RUTGERS
School of Social Work

LOSS ACROSS THE LIFESPAN (19:910:547:XX)   **Spring 2022**

Instructor:
Office:
Phone:
E-Mail:

I.   Catalogue Course Description

This course will address many types of loss that occur across the lifespan and will incorporate a developmental approach to loss and grief.

II.   Course Overview

Loss is a universal human experience, asserts Bertha Simos, yet we have a tendency to only acknowledge losses due to death as worthy of therapeutic attention. This course starts with a unique premise: all of life is about loss and therefore it is imperative for social workers to be skilled at identifying less recognizable losses as well as more common ones. Social workers must be adept at helping people process the meaning of that loss in their life.

The course will start with an overview of loss as a normal and necessary part of life and growth. The evolution of grief theory from Freud, Lindemann and Kubler- Ross, through Rando, Klass, Silverman, Nickman and Neimeyer will be an additional focus. It will provide the foundations of classical grief theory as well as its evolution through more recent understandings about continuing bonds, meaning making and the hazards of phase theories of grief. While death and dying at different stages in the lifespan will be addressed, each life stage will also be explored for the normative losses that occur at that stage- for instance, toddlers often lose their primary status as care object and college students often lose the physical care of parents who no longer provide meals, laundry and rides. Although these are positive developmental steps, they are still losses requiring transitions.

This is a participatory and experiential class. All are expected to approach the class ready to consider implications of loss and what it requires of the social worker to be able to effectively assist those going through various transitions. Theory and practice guidelines will be integral to the coursework and the main assignment will be an interview of someone who has experienced some loss.

Additionally, each student will be expected to present some section of the main course material, either individually or in very small groups.

III.   Place of the Course in the Program

This is an advanced elective requiring that HBSE I and Foundation Practice have been taken.

IV.   <u>Program Level Learning Goals and the</u> <u>Council on Social Work Education's Social Work Competencies</u>

The MSW Program at Rutgers, The State University of New Jersey is accredited by the Council on Social Work Education (CSWE). CSWE's accreditation standards can be reviewed at 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 CSWE competencies: 2, 7.   The definitions are below.

Competency 2: Engage Diversity and Difference in Practice

Clinical social work practitioners are knowledgeable about many forms of diversity and difference (e.g., culture, age, health/mental health functioning, educational attainment, sexual orientation/gender identity socioeconomic status, race/ethnicity etc.) and how these components influence the therapeutic relationship and clients' presenting concerns. Clinical social workers understand how various dimensions of diversity affect explanations of health/mental health and well-being, as well as help-seeking behaviors. Practitioners in clinical social work value cultural strengths and recognize the importance of tailoring their engagement strategies, assessment tools, and interventions to meet the diverse needs of their clients. Practitioners in clinical social work monitor their biases, reflect on their own cultural beliefs, and use and apply knowledge of diverse populations and complex health/mental health delivery systems to enhance client well-being. Clinical

social workers recognize the need to conceptualize cases using an intersectional perspective and to identify their clients' strengths and resiliencies, while learning to critically evaluate their own family history, privileges, and characteristics. In presenting case material, clinical social work practitioners integrate anti-oppressive stances and attend to clients' experiences of oppression and marginalization while also working to avoid undue pressure or use of power over clients.

Practitioners in clinical social work:
- Demonstrate awareness of one's intersectionality and cultural background and how these factors may impact one's practice.
- Use clinical supervision to address personal and cultural biases and increase self-awareness.
- Apply the various models of clinical practice in ways that are culturally relevant to diverse and oppressed groups.
- Acknowledge the impact of client's intersectional issues—race/ethnicity, class, gender, sexual orientation, gender identity, ability status, immigration status, religion, and age—on clients' emotional and physical well-being.

Competency 7: Assess Individuals, Families, Groups, Organizations, and Communities

Clinical social workers understand the importance of the assessment process and recognize that it is ongoing and that it directly informs their interventions. Clinical social workers value holistic assessment and therefore use the bio-psycho-social-spiritual assessment process as well as analysis of clients' strengths and resiliencies, their coping skills, and their adaptation to traumatic and stressful life events in a full assessment. Practitioners of clinical social work understand how their personal experiences may impact the assessment process. Clinical social workers recognize the power of intergenerational family patterns on individuals and explain these to clients while avoiding deterministic approaches to identifying such patterns. When applicable, clinical social workers rely on the *Diagnostic and Statistical Manual of Mental Disorders* to enhance their assessment, to conduct differential diagnosis, and to communicate with other healthcare providers about clients' presenting problems and symptomatology. Clinical social workers elicit client feedback about their experience of the assessment process, reflect upon varied meanings of the assessment, and share these assessment outcomes with clients.

Practitioners in clinical social work:
- Demonstrate an ecological understanding of the transactional relationship between emotional/ behavioral difficulties and social problems—poverty, crime, social injustice, institutional racism, sexism, religious and/or ideological bias, homophobia, and transphobia—and incorporate this understanding into their assessments.
- Select, modify and adapt, and evaluate clinical assessment tools and approaches depending on the needs and social characteristics of clients and current empirical evidence.

- Assess how issues of privilege, social injustice, and inequities in access to resources play a role in client difficulties and how they affect the assessment process, including assisting the client in voicing concerns to the entire treatment team.
- Reflect on their own issues of power and privilege and how they impact the therapeutic relationship.

CSWE Core Competencies are assessed using the following assignments:

Competencies	Assessment Measure
C #2: Engage Diversity and Difference in Practice	• Interview with Griever • Presentation • Discussion of cultural aspects of grief
C #7: Assess Individuals, Families, Groups, Organizations, and Communities	• Presentation • Class Discussion • Interview with Griever

V.   **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 strengthens 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

VI.   **Course Learning Goals and Objectives:**

Course learning goals relate to the aforementioned competencies and program level learning goals as they specifically apply to this course which focuses on the experiences of human development, loss, and grief over the lifespan. The course addresses diverse ages, socioeconomic statuses, gender, cultural, racial, and religious identities, and other dimensions of difference in individuals and families

as they experience loss. Assessment skills incorporating these dimensions and the impact of varied losses on individuals and families are a main focus of the course.

Upon completion of this course the student will;

Goal 1- Demonstrate the ability to use varied conceptual frameworks for assessment and intervention with individuals experiencing loss.

Specific Objectives:

1- demonstrate ability to differentiate task-centered from phase-centered models of grief and describe some of the benefits and hazards of each.

2- describe the newer conceptualizations of loss, from disenfranchised grief to ambiguous losses to traditional losses due to death, and developmental aspects of loss at various points in the lifecycle.

3- trace the development of grief theory from early theoretical models through current understandings about the unfolding of "normal" and complicated grief.

4-apply developmental theory at varied stages of life and describe how it affects the experience of loss.

5-apply intersectional lenses to assess and understand how dimensions of identity from life phase, socioeconomic statuses, gender, cultural, racial, and religious identities affect the grief trajectory

6- trace the development of technologies like social media and online spaces as sites for grieving as well as sites for intervention.

7-describe interventions that are developmentally and culturally appropriate at each life phase.

Goal 2- Demonstrate a professional stance in work with individuals experiencing loss, including an ability to reflect critically upon one's practice, utilize research in assessing and intervening with the bereaved, and reflect upon the impact such work has upon the social worker personally.

Specific Objectives**:**
1- demonstrate the ability to apply developmental and grief theories and practice guidelines appropriately to a specific case in a professional manner.

2- demonstrate the ability to utilize information about cultural context, spiritual beliefs and other demographically–based information to inform the assessment and intervention planned with any specific individual.

3- exhibit competence to assess normative developmental losses as well as losses due to death and to tie this assessment to an appropriate form of intervention, particularly focusing on meaning-making as it applies to that specific individual.

