

**Sowk 631 : Advanced Theories and Clinical Interventions in Health Care
FALL 2011**

Instructor: Julie Cederbaum, MSW, MPH, PhD, Assistant Professor
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Office hours: By appointment
Day/Time: Thursday, 1:00pm – 3:50pm

I. COURSE DESCRIPTION

This course is designed to build upon first year Human Behavior and Practice foundation courses from a trans-disciplinary perspective. The goal is to facilitate integrating this knowledge with advanced analysis of research and theory for social work practice in health care settings serving diverse urban populations. The content of the course will include current and emerging health behavior theory, research, and practice specific to a variety of health related settings and to populations diverse on gender, age, ethnicity, sexual orientation and health status. Theories of behavior change will be related to research and practice across micro, meso, and macro practice arenas. A strengths resilience orientation will be presented relevant to all groups.

The goal is the development of a culturally relevant and evidence-based practitioner able to work at micro, meso and macro levels in health. Skills will include interviewing, social support and psycho-educational interventions with individuals and groups. Supportive context will include the varied roles of social workers in health care including team membership, collaboration, case management, advocacy and leadership. These integrated Behavior Practice skills will be adapted to assess, diagnose, engage, and treat populations such as the terminally and chronically ill, frail elderly, disabled, women, men, children, adolescents, and gay, lesbian, bisexual, transgender, and questioning persons, utilizing culturally relevant ecological perspectives. Ethical dilemmas involving right to life, right to die, advance directives, life support, surrogacy and other issues will be discussed. Self-determination, informed consent, social justice for oppressed populations, confidentiality and other social work values will be integrated into class learning.

II. COURSE OBJECTIVES

Upon completing this course, students will:

1. Demonstrate an advanced theoretical base for helping individuals, families, and groups in varied health care settings, utilizing a bio-psychosocial, ecological perspective in oral and written materials.
2. Articulate values and skills required to perform as a valued professional in a trans-disciplinary setting.

3. Construct rationale for selection of and identify critical elements of application and evaluation of practice approaches, for work with individuals, couples, families, and groups, including but not limited to: bereavement issues, crisis intervention, conjoint counseling, group, stress management.
4. Demonstrate awareness of self as it impacts on professional practice and ethical decision-making by using strengths/resilience approach to analyze social worker role.
5. Conduct benchmarking and literature reviews for critical analysis of evidence-based alternative, non-traditional health care practices of various cultural groups.
6. Identify and consult lifelong learning resources to sustain excellence in current clinical practices and contribute to evolution of trends in the health and social work fields, including but not limited to Internet-related sources, professional associations, conferences, and journals.
7. Demonstrate knowledge of community resources for purposes of consultation, collaboration, advocacy, referral, and networking on behalf of clients and families.

III. COURSE FORMAT

Lecture, discussion with demonstration of techniques, role play, and class presentations constructed around learner needs and core curriculum elements.

IV. COURSE EVALUATION AND GRADING

All students are expected to regularly attend class and be on time. A student with more than two unexcused absences during the course of this seminar may receive a no credit. A student who is tardy three or more times to seminar may receive a grade of no credit. If a student receives a no credit grade in this seminar, they will be required to repeat this seminar.

Class grades will be based on the following:

Assignment Grade:		Final Grade:	
3.85 – 4	A	93 – 100	A
3.60 – 3.84	A-	90 – 92	A-
3.25 – 3.59	B+	87 – 89	B+
2.90 – 3.24	B	83 – 86	B
2.60 – 2.87	B-	80 – 82	B-
2.25 – 2.50	C+	77 – 79	C+
1.90 – 2.24	C	73 – 76	C
		70 – 72	C-

CLASS PARTICIPATION 10%**WRITTEN ASSIGNMENTS**

1. Presentation and 2-page analysis of current health event.

Due Date: Assigned weekly 5%

2. Take Home Mid-term (5-7 pages)
 - Bio-psychosocial assessment
 - Treatment plan development
 - Therapeutic intervention
 - Resource coordination

Due Date: October 6 (by 1pm) 30%

3. A group presentation (will be presented during relevant week): In-service model on a new direction in health social work practice. Presentation should provide: (1) background information on the issue/technique/tool; (2) a critical analysis of the issue/technique/tool, (3) coaching for preliminary skill development in new area, and (4) a fact sheet (handout to the class) that includes resources (internet or other) that encompasses relevant theory, research, and practice.

Due Date: Weeks 8-14 25%

4. Take Home Final (6-8 pages)
 - Bio-psychosocial assessment
 - Treatment plan development
 - Therapeutic intervention
 - Resource coordination
 - Ethics

Due Date: December 9 (by 5pm) 30%

MORE INFORMATION ON ALL ASSIGNMENTS CAN BE FOUND AT THE END OF THE SYLLABUS

V. ATTENDANCE POLICY

Students are expected to attend every class and to remain in class for the duration of the session. Failure to attend class or arriving late may impact your ability to achieve course objectives which could affect your course grade. Students are expected to notify the instructor by email or telephone of any anticipated absence or reason for tardiness.

University of Southern California policy permits students to be excused from class, without penalty, for the observance of religious holy days. This policy also covers scheduled final examinations which conflict with students' observance of a holy day.

Students must make arrangements *in advance* to complete class work which will be missed, or to reschedule an examination, due to holy days observance.

VI. COURSE EXPECTATIONS AND GUIDELINES

Prompt attendance. This is a learner-centered course. For most class sessions a packet of specialized resources is available for student review. Class participation is expected which means that a synthesis of readings and application is demonstrated.

VII. REQUIRED TEXTBOOK

Kerson, T.S., McCoy, J.L.M. & Associates (2010). *Social Work in Health Settings: Practice in Context, 3rd Ed.* Routledge: New York.

