

THE UNIVERSITY OF TENNESSEE  
COLLEGE OF SOCIAL WORK

**SW540 - Social Work in Health Care Settings**

Course Outline  
Spring 2005

Dr. Egan

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Office hours: Mondays & Tuesdays: 3:30pm to 4:30pm & by appt.

Course session schedule, activities & required readings

Required Readings may be accessed at <http://www.lib.utk.edu>  
--online electronic reserves for SW 540: Social Work in Health Care Settings; identified  
in outline as “\*Required Readings”.

Please note, as indicated in the grading policy statements in this outline, students are expected to participate in all class session activities and to evidence in that participation thoughtful preparation and reading assigned selections for class sessions.

**Sessions 1 & 2** Weeks of January 24<sup>th</sup> & 31<sup>st</sup>

**Session 1**

- Overview: The framework of the course
- The course outline, readings and requirements
- History of social work in health care settings
- Current context of health care delivery & health care delivery

**Session 2:**

- ? Societal, political and organizational shifts expanding SW in health care settings:
- Changes in health care technology
  - Trends in health care consumer population
  - The shift from acute to chronic & inpatient to outpatient care
  - Managed care & the uninsured

In Class Activity: Discussion of contracting, the Ethnographic Interview and Teaching Moment assignments.

**\*Required Readings: [Sessions 1 & 2]:**

- \*Cnaan, R., & Boddie, S. (2002). Charitable choice and faith-based welfare: A call for social work. *Social Work*, 47(3), 224-235.
- \*Dziegielewska, S., & Holliman, D. (2001). Managed care and social work practice: Implications in an era of change. *Journal of Sociology and Social Welfare*, 28(2), 125-139.
- \*Friedman, E. (1996). Capitation, integration and managed care. *Journal of the American Medical Association*, 275(12), 957-969.

- \* Lesser, J. (2000). Clinical social work and family medicine: A partnership in community service. *Health & Social Work, 25*(2), 119-125.
- \*Manton, K., & Gu, K. (2001). Changes in the prevalence of chronic disability in the United States black and nonblack population above the age of 65 from 1982-1999. *Proceedings of the National Academy of Sciences, 98*, 6354-6359.
- \*Petrosky, M., Chaffer, C., Devlin, M., & Almog, D. (2000). An on-site social work program in an urban academic dental center. *Journal of Dental Education, 64*(5), 370-374.
- \*Pecukonis, E., Cornelius, L., & Parrish, M. (2003). The future of health social work. *Social Work in Health Care, 37*(3), 1-15.
- \*Schneider, A., Hyer, K., & Luptak, M. (2000). Suggestions to social workers surviving in managed care. *Health & Social Work, 25*(4), 276-279.

**Additional Recommended Readings:**

Berkman, B. (1996). The emerging health care world: Implications for social work practice and education. *Social Work, 41*(5), 541-551.

Feldman, R. (2001). Health care and social work education in a changing world. *Social Work in Health Care, 34*(1/2), 31-41.

Mizrahi, T., & Berger, C. (2001). Effect of a changing health care environment on social work leaders: Obstacles and opportunities in hospital social work. *Social Work, 46*(2), 170-182.

Takamura, J. (2000). The aging of America and the Older Americans Act. In S. Keigher, & A. Fortune (Eds.), *Aging and social work: The changing landscape*. (pp. 127-135). Washington, DC: NASW.

Volland, P., Berkman, B., Phillips, M., & Stein, G. (2003). Social work education in health care: Addressing practice competencies. *Social Work in Health Care, 37*(4), 1-17.

Vourlekis, B., Ell, K., & Padgett, D. (2001). Educating Social Workers for health care's brave new world. *Journal of Social Work Education, 37*, 177-191.