4- describe the interplay of societal recognition of loss and individuals' ability to mobilize support and consider how the professional social worker may use policy and advocacy to promote equitable support for individuals experiencing disenfranchised losses, as well as more commonly recognized losses.

5- demonstrate leadership in the ability to teach others about empirically supported grief assessment and intervention

VII.   **Required Texts:**

McCoyd, J.L.M., Koller, J. M., & Walter, C. A. (2021*). Grief and loss across the lifespan: A biopsychosocial perspective (3rd ed)*. New York: Springer Publishing.

Neimeyer, R.A., Harris, D. L., Winokuer, H. R., & Thornton, G. F. (2011). *Grief and bereavement in contemporary society: Bridging research and practice*. New York: Routledge.

Recommended:
Doka, K. (2002). *Disenfranchised grief: New directions, challenges, and strategies for practice*. Champagne, IL: Research Press.
Klass, D., Silverman, P. R., & Nickman, S. L. (1996). *Continuing bonds: New understandings of grief*. Philadelphia, PA: Taylor & Francis.
Rando, T. (1993). *Treatment of complicated mourning*. Champagne, IL: Research Press.

Most required readings are available through the Rutgers University Library "Reading List" that is integrated into your Canvas course. To find your readings:

Click on the "Reading List" tab in the Canvas navigation bar to the left hand side of the course. Please note: this list contains links to articles and other required readings, generally organized by module. Please follow the syllabus and/or Canvas Readings and Resources page in each module for more specific required readings and resources for each week (including textbook/media). You can also copy and paste the resource into the QuickSearch Function of the Rutgers Library website and follow the links to the resource.

The textbooks are available in electronic form but we ask that you only read them on-line or only download a chapter.
DO NOT DOWNLOAD THE WHOLE TEXTBOOK – doing so makes it unavailable for others.

For further instructions [please click here for a video tutorial](#)

VIII. Course Requirements and Attendance/ Participation Policies

Students are expected to attend class regularly and to complete the "Tasks to complete before class" including all the readings. This enables you to participate effectively in class discussions. More than three absences may result in the failure of the class. Students are expected to arrive to class on time and stay for the entire duration of class. More than 3 late arrivals or early departures will result in grade deductions. In addition, students are expected to take leadership roles in class discussions and exercises.

Canvas will be used to manage the course. Canvas is a learning management system (LMS) designed to aid in the communication and dissemination of course information and materials. Students are to ensure that they have access to a working computer with camera and microphone as well as a reliable Internet broadband connection.

- Students are expected to check Canvas course "Announcements" frequently, as this is the instructor's primary method of communication with the class. Entering Canvas online from your computer/device is ideal as it will give you full functionality (phone APPs are not as effective).

- Students are expected to set up 'notification' preferences in Canvas to receive timely notifications of correspondence items including but not limited to: Announcements; Discussion thread posts - to see your classmates' and instructor's comments and weekly discussions (as necessary); Grades comments. In order to receive timely correspondence from me/classmates, you should also set your 'preferred email' so that your Canvas Email will be forwarded to your most frequently-used email address (e.g., Gmail). Otherwise, you will need to manually/proactively check your Canvas Inbox (Email) daily.

This link (that links to an external site) provides information about how students can set up notifications - https://community.canvaslms.com/docs/DOC-10624

- It is expected, and is good course technology practice, that students will download and organize all relevant items, including assignment due dates, the first week of the semester (e.g., syllabus, handouts, pdfs of readings (from the Reading List on the left of Canvas) onto their own personal computer/device in the event of power outage or hacker problems. Moreover, these materials are an important part of creating your "professional library" and you will find them useful resources post-graduation.

- The instructor cannot respond to technology questions. Refer Canvas questions to: 1-877-361-1134; help@canvas.rutgers.edu

(home page: https://onlinelearning.rutgers.edu/canvas).

- Please recognize that the Canvas Inbox/ email does not allow students to send attachments consistently. Always upload your assignments to the Assignment module. If you have concern whether it has fully been uploaded, please feel free to directly email me   jmccoyd@ssw.rutgers.edu   from your own direct email and add the attachment.

INSTRUCTOR AND STUDENT ROLES

The instructor plays an active part in the learning process. Students can expect that the professor will convey clear, specific information about theory, advanced social work practice, and social work values and ethics. Assignments have been developed in a format that encourages learning, as well as provides the instructor with a means with which to evaluate the student.

The student plays an active part in the learning process. As with all social work classes, participating in the process of the educational experience is vital. It is expected that students will **read all required readings, attend all classes, come to class prepared to discuss the topic and complete assignments on time**. Students should demonstrate, in class sessions and in assignments, that they have read the readings (and a generous selection of supplemental readings), can relate readings and class material to case material, and apply empirical evidence for the validity of various theories and the effectiveness of various intervention approaches.

*Note: All electronic devices (e.g., cell phone, ipod, laptop) must be silenced and stored out-of-sight before OTG class begins. Use of electronic devices is prohibited in the classroom at all times. In the on-line classroom, notifications and other applications should be off during class time and preferentially, cameras will be on with microphones muted except when speaking (unless instructor requests otherwise). (See instructor to discuss exceptions). Failure to comply will result in point deductions at the instructor's discretion.

ALSO important:

All discussion must be guided by our Code of Ethics and confidentiality. Therefore, pseudonyms should be used for clients/ respondents in all papers or classroom discussion of case material and the institutions or other identifying material should be removed or made anonymous.

If you elect to talk about your own losses as an example in class. Please do so with the connection to the material or lesson made explicit. Personal disclosures should be connected to the learning goals and course material.

- o ***The RU-SSW supports an inclusive learning environment where diversity, individual differences, and*** *identities (including race, gender, class, sexuality, religion, physical difference, political ideology, etc.)* ***are respected and recognized as a source of strength***. Students and Instructors are expected to respect differences and contribute to a learning environment that allows for a diversity of intellectual

thought and worldviews; values diversity as a way of strengthening communities; and promotes an environment that allows individuals to confirm, grow, challenge, modify, and change previously held viewpoints on their journey of learning.

- In the spirit of mindfulness practice and to create a 'soundscape' conducive to teaching and learning -- a classroom milieu free from extraneous noise and distractions -- all electronic devices (e.g., laptop, cell phone, iPod, etc.) *must be silenced and stored out-of-sight before entering the classroom and during breaks* (in OTG classrooms). *This extends to synchronous classes in that other notifications should be silenced on your computer during class time and you should keep your microphone muted when not speaking*. It is preferred that cameras be kept on throughout class so all class members can be interactive. Zoom backgrounds or screens can be used to ensure privacy of other household members.

- Behavior in this course must also comply with the university's code of conduct (http://studentconduct.rutgers.edu/university-code-of-student-conduct).

- Failure to comply with course policies will result in class participation (and/or assignment) point deductions at the instructor's discretion, or other appropriate action.

IX.   REQUIRED ASSIGNMENTS:

Rubrics for the assignments are at the back of the syllabus with the full assignment description.

The instructor requests that you include the following statement on all assignments, signed.

On my honor, I have neither received nor given any unauthorized assistance on this assignment.

FINAL ASSIGNMENT
The student will interview someone about a loss they have experienced. The student will follow the guidelines for interviewing found in the appendix. This will become the basis of the final assignment in which the student will apply developmental and grief theories to the understanding of the material gathered through the interview. The interviewees (NOT clients, nor someone well-known to the student- a cousin's best friend or someone at two degrees of separation is best) will be informed of the educational purposes of the interview and given the right to stop participation at any time. All interviews will be audio-taped (mp3 preferred) and fully transcribed. Together, the interview and final paper will count for 50% of the final grade. The typical paper, not including the interview transcript, is 10-15 pages. Transcripts should be single spaced with double spaces between each speaker and a pseudonym assigned to the interviewee. No identifying

information should remain in the transcript and the student is to keep the informed consent sheet until they receive their grade back, at which point they can destroy the consent. Transcripts are also typically 8-18 pages long.