Recommended Readings:

Students are expected to read journal articles that relate to the current discussion about the role of social work in the health care environment and the impact of public policy on health care social work practice. Students should come prepared to discuss the media's presentation of these issues. In addition, students should become familiar with the literature in this area. In particular, the following journals are especially pertinent:

American Journal of Public Health
 Community Mental Health Journal
 Health Affairs
 Health and Social Work
 Journal of the American Medical Association (JAMA)
 Journal of Health and Social Behavior
 Journal of Health and Social Policy
 New England Journal of Medicine (NEJM)
 Social Science and Medicine
 Social Work and Health Care

Internet searches of the many private and governmental organizations dedicated to understanding health and mental- health policies that impact social work practice in the health care arena should also be explored to add to the student's learning. Examples include:

<http://www.accesstobenefits.org>
<http://www.hhs.gov/>
<http://www.cdc.gov/nchs/>
<http://www.kff.org>
<http://www.surgeongeneral.gov>
<http://www.omhrc.gov/>
<http://www.cms.hhs.gov/>
<http://www.apha.org>
<http://www.ahcpr.gov/>
<http://www.measuredhs.com/>
<http://www.hschange.com>

<http://www.medicarerights.org/>
<http://www.esresearch.org/>
<http://www.childrensdefense.org/>
<http://www.familiesusa.org>
<http://www.bazelon.org>
<http://www.nami.org>
<http://www.nmha.org>
<http://www.samhsa.gov>
<http://www.hsph.harvard.edu/healthliteracy/>
<http://www.naswdc.org>
<http://www.iaswresearch.org>

Recommended texts:

- Beder, J. (2006). *Hospital social work: the interface of medicine and caring*. New York: Routledge.
- D'Ambruoso, S. (Ed.) (2006). *Handbook of social work in health and aging*. New York : Oxford University Press.
- Egan, M. (2010). *Evidence-Based Interventions for Social Work in Health Care*. Routledge, 2010
- Gehlert, S. & Browne, T. A. (Eds.) (2006). *Handbook of health social work*. New York: Wiley.
- Kolb, P.J. (2007). *Social work practice with ethnically and racially diverse nursing home residents and their families*. New York : Columbia University Press.
- Loretz, L. (2005). *Primary Care Tools for Clinicians: A compendium of Forms, Questionnaires and Rating Scales for Everyday Practice*. Mosby.
- Pritchard, C. (2006). *Mental health social work: Evidence-based practice*. New York: Routledge.
- Poindexter, C. C. (2010). *Handbook of HIV and Social Work: Principles, Practice and Populations*. New York: Wiley.
- Rehr, H., & Rosenberg, G. (2006). *The social work-medicine relationship: 100 years at Mount Sinai*. New York: Haworth Press.
- Rollnic, S., Miller, W. R., & Butler, C. C. (2008). *Motivational interviewing in health care: Helping patients change behavior*. New York: Guilford Press.
- Sobo, E. J., & Loustaunau, M. O. (2010). *The cultural context of health, illness and medicine*. Santa Barbara, CA: Praeger.

Important Fact Sheets

- America's Affordable Health Choices Act of 2009, <http://www.kff.org/healthreform/upload/7952.pdf>
- Medicare – A Primer <http://www.kff.org/medicare/upload/7615-02.pdf>
- Medicare prescription drug plans in 2009 and key changes from 2006 <http://www.kff.org/medicare/upload/7917.pdf>
- The medicare prescription drug benefit – 2009 <http://www.kff.org/medicare/upload/7044-09.pdf>
- Medicare advantage fact sheet – 2009 <http://www.kff.org/medicare/upload/2052-12.pdf>
- New Option for States to Provide Federally Funded Medicaid and CHIP Coverage to Additional Immigrant Children and Pregnant Women <http://www.kff.org/medicaid/upload/7933.pdf>
- The uninsured – A Primer <http://www.kff.org/uninsured/upload/7451-04.pdf>
- State Medicaid Fact Sheet – California <http://www.statehealthfacts.org/mfs.jsp?rgn=6&rgn=1>

VIII. ACADEMIC ACCOMMODATIONS

Any student requesting academic accommodations based on a disability is required to register with Disability Services and Programs (DSP) each semester. A letter of verification for approved accommodations can be obtained from DSP. *Please be sure the letter is delivered to the instructor as early in the semester as possible.* DSP is located in STU 301 and is open from 8:30 a.m. to 5:00 p.m., Monday through Friday. The phone number for DSP is (213) 740-0776.

IX. EMERGENCY RESPONSE INFORMATION

To receive information, call main number (213)740-2711, press #2. “For recorded announcements, events, emergency communications or critical incident information.”

To leave a message, call (213) 740-8311

For additional university information, please call (213) 740-9233

Or visit university website; <http://emergency.usc.edu>

If it becomes necessary to evacuate the building, please go to the following locations carefully and using stairwells only. Never use elevators in an emergency evacuation.

University Park Campus

MRF – Lot B

SWC – Lot B

WPH – McCarthy Quad

VKC – McCarthy Quad

City Center

Front of the building (12th & Olive)

Orange County Campus

Faculty Parking Lot

Skirball Campus

Front of building

Do not re-enter the building until given the “all clear” by emergency personnel.

X. COURSE OUTLINE**Session 1 (August 25): Setting the Stage for Practice in Health****Course Objectives: # 1, 2, 3, 4, 6**

1. A historical perspective of medical social work practice
2. Role/Function of a social worker in healthcare: assessment, treatment, case management, multidisciplinary teams, discharge planning, ethics, cultural relevancy and diversity
3. A review of social work practice skills: engagement, assessment, diagnosis, treatment, termination, leadership in evidence-based practice and evaluation
4. Ethics

Session 1:**Required Reading:**

Congress, E. P. (2008). What social workers should know about ethics: Understanding and resolving practice dilemmas. *Advances in Social Work, 1*(1), 1-26.

[blackboard]

Gregorian, C. (2005). A Career in Hospital Social Work: Do you have what it takes? *Social Work in Health Care, 40*(3), 1-14.