**Sessions 3, 4, & 5                      Weeks of: February 7<sup>th</sup>, 14<sup>th</sup> & 21<sup>st</sup>**

**Ethnographic Interview Paper is Due week of Feb. 21<sup>st</sup>**

**Sessions 3 & 4:**

- Health disparities
- Multicultural health care beliefs

- Acuity? Chronicity

Video: Chronic Illness: The Constant Companion

**\*Required Readings: [Sessions 3 & 4]:**

- \* Al-Krenawi, A., & Graham, J. (2000). Islamic theology and prayer: Relevance for social work practice. *International Social Work*, 43(3), 289-304.
- \*Applewhite, S. L. (1995). *Curanderismo*: Demystifying the health beliefs and practices of elderly Mexican Americans. *Health & Social Work*, 20(4), 247-253.
- \* Berger, C. (2001). Infant mortality: A reflection of the quality of health. *Health & Social Work*, 26(4), 276-282.
- \*Bertera, E. (2003). Psychosocial factors and ethnic disparities in diabetes diagnosis and treatment among older adults. *Health & Social Work*, 28(1), 33-42.
- \*Campinha-Bacote, J. (2002). The process of cultural competence in the delivery of healthcare services: A model of care. *Journal of Transcultural Nursing*, 13(3), 182-184.
- \*Cornelius, D. (2000). Financial barriers to health care for Latinos: Poverty and beyond. *Journal of Poverty*, 4(1/2), 63-83.
- \* Murguia, A., Peterson, R., & Zea, M. (2003). Use and implications of ethnomedical health care approaches among Central American Immigrants. *Health & Social Work*, 28(1), 43-52.
- \*Panos, P., & Panos, A. (2000). A model of culture-sensitive assessment of patients in health care settings. *Social Work in Health Care*, 31(1), 49-62.
- \*Sudha, S., & Mutran, E. (2001). Race, ethnicity, nativity, and issues of health care. *Research on Aging*, 23(1), 3-13.
- \*Van Loon, R., Borkin, J., & Steffen, J. (2002). Health care experiences and preferences of uninsured workers. *Health & Social Work*, 27(1), 17-26.

**Additional Recommended Readings:**

Healthy People 2010 Fact Sheet. (2002). Department of Health and Human Services, Office of Disease Prevention and Health Promotion. Washington, DC: DHHS.

[www.healthypeople.gov](http://www.healthypeople.gov)

Institute of Medicine. (2002). Unequal treatment: Confronting racial and ethnic disparities in health care. <http://www.iom.edu/iomhome>.

McEvoy, M. (2003). Culture and spirituality as an integrated concept in pediatric care. *American Journal of Maternal Child Nursing*, 28(1), 39-44.

Mitka, M. (1998). Getting religion seen as help in being well. *Journal of the American Medical Association*, 280(22), 1896-1897.

Thompson, S., Auslander, W., & White, N. (2001). Influence of family structure on health among youths with diabetes. *Health & Social Work*, 26(1), 7-14.

### **Session 5:**

- The genetic revolution and social work
- Advances in Technology: Telehealth & Issues for Social Work practice

#### In-class Activities: [in computer lab-Beale Bldg.]

- (1) Maternal Child Health Modules for Social Work Practice
- (2) Internet Assignment

### **\*Required Readings: [Session 5]:**

\*Farmer, J., & Muhlenbruck, L. (2001). Telehealth for children with special health care needs: Promoting comprehensive systems of care. *Clinical Pediatrics*, Feb, 93-98.

\*Freedman, T. (1998). Genetic susceptibility testing: Ethical and social quandaries. *Health & Social Work*, 23 (3), 214-222.

### **Additional Recommended Readings:**

Chadiha, L., Proctor, E., Morrow-Howell, N., Darkwa, O., & Dore, P. (1996). Religiosity and church-based assistance among chronically ill African-American and White elderly. *Journal of Religious Gerontology*, 10(1), 17-36.

Congress, E. P., & Lyons, B. P. (1992). Cultural differences in health beliefs: Implications for Social Work practice in health care settings. *Social Work in Health Care*, 17(3), 81-96.

Howard, D., Konrad, T., Stevens, C., & Porter, C. (2001). Physician-patient racial matching, effectiveness of care, use of service and patient satisfaction. *Research on Aging*, 23(1), 83-108.

Jackson, L. E. (1993). Understanding, eliciting, and negotiating clients' multicultural health beliefs. *Nurse Practitioner*, 18(4), 30-43.