IN CLASS PRESENTATION

Students will be responsible for presenting some aspect related to the class material during the course of the term. For example, a student may elect to present information about death in another culture or religious tradition on the class day devoted to Grief and Culture. **This is different from the interview assignment and should not focus solely on a case, but on the theoretical and practice information related to loss during a particular lifephase**. Students can work individually or with a partner/ in groups to:
1) describe a particular type of loss and its effects during a specific lifephase (e.g. death of a parent during emerging adulthood)
2) discuss at least one new research-based article that is incorporated into the presentation to the class;
3) present the material in class incorporating at least one case example or video clip;
4) use at least one discussion question to start class discussion and engage the class.

This accounts for 40% of the student's grade. See appendix for full description of the assignment and the rubric.

The Media Project is an alternative for the research- based presentation. The student can view 3 TV shows or videos and consider the losses shown in the media. This will entail the description of the shows (preferably showing a clip of them within the presentation). These must be followed by an application of grief theories to the material and analysis of the impact such messages in popular media may have for grievers and grief counselors. See appendix for full description of the assignment and the rubric.

Class Participation:
Students are expected to attend all classes having read the assigned readings and discussion boards and tasks as appropriate. They must arrive on time to the classroom (whether OTG or virtual). If anything impairs ability to be fully present in the class environment, please discuss those potential barriers with the Instructor. Absences may occur due to unforeseen circumstances, however, excessive absences (three absences) and/or consistent lateness will result in the lowering of the final grade. The student must notify the instructor in advance, or as soon as possible after, the missed class. Missed classes will be excused by the instructor only for compelling reasons (e.g., illness, emergency, and other--to be determined by the instructor); *notification does not automatically indicate an excused absence*. Even in the event of illness/compelling reasons, 3 or more absences may result in course failure. Students are responsible for obtaining class notes and handouts of the missed session from a fellow student.

Class participation includes, but is not limited to, responses to the Discussion Boards, asking relevant questions/making relevant comments, active participation in small/large group exercises, presentation of case material, and bringing to class relevant articles/newspaper clippings/current events information. Use of phones, laptops during class time is a form of non-participation and will mean deductions from the class participation grade.

Grade Summary:
50 %   Interview and final paper
40 %   Presentation or Media Project
10 %   Class participation (Attendance, demonstration of reading, in class
                discussions, Discussion Boards, and no use of electronics in class)

Grade Statement:

Grades are increasingly contentious. They have also been broadly inflated and standards not held equally across classes. This is provided to have an understanding of the way this professor assesses student work.

It should be understood that students are not graded "on a curve," which would require that the majority get a C (average under the normal bell curve) and the other 20% +-are above that and 20%+- below that. That said, there is some degree of comparison in that those who clearly go above and beyond the bare requirements and who write well and clearly, and who integrate excellent analysis and/or creativity are going to earn A's.

Those who just meet the requirements of the assignment, with no indication of strong engagement with the material and adequate writing and analysis will receive B's.
Those who fail to meet some aspect of the assignment requirements, or who have poor syntax or other writing errors and minimal analysis should not expect to get any higher than a C.

Grade		Definition	Equivalent
A	92-100	Outstanding	4.0
B+	87-91	Very Good	3.5
B	82-86	Good	3.0
C+	77-81	Average	2.5
C	70-76		2.0
F	69 and below	Failing	0.0

*Scores to be rounded up at .5

READINGS ARE IMPERATIVE- Other than the text readings, they are available on the Reading List part of the Canvas shell and can be accessed through the library.

Session 1:   Introduction and Overview of the Course

Required Reading must be completed before class starts:

Simos, B. (1979). *A time to grieve*. Washington, DC: Family Service of America.
(Read the chapters in the course shell)

Stroebe, M., Schut, H., & Boerner, K. (2017). Cautioning health-care professionals:
Bereaved persons are misguided through the stages of grief. *Omega* (United
States), *74*(4), 455-473. https://doi.org/10.1177/0030222817691870

Session 2:   Theories of Grief and Loss

Required Readings must be completed before class starts:

McCoyd, Koller, & Walter text Chapter 1 (Introduction)

Doka, K. J. (Ed). (2002). *Disenfranchised grief: New directions, challenges, and
strategies for practice*. Research Press: Champaign, IL.
        Chapter 1- Introduction

Neimeyer, R.A., et al. Text
        Chapters:
        Chapter 2- Neimeyer & Sands-Meaning reconstruction in bereavement
        Chapter 3- Zech & Arnold-   Attachment and coping with bereavement
        Chapter 6- Worden & Winokuer- A Task-based approach for counseling the
        bereaved

Recommended:
        Maciejewski, P.K., Zhang, B., Block, S. D., & Prigerson, H. G. (2007) An
                empirical examination of the stage theory of grief. *JAMA: the Journal of
                the American Medical Association*, 297, 716-723.
                https://doi.org/10.1001/jama.297.7.716

        Neimeyer , R. A., Klass, D. & Dennis, M. R. (2014). A Social Constructionist
                account of grief: Loss and the narration of meaning. *Death Studies, 38*(8),
                485-498, https://doi.org/10.1080/07481187.2014.913454

        Shear, K., Frank, E., Houck, P. & Reynolds, C.F. (2005). Treatment of
                complicated grief. *JAMA: the Journal of the American Medical
                Association, 293* (21), 2601-2608.
                https://doi.org/10.1001/jama.293.21.2601

Session 3:   "Closure" and Other Grief/ Loss Theories
Required Readings must be completed before class starts:

Berns, N. (2011). *Closure: The rush to end grief and what it costs us*. Philadelphia: Temple University Press. (Chapters 1, 2, 9)

Klass, D. (2013). Sorrow and solace: Neglected areas in bereavement research. *Death Studies*, 37: 597-616. https://doi.org/10.1080/07481187.2012.673535

Neimeyer Text
      Chapter 12- Shear, Boelen & Neimeyer- Treating complicated grief
      Chapter 13- Boss, Roos, & Harris- Grief in the midst of ambiguity and uncertainty

Shear, M. K. (2015). Complicated grief. *New England Journal of Medicine, 372*(2), 153-160. https://doi.org/10.1056/NEJMcp1315618

Recommended:

Attig, T. (2015). Seeking wisdom about mortality, dying and bereavement. In J. M. Stillion and T. Attig (Eds). *Death, dying, and bereavement: Contemporary perspectives, institutions, and practices* (pp. 1-16). New York: Springer Publishing Co.

Gawande, A. (2014). *Being mortal: Medicine and what matters in the end*. New York: Metropolitan Books.

Klass, D., Silverman, P. R., & Nickman, S. L. (1996). *Continuing bonds: New understandings of grief*. Philadelphia, PA: Taylor & Francis.
Chapter 2- Broken hearts or broken bonds

Session 4:   Cultural issues in Grief and Loss

Required Readings must be completed before class starts:

Dezutter, J. J., Soenens, B. B., Luyckx, K. K., Bruyneel, S. S., Vansteenkiste, M. M., Duriez, B. B., & Hutsebaut, D. D. (2009). The role of religion in death attitudes: distinguishing between religious belief and style of processing religious contents. *Death Studies*, *33*(1), 73-92.