Kerson, McCoyd, & Associates, "Practice in context: the framework" [text]

Recommended Reading:

Gehlert & Browne, Chapter 2 "Social Work Roles in Healthcare Setting" [blackboard]

Gregorian, C. (2005). A career in hospital social work: Do you have what it takes? *Social Work in Health Care, 40*(3), 1-14.

Holliman, D. C., Dzlegielewski, S. F., & Priyadarshi, D. (2001). Discharge planning and social work practice. *Social Work in Health, 32*, 1-19.

Kitchen, A., & Brook, J. (2005). Social work at the heart of the medical team. *Journal of Social Work in Health Care, 40*, 1-18.

Mizrahi, T., & Berger, C. S. (2005). A longitudinal look at social work leadership in hospitals: The impact of a changing health care system. *Health & Social Work, 30* (1), 156-65.

Pecukonis, E.V., Cornelius, L. & Parrish, M. (2003). The future of health social work. *Social Work in Health Care, 37*(3), 1-15.

Rizzo, V.M., & Abrams, A. (2000). Utilization review: A powerful social work role in health care settings. *Health & Social Work, 25*, 264-269.

Snethen, J. A., Broome, M. E., Knafel, K., Deatrick, J. A., Angst, D. B. (2006). Family patterns of decision-making in pediatric clinical trials. *Research in Nursing & Health, 29*(3), 223-237.

Stuart, P.H. (2004). Individualization and prevention: Richard. C. Cabot and early medical social work. *Social Work in Mental Health, 2*, 7-20.

Silverman, E. (2008). From ideological to competency-based: The rebranding and maintaining of medical social work's identity. *Social Work, 53*(1), 89-91.

Volland, P.J., Berkman, B., Phillips, M., & Stein, G. (2003). Social work education for health care: Addressing practice competencies. *Journal of Social Work in Health Care, 37*, 1-17.

Session 2 (September 1): Session 2: Setting the Stage for Practice in Health II**Course Objectives: # 1, 2, 3, 4, 6**

1. Understanding Human Behavior in health and illness: Behavior theories.
Can include: strengths perspective, ego psychology, stress, solution-focused therapy, crisis intervention, social learning, social capital and cross cultural theories
2. Culturally relevant social work: Practice, Behavior, Health Promotion
 - a. Diversity of ethnicity, sexual identity, role group
 - b. Beyond Culture: Strategies for Caring for Patients from Diverse Racial, Ethnic and Cultural groups

Required Reading:

- Bannink, F. P. (2007). Solution-focused brief therapy. *Journal of Contemporary Psychotherapy*, 37, 87-94. [blackboard]
- Gregg, J., & Saha, S. (2006). Losing culture on the way to competence: The use and misuse of culture in medical education. *Academic Medicine*, 81(6) 542-547. [blackboard]
- Grossman, A. H., & D'Augelli, A. R. (2006). Transgender youth: Invisible and vulnerable. *Journal of Homosexuality*, 51(1), 111-128. [blackboard]
- Kotrola, K. (2005). Social work practice in health care: The need to use brief interventions. *Health & Social Work*, 30(4), 336-39. [blackboard]
- Myer, R. A., & Conte, C. (2006). Assessment for crisis intervention. *Journal of clinical Psychology: In Session*, 62, 959-970. [blackboard]

Recommended Reading:

- Boutin-Roster, C., Euster, S., Rolon, Y., Motal, A., BeLue, R., Kloine, R., & Charlson, M.E. (2005). Social work admission assessment tool for identifying patients in need of a comprehensive social work evaluation. *Health & Social Work*, 30, 117-125. [blackboard]
- Brun, C. & Rapp, R.C. (2001). Strengths-based case management: Individuals' perspectives on strengths and the case manager relationship. *Social Work*, 46, 278-288.
- Congress, E. P. (2004). Cultural and Ethical Issues in working with Culturally Diverse Patients and Their Families: The Use of the Culturagram to promote Cultural Competent Practice in Health care Settings. *Social Work in Health Care*, 39, 231 – 247.
- Corby, B. C., Hodges, E. V., & Perry, D. G. (2007). Gender identity and adjustment in Black, Hispanic, and White preadolescents. *Developmental Psychology*, 43(1), 261-266.
- Edwards, J. W., Fisher, D. G., & Reynolds, G. L. (2007). Male to female and transsexual clients of HIV service programs in Los Angeles County, CA. *American Journal of Public Health*, 97, 1030-1033. [blackboard]
- Gehlert & Browne, Chapter 8 "Physical and Mental Health: Interactions, Assessments, and Intervention"
- McAlynn, M., & McLaughlin, J. (2008). Key factors impeding discharge planning in hospital social work: An exploratory study. *Social Work in Health Care*, 46(3), 1-27.
- National Association of Social Workers Code of Ethics.
<http://www.socialworkers.org/pubs/code/code.asp>
- Van Hook, M. P. (2003). Psychosocial issues within primary health care settings: challenges and opportunities for social work practice. *Social Work in Health Care*, 38(1), 63-80.
- Zucker, K. J., & Spitzer, R. L. (2005). Was the Gender Identity Disorder of Childhood Diagnosis Introduced into DSM-III as a Backdoor Maneuver to Replace Homosexuality?: A Historical Note. *Journal of Sex and Marital Therapy*, 31, 31-42.