Morrow-Howell, N., Chadiha, L. A., Proctor, E. K., Hourd-Bryant, M., & Dore, P. (1996). Racial differences in discharge planning. *Health & Social Work*, 21(2), 131-139.

**Week of:**

**February 28<sup>th</sup> [no class]**

**Session 6**

- High risk families, children and adolescents & family caregivers
- Time-limited interventions: Disease management
- Activity: Discussion of Ethnographic Interviews
- Video: *Travis*

**\*Required Readings:**

- \*Mitchell, C., Linsk, M. (2004). A multidimensional conceptual framework for understanding HIV/AIDS as a chronic long-term illness. *Social Work*, 49(3), 469-477.
- \*Owens, S. (2003). African American women living with HIV/AIDS: Families as sources of support and of stress. *Social Work*, 48(2), 163-170.
- \*Tollier, D. (2001). African American female caregivers of family members living with HIV/AIDS. *Families in Society*, 82(2), 144-156.
- \*Waldrop, D., & Weber, J. (2001). From grandparent to caregiver: The stress and satisfaction of raising grandchildren. *Families in Society*, 82, 461-472.

**Additional Recommended Readings:**

Bedway, A. J., & Smith, L. H. (1996). "For Kids Only": Development of a program for children from families with a cancer patient. *Journal of Psychosocial Oncology*, 14(4), 19-28.

Berg, W., Rubio, D., & Tebb, S. (2000). The Caregiver Well-Being Scale revisited. *Health & Social Work*, 25(4), 255-263.

Munch, S., & Levick, J. (2001). "I'm special, too": Promoting sibling adjustment in the neonatal intensive care unit. *Health & Social Work*, 26(1), 58-64.

Roberts, C. S., Tumey, M. E., & Knowles, A. M. (1998). Psychosocial issues of adolescents with cancer. *Social Work in Health Care*, 27(4), 3-18).

Telfair, J., & Gardner, M. (2000). Adolescents with sickle cell disease: Determinants of support group attendance and satisfaction. *Health & Social Work*, 25(1), 43-49.

Thompson, S., Auslander, W., & White, N. (2001). Influence of family structure on health among youth with diabetes. *Health & Social Work*, 26(1), 7-14.

**Session 7:**

- Collaboration and interdisciplinary teams: Agency-based & community-based settings



Poindexter, C. (1999). Promises in the plague: Passage of the Ryan White comprehensive AIDS resources emergency act as a case study for legislative action. *Health & Social Work*, 24(1), 35-41.

Van Hook, M., Hugen, B., & Aguilar, M. (2001). *Spirituality within Religious Traditions in Social Work Practice*. Pacific Grove, CA: Brooks/Cole.

### **Session 9:**

- Women's health care
  - Social work practice with the terminally ill and their families  
Speaker: Baptist-Trinity Hospice & Camp Good Grief: Angela Hamblen
- Video: "Before I Die"
- Exemplars: The Blues Project

### **\*Required Readings:**

\*Bern-Klug, M., Gessert, C., & Forbes, S. (2001). The need to revise assumptions about the end of life: Implications for social work practice. *Health & Social Work*, 26(1), 38-48.

\*Hurdle, D. (2001). Social support: A critical factor in women's health and health promotion-prevention. *Health & Social Work*, 26(2), 72-79.

\*Kovacs, P., & Bronstein, L. (1999). Preparation for oncology settings: What hospice social work say they need. *Health & Social Work*, 24(1), 57-64.

\*Miller, P. (2000). Life after death with dignity: The Oregon experience. *Social Work*, 45(3), 263-271.

\*Pistella, C., Bonati, F., & Mihalie, S. (2000). Rural women's perceptions of community prenatal care systems: An empowerment strategy. *Journal of Health and Social Policy*, 11(4), 75-87.

### **Additional Recommended Readings:**

Shapiro, E. (1996). Family bereavement and cultural diversity: A social developmental perspective. *Family Process*, 35, 313-331.

Wesley, C. (1996). Social work and end-of-life decisions: Self-determination and the common good. *Health & Social Work*, 21(2), 115-121.