Moore, S. E., Jones-Eversley, S. D., Tolliver, W. F., Wilson, B. & Harmon, D. K. (2020) Cultural responses to loss and grief among Black Americans: Theory and practice implications for clinicians. *Death Studies*. https://doi.org/10.1080/07481187.2020.1725930

Moyer, L. M. & Enck, S. (2020) Is my grief too public for you? The digitalization of grief on Facebook™, *Death Studies, 44*,2, 89-97. https://doi.org/10.1080/07481187.2018.1522388

Neimeyer Text:
      Chapter 7- Martin & Doka-   The influence of gender and socialization on grieving styles
      Chapter 26- Klass & Chow-Culture & ethnicity in experiencing policing and handling grief

Umberson, D. (2017). Black deaths matter: Race, relationship loss, and effects on survivors. *Journal of Health and Social Behavior*, *58*(4), 405-420. https://doi.org/10.1177/0022146517739317

Recommended:

Balk, D. (1999). Bereavement and spiritual change. *Death Studies*, 23, 485-493.

Edwards, S. S., McCreanor, T. T., Ormsby, M. M., Tuwhangai, N. N., & Tippene-Leach, D. D. (2009). Maori men and the grief of SIDS. *Death Studies*, *33*(2), 130-152.

Valentine, C. (2010). The role of the ancestral tradition in bereavement in contemporary Japanese society. *Mortality*, *15*(4), 275-293. https://doi.org/10.1080/13576275.2010.513161

Session 5:   Pregnancy and Perinatal Issues

Required Readings must be completed before class starts:

McCoyd, Koller, & Walter Text- Chapter 2

Bennett, S. M., Litz, B. T., Sarnoff Lee, B., & Maguen, S. (2005). The scope and impact of perinatal loss: Current Status and future directions. *Professional Psychology: Research and Practice, 36*(2), 180-187. https://doi.org/10.1037/0735-7028.36.2.180

Grout, L.A.., & Romanoff, B. D. (2000). The myth of the replacement child: Parents' stories after perinatal death. *Death Studies, 24* (2), 93-113. https://doi.org/10.1080/074811800200595

Obst, K. L., Due, C., Oxlad, M., & Middleton, P. (2020). Men's grief following pregnancy loss and neonatal loss: a systematic review and emerging theoretical model. *BMC Pregnancy and Childbirth, 20*(1), 1-17. https://doi.org/10.1186/s12884-019-2677-9

Redshaw, M., & Henderson, J. (2018). Mothers' experience of maternity and neonatal care when babies die: A quantitative study. *PLoS One, 13(*12), e0208134. https://doi.org/10.1371/journal.pone.0208134

Recommended:

Gerber-Epstein, P. P., Leichtentritt, R. D., & Benyamini, Y. Y. (2009). The experience of miscarriage in first pregnancy: the women's voices. *Death Studies*, *33*(1), 1-29.

Goldbach, K.R.C., Dunn, D.S., Toedter, L.J., & Lasker, J.N. (1991). The effects of gestational age and gender on grief after pregnancy loss. *The American Journal of Orthopsychiatry*, 61 (3), 461-7.

McCoyd, J.L.M. (2009). Discrepant feeling rules and unscripted emotion work: Women terminating desired pregnancies due to fetal anomaly (Lead Article). *American Journal of Orthopsychiatry,* 79 (4), 441-451.

McMahon, S, Huang, C-C, Boxer, P. & Postmus, J. (2011). The impact of emotional and physical violence during pregnancy on maternal and child health at one year post-partum. *Children and Youth Services Review, 33*, 2103-2111.

Phillips, A., Tripathi, V., & Tomlinson, C. (2016). The tyranny of silence: Giving sorrow words in the context of genetic counselling. *Healthcare Counselling & Psychotherapy Journal*, 18-21.

Uren, T. H. & Wastell, C.A. (2002). Attachment and meaning-making in perinatal bereavement. *Death Studies, 26*, 279-308

Session 6:   Infancy and Toddlerhood

Required Readings must be completed before class starts:

McCoyd, Koller, & Walter Text- Chapter 3

Douglas, H. A. (2014). Promoting meaning-making to help our patients grieve: an exemplar for genetic counselors and other health care professionals. *Journal of Genetic Counseling, 23*(5), 695-700. https://doi.org/10.1007/s10897-014-9731-6

Hames, C.C. (2003). Helping infants and toddlers when a family member dies. *Journal of Hospice & Palliative Nursing*, 5 (2), 103-112.

Rosengren, K. S., Miller, P. J., Gutierrez, I. T., Chow, P. I., Schein, S. S., Anderson, K. N. (2014). Children's understanding of death: Toward a contextualized and integrated account. *Monographs in the Society for Research in Child Development,* 79(1), Chapters 1 and 7.

Recommended:

Abrams, S. M, Field, T., Scafidi, F., Prodromidis, M. (1995). Newborns of depressed mothers. *Infant Mental Health Journal*, 16 (3), 233-239. https://doi.org/10.1002/1097-0355(199523)16:3<233::AID-IMHJ2280160309>3.0.CO;2-1

Brett, J. (2004). The journey to accepting support: how the parents of profoundly disabled children experience support in their lives. *Paediatric Nursing*, 16 (8), 14-18. https://www.proquest.com/openview/cd9e10ce1e7900fbf2e05705cae41fb0/1?pq-origsite=gscholar&cbl=33983

Viorst, J. (1986). *Necessary losses: The loves, illusions, dependencies and impossible expectations that all of us have to give up in order to grow.* New York: Fawcett. Chapters. 1-3

Session 7:   Elementary School Aged Children

Required Readings must be completed before class starts:

McCoyd, Koller, & Walter Text- Chapter 4

Neimeyer text-
Chapter 9- Buckle & Fleming- Parental challenges after the death of a child

Berg, L., Rostila, M., Saarela, J., & Hjern, A. (2014). Parental death during childhood and subsequent school performance. *Pediatrics, 133*, 682-689. https://doi.org/10.1542/peds.2013-2771

Christ, G. H. (2000). The impact of development on children's mourning. *Cancer Practice*, 8 (2), 72-81. https://doi.org/10.1046/j.1523-5394.2000.82005.x

Goldman, L. (2015). Supporting grieving children. In J. M. Stillion and T. Attig (Eds.). *Death, dying and bereavement* (pp. 275-291). New York: Springer Publishing.

Salinas, C. L. (2021). Playing to heal: The impact of bereavement camp for children with grief. *International Journal of Play Therapy, 30*(1), 40–49. https://doi.org/10.1037/pla0000147

Recommended:

Ahrons, C. (2007). Family ties after divorce: Long-term implications for children. *Family Process, 46*, 53-65.

Broadway, M. D. (2008). Dealing with death: books to help young people cope with grief. *Teacher Librarian*, *35*(5), 44-48.

Currier, J., Holland, J., & Neimeyer, R. (2007). The effectiveness of bereavement interventions with children: A meta-analytic review of controlled outcome research. *Journal of Clinical Child & Adolescent Psychology, 36*, 253-259.

Eppler, C. (2008). Exploring themes of resiliency in children after the death of a parent. *Professional School Counseling, 11(*3), 189-196.

Kempson, D. D., & Murdock, V. V. (2010). Memory keepers: A narrative study on siblings never known. *Death Studies*, *34*(8), 738-756.

Graham-Bermann, S. A., & Perkins, S. (2010). Effects of early exposure and lifetime exposure to intimate partner violence (IPV) on child adjustment. *Violence and Victims, 25*, 427–439.

Holland, J. (2008). How schools can support children who experience loss and death. *British Journal of Guidance & Counseling, 36,* 411-424.

Hung, N. C., & Rabin, L. A. (2009). Comprehending childhood bereavement by parental suicide: A critical review of research on outcomes, grief processes, and interventions. *Death Studies*, *33*(9), 781-814.

McCoyd, J.L.M., Akincigil, A., Peak, E.H. (2010). Pediatric disability and caregiver separation. *Journal of Family Social Work, 13* (3), 251-268.

