





**HBSE: Social Work Perspective on AIDS**  
**SPRING 2019**  
**Graduate School of Social Work, Rutgers University**  
**19:910:569:**

-  Instructor:
-  Telephone:
-  E-mail:
-  Office Hours:

**Catalog Course Description**

This course is designed to examine the field of HIV/AIDS and will acquaint students with the primary and most advanced facts about HIV/AIDS. It will take different approaches to the impact of HIV infection and AIDS on the individual, family, society, and institutions that provide care and will sensitize students to the challenges that HIV/AIDS has generated in public health, social policy, and social service delivery. This elective course provides an overview of individuals and families infected and living with HIV as a population group and as a biopsychosocial process. The course explores aspects of social services and health care systems intended to help individuals, families, and communities confront HIV Intersections consisting of gender, age, ability, sexuality and other related challenges and capitalize upon relative strengths.

Social work students will have an opportunity to explore their own beliefs, values and approaches to the issues regarding HIV/AIDS, in addition to the cultural, political, social, legal, ethical, spiritual, and public health concerns and the perspectives of people living with HIV infection and AIDS that are needed to inform practice and policy.

**Course Overview**

HIV/AIDS is a modern pandemic with far-reaching ramifications of an actual, biomedical, public health, psychosocial, cultural, legal, ethical, spiritual, political and economic nature which is likely to affect the context in which social work is practiced profoundly. It is probable that most social workers will professionally encounter an HIV client at some point in their career and the discrimination and stigma still associated with the disease are present in every systemic context, and social workers will, therefore, need to be prepared to address the various bio-psycho-social issues impacting their HIV clients. This course is intended to provide students the opportunity to examine the ramifications of this pandemic from the profession's commitment to the core values of human dignity, social justice, cultural diversity and self-determination and to build the skills they will need for delivering effective interventions at the individual, family, community and policy levels.

There is a continuing need for social workers to work within the HIV care field. With their particular expertise in providing psychological and environmental support as well as their case management skills in establishing service linkages and engaging in client advocacy, social workers have been at the forefront of efforts to improve the lives of people infected and affected by HIV disease. This course will attempt to serve as an introduction to the biological basis and bio-psycho-social impact of HIV disease on students, and although the skills being learned may be particularly useful for students who are considering a professional commitment in the HIV field, they will be transferable to work conducted in most other practice areas. Students will learn to analyze the differential impact that HIV disease has on various cultural and ethnic groups as well as individual, family, psychosocial stages development and policy issues to understand the interrelatedness of

personal, clinical, community and environmental concerns. This course is a “General Elective” open to all graduate students.

### **Place of Course in Program**

This is an elective course.

### **Program Level Learning Goals and the Council of Social Work Education’s Social Work Competencies**

The MSW Program at Rutgers is accredited by the Council on Social Work Education (CSWE). CSWE’s accreditation standards can be reviewed at [www.cswe.org](http://www.cswe.org).

In keeping with CSWE standards, the Rutgers School of Social Work has integrated the CSWE competencies within its curriculum. *These competences serve as program level Learning Goals for the MSW Program and include the following. Upon completion of their MSW education students will be able to: demonstrate ethical and professional behavior; engage in diversity and difference in practice; advance human rights and social, economic and environmental justice; engage in practice informed research and research informed practice; engage with individuals, families, groups organizations and communities; intervene with individual, families, groups organizations and communities; and evaluate practice with individuals, families, groups, organizations and communities.*

This course will assist students in developing the following competencies:

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

Social workers understand how diversity and difference characterize and shape the 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.

#### **Competency 3: Advance Human Rights and Social, Economic and Environmental Justice**

Social workers understand that every person regardless of position in society has fundamental human rights such as freedom, safety, privacy, an adequate standard of living, health care, and education. Social workers understand the global interconnections of oppression and human rights violations, and are knowledgeable about theories of human need and social justice and strategies to promote social and economic justice and human rights. Social workers understand strategies designed to eliminate oppressive structural barriers to ensure that social goods, rights, and responsibilities are distributed equitably and that civil, political, environmental, economic, social, and cultural human rights are protected.

#### **Competency 5: Engage in Policy Practice**

Social workers understand that human rights and social justice, as well as social welfare and services, are mediated by policy and its implementation at the federal, state, and local levels. Social workers understand the history and current structures of social policies and services, the

role of policy in service delivery, and the role of practice in policy development. Social workers understand their role in policy development and implementation within their practice settings at the micro, mezzo, and macro levels and they actively engage in policy practice to effect change within those settings. Social workers recognize and understand the historical, social, cultural, economic, organizational, environmental, and global influences that affect social policy. They are also knowledgeable about policy formulation, analysis, implementation, and evaluation.

**Competency 6: Engage with Individuals, Families, groups Organizations and Communities**  
Social workers understand that engagement is an ongoing component of the dynamic and interactive process of social work practice with, and on behalf of, diverse individuals, families, groups, organizations, and communities. Social workers value the importance of human relationships. Social workers understand theories of human behavior and the social environment, and critically evaluate and apply this knowledge to facilitate engagement with clients and constituencies, including individuals, families, groups, organizations, and communities. Social workers understand strategies to engage diverse clients and constituencies to advance practice effectiveness. Social workers understand how their personal experiences and affective reactions may impact their ability to effectively engage with diverse clients and constituencies. Social workers value principles of relationship-building and inter-professional collaboration to facilitate engagement with clients, constituencies, and other professionals as appropriate

**Competency 7: Assess Individuals, Families, Groups, Organizations and Communities**  
Social workers understand that assessment is an ongoing component of the dynamic and interactive process of social work practice with, and on behalf of, diverse individuals, families, groups, organizations, and communities. Social workers understand theories of human behavior and the social environment, and critically evaluate and apply this knowledge in the assessment of diverse clients and constituencies, including individuals, families, groups, organizations, and communities. Social workers understand methods of assessment with diverse clients and constituencies to advance practice effectiveness. Social workers recognize the implications of the larger practice context in the assessment process and value the importance of inter-professional collaboration in this process. Social workers understand how their personal experiences and affective reactions may affect their assessment and decision-making.

Assessment of Competencies/Program Level Learning Goals: Because this course focuses on providing you with the knowledge, skills, and values for you to advance human rights and social, economic, and environmental Justice and engage in policy practice, it has been selected be to part of the School of Social Work overall assessment program of the social work competencies/program level learning goals. This means that one of the course assignments, the Single System Research Design assignment, has been designed to assess your attainment of these competencies.

### **Course Learning Goals**

Course level learning goals primarily relate to the aforementioned competencies/program level learning goals as the course addresses policy analysis skills and competencies as well as addresses human rights and social, economic and environmental justice through the study of the evolution of the US welfare state and the emergence of the social work profession.

Upon completion of this course, students will be able to:

- ⚠️ Articulate the Epidemiological, Biological, Medical & social aspects of HIV and the disease progress.
- ⚠️ Describe the concept of multiple layers of HIV discrimination based on the systems of Intersectionality ( i.e., gender, ages and stages, ethnicity, cultural, socio-economic class, sexuality, spirituality, age )
- ⚠️ Apply this concept of Intersectionality and analyze how HIV norms, values and practices are perpetuated worldwide.
- ⚠️ Integrate insights on HIV Intersectionality issues into social work practice.
- ⚠️ To understand HIV infected & affected populations (children, adolescents, adults & seniors) as a diverse and ever-changing community group.

