American Journal of Public Health, 99*(6), 976-980.

- Ramirez-Valles, J., Garcia, D., Campbell, R.T., Diaz, R.M., & Heckathorn, D. (2008). HIV infection, sexual risk behavior, and substance abuse among latino gay and bisexual men and transgender persons. *American Journal of Public Health, 98*(6), 1036-1042.
- Rowe, W. (2007). HIV-AIDS—Cultural competence in HIV prevention and care: Different histories, shared future. *Social Work in Health Care, 44*(1/2), 45-54.
- Sutton, M.Y., Jones, R., Wolitski, R.J., Cleveland, J.D., & Dean, H.D. (2009). A review of the Centers for Disease Control and Prevention's response to the HIV/AIDS crisis among Blacks in the United States. *American Journal of Public Health, 99*(Supplement 2), S351-359.
- Villarica, H. (2011, December 6). Read my lips: Reflections of an accidental AIDS activist. *The Atlantic*, retrieved from <http://www.theatlantic.com/life/archive/2011/12/read-my-lips-reflections-of-an-accidental-aids-activist/249228/>.

PALLIATIVE, HOSPICE, AND END-OF-LIFE CARE

- Gonzales-Ramos, G. (2004). Chapter 2: On loving care and the persistence of memories: Reflections of a grieving daughter. From C. Levine & T.H. Murray (eds.). *The cultures of caregiving: Conflict and common ground among families, health professionals, and policymakers*. Baltimore: Johns Hopkins University Press.
- Gwande, A. (2010). Letting go. *The New Yorker, 86*(22), 36.
- Lord, B., & Pockett, R. (1998). Perceptions of social work interventions with bereaved clients: Some implications for hospital social work practice. *Social Work in Health Care, 27*(1), 51-66.
- Mellor, J.M. (1998). The role of the social worker in interdisciplinary geriatric teams. *Journal of Gerontological Social Work, 30* (3/4), 3-8.
- Miller, P. (2007). End of life decision in Oregon. *Social Work, 52*(2), 190-192.
- Miller, P., Hedlund, S., & Murphy, K. (1998). Social work assessment at the end of life: Practice guidelines for suicide and the terminally ill. *Social Work in Health Care, 26*(4), 23-36.
- Reese, D.J. & Raymer, M. (2004). Relationships between social work involvement and hospice outcomes: results of the National Hospice Social Work Survey. *Social Work, 49*(3), 415-431.

Stein, G.L. (2004). Improving our care at life's end: Making a difference. *Health and Social Work*, 29(1), 77-79.

Stein, G.L. (2002). Welcoming elder lesbian and gay patients in palliative care settings. *American Academy of Hospice and Palliative Medicine Bulletin*, 3(1), 6-7.

Stein, G.L. & Bonuck, K. A. (2001). Attitudes on end-of-life care and advance care planning in the lesbian and gay community. *Journal of Palliative Medicine*, 4(2), 173-190.

ONCOLOGY

Becker, J.E. (2004). Oncology social workers' attitudes toward hospice care and referral behavior. *Health and Social Work*, 29(1), 36-45.

Bunston, T., & Mings, D. (1998). Planning psychosocial care for cancer patients; if at first you don't succeed, shift your paradigm. *Social Work in Health Care*, 27(1), 67-87.

Cohen, M. (2010). A model of group cognitive behavioral intervention combined with biofeedback in oncology settings. *Social Work in Health Care*, 49(2), 149-164.

Goelitz, A. (2001). Dreaming their way into life: A group experience with oncology patients. *Social Work with Groups*, 24(1), 53-68.

Jones, B.L. (2005). Pediatric palliative and end-of-life care: The role of social work in pediatric oncology. *Journal of Social Work in End of Life and Palliative Care*, 1(4), 35-62.

Lethborg, C.E., Kissane, D., & Burns, W.I. (2003). 'It's not the easy part': The experience of significant others with women with early stage breast cancer at treatment completion. *Social Work in Health Care*, 37(1), 63-85.