Session 3 (September 8): Health Promotion-Advances in methods: lifelong learning strategies

Course Objectives: #1, 2, 3, 4, 7

1. Health behavior change theories & public health education models: Transtheoretical Model (stages of change), Health Belief Model, Ecological model, Empowerment theory

Required Reading:

Gehlert & Browne, Chapter 7 “Theories in Health Behavior” [blackboard]
 Prochaska, J. O., & Velicer, W. F. (1997). Behavior change: The transtheoretical model of health behavior change. *American Journal of Health Promotion*, 12(1), 38-48. [blackboard]

Recommended Reading:

Baffour, T. D., Jones, M. A., & Contreras, L. K. (2006). Family health advocacy: An empowerment model for pregnant and parenting African American women in rural communities. *Family and Community Health*, 29(3), 221-228.
 Rosenstock, I. M., Strecher, V. J., & Becker, M. H. (1988). Social Learning Theory and the Health Belief Model. *Health Education Quarterly*, 15(2), 175-183. [blackboard]
 West, R. (2005). Time for a change: Putting the transtheoretical (stages of change) model to rest. *Addiction*, 100, 1036-1039.

Session 4 (September 15): Practice Skills & Assessment

Course Objectives: #1, 2, 3, 4, 5

1. Assessment in health care settings
2. Problem Solving Therapy
3. Short Term CBT

Required Reading:

Beck, J. S., & Tompkins, M. A. (2007). Cognitive therapy. In N. Kazantzis and L. L'Abate (Eds) *Handbook of Homework Assignments in Psychotherapy* (Chap 3). New York: Springer. [blackboard]
 Fisher, E., et al. (2011). Behavior Matters. *American Journal of Preventive Medicine*, 40(5), e-15-e30. [blackboard] **631/636 CROSSOVER**
 Gellis, Z., McGinty, J., Horowitz, A., Bruce, M., & Misener, E. (2007). Problem-solving therapy for late-life depression in home care: A randomized field trial. *American Journal of Geriatric Psychiatry*, 15, 968-978. [blackboard]
 Nezu, A. M., & Nezu, C. M. (2001). Problem-solving therapy. *Journal of Psychotherapy Integration*, 11(2), 187-205. [blackboard]

Recommended Reading:

Carvalho, J. P., & Hopko, D. R. (2009). Treatment of a depressed breast cancer patient with problem-solving therapy. *Clinical Case Studies*, 8(4), 263-276. [blackboard]
 Dobson, K. S. (Ed). (2009). *Handbook of cognitive behavioral therapies*, 3rd ed. New York: Guilford Press.
 Escobar, J. I., Gara, M. A., Diaz-Martinez, A. M., Interian, A., Warmna, M., Allen, L. A. et al. (2007). Effectiveness of a time-limited cognitive behavior therapy-type intervention among primary care patients with medically unexplained symptoms. *Annals of Internal Medicine*, 5(4), 328-335.

Malouff, J. M., Thorsteinsson, E. B., Schutte, N. S. (2007). The efficacy of problem solving therapy in reducing mental and physical health problems: A meta-analysis. *Clinical Psychological Review*, 27(1), 46-57.

Session 5 (September 22): Grief, Loss, and Bereavement

Course Objectives: 1, 2, 3, 4, 5, 6, 7

1. Theories of grief, loss and bereavement, cultural differences
2. Individuals, couples, family and group models around grief and loss
3. Resources and referrals for grief and loss

Required Reading:

Boelen, P.A., Bout, J. & Keizser, J. (2003). Traumatic grief as a disorder distinct from bereavement related depression and anxiety. A replications study with bereaved mental health care patients. *The American Journal of Psychiatry*, 160, 1339-1341. [blackboard]

Callister, L. C. (2006). Perinatal loss: A family perspective. *The Journal of Perinatal & Neonatal Nursing*, 20, 227-234. [blackboard]

Currier, J. M., Holland, J. M., & Neimeyer, R. A. (2006). Sense-making, grief, and the experience of violent loss: Toward a meditational model. *Death Studies*, 30, 403-428. [blackboard] 631/636 CROSSOVER

Kerson, McCoyd, & Associates. Ch 20

Recommended Reading:

Clements, P. T., Focht-New, G., & Faulkner, M. J. (2004). Grief in the shadows: Exploring loss and bereavement in people with developmental disabilities. *Issues in Mental Health Nursing*, 25, 799-808.

Holland, J. M., & Neimeyer, R. A. (2010). An examination of stage theory of grief among individuals bereaved by natural and violent causes: A meaning-oriented contribution. *OMEGA*, 61(2), 103-130.

National Health Plan Collaborative: Toolkit to Reduce Disparities in Health Care, Available at: http://nationalhealthplancollaborative.org/500_toolkit.html 631/636 CROSSOVER

Session 6 (September 29): Managing Substance Abuse in Health Care Settings

Course Objectives: 1, 2, 3, 6, 7

1. Substance abuse / addiction theory
2. Assessment, diagnosis, intervention
3. Resources and referrals

****MID-TERM WILL BE DISTRIBUTED****

Required Reading:

Baskin-Sommers, A., & Sommers, I. (2006). The co-occurrence of substance use and high-risk behaviors. *Journal of Adolescent Health*, 38, 609-611. [blackboard]

Guerrero, E. G., & Cederbaum, J. A. (2011). Adoption and utilization of sexually transmitted infections testing in outpatient substance abuse treatment facilities serving high risk populations in the U.S. *International Journal of Drug Policy*, 22(1), 41-48. 631/636 CROSSOVER [blackboard]

Kerson, McCoyd, & Associates. Ch 25

Recommended readings:

- Gehlert & Browne, Chapter 13 “Substance use Problems in Health Social Work Practice”
- Padgett, D. K., Hawkins, R. L., Abrams, C., & Davis, A. (2006). In their own words: Trauma and substance abuse in the lives of formerly homeless women with serious mental illness. *American Journal of Orthopsychiatry*, 76, 461-467.
- VanDeMark, N. R., Russell, L. A., O’Keefe, M., Finkelstein, N., Noether, C. D., & Gampel, J. C. (2005). Children of mothers’ with histories of substance abuse, mental illness, & trauma. *Journal of Community Psychology*, 33, 445-459.