### **School of Social Work Mission Statement and School Wide Learning Goals**

The mission of the School of Social Work is to develop and disseminate knowledge through social work research, education, and training that promotes social and economic justice and strengths individual, family, and community well-being, in this diverse and increasingly global environment of New Jersey and beyond.

School Wide Learning Goals: Upon graduation all students will be able to:

1. Demonstrate Ethical and Professional Behavior;
2. Engage Diversity and Difference in Practice; and
3. Engage, Assess, and Intervene with Individuals, Families, Groups, Organizations, and Communities

### **Required Texts**

- ⚠️ There are **no required Textbooks to purchase**. All materials have been uploaded to the CANVAS site by your professor. Please download and read the article selections located in CANVAS ( Resources & Assignments)

### **COURSE REQUIREMENTS**

- ⚠️ Students are expected to be **active** learners and collaborators. Students are supposed to contribute knowledge and observations to discussions. Regular class attendance with active participation is expected. When students participate actively in class discussions learning is enhanced. It is essential that reading assignments be completed before each session. Please take responsibility for seeking clarification of difficult material encountered in the text, readings, and lectures. At the end of each class session, readings for the subsequent class will be assigned.
- ⚠️ Class attendance is **not** optional. Students are expected to notify the instructor before missing a meeting (see email and telephone numbers above). **With 2 or more absences**, the professor reserves the right to reduce the final grade by a whole grade. Students who leave during breaks will be marked as absent. You will not be penalized for missing class for appropriate reasons (e.g., illness and religious observances). If you are absent for medical reasons, you must bring a note from your doctor. Students are required to take the examinations on the designated dates. No make-up exams will be given unless a physician has certified, in writing, that you are unable to make the exam.
- ⚠️ All written work **must** be typed. Late assignments will **not** be accepted unless the student has made arrangements for the assignment due date. The professor reserves the right to

reduce the grade for late assignments at their discretion. All written assignments **must** follow APA format. The professor reserves the right to lower the letter grade for any assignment that does not conform to APA format (see this website for a useful guide to APA, <http://www.columbia.edu/cu/ssw/write/apastyle.html>)

⚠ Student behavior in this course must comply with the university's code of conduct. The entire system of contact can be attained from Student Judicial Affairs Office or online at <http://studentsconduct.rutgers.edu/university-code-of-student-conduct>. Students should be aware that violations of academic integrity, for example, plagiarism of any kind, would result in expulsion from the program.

⚠ During this course, it may be difficult to disguise references to specific organizations and people, so much information must stay in the classroom. Confidentiality is vital.

⚠ Respect for others in the classroom. Social work courses are often messy and ambiguous, with room for multiple and diverse perspectives. We all must attempt to treat each other with respect when opinions are shared. Language should be used which recognizes diversity and is respectful of others. It is also imperative, as we struggle with complex political, personal and social issues, that we not silence others by assuming that there are "politically correct" lines of thought that cannot be challenged. Let us attempt to struggle for intellectual growth and mutual respect as we endeavor in this process!

⚠ Please do *not* use cell phones or laptops during class, unless they are required for your learning. You will be dismissed from class if you use these devices for surfing the internet or answering email. This course is meant to be a conversation. Electronic devices quickly disrupt attention interrupt the learning process.

### ⚠ **Methods of Evaluation**

Grades for the course will be weighted as follows:

**20% = Attendance & Participation**

**30% = Journals**

**40 % = HIV Intersectionality Research paper**

**10% = HIV Intersectionality Oral & Visual Presentation.**

**HIV Intersectionality Research Paper & Presentation:** For instructions, see page 25-26 of this syllabus.

**Late Assignments:** All assignments are due at the beginning of class on the date assigned. **Journal Assignments** will be reduced by 1 point each day the task is late or incomplete. For **HIV Intersectionality Paper**, grades will be reduced by 3 points a day the assignment is late or incomplete. (Exceptions will be made only in extreme circumstances and must be approved by the instructor **before** the due date.) If a scheduled date conflicts with religious observance, please consult with the professor before the assignment's due date.

**Incomplete grades:** Incompletes will only be granted at the discretion of the instructor under exceptional circumstances. It is the student's responsibility to request an Incomplete from the instructor before the Semester Withdrawal period and in conjunction with their Academic Advisor. A request signed by the student and the faculty member must be on file when grades are submitted

### **Attendance & Participation (20%).**

Students are expected to attend class (and be on time), which is essential for learning from lecture and class discussions, and for socialization to the profession of social work. Attendance and participation will affect 20% of the course grade. ***Students who miss more than a total of 3 classes will not receive a passing grade for the course.*** Students who leave during the break will be marked as absent for that level. Absences because of religious holidays are allowed with prior permission from the instructor. The consistent lateness, of course, will also result in being marked absent.

### **Weekly Journal Entries/ Assignments (30%):**

All Journal entries are to be completed by scheduled due dates. You are expected to Journal on ONE (1) of the reading assignments for **SEVEN** selected weeks. Each Reading should be a full page- front into back -page typed, as **a reflection of the depth of the article, and how it impacts the Field of Social work and you as a social worker.** It is due each week noted on SYLLABUS and should be posted on **CANVAS Journal Assignment Section** before class. Late assignments will not be accepted unless the student has made arrangements with the professor before the assignment's due date. The professor reserves the right to reduce the Journal grade by 1 point-daily- for every day it is late. If a scheduled date conflicts with religious observance, please consult with the professor before the assignment's due date.

### **Journal Due Dates:**

**Class # 2, Class # 3, Class # 4, Class # 5, Class # 6, Class # 13, Class #14**

### **🚫 Grading Standards**

A = Exceptional or outstanding work; student demonstrates a full understanding of the material, displays unusual analytical and creative ability; extensive work; must be well organized and conform to accepted standards of writing including correct grammar, accurate spelling, etc.; cites material correctly. Work is completed by the due date.

B+ = above average collaborate regarding understanding material and ability to apply material from lectures and readings to own proposed project. Work must be organized and conform to accepted standards of writing; cites article correctly. Work is completed by the due date.

B = Good work; demonstrates an understanding of the material; written materials well organized and conforms to accepted standards of grammar, spelling punctuation, etc.; cites article correctly. Work is completed by the due date.

C = Acceptable work, similar to C+ but reveals more significant problems in applying the concepts and techniques to own work, fails to cover some critical point(s). Some difficulties in organizing and presenting written materials; cites article incorrectly; too many direct quotes; fails to



paraphrase and cite appropriately.

Grade cut-offs for all courses offered by the Rutgers Graduate School of Social Work (MSW) as follows:

A	92-100
B+	87-91
B	82-86
C+	77-81
C	70-76
F	0-69

\*Scores to be rounded up at .5

### **COURSE EVALUATION**

Rutgers University evaluates both the course and the instructor. This survey is completed by students toward the end of the semester; all answers are confidential and anonymous. The instructor may also choose to conduct a mid-term evaluation.

### **WRITING ASSISTANCE**

Success in graduate school and within the broader profession of social work depends on strong writing skills. Several resources are available to help students strengthen their professional and academic writing skills. Writing assistance is open to all MSW students as described below.

#### New Brunswick Campus

All MSW SSW students (NB, Camden, Newark, and IW, online/ blended) are eligible to access writing assistance at the New Brunswick Learning Center. Online tutoring may also be available.

Contact: <https://rlc.rutgers.edu/student-info/group-and-individual-academic-support/writing-coaching>

#### Newark Campus

The Newark writing center is available for MSW students on the Newark campus by appointment.

<http://www.ncas.rutgers.edu/writingcenter>

#### Camden Campus

The Camden learning center provides writing assistance for MSW students on the Camden campus.