Moody, K., Mannix, M.M., Furnari, N., Fischer, J., & Kim, M. (2011). Psychosocial needs of ethnic minority, inner-city, pediatric cancer patients. *Supportive Care in Cancer*, 19(9), 1403-1410.

ELDER CARE / LONG-TERM CARE / CAREGIVING FOR OUR ELDERS

Aranda, M.P., Villa, V.M., Trejo, L., et al., (2003). El Portal Latino Alzheimer's project: Model program for Latino caregivers of Alzheimer's disease affected people. *Social Work*, 48(2), 259-271.

- Dhooper, S.S. (1997). *Social work in health care in the 21st century*. New York: Sage. Chapter 7, 249-260.
- Dziegielewski, S.F. (2013). The changing face of health care social work: Opportunities and challenges for professional practice. (3rd Ed.). New York: Springer Publishing Company. Chapters 5, 6, 8, and 16.
- Fabbre, V.D., Buffington, A.S., Altfeld, S.J., Shier, G.E., & Golden, R.L. (2011). Social work and transitions of care: Observations from an intervention for older adults. *Journal of Gerontological Social Work*, 54(6), 615-626.
- Galambos, C., & Rosen, A. (1999). The aging are coming and they are us. *Health and Social Work*, 24(1), 73-77.
- Howe, J. Hyer, K., Mellor, M.J., Lindeman, D., & Luptak, M. (2001). Educational approaches for preparing social work students for interdisciplinary teamwork on geriatric health care teams. *Social Work in Health Care*, 32(4), 19-42.
- Ingersoll-Dayton, B., Schroepfer, T. & Waarala, C. (2003). Enhancing relationships in nursing homes through empowerment. *Social Work*, 48(3), 420-424.
- Lacey, D. (2005). Nursing home social worker skills and end of life planning. *Social Work in Health Care*, 40(4), 19-40.
- Levine, C., & Murray, T.H. (eds.) (2004). *The cultures of caregiving: Conflict and common ground among families, health professionals, and policymakers*. Baltimore: Johns Hopkins University Press.
- McClive-Reed, K.P., & Gellis, Z.D. (2010). Anxiety and related symptoms in older persons with dementia: Directions for practice. *Journal of Gerontological Social Work*, 54(1), 6-28.
- Naleppa, M.J. (1996). Families and the institutionalized elderly. *Journal of Gerontological Social Work*, 27(1/2), 87-111.
- Smith, L.A., McCaslin, R., Chang, J., Martinez, P., & McGrew, P. (2010). Assessing the needs of older gay, lesbian, bisexual, and transgender people: A service-learning and agency partnership approach. *Journal of Gerontological Social Work*, 53(5), 387-401.
- Stein, G.L., Beckerman, N.L., & Sherman, P.A. (2010). Lesbian and gay elders and longterm care: Identifying the unique psychosocial perspectives and challenges. *Journal of Gerontological Social Work*, 53(5), 421-435.

United Hospital Fund (2012). HIPAA: Questions and answers for family caregivers.

Retrieved from: http://www.nextstepincare.org/Caregiver_Home/HIPAA/

Wolff, M. (2012, May 28). A life worth ending. *The New Yorker*, p. 26. Download at:

<http://nymag.com/news/features/parent-health-care-2012-5/>

WOMEN'S ISSUES / DOMESTIC VIOLENCE

Anderson, S.G. & Eamon, M.K. (2004). Health coverage instability for mothers in working families. *Social Work*, 49(3), 395-414.

Beder, J. (1995). Perceived social support and adjustment to mastectomy in socioeconomically disadvantaged Black women. *Social Work in Health Care*, 22(2), 55-71.

Clemans, S.E. (2004). Life-changing: The experience of rape-crisis work. *Affilia*, 19(2), 146-159.

Iyengar, R., & Sabik, L. (2009). The dangerous shortage of domestic violence services. *Health Affairs*, 28(6), w1052-w1065.

