Spiritual Care in Death, Dying, Grief and Loss Fall 2017

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B.S. **Industrial Engineering**

M.A. Religion





Ph.D. Religious & **Theological Studies**



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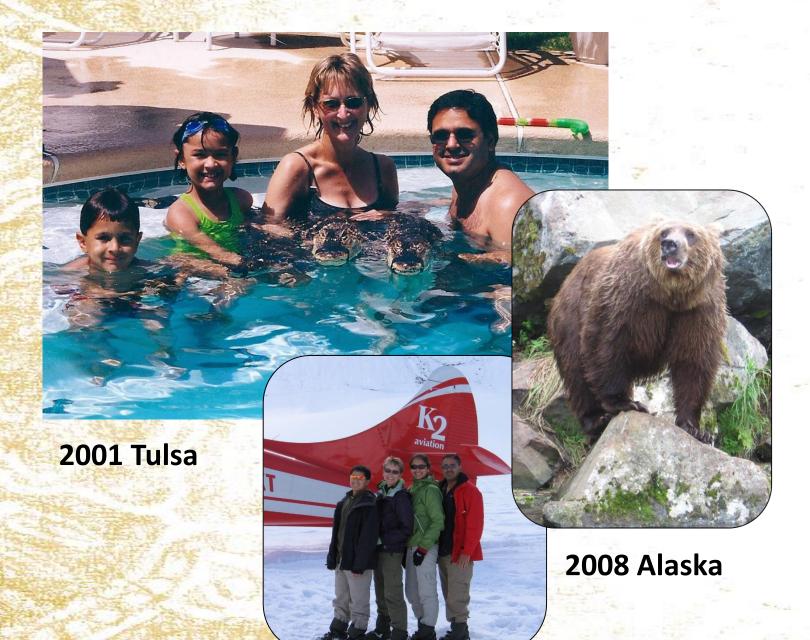
for working palliative care professionals

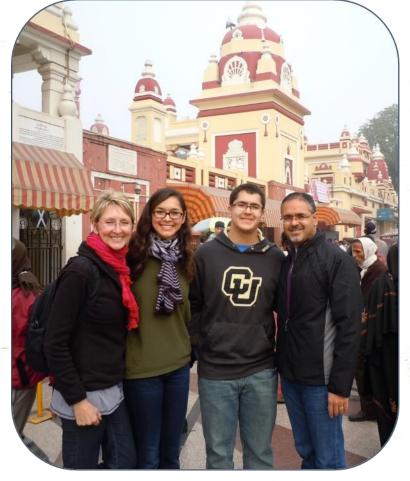


Lutheran Presbyterian **Buddhist** Hindu **Unitarian Universalist United Methodist Episcopal Catholic Shamanism**









2012-13 India







Spiritual Care in Death & Dying, Grief & Loss



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Fall 2017

Home

Modules

Syllabus

Assignments

Discussions

People

Grades

Policies & Services

Pages

Files

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Home

Modules

Syllabus

Assignments

Discussions

People

Grades

Policies & Services

Pages

Files

▼ Week 2 Personal Values, Beliefs & Meanings



Week 2 Personal Values and Beliefs: Instructions



Week 2 Personal Values and Beliefs

Sep 24 | 150 pts

▼ Week 3 Aging, Loss & Grief



Week 3 Aging, Loss & Grief: Instructions



Week 3 Aging, Loss & Grief

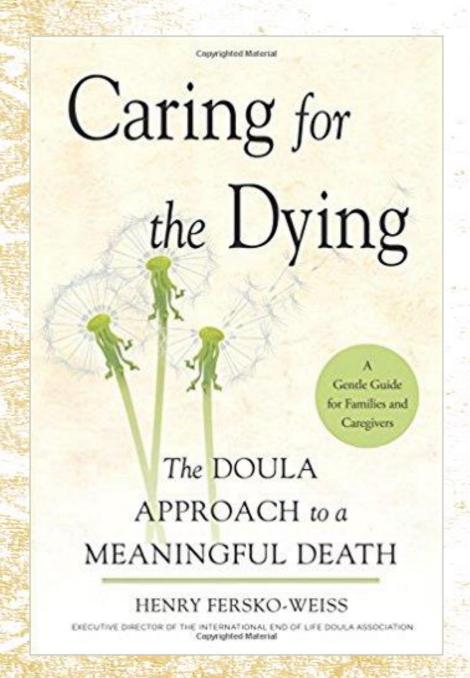
Oct 1 | 70 pts

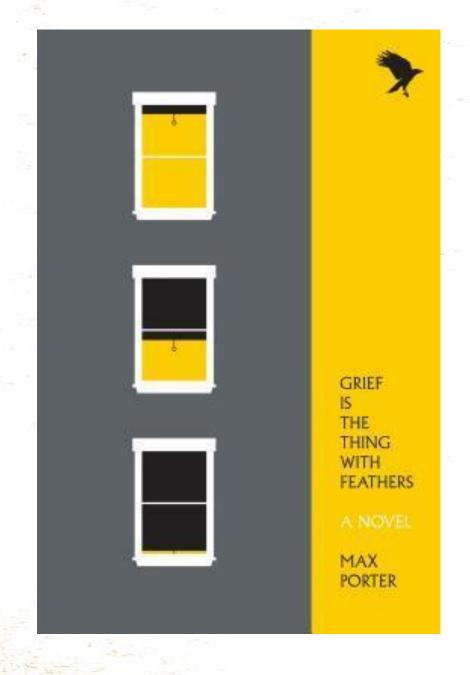


Week 3 Extra Credit Artwork Discussion

Oct 1 | 0 pts









Required readings:

Insight into death attitudes MNT2016.pdf

(4 pgs)

Moschella Spir autobio & older adults.pdf <u>a</u> d (5 pgs)

Nelson-Becker - Social gerontology.pdf 🗟 🗹 (4 pgs)

Petrou - Grandma has a boyfriend at 90 - HP2017.pdf 🚉 🗹 (7 pgs)



Study Findings

Introduction

access to

Human S

Cultural issues impact on behaviours and beliefs, and issues is observed in almost to lifestyle risk factors for access to

Conclusions

This is the first review of the literature invest Hasidic populations. Despite, at times sig reviewed studies reveal that Hasidic Jews e relation to illness and health care across a varunconsidered by these authors, indicates the groups may express similar beliefs and beha in-depth analysis of Hasidic thought and pracality with other groups, some behaviour and I specific religious and sociocultural characteri

Although the reviewed studies are diverse in subject matter, methods, level of analysis and quality, making it difficult to draw overall conclusions concerning the health care behaviours and beliefs of Hasidic Jews, several themes emerge:

Spiritual Healing

Methods

Several methods were used to identify relevant research articles. Firstly, we searched the databases AMED, CINAHL Plus, EMBASE, OVID MEDLINE (R) and PsycINFO individually from the earliest to the most recent issue relative to the search date (April week 4 2010) using each of the following keywords and phrases: (C)has(s)idic, (c)haredi, ultraorthodox Jew(ish), and orthodox Jew y, references of papers identified were retrieved, as were references of p bors of identified papers were asked whether they knew of publish Finally, experts in the field were ublished re asked whether they knew of initial asses of suitability for inclusion was conducted by reading the cts o. ers iden These initial stages of paper identification indicated a and we decided that papers of rese incorporating a range of m ative and qualitative and case ologies inc. series and case reports would ible for incl also decided to include reports on both medical and mental hear ical reports were excluded as were papers describing optimum practice professional guidance. During the early stages of article identification, papers remained eligible for inclusion if they reported on an empirical investigation into health care behaviours or beliefs in a Hasidic, haredi, ultraorthodox or orthodox Jewish sample. Where the sample was described as haredi, ultraorthodox or orthodox Jewish, the authors were asked whether participants were known to have been Hasidic. Where all or some were, the paper was included. Where only some





Submit Assignment

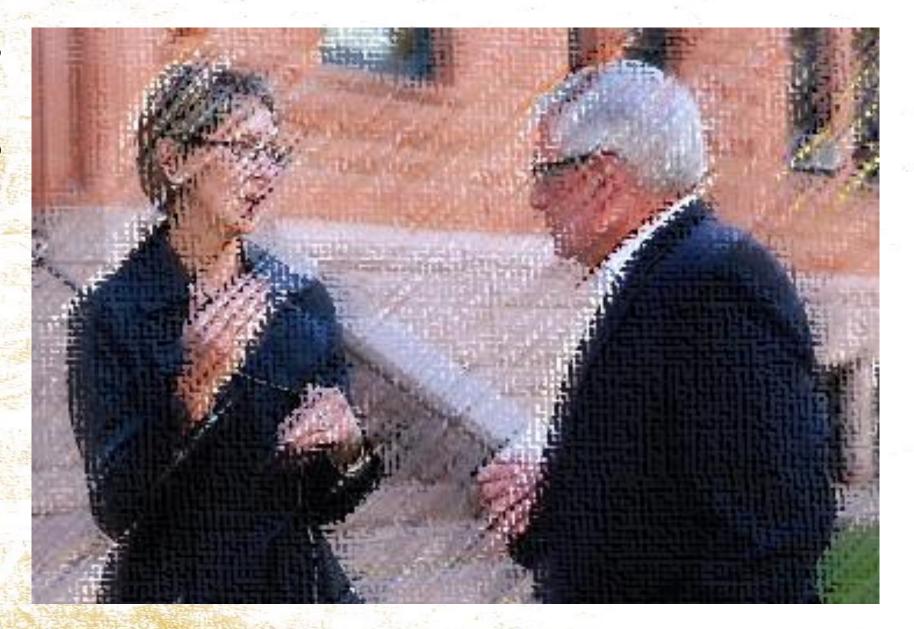
Due Sep 24 by 11:59pm **Points** 150 **Submitting** a text entry box or a file upload

In this assignment, we explore the embedded beliefs and values that we may hold—often without being aware of them—around loss, grief, dying and death. In this course, we'll use Fersko-Weiss' language, calling this "our own personal mythology about death and dying" (39, italics added). As spiritual caregivers, it's critical that we're aware of our mythologies around loss, grief, dying and death so that we can maintain a self-differentiated stance in relationship with care seekers. In other words, we want to appropriately manage our own emotional responses to the care seeker's situation, and we want to honor the care seeker's mythology by not imposing our beliefs and values on him or her.

Use the required readings to help you reflect on your own mythologies around loss, grief, dying and death. As you review the Frank article, ask yourself why



Week 7 Interviews





Extra Credit Reflections













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