<http://learn.camden.rutgers.edu/writing-assistance>

## **Office on Violence Prevention and Victim Assistance**

Our school is committed to fostering a safe, productive learning environment. Title IX and our school policy prohibit discrimination by sex, which regards sexual misconduct — including harassment, domestic and dating violence, sexual assault, and stalking. We understand that sexual abuse can undermine students' academic success and we encourage students who have experienced some form of sexual misconduct to talk to someone about their experience, so they can get the support they need.

Confidential support and educational advocacy are available through the Rutgers Office of Violence Prevention and Victim Assistance, 732.932.1181, <http://vpva.rutgers.edu>. Services are free and confidential and open 24 hrs. /day, seven days a week.

## **Library Resources:**

The Rutgers University library system contains an impressive collection of resources and materials that will be of great assistance to you as you complete assignments for this class and your other graduate courses.




Many of these materials can be accessed online.

The university librarians offer free tutorials on using the in-library services and online search tools; understanding how to navigate these devices is vital for ensuring timely, thorough, and proficient completion of the assignments for this course.

Some library tools that may be of particular relevance to this course:

Under the main library website, check out the following:

<http://www.libraries.rutgers.edu.proxy.libraries.rutgers.edu/rul/index.shtml>

-  The Electronic Reference Sources under the Reference link. You can find online links for the APA Style Manual, assistance with grammar and writing, and many other useful connections under (see Style Manuals).
-  Subject Research Guides under the Research Resources link. The Social Work category contains links to Government Resources (state and federal websites relevant to policy research) and numerous other resource sites and reference collections.
-  RefWorks, a web-based bibliography, and citation manager.

Dr. Karen Hartmann is the social work the social work librarian on the New Brunswick Campus [khartman@rci.rutgers.edu](mailto:khartman@rci.rutgers.edu) p. 848-932-6104;

Natalie Borisovets is at Newark, Dana Library [natalieb@andromeda.rutgers.edu](mailto:natalieb@andromeda.rutgers.edu), 973-353-5909;  
Vibiana Cvetkovic is at Camden, Robeson Library: [bowman@camden.rutgers.edu](mailto:bowman@camden.rutgers.edu), 856-225-2832.  
They are all available to meet with students.

## **HBSE: Social Work Perspective on HIV /AIDS: Course Content and Reading Assignments**

### **Class # 1 – Introduction to HIV: Basic Myths and Facts on Epidemiology**



### **Weekly overview:**

This week we will focus on getting to know each other so that we will be able to engage comfortably in intellectual and constructive discussions later. We will learn some of the essential concepts that will recur throughout the course and discuss the origins of HIV.

### **Weekly objectives:**

1. Identify your classmates and instructor and their respective interests and backgrounds.
2. Discuss & view the origin of HIV

### **Lecture / Instructional Tools:**

- 🚫 Epidemiology and public health in the U.S., Incidence/prevalence of HIV in the world, U.S., and NJ, display & discuss HIV 101: common myths and misconceptions about HIV, HIV transmission and being HIV+: [http://www.medicinenet.com/hiv-aids\\_quiz/quiz.htm](http://www.medicinenet.com/hiv-aids_quiz/quiz.htm); View Origin of AIDS – Epidemiology and research theories. ( 70 minutes )  
[https://www.youtube.com/watch?v=HoBjkZv\\_Bp0](https://www.youtube.com/watch?v=HoBjkZv_Bp0)

## **Class # 2 – HIV Epidemiology: A Historical Perspective**

### **Weekly overview:**

This week we will focus on the history of the HIV epidemic in the United States. We will explore the connection between epidemiology and social work, through research study designs and client interviews.

### **Weekly objectives:**

1. Distinguish the definitions of epidemiology and HIV related terminology
2. Describe how various disenfranchised groups are captured through HIV epidemiological data collection; Tuskegee syphilis experiment & polio vaccine trials

### **Lecture / Instructional Tools:**

- 🚫 Video: *And the Band Played On* (1993) 141 minutes (View Part I – 70 min) , Cholera & Ebola – Epidemiological investigation  
[:https://www.youtube.com/watch?v=jG1VNSCsP5Q](https://www.youtube.com/watch?v=jG1VNSCsP5Q) &  
<https://www.youtube.com/watch?v=TZI-FayZkvg>

### **Required Readings:**

- 🚫 Bonita, R, Beadlehole, R. and Kjellstriim, T, (Eds.) (2006) *Basic Epidemiology* (2<sup>nd</sup> Ed.). Chapter 1 (pp 1-11) from Geneva: World Health Organization
- 🚫 Bonita, R, Beadlehole, R. and Kjellstriim, T, (Eds.) (2006) *Basic Epidemiology* (2<sup>nd</sup> Edition). Chapter 5 (pp 83-96) Geneva: World Health Organization
- 🚫 Poindexter, C (Eds.) (2010) *Handbook of HIV and Social Work* HIV History, Illness, Transmission, and Treatment (pp.3-27)
- 🚫 Poindexter, C (Eds.) (2010) *Handbook of HIV and Social Work: HIV Social work Roles, Tasks, and Challenges in Health Care Settings* Chapter 7(pp.103-119)

**JOURNAL # 1:** Due on ONE (1) Reading, Please upload into CANVAS / Assignments before class.

### **Class # 3 – HIV Virology and Testing**

#### **Weekly overview:**

This week we will conclude epidemiological assessment of the HIV epidemic in the United States. We will explore the options for HIV testing while investigating the outcomes provided.

#### **Weekly objectives:**

1. Outline the historical and practical methods of HIV testing
2. Evaluate the outcomes of HIV testing demographic data sheets in conjunction with the NJ State Department of Health reports.

#### **Lecture / Instructional Tools:**

- 🚫 Conclude Video: *And the Band Played On* (1993) (View Part 2 – 70 min) HIV testing fundamentals (Highlight National and local resources) Universal testing & Controversies in HIV testing. Optional viewing: "Patient Zero" Randy Shilts Interview, 1987 - HIV AIDS: <https://www.youtube.com/watch?v=Sc7bYnH2Zpo>

### **Required Readings:**

- 🚫 Cederbaum, J. A. (2008). Name-based HIV reporting: Current status and advocacy needs. *Journal of HIV/AIDS and Social Services: Research, Policy and Practice*, 17(2), 117-133.
- 🚫 Shernoff, M. (Eds.) (1999). *AIDS and Mental Health, Clinical and Policy Issues*. Losing Lawrence: The Death of a Child in a Residential Child Welfare facility. Chapter 6: (67-76) From the Haworth Press.
- 🚫 Web content from the Kaiser Family Foundation on *HIV Testing* (Fact Sheet, Jun 2010) <http://www.kff.org/hivaids/upload/6094-10.pdf>
- 🚫 Web content from the Open Society Foundation for *Women and HIV Testing* [http://www.soros.org/initiatives/health/focus/law/articles\\_publications/publications/womenhiv\\_20080730/womenhiv\\_20080730.pdf](http://www.soros.org/initiatives/health/focus/law/articles_publications/publications/womenhiv_20080730/womenhiv_20080730.pdf)
- 🚫 Web content from the Open Society Foundation on *Mandatory Premarital HIV Testing* [http://www.soros.org/initiatives/health/focus/law/articles\\_publications/publications/mandatory-hiv-testing-20100513/mandatory-premarital-hiv-testing-20100513.pdf](http://www.soros.org/initiatives/health/focus/law/articles_publications/publications/mandatory-hiv-testing-20100513/mandatory-premarital-hiv-testing-20100513.pdf)

**JOURNAL # 2: Due** on **ONE** (1) Reading, Please upload into CANVAS Assignment before class.

## **Class # 4 – Basics in HIV Treatment and Prevention**

### **Weekly overview:**

This week we will introduce a medical exploration of how HIV infects the immune system while highlighting the opportunistic infections that could be evident to those infected with HIV.