Krieger, N., Chen, J.T., & Waterman, P.D. (2010). Decline in US breast cancer rates after the women's health initiative: Socioeconomic and racial/ethnic differentials. *American Journal of Public Health*, 100(Supplement 1), S132-S139.

McGregor, M.J., Lipowska, M., Shah, S., et al., (2003). An exploratory analysis of suspected drug-facilitated sexual assault seen in a hospital emergency department. *Women and Health*, 39(3), 71-80.

Munch, S., & Shapiro, S. (2006). The silent thief: Osteoporosis and women's health care across the life span. *Health & Social Work*, 31(1), 44-53.

Munch, S. (2006). The women's health movement: Making policy, 1970-1995. *Social Work in Health Care*, 43(1), 17-32.

Murphy, S.B., Ouimet, L.V. (2008). Intimate Partner Violence: A call for social work action. *Health & Social Work*, 33(4), 309-314.

Nicolaidis, C. & Touhouliotis, V. (2006). Addressing intimate partner violence in primary care: Lessons from chronic illness management. *Violence and Victims*, 21(1), 101116.

Ross, J., Walther, V. & Epstein, I. (2004). Screening risks for intimate partner violence and primary care settings: Implications for future abuse. *Social Work in Health Care, 38*(4), 1-23.

Shields, G., Baer, J., Leininger, K., et al., (1998). Interdisciplinary health care and female victims of domestic violence. *Social Work in Health Care, 34*(2), 27-48.

LESBIAN, GAY, BISEXUAL, AND TRANSGENDERED PEOPLE

Bobbe, J. (2002). Treatment with lesbian alcoholics: Healing shame and internalized homophobia for ongoing sobriety. *Health and Social Work, 27*(3), 218-222.

Fredriksen-Goldsen, K. I., Hoy-Ellis, C. P., Goldsen, J., Emlet, C. A., & Hooyman, N. R. (2014). Creating a vision for the future: Key competencies and strategies for culturally competent practice with LGBT older adults in the health and human services. *Journal of Gerontological Social Work. 57*(2-4), 80-107.

Fredriksen-Goldsen, K. I. Despite disparities, most LGBT elders are aging well. *Aging Today 35*(3) 1-3. Retrieved from <http://www.asaging.org/blog/despite-disparitiesmost-lgbt-elders-are-aging-well>

Fredriksen-Goldsen K. I., Kim, H.-J., Barkan, S. E., Muraco, A., & Hoy-Ellis, C. P. (2013). Health Disparities Among Lesbian, Gay, and Bisexual Older Adults – Results from a Population-Based Study. *American Journal of Public Health, 103*(10), 1802–1809.

Klitzman, R.L. & Greenberg, J.D. (2002). Patterns of communication between gay and lesbian patients and their health care providers. *Journal of Homosexuality, 42*(4), 65-75.

McNair, R. (2003). Outing lesbian health in medical education. *Women and Health, 37*(4), 89-103.

Smith, L.A., McCaslin, R., Chang, J., Martinez, P., & McGrew, P. (2010). Assessing the needs of older gay, lesbian, bisexual, and transgender people: A service-learning and agency partnership approach. *Journal of Gerontological Social Work, 53*(5), 387-401.

Stein, G.L. & Bonuck, K.A. (2001). Physician-patient relationships among the lesbian and gay community. *Journal of the Gay and Lesbian Medical Association, 5*(3), 87-93.

- Stein, G.L. & Bonuck, K. A. (2001). Attitudes on end-of-life care and advance care planning in the lesbian and gay community. *Journal of Palliative Medicine*, 4(2), 173-190.
- Stein, G.L., Beckerman, N.L., & Sherman, P.A. (2010). Lesbian and gay elders and longterm care: Identifying the unique psychosocial perspectives and challenges. *Journal of Gerontological Social Work*, 53(5), 421-435.
- Wheeler, D.P. (2003). Methodological issues in conducting community-based health and social services research among urban black and African American LGBT populations. *Journal of Gay and Lesbian Social Services*, 15(1/2), 65-78.