Session 7 (October 6): Individual & Group in Health Care Settings**Course Objectives: 1, 2, 3, 4.**

1. Self help in healthcare settings
2. Support groups in healthcare settings
3. Psychotherapy in healthcare settings

******MID-TERM DUE******

Required Reading:

- Barak, A., Boniel-Nissim, M., & Suler, J. (2008). Fostering empowerment in on-line support groups. *Computers in Human Behavior*, 24, 1867-1883. [blackboard]
- Clements, J. A. (2008). Social work students’ perceived knowledge of and preparation for group work practice. *Social Work with Groups*, 31, 329-346. [blackboard]
- Kerson, McCoyd, & Associates. Ch 21, 24

Recommended Reading:

- Helgeson, V.S., Cohen, S., Schulz, R., & Yasko, J. (2000). Group support interventions for women with breast cancer: Who benefits from what? *Health Psychology*, 19(2), 107-114.
- Lieberman, M. A., Winzelberg, A., Golant, M., Wakahiro, M., DiMinno, M., Aminoff, M., et al. (2005). Online support groups for Parkinson’s patients: A pilot study of effectiveness. *Social Work in Healthcare*, 42(2), 23-38.
- National Family Caregivers Association (2004). A portrait of family care giving: America’s invisible workforce. Retrieved from: <http://www.thefamilycaregiver.org/pdfs/Portrait.pdf>.
- Schwartz, W. (2006). The group work tradition in social work practice. *Social Work with Groups*, 28(3), 69-89.
- Toseland, R.W., & Rivas, R.F. (2005). Understanding group dynamics. In *An introduction to group work practice* (5th ed.). Boston: Allyn and Bacon.

Session 8 (October 13): Mental Health**Course Objectives #1, 2, 3, 4, 5, 7**

1. Severe mental illness and health disparities
2. Mind-body connection
3. Resources and referrals

- Drake, R. E., Mueser, K. T., Brunette, M. F. (2007). Management of persons with co-occurring severe mental illness and substance use disorder: Program implications. *World Psychiatry*, 6, 131-136. [blackboard]

- Robson, D., & Gray, R. (2007). Serious mental illness and physical health problems: A discussion paper. *International Journal of Nursing Studies*, 44, 457-466. [blackboard]
- Solway, E. S. (2011). The lived experiences of tobacco use, dependence, and cessation: Insights and perspectives of people with severe mental illness. *Health & Social Work*, 36(1), 19-32. **631/636 CROSSOVER** [blackboard]

Recommended Reading:

- Bromet et al. (2011). Cross-national epidemiology of DSM-IV major depressive episode. *BMI Medicine*, 9, in press.
- Lawrence, D. & Kisely, S. (2010). Inequalities in healthcare provision for people with severe mental illness. *Journal of Psychopharmacology*, 24(11), S61–S68.
- McCarthy, M. J., Powers, L. E., & Lyons, K. S. (2011). Poststroke Depression: Social Workers' Role in Addressing an Underrecognized Psychological Problem for couples who have experienced stroke. *Health & Social Work*; 36, 139-148.
- Morden, N. E., Mistler, L. A., Weeks, W. B., Bartels, S. J. (2009). Health Care for Patients with Serious Mental Illness: Family Medicine's Role. *Journal of the American Board of Family Medicine*, 22, 187–195.

Session 9 (October 20): Older adults: healthy aging and continuity of care

Course Objectives: 1,2,3,4,5,6,7

1. The elderly, the “young old,” and the “old old”, Healthy Aging, Aging in place, health technology (<http://www.generationsonline.com/>)
2. The three “D’s” – delirium, depression, dementia
3. Elder abuse & mandated reporting, substance abuse, and sexuality
4. Caregivers

Required Reading:

- Applebaum, P. (2007). Assessment of patients' competence to consent to treatment. *New England Journal of Medicine*, 357, 1834-1840. [blackboard]
- Damron-Rodriguez, J. (2008). Developing competence for nursing and social workers. *Journal of Social Work Education*, 44(3), 27-37.
- Gorbien, M. J., & Eisenstein, A. R. (2005). Elder abuse and neglect: An overview. *Clinics in Geriatric Medicine*, 21(2), 279-292. [blackboard]
- Kerson, McCoyd, & Associates. Ch 16, 17

Recommended Reading:

- Gutheil, I. A., & Heyman, J. (2005). Communication between older people and their health care agents: Results of an intervention. *Health and Social Work*, 30(2), 107-116.
- Hackstaff, L., Davis, C. & Katz, L. (2004). The case for integrating behavior change, client-centered practice and other evidence-based models into geriatric care management, *Social Work in Health Care*, 38(3), 1-19.
- Lai C. K., Chi I., & Kayser-Jones, J. (2004). A randomized controlled trial of a specific reminiscence approach to promote the well-being of nursing home residents with dementia. *International Psychogeriatrics*, 16, 33-34.
- Li, F., Harmer, P., Glasgow, R., Mack, K. A., Sleet, D., Fisher, J., et al. (2008). Translation of an effective Tai Chi intervention into a community-based falls-prevention program. *American Journal of Public Health*, 98, 1195-1198.

Naylor, M. & Keating, S. A. (2008). Transitional care. *Journal of Social Work Education, 44*(3), 65-73.

Zarit, S., & Femia, E. (2008). Behavioral and psychosocial interventions for family caregivers. *Journal of Social Work Education, 44*(3), 49-57.

Session 10 (October 27): Clinical Practice with Men

Course Objectives: 1, 2, 3, 4, 5, 7

1. Social role and stress theories
2. Chronic illness, diabetes, heart disease and cancer
3. Treatment models
4. Resources and referrals

Required Reading:

Kerson, McCoyd, & Associates. Ch 12, 15

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

Recommended Reading:

Bloch, S., Love, A., MacVean, M., Duchesne, G., Couper, J., & Kissane, D. (2007).

Psychosocial adjustment of men with prostate cancer: A review of the literature.

BioPsychoSocial Medicine, 1(2), XX-XX.