### **Weekly objectives:**

1. Outline an overview of human immune system
2. Explore HIV life cycle and disease progression and evidence-based HIV prevention programs of the CDC
3. Review HIV prevention and vaccine research, HIV disease management & holistic approaches, HIV treatment adherence across the lifespan
4. Investigate the role of social workers in HIV healthcare settings( Pediatrics, adult & geriatric)

### **Lecture / Instructional Tools:**

- 🚫 Presentation of HIV life cycle, review of medication adherence & management, Group activities: The condom Challenge PDF; Gender & stigma- Life cycle exercise (PDF) Self-

exploration Test & STDs / HIV PDF -. Discussion & video- Barriers to care for Latinos. ( Merck RX DVD)

### **Required Readings:**

- 🚫 Halkitis, Perry N: *Evidence for a Syndemic in Aging HIV-positive Gay, Bisexual, and Other MSM: Implications for a Holistic Approach to Prevention and Healthcare*\_NIH Public Access, Author Manuscript, 2012 November 1; 36(2): oi:10.1111/napa.12009
- 🚫 Poindexter, C (Eds.) (2010) *Handbook of HIV and Social Work*; HIV Prevention Innovations and Challenges Chapter 12 (pp.183-193)
- 🚫 Shernoff, M. (Eds.) (1999). *AIDS and Mental Health, Clinical and Policy Issues: HIV prevention, Women, and the Kitchen Sink Model*. Chapter 5 ( pp.55-65):
- 🚫 Shippy, A. MA, Brennan-Ing, M. Ph.D., & Havlik, R. MD( 2003) *AIDS Community Research Initiative of America (ACRIA) The aging HIV/AIDS population: Fragile social networks*( pp 2-11)
- 🚫 Web content from The Body by David Wohl, MD on Top HIV-Related Clinical Developments of 2010 (12/8/10; pp 1-5) <http://www.thebody.com/content/art59769.html?getPage=1>

**JOURNAL # 3:** Due on **ONE (1)** Reading, Please upload into CANVAS Assignments before class.

## **Class # 5 – HIV Policy and Programs**

### **Weekly overview:**

This week we will explore the macro aspects of HIV social work through global, federal & state policies.

### **Weekly objectives:**

1. Outline the NASW code of ethics to introduce the underlying principles of helping in the HIV field. [https://www.uaf.edu/socwork/student-information/checklist/\(D\)-NASW-Code-of-Ethics.pdf](https://www.uaf.edu/socwork/student-information/checklist/(D)-NASW-Code-of-Ethics.pdf)
2. Explore global approaches to HIV interventions: macro NGO's.
3. Outline a brief history of HIV social work through the GMHC grassroots organizations and the buddy programs.
4. Investigate the macro funding of programs: example of SSA 2017 <https://www.ssa.gov/news/press/factsheets/basicfact-alt.pdf>
5. Examine the federal policies of Ryan White programs, PEPFA, and state-run programs for PLWA. <https://hab.hrsa.gov/about-ryan-white-hiv-aids-program/about-ryan-white-hiv-aids-program>

## Lecture / Instructional Tools:

- 🔗 Highlight macro statistics using: The Denver Principles; [http://www.actupny.org/documents/denver\\_principles.pdf](http://www.actupny.org/documents/denver_principles.pdf) & The AIDS Map: <http://www.aidsmap.com/law-country>
- 🔗 Group Activity – case scenarios ( Handbook of HIV: Liz ( pp147) & Robert ( pp 154). Bruce ( pp 85) John ( pp 70) Frederica ( pp 68) Media: The Age of AIDS; Financing the Battle :
- 🔗 <http://www.pbs.org/wgbh/pages/frontline/video/flv/generic.html?s=frol02s46aq90&continuous=1>

## Required Readings:

- 🔗 Poindexter, C (Eds.) (2010) *Handbook of HIV and Social Work*; HIV Related Political and Legislative Intervention Chapter 11 (pp.173-181)
- 🔗 A publication from U.S. Department of Health and Senior Services – HIV/AIDS Bureau: *Going the Distance. The Ryan White HIV/AIDS Program: 20 Years of Leadership, A Legacy of Care* (August 2010). PDF is accessible online at <http://www.impactmc.net/downloads/samples/writing/Going-the-Distance-20-years-of-the-Ryan-White-HIV-AIDS-Program.pdf>
- 🔗 Web content from the Kaiser Family Foundation on *HIV/AIDS Policy* (Fact Sheet, Feb 2009) [http://www.kff.org/hivaids/upload/7582\\_05.pdf](http://www.kff.org/hivaids/upload/7582_05.pdf)
- 🔗 Web content from NJDHSS – Division of HIV/AIDS Services on available HIV client services in NJ (2010), located in the FAQ section at <http://www.state.nj.us/health/aids/faqs.shtml>

**JOURNAL# 4:** Due on **ONE (1)** Reading, Please upload into CANVAS Assignment before class.

## Class #6 – Issues of HIV stigma and disclosure

### Weekly overview:

This week we will explore the policies and practices that perpetuate the stigmas and bias associated with HIV, exploring the Intersectionality issues for individuals living with HIV.

### Weekly objectives:

1. Outline common phobias, prejudices, beliefs, and biases that contribute to the development of HIV societal stigma and discriminatory practices.
2. Explore the impact of stigma on HIV policy formation and service access/delivery.
3. Examine the HIV health outcome implications associated with existing stigma, phobia, and discrimination, while highlighting the ethical considerations regarding HIV status disclosure of oneself or others.

## Lecture / Instructional Tools:

- Identify the definition of Stigma, examples of Intersectionality issues: sexuality, gender, ethnicity through lecture & class activity- Case Studies & identifying stigma. Adolescents: <https://www.aetcnmc.org/studies/adolescents.html>. Living with HIV- Stories: <https://www.avert.org/living-with-hiv/stories>. Optional viewing: Blood Brother 2013 : Review Intersectionality issues as an example for the upcoming research paper & topic presentation. Intersectionality issues include: cultural stigma, isolation, fear, abandonment are a few.

### **Required Readings:**

- Sankara, A., Nevada A., Neufeld, S, Berry R & Luborskya, M: (2011). *What do we know about older adults and HIV?* A review of the social and behavioral literature: NIH Public Access, Author Manuscript; AIDS Care. October; 23(10): 1187–1207. doi:10.1080/09540121.2011.564115
- Shernoff, M. (Eds.) (1999). *AIDS and Mental Health, Clinical, and Policy Issues.*: Intrapsychic and Systemic issues Concerning Returning to Work for People Living with HIV/AIDS. Chapter 2 ( pp.19-29)
- Vallerand, A. H., Hough, E., Pittiglio, L., & Marvicsin, D. (2005). AIDS Patient Care and STDs: The Process of disclosing HIV serostatus between HIV-positive mothers and their HIV-negative children., 19(2), 100-109
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- Yoshioka, M. R., & Schustack, A. (2001). *AIDS Patient Care and STD's*: Disclosure of HIV status: Cultural issues of Asian patients., 15(2), 77-82.
- Zea, M.C., Popper, C. A., Echeverry, K. J., & Bianchi, F. (2004). *American Journal of Community Psychology*, Disclosure of HIV-positive status to Latino gay men's social networks. 33(1/2), 107-116.