Melhem, N. M., Moritz, G., Walker, M., Shear, M. K., & Brent, D. (2007). Phenomenology and correlates of complicated grief in children and adolescents. *Journal of the American Academy of Child and Adolescent Psychiatry, 46*, 493–499. doi: 10.1097=chi.0-b013e31803062a9

Silverman, W. K., Ortiz, C. D., Viswesvaran, C., Burns, B. J., Kolkno, D. J.,
      Putnam, F.W., & Amaya-Jackson, L. (2008). Evidence-based psychosocial
      treatments for children and adolescents exposed to traumatic events.
      Journal of Clinical Child & Adolescent Psychology, 37, 156-183.

Willis, C. A. (2002). The grieving process in children: Strategies for
      understanding, educating, and reconciling children's perceptions of death.
      Early Childhood Education Journal, 29, 221-226.

INTERVIEW MUST BE COMPLETED AND TRANSCRIBED BY NOW

Session 8:   Tweens and Teens
INTERVIEW DUE

Required Readings must be completed before class starts:

McCoyd, Koller, & Walter Text- Chapter 5

Neimeyer text-
      Chapter 19- Goldman & Livoti- Grief in LGBT populations.

Punzanio, A.C., Montagna, L., Mastroianni, C., Giuseppe, C., Piredda, M., & de Marinis,
      M. G. (2014). Losing a parent: analysis of the literature on the experiences and
      needs of adolescents dealing with grief. Journal of Hospice & Palliative Nursing,
      16(6), 362-373. https://doi.org/10.1097/NJH.0000000000000079

Recommended:

Cait, C.A.. (2004) Spiritual and religious transformation of females who are
      parentally bereaved in adolescence. *Omega: Journal of Death & Dying*,
      49 (2), 163-181.

Christ, G. H., Siegel, K., Christ, Adolph, E. (2002). Adolescent Grief: It never
      really hit me… until it actually happened." *JAMA: Journal of the
      American Medical Association,* 288 (10), 1269-79.

LaSala, M. C. (2014). Condoms and connection: Parents, gay and bisexual youth,
      and HIV risk. *Journal of Marital and Family Therapy*, 1-14.
      https://doi.org/10.1111/jmft.12088

Li Kitts, R. (2005). Gay adolescents and suicide: Understanding the association. *Adolescence*, *40* (159), 621-28.

Murphy, S., Johnson, et al. (2003). Parents' responses after the death of their child due to accident, suicide or homicide. *Death Studies, 27* (1), 39-62.

SPRING BREAK (March XX-XX)
HAVE A WONDERFUL SPRING BREAK!

Session 9:   Emerging Adulthood

Required Readings must be completed before class starts:

McCoyd, Koller, & Walter text- Chapter 6

Arnett, J. J. (2007). Emerging adulthood: What is it, and what is it good for? *Child Development Perspectives, 1,* 68–73. https://doi.org/10.1111/j.1750-8606.2007.00015.x

Arnett, J. J. (2008). From 'worm food' to 'infinite bliss': emerging adults' views of life after death. *Positive youth development & spirituality: from theory to research*, (pp. 231-243). Philadelphia: Templeton Foundation.

Huismann, D., Sheldon, J., Yashar, B., Amburgey, K., Dowling, J., & Petty, E. (2012). Quality of life and autonomy in emerging adults with early-onset neuromuscular disorders. *Journal of Genetic Counseling, 21*(5), 713-725. https://doi.org/10.1007/s10897-012-9492-z

Recommended:

Power, L., & McKinney, C. (2013). Emerging adult perceptions of parental religiosity and parenting practices: Relationships with emerging adult religiosity and psychological adjustment. *Psychology of Religion and Spirituality, 5*(2), 99-109. https://doi.org/10.1037/a0030046

Rappleyea, D., Taylor, A., & Fang, X. (2014). Gender differences and communication technology use among emerging adults in the initiation of dating relationships. *Marriage and Family Review, 50*(3), 269-284. https://doi.org/10.1080/01494929.2013.879552

Rogers, H. B. (2013). Koru: Teaching Mindfulness to emerging adults. *New Directions For Teaching & Learning,134*, 73-81. https://doi.org/10.1002/tl.20056

Schultz, L. A. (2007). The influence of maternal loss on young women's experience of identity development in emerging adulthood. *Death Studies, 31*(1), 17-43, https://doi.org/10.1080/07481180600925401

Stone, A. L., Becker, L. G., Huber, A. M. & Catalano, R.F. (2012). Review of risk and protective factors of substance use and problem use in emerging adulthood. *Addictive Behaviors, 37*(7), 747–775. https://doi.org/10.1016/j.addbeh.2012.02.014

Weiland, B. J., Korycinski, S. T., Soules, M. M., Zubieta, J. K., Zucker, R. A., & Heitzeg, M. M. (2014). Substance abuse risk in emerging adults associated with smaller frontal gray matter volumes and higher externalizing behaviors. *Drug and Alcohol Dependence*, *137*, 68-75. https://doi.org/10.1016/j.drugalcdep.2014.01.005

Session 10:   Young Adulthood

Required Readings must be completed before class starts:

McCoyd, Koller, & Walter Text- Chapter 7

Neimeyer Text-
Chapter 17- Jordan & McIntosh- Is suicide bereavement different?

Recommended:
Bagnoli, A. (2003). Imagining the lost other: The experience of loss and the process of identity construction in young adults. *Journal of Youth Studies*, 6 (2), 203-18. https://doi.org/10.1080/1367626032000110318

Grinyer, A., & Thomas, C. (2004). The importance of place of death for young adults with cancer. *Mortality*, 9(2), 114-131. https://doi.org/10.1080/13576270310001659436

Hawkins, K. A., Hames, J. L., Ribeiro, J. D., Silva, C., Joiner, T. E., & Cougle, J. R. (2014). An examination of the relationship between anger and suicide risk through the lens of the interpersonal theory of suicide. *Journal of Psychiatric Research*, *50,* 59-65. https://doi.org/10.1016/j.jpsychires.2013.12.005

Read, S. (2005). Loss, bereavement and learning disabilities; A continuum of support. *Learning Disability Practice*, 8 (1), 31-37.

Session 11:   Middle Adulthood

Required Readings must be completed before class starts:

McCoyd, Koller, & Walter Text: Chapter 8

Lloyd, G. M., Sailor, J. L., & Carney, W. (2014). A phenomenological study of postdivorce adjustment in midlife. *Journal of Divorce & Remarriage, 55*(6), 441-450. https://doi.org/10.1080/10502556.2014.931757

Huffington Post (2015). Working poor stories. Retrieved February 20, 2015 from http://www.huffingtonpost.com/news/working-poor/ .

Recommended:

Ahmad, F., Driver, N., McNally, MJ, Stewart, DE. (2009) "Why doesn't she seek help for partner abuse? An exploratory study with South Asian immigrant women. *Social Science & Medicine, 69*(4), 613-622.

Huffington Post (2014). Job loss map. Retrieved February 20, 2015 http://www.huffingtonpost.com/2014/10/30/geography-of-jobs_n_6069856.html .

Johnson, D.M. & Zlotnick, C. (2009) HOPE for battered women with PTSD in domestic violence shelters. *Professional Psychology: Research & Practice, 4*0(3), 234-241.

Marshall, H. (2004). Mid-life loss of parents: from adult child to orphan. *Ageing International*, 29 (4), 351-367.