Mustanski, B., Garofalo, R., Herrick, A., & Donenberg, G. (2007). Psychosocial health problems increase risk for HIV among urban young men who have sex with men: Preliminary evidence of a syndemic in need of attention. *Annals of Behavioral Medicine, 34*(1), 37-45.

Northouse, L. L., Mood, D. W., Montie, J. E., Sandler, H. M., Forman, J. D., Hussain, M. et al. (2007). Living with prostate cancer: Patients' and spouses' psychosocial status and quality of life. *Journal of Clinical Oncology, 25*, 4171-4177.

Raj, A., Santana, C., LaMarche, A., Amaro, H., Cranston, K., & Silverman, J. G. (2006). Perpetration of intimate partner violence associated with sexual risk behaviors among young adult men. *American Journal of Public Health, 96*, 1873-1878.

Saigal, C. S., Wessells, H., Pace, J., Schonlau, M., & Wilt, T. J. (2006). Predictors and prevalence of erectile dysfunction in a racially diverse population. *Archives of Internal Medicine, 166*, 207-212.

Session 11 (November 3): Clinical Practice with Women

Course Objectives #1, 2, 3, 4, 5, 7

1. Behavioral health practices of women. Feminist and gender theories
2. Heart disease, cancer and other chronic illnesses
3. Pregnancy, infertility, abortions, and sexual dysfunctions, sterilization
4. Eating disorders
5. Violence

Required Reading:

Hutchinson, M. K., Thompson, A. C., & Cederbaum, J. A. (2006). Multi-system factors contributing to health disparities in preventive health care among lesbian women.

Journal of Obstetrics, Gynecologic, and Neonatal Nursing, 35, 393-402. [blackboard]

Kerson, McCoyd, & Associates. Ch 13, 26

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

Recommended Reading:

Coker, A. L., Smith, P. H., Bethea, L., King, M. R., & McKeown, R. E. (2000). Physical health consequences of physical and psychological intimate partner violence. *Archives of Family Medicine*, 9, 451–57.

Ell, K., Xie, B., Wells, A., Nedjat-Haiem, F., Lee, P., & Vourlekis, B. (2008). Economic stress among low-income women with cancer: Effects on quality of life. *Cancer*, 112, 616-625.

Fobair, P., Stewart, S. L., Chang, S., D'Onofrio, C., Banks, P. J., & Bloom, J. R. (2006). Body image and sexual problems in young women with breast cancer. *Psycho-Oncology*, 15, 579-594.

Gross, R., Brammli-Greenberg, S., & Bentur, N. (2003) Women caring for disabled parents and other relatives: implications for social workers in the health services. *Social Work in Health Care*, 37(4), 19-37.

Lyerly, A. D., Mitchell, L. M., Armstrong, E. M., Harris, L. H., Kukla, R., Kupperman, M., & Little, M. O. (2007). Risks, values, and decision-making surrounding pregnancy. *Obstetrics & Gynecology*, 109, 979-984.

Marcus, M. D., Bromberger, J. T., Wei, H., Brown, C., & Kravitz, H. M. (2007). Prevalence and selected correlates of eating disorder symptoms among a multiethnic community sample of midlife women. *Annals of Behavioral Medicine*, 33, 269-277.

Santelli, J. S., Speizer, I. S., Avery, A., & Kendall, C. (2006). An exploration of the dimensions of pregnancy intentions among women choosing to terminate pregnancy or to initiate prenatal care in New Orleans, Louisiana. *American Journal of Public Health*, 96, 2009-2015.

Saulnier, C. F. (2002). Deciding who to see: Lesbians discuss their preferences in health and mental health care providers. *Social Work*. 47(4):355-65.

Wingood, G. M., & DiClemente, R. J. (2000). Application of the theory of gender and power to examine HIV-related exposures, risk factors, and effective interventions for women. *Health Education and Behavior*, 27, 539-565.

Session 12 (November 10): Clinical Practice with Adolescents and Children

Course Objectives: 1, 2, 3, 4, 5, 6, 7

1. Life span / developmental theories
2. Trauma theory
3. Sexuality
4. Interventions

Required Reading:

Hoffman, N. D., Freeman, K., Swann, S. (2009). Healthcare preferences of lesbian, gay, bisexual, transgender and questioning youth. *Journal of Adolescent Health*, 45 (3), 222-229. [blackboard]

Kerson, McCoyd, & Associates. Ch 5 & 9

Kumanyika, S. K. (2008). Environmental influences on childhood obesity: Ethnic and cultural influences in context. *Physiology & Behavior*, 94, 61-70. [blackboard]

Recommended Reading:

- Barakat, L. P., Patterson, C. A., Daniel, L. C. & Dampier, C. (2008). Quality of life among adolescents with sickle cell disease: mediation of pain by internalizing symptoms and parenting stress. *Health and Quality of Life Outcomes*, 6, 60-69.
- DeWalt, D. A., Dilling, M. H., Rosenthal, M. S., & Pignone, M. P. (2007). Low parental literacy is associated with worse asthma care measures in children. *Ambulatory Pediatrics*, 7, 25-31.
- Hamama, R, Ronen, T., & Feigin, R. (2000). Self Control, Anxiety and Loneliness in Siblings of Children with Cancer. *Social Work in Health*, 31(1), 63-83.
- Kan, M. L., Cheng, Y. A., Landale, N. S., McHale, S. M. (2009). Longitudinal predictors of change in number of sexual partners across adolescence and early adulthood. *Journal of Adolescent Health*, In Press.
- Kipke, M. D., Iverson, E., Moore, D., Booker, C., Ruelas, V., Peters, A. L., & Kaufman, F. (2007). Food and park environments: Neighborhood-level risks for childhood obesity in East Los Angeles. *Journal of Adolescent Health*, 40(4), 325-333.
- Kirsh, G., McVey, G., Tweed, S., & Katzman, D. K. (2007). Psychosocial profiles of young adolescent females seeking treatment for an eating disorder. *Journal of Adolescent Health*, 40(4), 351-356., [blackboard]
- Lohman, B. J., Stewart, S., Gundersen, C., Garasky, S., & Eisenmann, J. C. (2009). Adolescent overweight and obesity: Links to food insecurity and individual, maternal, and family stressors. *Journal of Adolescent Health*, In Press.
- Mandell, D. S., Eleey, C., Cederbaum, J. A., Hutchinson, M. K., Jemmott, L. S., & Blank, M. B. (2008). Sexually transmitted infections among adolescents receiving special education services. *Journal of School Health*, 78, 382-388.
- Mulye, T. P., Park, M. J., Nelson, C. D., Adams, S. H., Irwin, C. E., & Brindis, C. D. (2009). Trends in adolescent and young adult health in the United States. *Journal of Adolescent Health*, 45, 8-24.
- Neumark-Sztainer, D. (2009). Preventing obesity and eating disorders in adolescents: What can health care providers do? *Journal of Adolescent Health*, 44(3), 206-213.
- Trasande, L., Liu, Y., Fryer, G., & Weitzman, M. (2009). Effects of childhood obesity on hospital care and costs, 1999–2005. *Health Affairs*, 28, w751-w760.