**JOURNAL # 5:** Due on **ONE (1)** Reading, - Please upload into CANVAS Assignment before class.

### **Class #7 – Bio-psycho-social considerations in HIV care**

#### **Weekly overview:**

This week we will explore the relationship between ethnicity, culture, gender & HIV and highlight biopsychosocial assessments practices for social workers.

#### **Weekly objectives:**

1. Identify cultural & gender characteristics of HIV clients and measure accessibility and reliance on beneficial health outcomes.
2. Explore the impact of health beliefs, health literacy & cultural competency of those infected & affected by HIV.
3. Explore the psychological, emotional, cultural, spiritual and societal issues related to HIV status through a SEM (Social Ecological Model) approach.



### **Lecture / Instructional Tools:**

- 🚫 Discuss ethical & racial disparages in HIV, share Cultural interview questions: <https://www.dshs.wa.gov/sites/default/files/CA/cp/documents/CulturallyResponsiveQuestions.pdf> & Diversity exercise, biopsychosocial, PHQ-9 (Patient Health Questionnaire) <file:///C:/Users/mali/Downloads/PHQ%20-%20Questions.pdf> Review Case study examples (Rose, Hamad, Gretchen & Rodrigo) through a SEM (Social Ecological Model) lens. Complete **Blood Brother** film, highlighting Intersectionality issues.

### **Required Readings:**

- 🚫 Alessi, E.J. (2008). *Journal of Gay & Lesbian Social Services: Changing directions in HIV prevention: The move toward a psychosocial model.* 20, 273-287.
- 🚫 Gitterman, A., & Heller, N.R. (2011). *Clinical Social Work Journal: Integrating social work perspectives and models with concepts, methods, and skills with other professions' specific approaches.* 39, 204-211.
- 🚫 Moreno, C. L. (2007). *Qualitative Health Research: The relationship between culture, gender, structural factors, abuse, trauma, and HIV/AIDS for Latinas.* 17(3), 1-13.
- 🚫 Perry N. Halkitis, Kristen D. Krause & (2017) *Mental Health, Psychosocial Challenges and Resilience in Older Adults Living with HIV* ( 187 – 204)
- 🚫 Shernoff, M. (Eds.) (1999). *AIDS and Mental Health, Clinical and Policy Issues: Spiritual Issues and HIV/AIDS in the Latino Community.* Chapter 10 ( pp.117-123)

## **Class # 8 – Social Work Interventions in HIV Care: Part I**

### **Weekly overview:**

This week we will explore the psychological perspective living with HIV, while focusing on treatment adherence and resiliency, building up to an embodiment of holistic care.

### **Weekly objectives:**

1. Explore the role and functions of HIV medical social workers, while servicing child, adolescent, adult and elderly populations.
2. Review the individual, group aspects of therapeutic interventions.
3. Discuss outcome of treatment adherence and harm-reducing models.
4. Investigate increasing HIV + population (women) within the USA, and how the Social worker treatment plans should accommodate the increasing population.

### **Lecture / Instructional Tools:**

- 🚫 Explore social work interventions in HIV care, students complete “Rosenberg Self-Esteem Scale, [http://fetzer.org/sites/default/files/images/stories/pdf/selfmeasures/Self\\_Measures\\_for\\_Self-Esteem\\_ROSENBERG\\_SELF-ESTEEM.pdf](http://fetzer.org/sites/default/files/images/stories/pdf/selfmeasures/Self_Measures_for_Self-Esteem_ROSENBERG_SELF-ESTEEM.pdf), group exercise: Teen & HIV

diagnosis/disclosure, explore mindfulness & stress reducing exercises:

[https://www.youtube.com/watch?v=iH3\\_64mLCU8](https://www.youtube.com/watch?v=iH3_64mLCU8) : Optional viewing: Endgame- AIDS in Black America: <http://video.pbs.org/video/2254967747/>

**Required Readings:**

- 🚫 Dow, M.G. (1998). Depression and HIV disease. In M.D. Knox & C.H. Sparks (Eds.), *HIV and Community Mental Healthcare* (pp. 161-177).
- 🚫 Gifford, A, Lorig, K, Laurent D, Gonzalez, V (2005). *Living Well with HIV & AIDS*, Overview of HIV / AIDS Self-Management: Chapter 1 (pp.3-20).
- 🚫 Gifford, A, Lorig, K, Laurent D, Gonzalez, V (2005). *Living Well with HIV & AIDS*, Using Your Mind to Manage Symptoms: Chapter 10: ( pp 159-174)
- 🚫 Halkins, P.N. (2014) *The AIDS Generation: Stories of Survival & Resilience:: Resilience, A Lifetime of Living with AIDS: Chapter 6* (pp 190-219)
- 🚫 Poindexter, C (Eds.) (2010) *Handbook of HIV and Social Work.* ; HIV-Related Group Work and Family Support Chapter 8 (pp.123-142)

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🚫 **Spring Break No Class**

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**Class # 9 - Social Work Interventions in HIV Care: Part II**

**Weekly overview:**

This week we will investigate social worker interventional strategies in HIV that will incubus a micro, mezzo, and macro supportive interventional framework.

**Weekly objectives:**

1. Investigate HIV harm reduction models in care, support group modalities and patients as service providers @ non-profit centers.
2. Explore the outcome of individual, group and community support services for those infected & affected by HIV

**Lecture / Instructional Tools:**

- 🚫 Explore domestic & international case management systems, review health belief models – group exercise- role play HIV support group activity. View film: House of Numbers: Anatomy of an Epidemic - <https://www.youtube.com/watch?v=BwqgmzbnckII>

### **Required Readings**

- 🚫 Dyson, et al: (2017) Using the Social-Ecological Model of HIV Prevention to Explore HIV Testing Behaviors of Young Black College Women  
<https://www.sciencedirect.com/science/article/pii/S1055329017302625>
- 🚫 Farber, E.W., Mirsalimi, H., Williams, K.A., & McDaniel, J.S. (2003). *Psychosomatic Medicine: Meaning of illness and psychological adjustment to HIV/AIDS.*, 44, 485-491
- 🚫 Gifford, A, Lorig, K, Laurent D, Gonzalez, V (2005). *Living Well with HIV & AIDS, Communicating: Chapter 14: (pp.265-276).*
- 🚫 Shernoff, M. (Eds.) (1999). *AIDS and Mental Health, Clinical and Policy Issues: A Question of Survival: Issues in Counseling Homeless Persons with HIV: Chapter 7 (pp.77-83)*
- 🚫 Shernoff, M. (Eds.) (1999). *AIDS and Mental Health, Clinical and Policy Issues: Couples of Mixed HIV Status: Therapeutic and Policy Issues. Chapter 22 ( pp.265-281)*
- 🚫 Wing, E. J. (2016), *International Journal of Infectious Diseases: HIV, and aging: Accepted 6 October 2016 (pp. 61-69)*
- 🚫 <http://www.catie.ca/en/pif/spring-2015/hiv-prevention-within-serodiscordant-couples-changing-paradigm>

### **Class # 10 – \*\* (FINAL PAPER DUE TODAY) \*\*\*\*\*Uploaded to CANVAS**

- 🚫 Student presentations ( 5 or 6 )

### **Class # 11**

- 🚫 Student presentations ( 5 or 6 )

### **Class # 12 –**

- 🚫 Student Presentations ( 5 or 6 )



### **Class # 13: Men and HIV**

#### **Weekly overview:**

This week we will investigate the modalities of transmission on gender-specific populations with HIV: Men. Their choice of sexual partners, identity, and experience will be explored throughout the lifespan. Intersectionality of ethnicity, gender, socioeconomic class and spirituality research will provide a unique experiential viewpoint for enhancing clinical practices.

