"While I thought I was learning how to live, 
I was learning how to die."

Leonardo da Vinci

Life must go on
And the dead be forgotten;
Life must go on,
Though good men die.

Anne, eat your breakfast;
Dan, take your medicine;
Life must go on;
I forget just why.

Edna St. Vincent Millay

"... more light ..."

Goethe
(Last words spoken before dying.)

“Life is measured not by its length, but by its depth.”

Mary Fisher
GENERAL INFORMATION:

This course will meet Tuesdays 8-12. In class, you will receive:
1. an extensive syllabus;
2. a bibliography on books and articles about death, loss and grief;
3. handouts pertaining to theory and clinical practice with the dying and bereaved.

Although I do not maintain a regular office at the School of Social Work Building, I do have a meeting place here, Room 2798. Please feel free to make appointments with me throughout the semester if you have questions or concerns. I will always be in my office before and after class.

COURSE DESCRIPTION:

This course addresses the theoretical framework of human loss and grief from a culturally and philosophically diverse perspective. It seeks to provide information about why and how humans grieve and how grieving is affected by type of loss, socioeconomic and cultural factors, individual personality and family functioning. Attention is focused on life span development and the meaning of death and loss at different ages. Various types of loss are discussed from an individual, family, and socio/cultural perspective. The importance of understanding trauma and its relationship to grief and loss will be addressed. Coping and resiliency in loss are explored, emphasizing the diversity of human response and focusing on the significance of social groups in integrating loss. The formation and practice of rituals, and diversity in religious and spiritual experience as a component of coping with loss will be discussed.

COURSE OUTLINE:

This course will begin with an overview of the historical treatment of death and bereavement in dominant United States culture. Contemporary attitudes about death and grief will be examined in this context and will include the examination of current themes in understanding dying and bereaved persons. Significant attention will be placed on understanding the diversity of reactions to death, loss, and grief within different religious and ethnic/cultural groups. The impact of poverty on dying and bereavement will be discussed as well as the policy decisions that direct funding as it impacts dying individuals and their families. The ethical debates in the right-to-die movement and social issues about quality of life will be explored. Explanatory models for bereavement and grief will be discussed including: psychoanalytic models, attachment models, stress and crisis models, cognitive and behavior models, illness and disease models, sociobiological models, and holistic models. Developmental approaches to understanding chronic illness, and individual and family functioning while dying will be addressed as well as current standards of care in social work involvement with the dying person and family. The function of health care systems for the dying and funeral care for the dead will be discussed. Social organizations for the dying and bereaved will be explored. Gender differences in grieving, immigration and cultural losses, responses to war and natural disasters will also be discussed. The theory of complicated mourning will be introduced and will be related both to developmental theory and trauma theory. Examples of complicated mourning will be discussed and will include the phenomena of disenfranchised and stigmatized loss. The identification and assessment of symptoms of complicated mourning will be introduced. Death resulting from violence, like homicide or suicide, and violence in communities and its impact on a person's capacity to grieve will be explored. Counseling the dying and grieving and its impact on the social worker will be discussed, as well as ways that professionals can care for themselves. The special concerns of children and loss will be examined. Aging, grief, and loss will be discussed and current research about losses in aging will be addressed.
Posttraumatic stress disorder as a response to traumatized loss will be discussed. The class will also examine broader cultural implications for living with loss, including responses to cultural genocide (both historically and currently). A final exploration into the development of grief responses on an individual and communal level will be made.

**COURSE OBJECTIVES:**

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

1. Understand the implications for practice and policy of the changing patterns of death/dying in the U.S. regarding socioeconomic status, age, gender, and cultural/ethnic patterns.

2. Understand the different meanings of loss, and the impact of loss on those grieving, on caregivers, and on larger social groups.

3. Identify and describe responses and reactions of the various caregivers (including social workers) to death and loss and the impact of these reactions on client systems.

4. Increase awareness of the medical-ethical issues in death and dying.

5. Summarize the different theoretical models for understanding bereavement and grieving.

6. Identify the practical issues and problems that arise for individuals and families following a death or major loss in the family and the significance of social groups in bereavement.

7. Examine the variables impacting mourning i.e. race, ethnicity, immigration, culture, gender, age, and socioeconomic issues in the experience and expression of grief for the family and/or person facing death and bereavement.

8. Discuss the ways in which violence affects the experience of death or loss, and the impact of layered loss when continually exposed to loss or violence.


10. Discuss dominant themes of complicated mourning including multiple losses, traumatized loss, disenfranchised or stigmatized loss, cultural genocide and historical transmission of loss.