Session 13 (November 17): Chronic Illness, Pain Management, and Palliative Care**Course Objectives: 1, 2, 3, 4, 5, 6, 7**

1. Roles for social work in chronic illness, pain management and palliative care
2. Issues of caregiving for persons with a chronic illness or chronic pain
3. Challenges of chronic vs. acute illness

Required Reading:

The Chronic Care Model:

http://www.improvingchroniccare.org/index.php?p=The_Chronic_Care_Model&s=2

Read modules: The Chronic Care Model & Model Elements

Gehlert & Browne, Chapter 21 "Pain Management and Palliative Care" [blackboard]

Recommended Reading:

American Pain Society (APS) <http://www.ampainsoc.org>

Arnold, L. M., Crofford, L. J., & Mease P. J., Burgess, S. M., Palmer, S. C., Abetz, L., et al. (2008). Patient perspectives on the impact of fibromyalgia. *Patient Education and Counseling*, 73, 114-120.

- Gehlert & Browne, Chap.18 “SW & Chronic Disease: Diabetes, Heart Disease, & HIV/AIDS
 Jones, B. L. (2006). Companionship, control, and compassion: A social work perspective on the needs of children with children and their families and end of life. *Journal of Palliative Medicine*, 9(3), 774-788.
- Lee, M. M. (2000). Alternative therapies used by women with breast cancer in four ethnic populations. *Journal of National Cancer Institute*, 92, 42-47.
- Lieberman, M. A., Winzelberg, A., Golant, M., Wakahiro, M., DiMinno, M., Aminoff, M., et al. (2005). Online support groups for Parkinson’s patients: A pilot study of effectiveness. *Social Work in Healthcare*, 42(2), 23-38.
- Meghani, S. H., & Cho, E. (2009). Self-reported pain and utilization of pain treatment between minorities and nonminorities in the United States. *Public Health Nursing*, 26(4), 307-316.
- Nainis, N., Paice, J. A., Tarner, J., Wirth, J. H., Lai, J., & Shott, S. (2006). Relieving symptoms of cancer: Innovative art therapy. *Journal of Pain and Symptom Management*, 31(2), 162-169.

NO CLASS NOVEMBER 22-24 - THANKSGIVING

Session 14 (December 1): Community Work Models in Health Care Settings

1. Psychoeducational programs in healthcare settings
2. Compliance / adherence in healthcare settings
3. Family as group

******FINAL WILL BE DISTRIBUTED******

Required Reading:

- Hawe, P. & Shiell, A. (2000). Social capital and health promotion: A review. *Social Science and Medicine*, 51, 871-885. [blackboard]
- Joosten, D. (2007). Preferences for accepting prescribed community-based, psychosocial, and in-home services by older adults. *Home Health Care Services Quarterly*, 26(1), 1-18. [blackboard]
- National Family Caregivers Association (2004). A portrait of family care giving: America’s invisible workforce. Retrieved from: <http://www.thefamilycaregiver.org/pdfs/Portrait.pdf>. [blackboard]

Recommended Reading:

- Folland, S. (2007). Does “community social capital” contribute to population health? *Social Science & Medicine*, 64, 2342-2354.
- Gehlert & Browne, Chapter 9 “Communication in Healthcare”
- Orth, W. S., Madan, A. K., Taddeucci, R. J., Coday, M., & Tichansky, D. S. (2008). Support group meeting attendance is associated with better weight loss. *Obesity Surgery*, 18, 391-394.
- Reppucci, N. D., Woolard, J. L., & Fried, C. S. (1999). Social, community, and preventive interventions. *Annual Review of Psychology*, 50, 387-418. **READ 400-412** [blackboard]
- Sherman, A. C., Pennington, J., Simonton, S., Latif, U., Arent, L., & Farley, H. (2008). Determinants of participation in cancer support groups: The role of health beliefs. *International Journal of Behavioral Medicine*, 15, 92-100.

SW631 ASSIGNMENTS

Below are the assignments for SW631. All assignments are expected to be handed in on time unless alternative arrangements have been made with the instructor prior to the due date of the assignment.

All assignments are expected to be double spaced, in Times New Roman 12-point font, and in APA 5th edition format. If you are unsure of the APA “rules”, please refer to the guidelines provided on Blackboard.

Assignments can be e-mailed to the instructor prior to 3pm on the day it is due, or a hard-copy can be provided the day of class. It is the instructors expectation that you take time to read and edit your work. If you need assistance with any of the assignments, please feel free to contact the instructor. Meetings can be via phone or in person. Also, remember that there are free and available resources for writing on campus: The Writing Center (<http://college.usc.edu/writingcenter/>), or one-on-one tutoring through the school of Social Work.