Nickerson, A., Liddell, B. J., Maccallum, F., Steel, Z., Silove, D., & Bryant, R. A. (2014). Posttraumatic stress disorder and prolonged grief in refugees exposed to trauma and loss. *BMC Psychiatry, 14*(1), 1-19. https://doi.org/10.1186/1471-244X-14-106

Parfitt, Y. & Ayers, S. (2014). Transition to parenthood and mental health in first-time parents. *Infant Mental Health Journal*, 35(3), 263-273. https://doi.org/10.1002/imhj.21443

Room, R. (2005). Stigma, social inequality and alcohol and drug use. *Drug & Alcohol Review*, 24 (2), 143-155. https://doi.org/10.1080/09595230500102434

Thorpe, A., Spittlehouse, J., Joyce, P., Pearson, J., & Schluter, P. (2014). Attitudes to aging in midlife are related to health conditions and mood.

International Psychogeriatrics, 26(12), 2061-2071.
https://doi.org/10.1017/S1041610214001550

Session 12:   Retirement

Required Readings must be completed before class starts:

McCoyd, Koller, & Walter Text- Chapter 9

Carstensen, L. L. (2015). The new age of much older age. *Time, 185*(6/7), 68-70.

Wallis, D. (2014, Aug 29). Increasingly, retirees dump their possessions and hit the road. *New York Times*. Retrieved from http://www.nytimes.com/2014/08/30/business/increasingly-retirees-dump-their-possessions-and-hit-the-road.html

Session 13:   Older Adulthood and Final Paper Due

Required Readings must be completed before class starts:

McCoyd, Koller, & Walter Text- Chapter 10 (3rd age)

Neimeyer text- Ch 8- Carr & Jeffreys- Spousal bereavement in later life

Ghesquiere, A. (2014). "I was just trying to stick it out until I realized that I couldn't": A phenomenological investigation of support seeking among older adults with complicated grief. *Omega, 68*(1), 1-22. https://doi.org/10.2190/OM.68.1

Sachs, O. (2014). My own life. Accessed at http://mobile.nytimes.com/2015/02/19/opinion/oliver-sacks-on-learning-he-has-terminal-cancer.html?_r=3&referrer=

Sasson, I. & Umberson, D.J. (2014). Widowhood and depression: New light on gender differences, selection, and psychological adjustment. *Journals of Gerontology, Series B: Psychological and Social Sciences, 69(*1), 135-145. https://doi.org/10.1093/geronb/gbt058

Sopcheck, J. (2020). Helpful approaches for older adults living in a retirement community to move forward after the death of a significant other. *Journal of*

Social Work in End-of-Life & Palliative Care, 16(3), 219-237.
https://doi.org/10.1080/15524256.2020.1745352

Recommended:

Lynn, J., Teno, J. M., Phillips, R. S. et al. (1997). Perceptions by family members of the dying experience of older and seriously ill patients. *Annals of Internal Medicine, 126,* 97-106.

Holland, J. M., Thompson, K. L., Rozalski, V., & Lichtenthal, W. G. (2014). Bereavement-related regret trajectories among widowed older adults. *Journals Of Gerontology Series B: Psychological Sciences & Social Sciences, 69B*(1), 40-47. https://doi.org/10.1093/geronb/gbt050

Troyer, J. M. (2014). Older widowers and post-death encounters: A qualitative investigation. *Death Studies*, 38 , 637-647. https://doi.org/10.1080/07481187.2014.924829

Walter, T. (1996). A new model of grief: Bereavement and biography. *Mortality, 1*, 7-25. https://doi.org/10.1080/713685822

Session 14:   Older Adulthood (4th Age)
Hope and Hoping: Hastened Death

Required Readings must be completed before class starts:

McCoyd**,** Koller, & Walter Text Chapter 11 (4th age)

Braden, A., Overholser, J., Fisher, J., & Ridley, J. (2015). Life meaning is associated with suicidal ideation among depressed veterans. *Death Studies*, 39, 24-29. https://doi.org/1080/07481187.2013.871604

Bustamante, Juan Jose.(2001).Understanding hope. Persons in the process of dying. *International Forum of Psychoanalysis*, 10 (1), 49-55.

Carey, I. M., Shah, S. M., DeWilde, S., Harris, T., Victor, C. R., & Cook, D. G. (2014). Increased risk of acute cardiovascular events after partner bereavement. *JAMA Internal Medicine*.   https://doi.org/10.1001/jamainternmed.2013.14558

Currier, J. M., Holland, J. M., & Neimeyer, R. A. (2010). Do CBT-based interventions alleviate distress following bereavement? A review of current evidence. *International Journal of Cognitive Therapy*, 3, 71-95. https://doi.org/10.1521/ijct.2010.3.1.77

Eliott, J. A. & Olver, I. N. (2007). Hope and hoping in the talk of dying cancer patients. *Social Science & Medicine, 64*, 138-149. https://doi.org/10.1016/j.socscimed.2006.08.029

Recommended:

Bonnewyn, A., Shah, K., Bruffaerts, R., Schoevaerts, K., Rober, P., Van Parys, H. & Demyttenaere, K. (2014). Reflections of older adults on the process preceding their suicide attempt: A qualitative approach. *Death Studies, 38* (9), 612-618. dx.doi.org/10.1080/481187.2013.835753.

Moneymaker, Kathleen A.; White, Jocelyn (2005). Understanding the dying process: Transitions during final days to hours. *Journal of Palliative Medicine*, 8 (5),1079-1079

Schroepfer, TA. (2007). Critical events in the dying process: The potential for physical and psychosocial suffering. *Journal of Palliative Medicine*, 10 (1), 136-147

Session 15:   Final Thoughts on Loss & Self-Care

Required Readings must be completed before class starts:

McCoyd, Koller, & Walter Text Chapter 12

Penman, E. L., Breen, L. J., Hewitt, L. Y. & Prigerson, H. G. (2014) Public attitudes about normal and pathological grief. *Death Studies, 38*(8), 510-516. https://doi.org/10.1080/07481187.2013.873839

Recommended:

Bertman, S. (2015). Using the arts and humanities with the dying, bereaved…and ourselves. In J. M. Stillion and T. Attig (Eds). *Death, dying, and bereavement*: *Contemporary perspectives, institutions, and practices* (pp. 245-257). New York: Springer Publishing Co.

Bryant, R., Kenny, L., Joscelyne, A., Rawson, N., Maccallum, F., Cahill, C., Hopwood, S., & Aderka, I. (2014). Treating prolonged grief disorder a randomized clinical trial. *JAMA Psychiatry, 71*(12), 1332-1339. https://doi.org/10.1001/jamapsychiatry.2014.1600

Karam, E. G., Tabet, C. C., & Alam, D. (2009). Bereavement related and nonbereavement related depressions: a comparative field study. *Journal of Affective Disorders, 112*, 102-110.

Levine, C. (2004). One loss may hide another. *Hastings Center Report*, 34 (6), 17-19.

Lubas, M. & De Leo, G. (2014). Online grief support groups: Facilitators' attitudes. *Death Studies, 38*(8), 517-521. https://doi.org/10.1080/07481187.2013.873840

National Caregiver's Library. (2015). Accessed at http://www.caregiverslibrary.org/caregivers-resources/grp-end-of-life-issues/hsgrp-hospice/hospice-vs-palliative-care-article.aspx

Stroebe, M & Schut, H. (2010) The Dual Process model of coping with bereavement: A decade on. *OMEGA, 61*(4), 273-289. https://doi.org/10.2190/OM.61.4.b

X.   **Academic Resources**

Success in graduate school and within the larger 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 available to all MSW students as described below.