**COURSE DESIGN:**

Lecture and class discussion with films and guest presentations to highlight specific topics. Small group discussion on some topics.
RELATIONSHIP OF THE COURSE TO FOUR CURRICULAR THEMES:

- **Multiculturalism and Diversity** will be addressed through the discussion of worker-client differences and power/privilege differentials based on culture, ethnicity, race, gender, age, and social class. Social system and case examples, possible interventions, and readings will reflect this theme.

- **Social Justice and Social Change** will be addressed through discussion of differences between problems that are responsive to interpersonal practice interventions and those which result from poverty, discrimination, and disenfranchisement and require systemic as well as individual intervention.

- **Promotion, Prevention, Treatment, and Rehabilitation** will be addressed through identification of ways to provide early intervention, guidance, and advocacy within systems, methods of preventing or mitigating later problems in loss and bereavement, and discussion of intervention theories and health care and social policies which support adaptive responses to loss that enhance later adjustment.

- **Behavioral and Social Science Research** will inform this course, especially current research in the following areas: bereavement and complicated mourning attachment and developmental requirements, response to trauma and maltreatment and resiliency/coping/adaptation.

RELATIONSHIP OF THE COURSE TO SOCIAL WORK ETHICS AND VALUES:

Social work ethics and values will be addressed in this course using the NASW Code of Ethics. This course will increase awareness of the medical-ethical issues and decision making in death and dying. In addition, students will evaluate ethical issues involved in death and loss, and discuss the impact of the social worker’s values and reactions to these issues.
COURSE REQUIREMENTS:

1. Attendance at all classes.
2. Reading of assignments.
3. Written assignments listed below:

Due: 5-15-01  A three-page (or longer if you desire) paper describing your own feelings and understanding about death and loss. This may include a personal experience with death, or your observations about how others close to you have experienced death. You may also find it useful to look at the ways in which your family has responded to past losses and deaths. Some students begin by describing their earliest memories of death and how it affected them. Try to focus on personal and not theoretical understanding. (Non-graded)

Due: 5-15-01  A genogram of your family history, noting significant losses. Genogram should highlight denied loss or unresolved loss that you have noted in researching your own family history. This is a non-graded assignment. If you prefer not to do a genogram of your own family, you may use a client's (protecting anonymity) with whom you have worked. (Non-graded)

Due: 5-29-01  Read a personal account of someone who faced death, was a caregiver for people dying, or was the bereaved. Suggested books are: Refuge, by Terry Tempest Williams, The Undertaking: Life Studies from the Dismal Trade, by Thomas Lynch or Tuesdays with Morrie: an old man, a young man, and life’s greatest lesson, by Mitch Albom; or a book you may choose (please clear it with me if not in the bib). This book should be a personal account, first person narrative. Please remember an introductory paragraph introducing your paper and a concluding paragraph summarizing your thoughts. After reading the book, please write 4 or more pages answering the following questions. Please note, even if the book doesn’t specifically address these issues, try to think how the author would handle them:

What are the possible reactions of the patient, friends, and family to news of a life-threatening diagnosis? Or the reactions of family and friends to news of a death?

What are three different ways of coping that people might have when facing death or bereavement? When thinking of coping, please use the understanding of coping mechanisms as discussed in class—underlying psychological strategies for preserving a sense of self and not being overwhelmed by loss.

What are the most difficult aspects of the dying process or bereavement?

What role does “social support” play in the process of dying or in bereavement?

How does poverty, discrimination, and social stigmatization affect dying or being bereaved?

Please react and comment on the following statement in light of the book you just read: “Death is inseparable from the whole of human experience; the study of death touches on the past, present, and future.” (DeSpelder and Strickland)
Due: 6-5-01  (non-graded assignment) Watch one movie, of your choice, dealing with the subjects of death, grief, or loss. Write a paragraph or two discussing death and loss themes (theoretical, sociologic or clinical) that you see reflected in the Movie.

Due: 6-12-01  Read and critique one (of the many) self-help books available for the dying and bereaved. A book on clinical practice may be substituted.

The critique should be at least four pages in length (longer is fine). The critique should include:

- why you chose this book.
- a brief summary (no longer than a paragraph) of the book
- to what readership or specific group (i.e., grieving parents) this book is directed.
- a discussion of the book's strengths: what you liked about the book as a clinician and what will be helpful about this book for its readership.
- a discussion of possible problematic aspects of one book (i.e., perhaps it is directed at a general public readership but is written in sophisticated clinical terminology; or perhaps the book does not meet its stated goal).
- a general summary of the book's utility as a self-help tool, whether it should be used by professionals in their practice, and any cautions about using the book.