#### **Weekly objectives:**

1. Explore Male sexual transmission: men having sex with men, men having sex with women, men who do not identify with sexual preference or gender.
2. Define MSM- homophobia, down-low, barebacking, & transgendered.
3. Discuss barriers to HIV care and the role of HIV social worker within this realm.

### **Lecture / Instructional Tools:**

- 🚫 Host-guest speaker to recount HIV personal experiences & living with chronic illness. Review articles regarding modalities of HIV transmission in men. View: Summer in my veins: <http://search.alexanderstreet.com/view/work/1858349> or view: The transformation: <http://search.alexanderstreet.com/view/work/1858365>

### **Required Readings:**

- 🚫 Abadsidis, Savas: Transgender Men's HIV and PrEP Needs Are Not Being Met
- 🚫 <https://www.hivplusmag.com/treatment/2018/2/25/transgender-mens-hiv-and-prep-needs-are-not-being-met>
- 🚫 Cederbaum, J. A., Coleman, C. L., Goller, G., & Jemmott, L. S. (2006). *Journal of the Association of Nurses in AIDS Care*: Understanding the HIV risk reduction needs of heterosexual African American substance-abusing men. 17(6), 28-37.
- 🚫 Cole, G. W. (2007). *Studies in Gender and Sexuality*: Barebacking: Transformations, dissociations, and the theatre of Countertransference. 8(1), 49-68.
- 🚫 Diaz, R. M., & Ayala, G. (1999). *Culture, Health & Sexuality*: Love, passion, and rebellion: Ideologies of HIV risk among Latino gay men in the USA., 1(3), 277-293
- 🚫 Halkitis, P.N. ( 2014) *The AIDS Generation: Stories of Survival & Resilience: And Then Middle Age: Gay Men Aging with HIV* Chapter 5( pp138-189)
- 🚫 Halkitis, P.N., Wilton, L., & Drescher, J. (Eds.) (2005). *Journal of Gay and Lesbian Psychotherapy*: Barebacking: Psychosocial and public health approaches. 9(3/4).
- 🚫 Poindexter, C (Eds.) (2010) *Handbook of HIV and Social Work*; HIV- Prevention and Services for gay, Bisexual, and other men who have sex with men: Now is still the Time, Chapter 14 (pp.211-225)
- 🚫 Shernoff, M. (2006). *Why Do Men Bareback? No Easy Answers* <http://www.thebody.com/content/art/art2452.html?ts=pf>
- 🚫 The Atlantic ( 12.02.2014) Gay Men Could Soon Donate Blood: <http://www.theatlantic.com/health/archive/2014/12/gay-men-could-soon-donate-blood/383303/>
- 🚫 Red Cross, 2018 : <https://www.redcrossblood.org/donating-blood/lgbtq-donors>

**JOURNAL# 6:** Due on **ONE (1)** Reading, - Please upload into CANVAS Assignment before class



### **Class # 14 : Women, Infants & children**

## Weekly overview:

This week we will explore the modalities of transmission on specific populations: HIV and Women. Their choice of sexual partners, identity, and experience will be examined throughout the lifespan. Intersectionality of ethnicity, gender, socioeconomic class and spirituality research will provide a unique experiential viewpoint for enhancing clinical practices. We will study the transmission to children, in-utero, along with the treatment modalities toward prevention.

## Weekly objectives:

1. Explore female sexual transmission: men having sex with women, women having sex with women, Trans-gender (MTF & FTM), women who do not identify with sexual preference or gender across the lifespan.
2. Discuss in-utero transmission, prevention & treatment interventions and children living with HIV. Particular emphasis will be placed on disclosure rights and HIPPA protection.

## Lecture / Instructional Tools:

- Host-guest speaker to recount HIV personal experiences & living with chronic illness. Review articles regarding modalities of HIV transmission in women and infants. View: Positive & pregnant: <http://search.alexanderstreet.com/view/work/2238919>

## Required Readings:

- 🚫 Poindexter, C (Eds.) (2010) *Handbook of HIV and Social Work*. The Impact of HIV on Children and Adolescents Chapter 15 (pp.231-247)
- 🚫 Poindexter, C (Eds.) (2010) *Handbook of HIV and Social Work*; HIV and Black and African American Communities in the 21<sup>st</sup> Century. Chapter 17\_(pp.271-284)
- 🚫 Poindexter, C (Eds.) (2010) *Handbook of HIV and Social Work*; Latinos and HIV: A Framework to Develop Evidence-based Strategies. Chapter 18 (pp.291-304)
- 🚫 Sangarlangkarn, A.& Appelbaum, J. ( 2016): Caring for Older Adults with the Human Immunodeficiency Virus: *JAGS* 64:2322–2329
- 🚫 Shernoff, M. (Eds.) (1999). *AIDS and Mental Health, Clinical and Policy Issues: Secrets-Working with Immigrants with HIV Entrusted*. Chapter 21: ( pp.255-263)
- 🚫 Shernoff, M. (Eds.) (1999). *AIDS and Mental Health, Clinical and Policy Issues: “Storytelling” in a Bereavement Support Group for Pediatric HIV/AIDS case managers of the Brooklyn Pediatric AIDS network*. Chapter 17 ( pp.211-219)
- 🚫 <http://ageisnotacondom.org/en/staying-healthy-with-hiv-as-you-age/>: Age is not a condom: STAYING HEALTHY WITH HIV AS YOU AGE
- 🚫 [http://www.gmhc.org/files/editor/file/GMHC\\_lap\\_whitepaper\\_0609.pdf](http://www.gmhc.org/files/editor/file/GMHC_lap_whitepaper_0609.pdf) : HIV Risk for Lesbians, Bisexuals & Other Women Who Have Sex With Women- June, 2009

**JOURNAL # 7:** Due on ONE (1) Reading, - Please upload into CANVAS / Assignment before class.



## **Class #15 – Spirituality, Palliative care & self-care in HIV social work**

### **Weekly overview:**

This week we will explore the Intersectionality of spirituality and HIV, focusing on how to utilize a client's spiritual connection within their treatment plan. We will further review palliative/hospice /end-of-life care, proxies, and extended family support in a micro & macro realm. Concluding with the importance of self-care within HIV social work.

### **Weekly objectives:**

1. Explore how to incorporate spirituality strengths within HIV therapeutic services through a full bio-psychosocial assessment, while understanding the various spiritual coping mechanism that are present.
2. Assess student's end-of-life clinical experiences through readings & group discussions.
3. Investigate methods of social worker's self-care and create individual & unique coping strategies to be shared with the class.

### **Lecture/Discussion**

- 🎗️ Review articles regarding spirituality & palliative care. Role play activities with bereavement support groups interventional techniques: <http://www.vitas.com/en/hospice-care-services/bereavement-and-grief-resources>
- 🎗️ Share self-care assessment tool, and solicit the feedback on existing techniques used by individuals. Self-care rating scale: <https://laveldanaylor.wordpress.com/2012/07/06/self-care-rating-scale/>, Post-quiz on HIV & reflection of course.