### **Session 10:**

- Ethical conflicts in the managed care environment of health care; HIPAA
- Time-limited practice: Disease Management interventions
- Student Teaching Moments and/or Article Critique Presentations

### **\*Required Readings:**

\*Dodd, S., & Jansson, B. (2004). Expanding the boundaries of ethics education: Preparing social workers for ethical advocacy in an organizational setting. *Journal of Social Work Education*, 40, (3), 455-465.

\*Gelman, S., Pollack, D., & Weiner, A. (1999). Confidentiality of social work records in the computer age. *Social Work*, 44(3), 243-252.

\*Rock, B., & Congress, E. (1999). The new confidentiality for the 21<sup>st</sup> century in a managed care environment. *Social Work*, 44(3), 253-262.

### **Additional Recommended Readings:**

Galambos, C. (1997). Resolving ethical conflicts in providing case management services to the elderly. *Journal of Gerontological Social Work*, 27(4), 57-67.

Hartman, A., & Laird, J. (1998). Moral and ethical issues in working with lesbians and gay men. *Families in Society*, Sept.-Oct., 263-275.

Kadushin, G., & Egan, M. (2001). Ethical dilemmas in home health care: A social work perspective. *Health & Social Work* 26,(3), 136-149.

### **Session 11**

- Evaluating practice in health care settings
- Student Teaching Moments and/or Article Critique Presentations

### **\*Required Readings:**

\*Auslander, G. (2000). Outcomes of social work intervention in health care settings. *Social Work in Health Care*, 31(2), 31-46.

\*Berkman, B., & Maramadli, P. (2001). Use of standardized measures in agency based research and practice. *Social Work in Health Care*, 34(1/2), 115-129.

\*Corcoran, K., Gingerich, W., & Briggs, H. (2003). Practice evaluation: Setting goals and monitoring change. In H. Briggs & K. Corcoran (Eds.), *Social work practice: Treating common client problems* (pp. 66-84). Chicago, IL: Lyceum Press.

\*Corwin, M. (2001). *Brief treatment in clinical social work practice* (pp. 181-210, Chap 8). Pacific Grove, CA: Brooks/Cole-Thomson Publishing.

### **Sessions 12 & 13**

**Weeks of April 18<sup>th</sup> & 25<sup>th</sup>**

- Health care access: At-risk populations & social justice
- ? Advocacy: Advance directives, living wills, DPAs, MPAs, informed consent, competence  
Speaker: U of M Geriatric Legal Clinic attorney  
Speaker: Hope House
- Student Teaching Moments and/or Article Critique Presentations

**\*Required Readings::**

\*Conway-Giustra, F., Crowley, A., & Gorin, S. (2002). Crisis in caregiving: A call to action. *Health & Social Work*, 27, 307-311.

\*Waldrop, D., & Weber, J. (2001). From grandparent to caregiver: The stress and satisfaction of raising grandchildren. *Families in Society*, 82, 461-472.

**Evaluation of course work and grading criteria:**

1. Written work must be completed and submitted on time; permission to submit a paper later than its official due date & time must be obtained from the instructor PRIOR to one (1) hour before the assignment is due; papers submitted late without prior permission will not be accepted.
2. Assignments must follow the format given in the assignment description/outline.
3. Assignments must demonstrate the ability to integrate theories, concepts and practice approaches/interventions/programs as requested in the description(s) of assignment(s)
4. Written assignments must be identified by Social Security Numbers ONLY.
5. Spelling errors, syntactical errors or verb tense errors: ONE (1) point will be deducted for each.
6. Attendance and participation evidencing preparedness for class discussion is expected.

**Contracting for a grade:**

**NOTE:** All students are expected to come to each class session prepared and to participate evidencing preparedness in class discussions.