Please avoid lengthy quotes or summaries of the book. Please do not select a short children's book. If you have questions, check with instructor.
Due: 7-03-01

A research paper (12-14 pages, longer is O.K. but not necessary) on any aspect of death, loss, or grief. Please choose a topic that is meaningful to you, perhaps discussed in lecture or in your readings, something that you would like to learn about in greater depth. Examples might be: adolescent suicide—predictive variables and intervention techniques, or the Hospice movement in the United States; or current legislation in the Right to Die Movement; or Clinical Issues when counseling a dying child; or The Use of Self-Help Groups with the Bereaved (widows, parents of murdered children, etc.); or socioeconomic and ethnic influences on funeral and grief practices; or post traumatic stress disorder and Homicide Bereavement. These are just examples of the multitude of topics.

Remember to narrow your topic in order to achieve a focus that goes deeply enough. For example, if you write about Hospice in general, you would be covering history, international issues, legislation, team approach, funding, etc.

Format of paper. I value organization. Please use the standard APA format for references. i.e., “Bereavement theorists eschew a fixed-stage grief theory in favor of a more flexible tasks-of-grief approach (Worden, 1992).” Begin with an introductory paragraph where you state what you will be writing about. Then move into the body of your paper. Use at least eight different references. Please use no more than three websites unless you specifically clear use of more with me. I want you to use journal articles and books as they are usually more rigorously peer reviewed than websites.

Note: I am not fond of long lists of “bulleted” items and would rather have you address fewer issues, but taking time to discuss each. For instance, rather than list all the possible signs of suicidality in a client, I’d rather have you take four or five of the signs and discuss them, giving them a paragraph each. You could then say, “Other signs that may represent suicidal tendencies are: a, b, and c.”

In your paper, please cover:

I. Overview/definitions of your topic.

II. Discuss research on the specific aspects of the concept you are concentrating on. This may well take up the body of your paper. Use concise sentence structure. Check for spelling errors or awkward sentence construction. You may include brief case examples from your reading or clinical practice. Lengthy quotes or summarized numerical lists should be avoided.

III. Summarize your findings from your readings. Discuss any implications that you might see for the practice of social work.

IV. Write a concluding paragraph where you restate what the concept was a sweeping summary of your readings, and a final concluding sentence.

Bibliography:
Please include a bibliography of your references. Footnotes are not necessary. Case material: please make sure to preserve client confidentiality, if discussing a case and use pseudonyms. Omit or change geographical information. Avoid any details that could identify clients.

References:
Please include a list of your references. Please do not use more than 33% of your bibliography as websites. Have at least eight references.

Grading:
Grade will be based on organization, following the terms of the assignment, clarity of writing and accurate understanding of concepts. Grading for the term:
Class attendance and completion of nongraded assignments: 10%
Critique I: 22%
Critique II: 22%
Final Paper: 46%

**The required texts are:**

**Suggested for purchase:**
1. Lund, D.A. Men Coping with Grief.
2. Rando, Therese. Treatment of Complicated Mourning. (Rando: TCM)
4. Irish et al, Ethnic Variations in Dying, Death and Grief: Diversity in Universality
5. Albom, Mitch, Tuesdays with Morrie: an old man, a young man, and life’s greatest lesson.
6. Figley, Bride and Mazza, Death and Trauma: The Traumatology of Grieving.

They are on reserve in the library, and are available for purchase through Common Language Bookstore located on 4th Avenue in Ann Arbor. Required readings are noted each week and are for that week. Strobe, Strobe, & Hansson. Handbook of Bereavement.

Please note that a coursepack of lecture roles and related death/loss manuals are available at Dollar Bill/Ulrich’s for purchase. Not required. Copy of this is on reserve in the library. No materials are copyrighted and you make make photocopies as you like.
Summary of Lectures: May to July 2001

1. 5-8-01
   A. Death in our Culture - Past and Present.
   B. A Theoretical Overview: Death, Dying, Bereavement.
   C. Ethics: The Right to Die Movement and Social Issues about the Quality of Life.

2. 5-15-01
   A. Integrating Theory into Clinical Practice.
   B. Developing Sensitivity to Ethnic and Cultural Differences.

   ASSIGNMENT DUE

3. 5-22-01
   Therapeutic Approaches with Individuals and Families when Death is Imminent or has Just Occurred.

4. 5-29-01
   A. Health Care Systems: Dying and Bereavement.
   B. Invited Speaker: Living with Life-Threatening Illness.

   ASSIGNMENT DUE

5. 6-5-01
   A. Special Types of Losses & Grief.
   B. AIDS: Challenges in Treatment for Patients’ and Those Close to Them.

   ASSIGNMENT DUE

6. 6-12-01
   A. Aging and Loss.

   ASSIGNMENT DUE

7. 6-19-01
   Children and Death

8. 6-26-01
   Homicide and Suicide.