### **Required Readings:**

- 🎗️ Gifford, A, Lorig, K, Laurent D, Gonzalez, V (2005). *Living Well with HIV & AIDS, Making Your Wishes Known: Advanced Directives* Chapter 15: (pp 277-287).
- 🎗️ Gifford, A, Lorig, K, Laurent D, Gonzalez, V (2005). *Living Well with HIV & AIDS, Using Planning For Now- And the Future* Chapter 16: (pp 289-309).
- 🎗️ Ringel, S. (2001). *Clinical Social Work Journal* In the shadow of death: Relational paradigms in clinical supervision., 29(2), 171-179

### 🎗️ **ACADEMIC INTEGRITY**



All work submitted in a graduate course must be your own.

It is unethical and a violation of the University's Academic Integrity Policy to present the ideas or words of another without clearly and fully identifying the source. Inadequate citations will be construed as an attempt to misrepresent the cited material as your own. Use the APA citation style which is described in the Publication manual of the American Psychological Association, 6th edition.

Plagiarism is the representation of the words or ideas of another as one's own in any academic exercise. To avoid plagiarism, every direct quotation must be identified by quotation marks or by appropriate indentation and must be properly cited in the text or footnote. Acknowledgement is required when material from another source is stored in print, electronic, or other medium and is paraphrased or summarized in whole or in part in one's own words. To acknowledge a paraphrase properly, one might state: "to paraphrase Plato's comment..." and conclude with a footnote identifying the exact reference. A footnote acknowledging only a directly quoted statement does not suffice to notify the reader of any preceding or succeeding paraphrased material. Information which is common knowledge, such as names of leaders of prominent nations, basic scientific laws, etc., need not be footnoted; however, all facts or information obtained in reading or research that are not common knowledge among students in the course must be acknowledged. In addition to materials specifically cited in the text, only materials that contribute to one's general understanding of the subject may be acknowledged in the bibliography. Plagiarism can, in some cases, be a subtle issue. Any question about what constitutes plagiarism should be discussed with the faculty member.

Plagiarism as described in the University's Academic Integrity Policy is as follows: "Plagiarism: Plagiarism is the use of another person's words, ideas, or results without giving that person appropriate credit. To avoid plagiarism, every direct quotation must be identified by quotation marks or appropriate indentation and both direct quotation and paraphrasing must be cited properly according to the accepted format for the particular discipline or as required by the instructor in a course. Some common examples of plagiarism are:

-Copying word for word (i.e. quoting directly) from an oral, printed, or electronic source without proper attribution.

-Paraphrasing without proper attribution, i.e., presenting in one's own words another person's written words or ideas as if they were one's own.

-Submitting a purchased or downloaded term paper or other materials to satisfy a course requirement.

-Incorporating into one's work graphs, drawings, photographs, diagrams, tables, spreadsheets, computer programs, or other nontextual material from other sources without proper attribution".

Plagiarism along with any and all other violations of academic integrity by graduate and professional students will normally be penalized more severely than violations by undergraduate students. Since all violations of academic integrity by a graduate or professional student are potentially separable under the Academic Integrity Policy, faculty members should not adjudicate alleged academic integrity violations by graduate and professional students, but should refer such allegations to the appropriate Academic Integrity Facilitator (AIF) or to the Office of Student Conduct. The AIF that you should contact is Laura Curran, at lacurran@ssw.rutgers.edu. The

student shall be notified in writing, by email or hand delivery, of the alleged violation and of the fact that the matter has been referred to the AIF for adjudication. This notification shall be done within 10 days of identifying the alleged violation. Once the student has been notified of the allegation, the student may not drop the course or withdraw from the school until the adjudication process is complete. A TZ or incomplete grade shall be assigned until the case is resolved. For more information regarding the Rutgers Academic Integrity Policies and Procedures, see: <http://academicintegrity.rutgers.edu/academic-integrity-at-rutgers>.

To promote a strong culture of academic integrity, Rutgers has adopted the following honor pledge to be written and signed on examinations and significant course assignments submitted for grading: ***On my honor, I have neither received nor given any unauthorized assistance on this test.***

## **DISABILITY ACCOMMODATION**

Rutgers University welcomes students with disabilities into all of the University's educational programs. To receive consideration for reasonable accommodations, a student with a disability must contact the appropriate disability services office at the campus where you are officially enrolled, participate in an intake interview, and provide documentation:







<https://ods.rutgers.edu/students/documentation-guidelines>.

If the material supports your request for reasonable accommodations, your campus' disability services office will provide you with a Letter of Accommodations. Please share this letter with your instructors and discuss the accommodations with them as early in your courses as possible. To begin this process, please complete the Registration form on the ODS website at:

<https://ods.rutgers.edu/students/registration-form>

## **BIBLIOGRAPHY**

### **Article Readings- Located in the CANVAS site under Resources & Assignments**

-  Alessi, E.J. (2008). Changing directions in HIV prevention: The move toward a psychosocial model. *Journal of Gay & Lesbian Social Services, 20*, 273-287
-  Bonita, R, Beadlehole, R. and Kjellstriim, T, (Eds.) (2006) *Basic Epidemiology* (Second Edition). Geneva: World Health Organization. Accessible online at [http://whqlibdoc.who.int/publications/2006/9241547073\\_eng.pdf](http://whqlibdoc.who.int/publications/2006/9241547073_eng.pdf)
-  Cannon-Poindexter, C. (E.Ds.) (2010). Handbook of HIV and Social Work. Chapters: 1, 7, 8, 11, 12, 14, 15, 17&18. Hoboken, NJ: John Wiley & Sons
-  Cederbaum, J. A. (2008). Name-based HIV reporting: Current status and advocacy needs. *J. of HIV/AIDS & Social Services: Research, Policy and Practice, 17*(2), 117-133.
-  Cederbaum, J. A., Coleman, C. L., Goller, G., & Jemmott, L. S. (2006). Understanding the HIV risk reduction needs of heterosexual, African American, substance-abusing men. *Journal of the Association of Nurses in AIDS Care, 17*(6), 28-37.
-  Diaz, R. M., & Ayala, G. (1999). Love, passion, and rebellion: Ideologies of HIV risk among Latino gay men in the USA. *Culture, Health & Sexuality, 1*(3), 277-293.