<b>A</b>	>Ethnographic interview and paper >In-class Internet Activities >Teaching Moment  **all assignments are expected to be of “A” graduate level quality.
<b>B+</b>	>Ethnographic interview and paper >In-class Internet Activities >Critical Analysis of <u>4</u> articles & <u>10</u> minute presentation {Maximum}of these; all on ONE <i>health care</i> topic/Population/ disorder

	**all assignments are expected to be of “B+” graduate level quality.
<b>B</b>	>Ethnographic interview and paper >In-class Internet Activities >Critical Analysis of <u>3</u> articles & <u>8</u> minute presentation {Maximum}of these; all on ONE <i>health care</i> topic/Population/ disorder **all assignments are expected to be of “B” graduate level quality.

## Assignment Descriptions

### **Assignment #1**

### **Ethnographic Interview**

**Learning Objective:** It is expected that by completing this assignment the student will gain an understanding of what it means to "live with" a chronic, disabling or terminal illness from the perspective of a person, also known as an “informant,” who has a chronic or serious illness or who is the primary caregiver of someone with a chronic, disabling or terminal physical illness.

In ethnography, since informants are living day-to-day with the illness, they are considered the "experts." You should approach the interview from the position of a naïve learner. It is important to let the informant teach you about his/her experience and to identify what he/she thinks is important for you to learn about the daily life of one who is living with a chronic, disabling or terminal illness.

#### **PART A: Interview Guidelines:**

1. Select an informant who is NOT related to you, not your client and not someone you know at all well, and who is currently experiencing a chronic/disabling or terminal physical illness or is the primary caregiver, relative, or significant other of someone who has a chronic/serious physical illness.

2. Unlike a clinical interview which focuses on gaining information for assessment and intervention, the ethnographic interview approach focuses on three main dimensions from the informant's viewpoint:
  - (1) the meaning of the illness;
  - (2) the types of strategies used to cope with the illness;
  - (3) the way in which the informant organizes his/her world in the context of the illness.
3. Confidentiality must be upheld and discussed with the informant before the interview occurs; assure the informant that her/his name will not be used in any way in your verbal or written work.
4. Interviews are generally 1 to 2 hours long; you may take detailed handwritten notes during the session IF agreeable to the informant **BUT you may not tape record the interview.** The interview should be fairly open, yet focused enough so that you can develop an understanding of what it is like to live with the person's illness/disability/ or terminal illness.
5. Acquaint yourself with the informant's illness BEFORE the interview [**\*\*use the website resource list in this course outline and consult with the instructor; Taber's Medical Encyclopedia may also be useful**].
6. Develop an interview guide to help you during the interview.  
The following are suggestions for what you might want to cover/include in your interview guide:
  - how did the informant first notice that something was wrong or experience symptoms?
  - what were the informant's initial feelings/response to symptoms and/or diagnosis and what did those mean for the informant?
  - how did the informant make sense of his/her illness (i.e., what kinds of explanations/theories about "why me?") ?
  - how does the informant's culture, ethnicity, age, gender, race, social-economic class, philosophical or religious beliefs affect his/her illness experience?
  - how does she/he cope with the illness on a daily basis?

- what is the impact of the illness and of receiving medical treatment on self, family life, work, career plans, social relationships, etc. ?
- what is her/his experience of accessing health care and of interactions with health care providers ?

### **PART B: Written assignment of the Interview**

Summarize the informant's experience of being chronically ill as you uncovered/discovered/understood it from your interview in 3-5 double-spaced typed pages (removing all identifying names) including at least 3 direct quotes from the informant, and 3 relevant citations from the social work literature (1993-2004) and address ALL the questions below:

1. What is your understanding of the condition/illness/disease of the informant? List sources you utilized to gain that understanding.
2. Discuss the impact on the psychosocial life of the informant from her/his viewpoint. How does she/he cope with the illness/what strategies does he/she use to cope with/adapt to the illness?
3. What was the most compelling thing you learned about the informant's experience from an insider's perspective? How will you incorporate this learning in your practice as a professional social worker?
4. In retrospect, in general, how well do you think you elicited information from the informant about his/her illness experience/role as caregiver? Looking back, what areas do you wish you had covered in the interview but did not? How "connected" did you feel to the informant and why, and what part of the interview was most difficult for you to "stay with" and why?
5. How were the health care service delivery system(s)/provider agency(s)/managed care system(s) barriers and/or resources for the informant and/or family. Analyze how these systems enhanced, challenged, or were neutral influences on the well being of the consumer and family.
6. Attach your interview guide to your paper and turn both in to the instructor.