ASSIGNMENT #1

Retrieve a current event article from a reputable news source (newspaper or news website, or magazine like Time, etc.), something that has arisen in the past week, related to a health issue. Articles may be policy oriented, epidemiological, or psychosocial. Be prepared to present the issue and main points to the class and facilitate discussion.

Send a copy of the article or a working link to the instructor by 5pm the evening prior to your presentation day. This link will be posted to Blackboard so that your fellow classmates have the opportunity to read the article and come up with thoughtful questions for discussion prior to class.

1. Expectation is that the presentation to the class should be 5 minutes. Be prepared to field questions for about 5-10 minutes.
2. Provide to the instructor, the date of your presentation, a 1-2 page written document. This should include:
 - a. a brief description of the article (about one paragraph)
 - b. rationale for why this is an important issue for society
 - c. rational for why this is an important issue for health social worker (or social workers in general)
 - d. potential implications of report for policy and/or practice, and or ethics.

Due Date: Will be assigned (at random) the first day of class.

This assignment is 5% of your grade.

ASSIGNMENT #2: TAKE HOME MID-TERM

For the mid-term, you will receive a set of case vignettes in class during week 6. You will chose **ONE** of the cases to utilize for your practice **AND** policy midterms. **THIS IS A CROSSOVER ASSIGNMENT.** The instructions listed here are for the practice mid-term **ONLY**. Please refer to your policy course syllabus for instructions related to the policy midterm requirements.

The objective of this assignment is for you to take one case and apply your practice skills. You are being asked to provide a bio-psychosocial assessment, develop a treatment plan, discuss therapeutic interventions, and discuss resources coordination. Please **DO NOT** restate the case in your write-up (but do denote which case you are responding to).

Please cover:

Assessment – We are asking you to discuss the immediate issues being presented and discuss how you are going to prioritize the individual's needs.

Treatment Plan – What will the treatment plan include? What is your primary focus when formulating the initial treatment plan? Consider immediate and on-going needs of the individual.

Therapeutic Intervention – Talk about initial interventions for this case and discuss areas of focus. This may include crisis stabilization, compliance, grief and loss, education, etc

Resources Coordination – What resources should you be presenting to the individual/family? Consider both immediate and long-term needs.

The mid-term should be 5 – 7 pages in length, **NOT** including any cover pages or references (if applicable).

**Due Date: Please send an e-mail copy to the instructor on October 6 by 1pm.
This assignment is 30% of your grade.**

ASSIGNMENT #3: GROUP PROJECT

This group presentation will be in groups of 3 on a topic relevant to the week the group selects. The topics are population based; the group may pick any topic within the population group to address. The groups are: older adults, men, women, adolescent & children, mental health, substance use, grief, loss, and bereavement, and chronic illness, pain management, or palliative care. Selection of groups will happen the second week of class.

This assignment will provide you with the opportunity to explore social work practice in response to a health problem/health behavior, and focus on health promotion. The presentation should: (1) demonstrate social work practice (techniques, interventions); (2) description of behaviors related to the issue; and (3) treatment plan for addressing coping and health promotion.

The presentation should include:

1. A description of the health problem: definition, incidence, and/or prevalence in the general population; population groups that are most affected (gender, age, ethnic minority, SES, etc) and why; etiology of the problem (bio-psychosocial factors that contribute); association with other diseases; course of the illness/health problem, including prognosis.
2. Issue surrounding treatment (types of treatment available; side effects from treatment, access and cost of treatment, treatment decision-making, ethical issues regarding treatment).
3. Impact of the problem on the individual's development. Address how development affects the way in which individuals deal with this health problem. You may use case examples if you wish.
4. Impact of the health problem on the family or larger social network. In some instances, it may be relevant to discuss the impact of the health problem on the community. Discuss health promotion.
5. Each group will be expected to identify psychosocial issues related to the problem and the implications for social work intervention which encompasses relevant theory, research, and practice.
6. Legal issues related to the health problem/practice

At the time of your presentation, hand out an outline and list of references to all class members (17 persons total in the class including the instructor). Include at least 5 research article references and 5-10 internet resources. Presentations should be 40 minutes in length. Plan an additional 10-20 minutes for discussion.

Remember to do your best to lead the class in a dynamic way that engages your colleagues. You may use interactive activities as well as lecture. Any take-home resources you can provide to your colleagues are great.

Presentation dates: September 22 or 29; October 13, 20, or 27; November 3, 10, or 17

This assignment is 25% of your grade.

ASSIGNMENT #4: TAKE HOME FINAL

For the final, you will receive a set of case vignettes in class during week 14. You will chose **ONE** of the cases to utilize for your final.

Like the mid-term assignment, the objective of this assignment is for you to take one case and apply your practice skills. You are being asked to provide a bio-psychosocial assessment, develop a treatment plan, discuss therapeutic interventions, discuss resources coordination, and discuss legal mandates and ethical standards. Please **DO NOT** restate the case in your write-up (but do denote which case you are responding to).

Please cover:

Assessment – We are asking you to discuss the immediate issues being presented and discuss how you are going to prioritize the individual's needs.

Treatment Plan – What will the treatment plan include? What is your primary focus when formulating the initial treatment plan? Consider immediate and on-going needs of the individual.

Therapeutic Intervention – Talk about initial interventions for this case and discuss areas of focus. This may include crisis stabilization, compliance, grief and loss, education, etc

Resources Coordination – What resources should you be presenting to the individual/family? Consider both immediate and long-term needs.

Legal Mandates and ethical standards – When discussing legal mandates and ethical considerations, remember that legal mandates are those set out by policies of the agency, county, and/or state/federal government. In contrast, ethical standards are those set out by the social work profession.

The mid-term should be 7-9 pages in length, **NOT** including any cover pages or references (if applicable).

Due Date: Please send an e-mail copy to the instructor on December 9 by 5pm.

This assignment is 30% of your grade.