9. 7-3-01
   A. Counseling the Dying and Bereaved: Impact on the Mental Health Professional.
   B. Disenfranchised Grief.

   ASSIGNMENT DUE

10. 7-10-01
    Maladaptive Grief: When Death or Loss is Unresolved: "Trauma" Model for Treatment.

11. 7-17-01
    Grief Responses on as Individual and Communal Level.
READING ASSIGNMENTS BY LECTURE

1. 5-8-01
   A. Lecture: Death in Our Culture--Past and Present
      ("Illness as Metaphor")
   B. A Theoretical Overview: Death, Dying, & Bereavement.
      Ethics: The Right to Die Movement and Social Issues About the
      Quality of Life.

   Readings Assigned: DeSpelder, S: Chapters 1, 2, 3, 6, 8, 9
                      Worden: Chapters 1, 2, 3

   Suggested Readings: Irish, ch. 1
                        Shapiro: Chapters 1, 2, 3

2. 5-15-01
   Lecture: A: Integrating Theory into Clinical Practice
            B: Developing Sensitivity to Ethnic and Cultural
               Differences.

   Readings Assigned: Despelder: Chapter 7, 11
                      Shapiro: Chapters 11, 12, 13

3. 5-22-01
   Lecture: A. Therapeutic Approaches with Individuals and Families
             When Death is Imminent or has just Occurred.
             B. Complicated Mourning.

   Readings Assigned: Despelder: Chapter 4
                      Worden: Chapters 4, 5, 7

   Suggested Reading: Figley, ch 1,2,3
                      Rando: Treatment of Complicated Mourning, Chapters 3, 12, 13, 14
                      Shapiro: Chapter 4

4. 5-29-01
   Lecture: A. Health Care Systems: Dying and Bereavement.
             B. Invited Speakers: Living with a Life-Threatening Illness.

   Readings Assigned: Despelder: Chapter 5
                      Rando: TCM, Chapters 1, 2, 4
                      Shapiro: Chapters 7, 8, 9

ASSIGNMENT DUE
5. 6-5-01
Lecture: A. Special Types of Losses and Grief: AIDS and Other Challenges in Treatment for Patients and Those Close to Them.

Readings Assigned: Despelder: Chapter 13
Worden: Chapters 6, 7

Suggested Readings: Shapiro: Chapters 10, 14

ASSIGNMENT DUE

6. 6-12-01
Lecture: Aging and Loss

Reading: Worden: Chapters 4, 5

ASSIGNMENT DUE

7. 6-19-01
Lecture: A. Children and Death.

Readings Assigned: Worden: Chapter 7
DeSpelder: Chapter 10

Suggested Readings: Rando, TCM, ch. 13
Shapiro, ch. 4, 5, 6, 10
Emswiler and Emswiler

8. 6-26-01
Lecture: A. Homicide and 
B. Suicide

Readings Assigned: Despelder: Chapter 11, 12

Suggested Readings: Rando: Treatment of Complicated Mourning, Chapter 10, 11
Figley: ch. 8

9. 7-3-01
B. Disenfranchised Grief.

Readings Assigned: Worden: Chapters 8, 9

Suggested Readings: Rando: Treatment of Complicated Mourning, Chapter 14, 19

ASSIGNMENT DUE

10. 7-10-01
Lecture: A. Maladaptive Grief: When Loss or Death is Unresolved: A "Trauma" Model for Treatment

Suggested Readings: Rando: TCM, Figley
I wish I had known about the therapeutic value of talk when Martin was dying. Because today I would insist on talking. I would talk to him about death and terror and pain as well as love. It is what you don't see, don't talk about, that terrifies you. The things that go bump in the emotional night. Talking dispels the phantoms. In helping Martin, I would have helped myself. I would have learned to talk about my feelings. And after Martin died, I could have talked about him. And talked about him and talked about him. Until I finally knew that he was dead and I was alone--starting a new life. I would have emerged from grief sooner. And so would the children.

From: Lynn Caine, Widow

Only people who avoid love avoid grief. The point is to learn from it and remain vulnerable to love. John Brantner

All those years I fell for the great palace lie that grief should be gotten over as quickly as possible and as privately. But what I’ve discovered since is that the lifelong fear of grief keeps us in a barren, isolated place and that only grieving can heal grief; the passage of time will lessen the acuteness, but time alone, without the direct experience of grief, will not heal it. San Francisco is a city in grief, we are a world in grief, and it is at once intolerable and a great opportunity. I’m pretty sure that it is only by experiencing that ocean of sadness in a naked and immediate way that we come to be healed—which is to say, that we come to experience life with a real sense of presence and spaciousness and peace...

Anne Lamott