## **Assignment #2                      Internet Activities Assignment {in-class assignment}**

This assignment will be completed during class in the computer lab and will involve utilization of one or more selected websites and the Maternal Child Health Modules, UMAB. The details of these activities will be distributed in the class in the lab.

## **Assignment # 3                                      Teaching Moments**

It is expected that, regardless of the topic you chose:

- a) You will write a learning objective for your “teaching” and submit it for approval at least 10 days before your scheduled time/date; the objective must be measurable.
- b) You will distribute to your class peers a copy of the approved Learning Objective
- c) And that your ‘teaching moment’ will include:
  - (1) an explanation of the health/illness/disorder/delivery or policy topic;
  - (2) an analysis of the interface of health care delivery systems, managed care systems and the needs of health care consumers with this health/illness/disorder/delivery or policy issue;
  - (3) an application of the social work perspective to your topic;
  - (4) a handout to the class of a brief annotated bibliography of 3 relevant articles from the social work literature during 1900-5; ONLY one of these references may be a website and that must be specific to the condition/illness/disorder/delivery or policy issue;
  - (5) the topic will be presented within the context of your own MSSW Concentration.

### **Possible topics for the Teaching Moment:**

- >A specific physical illness/condition
- >Disease management interventions for a specific health condition {e.g., pediatric asthma, diabetes, obesity, hypertension}
- >Organ Transplantation: Donor/recipient selection & policies &/or issues for practice
- >Health care delivery/programs in public school settings {i.e., elementary, middle, high schools}
- >Memphis health system response to the growing immigrant population
- >Social work & public health: The integration of these two fields of practice
- >Health care in a specific geriatric setting [e.g., community-based, nursing home, assisted living]

Analysis of a film:

- “Iris” [i.e., the one with Dame Judy Dench: aging & Alzheimer’s]
- “John Q” [i.e., managed care, resource limitations & consumers’ needs]

## **A Brief List of Websites related to Social Work in Health Care Settings**

AGS Foundation for Health in Aging: [www.healthinaging.org/bulletin\\_board.html](http://www.healthinaging.org/bulletin_board.html).

Alzheimer's Disease Education and Referral (ADEAR) Center: [www.alzheimers.org](http://www.alzheimers.org)

American Public Health Association: [www.apha.org](http://www.apha.org)

Asian Pacific Islander American Health Forum: [www.apiahf.org](http://www.apiahf.org)

Centers for Disease Control. [www.cdc.gov](http://www.cdc.gov)

Health Care Financing Administration (HCFA). [www.hcfa.gov](http://www.hcfa.gov)

Hispanic Health Link: [www.cossmho.org](http://www.cossmho.org)

Human Genome Project: [www.ornl.gov/TechResources/HumanGenome](http://www.ornl.gov/TechResources/HumanGenome)

Indian Health Services: [www.ihs.gov](http://www.ihs.gov)

Maternal and Child Health Bureau: [www.mchb.hrsa.gov](http://www.mchb.hrsa.gov)

National Association of Social Workers: [www.naswdc.org](http://www.naswdc.org)

National Cancer Institute: [www.nci.nih.gov](http://www.nci.nih.gov)

National Institute on Aging: [www.nih.gov/nia](http://www.nih.gov/nia)

National Parent Network on Disabilities (NPND): [www.npnd.org](http://www.npnd.org)

Office of Minority Health Resource Center: [www.omhrc.gov](http://www.omhrc.gov)

U.S. Department of Health and Human Services: [www.healthfinder.com](http://www.healthfinder.com)



## **What is Chronic Physical Illness?**

Chronic physical illness is defined as a serious, ongoing health condition that:

1-has a biological, anatomical or physiologic basis

2-has lasted or is expected to last at least one year

3-either produces or is likely in relation to 'normal' functioning to produce one or more of:

- a) shortened life expectancy
- b) disability
- c) disfigurement
- d) limitation of function or activities
- e) necessity for surgical intervention
- f) requirement for ongoing medical treatments
- g) dependency on medication and/or special diets
- h) dependency on technology