New Brunswick Campus
All MSW SSW students (NB, Camden, Newark, IW, online and blended) are eligible to access writing assistance at the New Brunswick Learning Center. Online tutoring may also be available.
https://rlc.rutgers.edu/student-services/writing-tutoring

Newark Campus
The Newark writing center is available for MSW students on the Newark campus by appointment.
http://www.ncas.rutgers.edu/writingcenter

Library Research Assistance

The following Rutgers librarians are all available to meet with students in-person or by phone:

Meredith Parker is the social work librarian on the New Brunswick Campus, Alexander Library: Meredith.parker@rutgers.edu p. 848-932-6124;
Natalie Borisovets is at Newark, Dana Library: natalieb@rutgers.edu p. 973-353-5909;
Katie Anderson is at Camden, Robeson Library: Katie.anderson@rutgers.edu 856-225-2830.

Additional Online Resources

APA Style

Purdue OWL https://owl.english.purdue.edu/owl/resource/560/01/

APA Style Guide http://www.apastyle.org/learn/faqs/index.aspx

Purdue OWL Mechanics, grammar, organization https://owl.english.purdue.edu/owl/section/1/

Email Etiquette for Students

https://owl.english.purdue.edu/owl/resource/694/01/

XI.   Course Evaluation

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

XII. Academic Integrity

As per Rutgers University Academic Integrity Policy, "Students are responsible for understanding the principles of academic integrity and abiding by them in all aspects of their work at the University. Students are also encouraged to help educate fellow students about academic integrity and to bring all alleged violations of academic integrity they encounter to the attention of the appropriate authorities." All SSW students are expected to review and familiarize themselves with the RU Academic Integrity Policy in its' entirety.

As per Rutgers University Academic Integrity Policy, "The principles of academic integrity require that a student: make sure that all work submitted in a course, academic research, or other activity is the student's own and created without the aid of impermissible technologies, materials, or collaborations; properly acknowledge and cite all use of the ideas, results, images, or words of others; properly acknowledge all contributors to a given piece of work; obtain all data or results by ethical means and report them accurately without suppressing any results inconsistent with the student's interpretation or conclusions; treat all other students ethically, respecting their integrity and right to pursue their educational goals without interference. This principle requires that a student neither facilitate academic dishonesty by others nor obstruct their academic progress; uphold the ethical standards and professional code of conduct in the field for which the student is preparing."

Students should review all types of Academic Integrity Violations per the RU Academic Integrity Policy. Below are some of the more common violations, as articulated in Rutgers University Academic Integrity Policy:

"**Plagiarism**: Plagiarism is the use of another person's words, ideas, images, or results, no matter the form or media, without giving that person appropriate credit. To avoid plagiarism, a student must identify every direct quotation using quotation marks or appropriate indentation and cite both direct quotation and paraphrasing 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, regardless of the nature of the assignment; Incorporating into one's work graphs, drawings, photographs, diagrams, tables, spreadsheets, computer programs, or other non-textual material from other sources, regardless of format, without proper attribution."

"**Cheating**: Cheating is the use or possession of inappropriate or prohibited materials, information, sources, or aids in any academic exercise. Cheating also includes submitting papers, research results or reports, analyses, and other textual or visual material and media as one's own work when others prepared them. Some common examples are: Prohibited collaboration: receiving research, programming, data collection, or analytical assistance from others or working with another student on an assignment where such help is not permitted; Copying another student's work or answers on a quiz or examination; Using or having access to books, notes, calculators, cell phones, technology, or other prohibited devices or materials during a quiz or examination; Submitting the same work or major portions thereof to satisfy the requirements of more than one course without permission from the instructors involved; Preprogramming a calculator or other device to contain answers, formulas, or other unauthorized information for use during a quiz or examination.; Acquiring a copy of an examination from an unauthorized source before the examination; Having a substitute take an examination in one's place; Submitting a purchased or downloaded term paper or other materials to satisfy a course requirement; Submitting as one's own work a term paper or other assignment prepared, in whole or in part, by someone else."

Any faculty member or academic administrator who becomes aware of a possible academic integrity violation must initiate a formal complaint with the Office of Student Conduct and the SSW's Academic Integrity Facilitator (Laura Curran at lacurran@ssw.rutgers.edu). The AIF deciding the case (the "adjudicator") shall notify the accused student of the allegation in writing or by electronic communication within fifteen working days of the time the faculty member becomes aware of 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, see [RU Academic Integrity Policy](#) and [Procedures for Adjudicating Academic Integrity Violations](#)

**Please note that Canvas uses Turnitin, an internet plagiarism detection service that checks student papers. Its findings may negatively affect your grade, or your enrollment in the program.

Honor Pledge Requirement

It has been recommended by the Office of Student Conduct that the honor pledge below be written on all examinations and major course assignments.

To promote a strong culture of academic integrity, Rutgers has adopted the following honor pledge to be written and signed on examinations and major course assignments submitted for grading:

On my honor, I have neither received nor given any unauthorized assistance on this assignment. Signed by_____

XIII.   Disability Accommodation

Rutgers University welcomes students with disabilities into all of the University's educational programs. In order 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 documentation 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 web site at: https://ods.rutgers.edu/students/registration-form

XIV. Other Resources

Our school is committed to fostering a safe, productive learning environment. Title IX and our school policy prohibit discrimination on the basis of sex, which regards sexual misconduct — including harassment, domestic and dating violence, sexual assault, and stalking. We understand that sexual violence 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 academic advocacy are available through the Rutgers Office on Violence Prevention and Victim Assistance, 732.932.1181, http://vpva.rutgers.edu. Services are free and confidential and available 24 hrs/day, 7 days a week.

Active Shooter Resources

It is important that you know what to do in cases where there is an active shooter on campus. Please go to this site to retrieve information that will reduce your personal risk in case of an active shooting on campus: http://rupd.rutgers.edu/shooter.php ***Please watch the two short videos listed under "Resources".***

Appendix for Assignments:

Final Assignment

Interview:
The goal of this assignment is two-fold:
  (a) **to have you experience what it is like to explore what is often a taboo topic with an individual; and**
  (b) **to learn more experientially about a particular form of loss.**

  In many ways, you must approach this assignment as a true practitioner/researcher. Your practice skills will be useful to maintain rapport. Use open ended questions to explore and help contain the emotional expression if necessary. Your goal is NOT to practice by doing therapeutic work, however. Your goal is to explore the experience with your interviewee until you believe you have fully understood the various aspects of their loss.

The following interview guide provides possible questions- it is NOT to be used as a survey (DO NOT just read the questions to the interviewee), but only to guide ideas about how to explore the topic with your interviewee.

I.   **What loss experience have you had that you are ready to discuss with me today?**
> **[Explore the loss until you have a sense of what happened]**
> **When did it occur?**
> **How old were you at the time?**
> **Who else did the loss affect?**

II.   **What was the most difficult part of the loss for you?**
> **What part-losses/ secondary-losses did you realize you had experienced?**
> **What surprised you in terms of the loss itself?**

III. **What was your emotional response to the loss?**
> **How did you express your emotion?**
> **How did it unfold over time?**
> **How did others respond to the loss?**
> **How did their response affect your response?**
> **At what point did you consider your loss "resolved" or "worked through"? How did you know?**

IV.   **What was hardest to keep doing after the loss?**
> **Were there any "silver linings" to the loss?**

V.   **Is there any way that who/ what you lost remains part of your life today?**

VI.   **How has it been for you to participate in this interview?**

Remember to have the person sign the form on the next page allowing the audio-taping of the interview.

Authorization/ Permission for Taping of Interview

I _____ give permission for _____

to audiotape an interview in which I talk with them about a loss I experienced. I

understand that I may request that we end the interview at any time. I also

understand that I may request that the taping cease and it will be turned off

immediately.

Most importantly, I understand that this interview is being done for

educational purposes and is not intended to be therapeutic, nor will it be available to

anyone other than the person who is interviewing me and the instructor. The tape

will be destroyed after the assignment is completed. Confidentiality will be strictly

observed.

I am aware of the above, have had the opportunity to ask questions, and consent to

the interview and taping of the interview.