- Ⓜ Dow, M.G. (1998). Depression and HIV disease. In M.D. Knox & C.H. Sparks (Eds.), *HIV and Community Mental Healthcare* (pp. 161-177). Baltimore, MD: John Hopkins University Press.
- Ⓜ Dyson, et all: (2017) Using the Social-Ecological Model of HIV Prevention to Explore HIV Testing Behaviors of Young Black College Women  
<https://www.sciencedirect.com/science/article/pii/S1055329017302625>
- Ⓜ Gifford, A, Lorig, K, Laurent D, Gonzalez, V (2005). Living Well with HIV & AIDS, Chapter 1, 10, 14, 15 & 16: Boulder, Colorado: Bull Publishing Company
- Ⓜ Gitterman, A., & Heller, N.R. (2011). Integrating social work perspectives and models with concepts, methods, and skills with other professions' specific approaches. *Clinical Social Work Journal*, 39, 204-211.
- Ⓜ Halkitis, Perry (2013). The AIDS Generation: Stories of Survival and Resilience
- Ⓜ Farber, E.W., Mirsalimi, H., Williams, K.A., & McDaniel, J.S. (2003). Meaning of illness and psychological adjustment to HIV/AIDS. *Psychosomatics*, 44, 485-491.
- Ⓜ Moreno, C. L. (2007). The relationship between culture, gender, structural factors, abuse, trauma, and HIV/AIDS for Latinas. *Qualitative Health Research*, 17(3), 1-13.
- Ⓜ A publication from U.S. Department of Health and Senior Services – HIV/AIDS Bureau: *Going the Distance. The Ryan White HIV/AIDS Program: 20 Years of Leadership, A Legacy of Care* (August 2010). PDF is accessible online at  
<http://www.impactmc.net/downloads/samples/writing/Going-the-Distance-20-years-of-the-Ryan-White-HIV-AIDS-Program.pdf>
- Ⓜ Ringel, S. (2001). In the shadow of death: Relational paradigms in clinical supervision. *Clinical Social Work Journal*, 29, 171-179.
- Ⓜ Shernoff, M (Eds.) (1999). AIDS and Mental Health Practice. Clinical and Policy Issues. Chapters: 2, 5, 6, 7, 10, 17, 21 & 22. Binghamton, NY. The Haworth Press
- Ⓜ Vallerand, A. H., Hough, E., Pittiglio, L., & Marvicsin, D. (2005). The Process of disclosing HIV serostatus between HIV-positive mothers and their HIV-negative children. *AIDS Patient Care and STDs*, 19(2), 100-109.
- Ⓜ Vanable, P., Carey, M., Blair, D., & Littlewood, R. (2006). Impact of HIV-related stigma on health behaviors and psychological adjustment among HIV-positive men and women. *AIDS & Behavior*, 10, 473-482.
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- Ⓜ Zea, M.C., Popper, C. A., Echeverry, K. J., & Bianchi, F. (2004). Disclosure of HIV-positive status to Latino gay men's social networks. *American Journal of Community Psychology*, 33, 107-116.
- Ⓜ Web content from The Body by David Wohl, MD on:  
*Top HIV-Related Clinical Developments of 2010* (12/8/10; pp 1-5)  
<http://www.thebody.com/content/art59769.html?getPage=1>
- Ⓜ Web content from the Kaiser Family Foundation on:  
Ⓜ *HIV Testing* (Fact Sheet, Jun 2010) <http://www.kff.org/hivaids/upload/6094-10.pdf>  
Ⓜ *HIV/AIDS Policy* (Fact Sheet, Feb 2009) [http://www.kff.org/hivaids/upload/7582\\_05.pdf](http://www.kff.org/hivaids/upload/7582_05.pdf)
- Ⓜ Web content from NJDHSS – Division of HIV/AIDS Services on:

Available HIV client services in NJ (2010), located in the FAQ section at <http://www.state.nj.us/health/aids/faqs.shtml>

🚫 Web content from the Open Society Foundation on:

🚫 *Women and HIV Testing*

[http://www.soros.org/initiatives/health/focus/law/articles\\_publications/publications/womenhiv\\_20080730/womenhiv\\_20080730.pdf](http://www.soros.org/initiatives/health/focus/law/articles_publications/publications/womenhiv_20080730/womenhiv_20080730.pdf)

🚫 *Mandatory Premarital HIV Testing*

[http://www.soros.org/initiatives/health/focus/law/articles\\_publications/publications/mandatory-hiv-testing-20100513/mandatory-premarital-hiv-testing-20100513.pdf](http://www.soros.org/initiatives/health/focus/law/articles_publications/publications/mandatory-hiv-testing-20100513/mandatory-premarital-hiv-testing-20100513.pdf)

🚫 **RUTGERS, THE STATE UNIVERSITY OF NEW JERSEY**

🚫 **SCHOOL OF SOCIAL WORK – Intersectionality Research Paper**

**Intersectionality Research Paper on HBSE: Social Work Perspective on AIDS (40%): (Due Class # 10)**

Students will be required to select an Intersectionality topic of their interest that concerns an issue relevant to HIV / AIDS. A List of HIV related Films is attached to a separate document that depicts individuals with HIV and how the disease affects them in a micro and macro settings. The theme of HIV and how the unique experience HIV tied in with an Intersectionality theme throughout the film will be the premise for discussing HIV with this research paper. You will research minimum five scholarly articles that support and explore the HIV Intersectionality theme you have chosen.

🚫 Topics include HIV & poverty, HIV & sexuality, HIV & cultural stereotypes, are some broad examples of the Research appear thesis. The HIV/ AIDS Films listed below will be used to extract an AIDS-related client – system, research the topic in depth and provide information on the scope and impact of the issue on AIDS, as well as potential treatment or programmatic solutions. (Should NOT contain summary of the film) The requirements are the following.

- 1) First, choose ONE of the Films below, a topic of your interest that is closely related to HIV / AIDS's Intersectionality social and economic, and political status in our society.

- 2) Identify and discuss the importance and significance of the intersectionality topics as they are interconnected with the macro/mezzo and micro relations within social work.
- 3) State “what is it, exactly, regarding the topic that you want to research in the paper” (e.g., the issue as a social problem, the theory that explains the problem, policy responses, effectiveness of policy responses, guidelines for practice, etc.).
- 4) Review the literature thoroughly & systemically. Must use at **least five (5)** scholarly articles.
- 5) Connect the Intersectionality theme of the film to the research articles. Please remember to identify and discuss how social system (family, neighborhood/community, workplace, government, societies, public policies, etc.) treat HIV /AIDS & what you think of those treatments.
- 6) Discuss broad implications of the Intersectionality issues for HIV/ AIDS and how social work practices could be or are enhanced/explored through this point.
- 7) Discuss policy and practice implications (macro) of the contents of your research.
- 8) Include at least 3 (Three) to 5 (five) NJ / NY or PA State / County resources, with original forms- referrals, & proof of application as relevant and current HIV /AIDS resources. ( Try your best to research and access the application as if you were the client or service provider )
- 9) Conclude your paper by offering a summary of the Intersectionality HIV issue (in a couple of sentences) and your final thoughts on the topic (How did this impact you as a social worker?)
- 10) It is expected that the Intersectionality research paper includes references from this course (text, required readings, bibliography, lecture), and a **minimum of five (5)** outside empirical and theoretical SCHOLARLY sources that relate to the client or agency. If you have concerns about what constitutes an academic source, please consult with your instructor.
- 11) Also, you must include at least (3) to (5) NJ / NY or PA State / County resources, with original forms- referrals, & proof of application
- 12) Remember the following as well:
  - Paper should be 09-12 pages long
  - Should be coherent, logical, and well-written, typo-free papers
  - Should use subheadings, organizing your discussions & thoughts
  - Should have introduction as well as conclusion sections
  - Should cite all others’ work (scholarly publications are preferred) that you used
  - Upload into CANVAS through **Turnitin.com**
  - Should follow APA writing style.
  - All written assignments must be typed double-spaced with 1-inch margins, using 12-point New Times Roman font and adhere to APA format for footnotes and citation references.
  - Grammar and spelling will be considered during grading, and the professor reserves the right to reduce the numerical grade for papers that do not meet the expected composition standards for written assignments submitted by graduate students
  - The final research paper is due in (WEEK 10) and should be posted on CANVAS Assignment section

### **Intersectionality Research Oral & Visual Presentation (10%):**

All students will be required to present their final papers in three class sessions in a professional manner (PowerPoint / Prezi). This document (PowerPoint / Prezi) will be submitted to CANVAS Presentation Assignment before the Presentation date. The presentation will be 10-15 minutes, citing topic, supporting research articles and theme of HIV / AIDS discussion.

The Student Presentations will be held over **three Class Sessions**:


 **Class # 10:**

 **Class # 11**

 **Class # 12**

The instructor will open up the above dates to the students, and each student may select their time: The visual materials should be posted on CANVAS Presentation Assignment section before the presentations.

 **List of Movies: See attached list in CANVAS Assignment section**

 *Films are to be used as a reference point to understand the Intersectionality Issues existing within individual/ groups/systems with HIV / AIDS.*