### **Categories of Risk Factors in Relation to Chronic Illness Psychosocial Outcomes**

?severity & impact of illness: degree of chronic impairment & adjustment in daily life

?degree of 'grief': loss of self, body image, abilities, mobility, independence

?duration of impairment: continuous loss, loss with stabilization, loss with return to near-normal functioning

? type of onset: acute/crisis vs. gradual; differential challenges to 'normative' coping strategies

?the affected person is a child

?prognosis of prolonged hospitalization/transfer from one HC provider to another/frequent readmissions

?living arrangements: support within or external to the home--caretakers are family or professionals

?stigma socially or personally associated with illness/disorder

?illness/disorder affects person's primary emotional and/or sexual intimate relationships

### **Additional Recommended Bibliography**

Abramson, J., & Mizrahi, T. (1996). When social workers and physicians collaborate: Positive and negative interdisciplinary experiences. *Social Work*, 41(3), 270-281.

Abramson, M. (1996). Toward a more holistic understanding of ethics in social work. *Social Work in Health, Care*, 23 (2), 1-14.

Boyd-Franklin, N., Steiner, G., & Boland, M. (1995). *Children, families and HIV/AIDS: Psychosocial and therapeutic issues*. New York, NY: Guilford Press.

Bricker-Jenkins, M. (1994). Feminist practice and breast cancer: "The patriarchy has claimed my right breast..." *Social Work in Health Care*, 19(3/4), 17-42.

Chadiha, L. A., Proctor, E. K., Morrow-Howell, N. M., Darkwa, O. K., & Dore, P. (1995). Post-hospital home care for African-American and white elderly. *The Gerontologist*, 35(2), 233-239.

Charmaz, K., & Paternite, D. (1999). *Health, illness, and healing: Society, social context and self*. Los Angeles: Roxbury.

Cook, C. (1997). The role of the social worker in perinatal substance abuse. In *Fundamentals of perinatal social work: A guide for clinical practice* (pp. 65-83). New York: Haworth Press.

Cowles, L. J., & Lefcowitz, M. J. (1995). Interdisciplinary expectations of the medical social worker in the hospital setting. *Health & Social Work*, 20(4), 279-285.

DeMontigny, F., Beaudet, L., & Dumas, L. (1999). A baby has died: The impact of perinatal loss on family social networks. *Journal of Obstetric Gynecologic and Neonatal Nursing*, 28(2), 151-6.

Dziegielewski, S. F. (1998). *The changing face of health care social work*. New York, NY: Springer Publishers.

Egan, M., & Kadushin, G. (1998). The social worker in the emerging field of home care: Professional activities and ethical concerns. *Health & Social Work*, 24(1), 43-56.

Ell, K. O., Mantell, J. E., & Hamovitch, M. B. (1998). Ethnocultural factors in health care delivery: Implications for curriculum in health concentrations. *Journal of Teaching in Social Work*, 2(1), 33-47.

Fadiman, A. (1997). *The spirit catches you and you fall down*. New York: The Noonday Press.

Families, USA. (2002). New Census Bureau numbers increase estimates of uninsured for 2000 and 2001.

Fraser, M. (1997). Risk and resiliency in childhood. Washington, D.C.: NASW Press.

Gillman, R. R., & Newman, B. S. (1996). Psychosocial concerns and strengths of women with HIV infection: An empirical study. *Families in Society*, 77(3), 131-41.

Gray, M., & Gant, L. (1997). Orphaned children: A continuing problem in the HIV/AIDS epidemic. *Journal of Prevention and Education for Adolescents and Children*, 1(3/4), 137-143.

Groce, N., & Zola, L. (1993). Multiculturalism, chronic illness, and disability. *Pediatrics*, 91(5), 1048-1055.

Hill, S. (1994). Motherhood and the obfuscation of medical knowledge: The case of sickle cell disease. *Gender and Society*, 8(1), 29-47.

HIV/AIDS: A Factsheet for Practitioners. (1999). NASW On-Line. [www.naswdc.org](http://www.naswdc.org).

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