_____

Outline for Final Loss Across the Lifespan Paper

The purpose of this paper is to integrate the theory and practice principles we have learned and to apply them to a living person's experience of loss. The outline below is provided as a guide, not a rigid format. Each subsection should be labeled, but not all questions are appropriate to your respondent's loss. The order is not prescribed- flow of the paper's narrative is more important than answering questions in order. Although this is a formal paper and proper grammar, syntax, spelling and citation are expected, you may use "I" judiciously (especially in the summary). References to the class readings (3-5) and other readings (2-4) should be integrated and cited appropriately following APA 7. The paper itself is typically 10-15 pages, not including the interview.

I. **The Respondent:** Describe the person's demographics, their developmental age and functioning, and your relationship to the respondent. What intersectional identities (mention 2-3 of the most important) impact their loss or their mourning of it?

II. **The Loss**: Describe the person's loss, both referring to the words they used (in the transcript, but also your classification of the loss (i.e. a disenfranchised loss of a loved pet during the adolescent years)).

III. **Application of Grief Theory**: Think about the information you elicited about how the person experienced their loss and particularly how they believed their grief process evolved. Try to use several sections of the transcript to show the evolution of the grief process over time while possibly applying the questions below to a section or two (remember, each question is not appropriate for all losses).

   A. How did the person's trajectory of grief unfold? (consider classical grief theories (task or process oriented models of grief) or newer post-modern models (Disenfranchised grief; Continuing Bonds; Dual- Process Model; Meaning- making)? (Use appropriate professional literature)

   B. How do the intersectional aspects of identity you identified in Section I affect this person's grief experience? How do developmental stage, cultural identities, gender, spirituality/ culture or other aspects play a role in the person's grief process and/ or meaning- making?

   C. What area/s did the person struggle with as their grief evolved and what factors do you assess as critical to why they had more difficulty in those areas?

IV **Application of Practice**:

   A. If you were providing grief work services to this person just after their loss, what models/ theories would inform your assessment and treatment plan? Integrate professional literature.

   B. What do you believe the person's needs currently are in regards to this loss and what would you recommend professionally to help?

V. **Summary**:

   How do you perceive this person's loss overall?

   What did you learn from this experience interviewing them?

APA Citation (7th edition) must be accurate. Remember that in the Neimeyer text, all chapters are authored by different authors and should be cited as separate references (do not just cite the whole text). An appropriate format would be:

> Zech, E. & Arnold, C. (2011). Attachment and coping with bereavement: Implications for therapeutic interventions with the insecurely attached. In R.A. Neimeyer, D. L. Harris, H.R. Winokuer, & G.F. Thornton (Eds.), *Grief and bereavement in contemporary society: Bridging research and practice* (pp 23-35). Routledge.

Attach the transcript at the end with the comments received from when you turned the interview in mid-semester.

Rubric:
15 points- evidence of competent interview and transcription (5 points for flow (open-ended questions); 5 for following respondent's lead; 5 for completeness)

15 points- shows analysis of the loss within the theoretical frameworks of loss (5 points for identification of types of loss; 5 for use of relevant loss theories; 5 for analysis)

10 points- shows evidence of skilled application to practice planning (5 for appropriate plan; 5 for connection to the theoretical assessment as driving the intervention)

10 points- follows instructions, has accurate grammar, syntax, citation and writing.

Assignment 2: Presentation or Media Project (Worth 40 points)
PRESENTATION
You may do your presentation alone or with a small group. Your first task is to select the age group and topic area that you want to present. This must be coordinated with the professor to ensure that most topic areas are covered, but not duplicated. If you have another topic area that fits within the course focus, please feel free to ask the professor about focusing in that area.

The presentation involves describing the loss issue and age group as well as reporting on a reading you find and select related to your topic area. The literature you select must have an evidence- base and come from a peer reviewed article. You will then present the information in a creative way and lead discussion about the topic area while incorporating the material.

For the presentation itself, it is best to contextualize the loss using assigned readings from the course. The presentation itself benefits from videos or other media, current event tie-ins, case studies, or even a mini-case presentation.

The goal is to engage the class with the material. There is much latitude and your work to engage the class in a learning experience and dialogue is a crucial part of the grade. Do NOT just read your PowerPoint slides at the class.

Rubric:
10 points- choice of the selected reading and explanation of it to the class. This must be contextualized within the developmental and loss framework.

20 points- creatively presented material that engages the class (5 for PowerPoint; 10 for clarity of presentation and not reading slides; 5 for creativity/ engagement)

10 points- promotion of dialogue with the class about the material (Questions/ exercises).

OR:
MEDIA PROJECT
Overview:
Watch 3 TV shows or movies- one sit- com, one drama and one reality show. Identify losses (traditional as well as maturational or disenfranchised) that occur within each show. Analyze why and how some are portrayed as traumatic and others are minimized or made laughable. How does this frame people's experiences of loss, traumatic and otherwise?

This assignment requires that you analyze three shows: You will need to select representative clips to show the class and discuss the plots of each. You will discuss the losses involved (multiple levels), and discuss how the loss/es are portrayed in the show. You will also talk about what messages each sends to the audience, with some discussion of how each format differs in its presentation of loss.

You need to track not only the plot, but the aspects of the way different characters are portrayed, whether the laugh track accompanies various scenes, what other character responses are to other characters throughout the show. You will also be on alert to identify every loss in the show. Although this may include an actual death, it is much more likely that these will be less obvious- things like loss of a relationship, loss of a friendship, loss of respect or "face", or some other less recognized loss. You need to pay special attention to how these losses are portrayed and also how they remain (or not) in the rest of the story line.

You will provide a summary of each of the plots (as well as appropriate identifying information about the show (title, date aired). You will identify the various losses in each TV show along with your observations of how this was presented in the show. You will end the presentation by analyzing the ways theory from the course applies to the various losses and what messages you believe the shows give to their watchers.

I.   Summary of the plots- include the show title, the episode title, and airing date
II.   Identification of Losses in the shows
III.   Description of the theories as they seem to be applicable. Identify the types of losses, why characters responded the way they did (Disenfranchised loss? Continuing bonds? Ambiguous loss? Developmental aspects?).

IV.   Analyze what messages the show seemed to be portraying and what implications this may have for viewers about grief, loss or related understandings of "the way the world works." Consider how this differs across the three genres.

Rubric:
15 points- Provided a brief description of the shows, the identification of the losses and appropriate analysis. For the presentation, selection of the clips and description of the plots in an engaging and understandable manner.

15 points- Application of grief theories (and interventions if appropriate) to the material in the show (5 points each for relevant theories identified; application of theory to loss; discussion of implications of theory)

10 points- Analysis of the messages portrayed to the audience and the implications of those messages for grievers and grief counselors. (3.3 points each for identification of explicit messages within the show; identification of implicit messages about loss; analysis of what those messages mean for societal perceptions of loss).

Rubric for Attendance and Participation (10 points)

Participation points will be based on attendance and class participation (including refraining from use of cell phones, laptops or other distracting devices in class). Students are expected to attend all classes and arrive on time. Absences are in compliance with SSW policies with more than 2 leading to a reduced grade. The student must notify the instructor in advance or as soon as possible if there is a missed class. *Points will be deducted for use of electronics in the classroom without express permission from the professor; this includes using other electronic devices or apps while in the remote classroom.*

Examples of class participation include, but are not limited to, asking relevant questions/making relevant comments, active participation in small/large group exercises, presentation of case material, and bringing to class relevant articles/newspaper clippings/current events information. This is an interactive class, so participation in class discussion is required.

Rubric:
3 points- Timeliness/ attendance
4 points- Attentiveness in class
3 points- Engagement with class discussions, framing questions, or bringing in outside relevant information.

Revised May 2021 JMc