

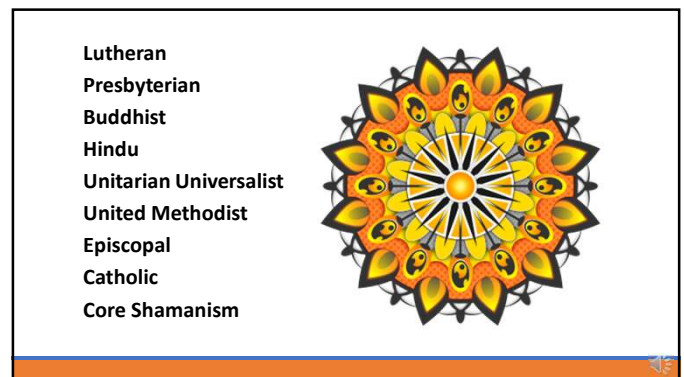
1



2



3



4

Home
Modules
Syllabus
People
Grades

Account
Dashboard
Courses
Calendar
Inbox
History

Week 2 Personal Values, Beliefs & Meanings

Week 2 Personal Values and Beliefs: Instructions

Week 2 Personal Values and Beliefs
Apr 10 | 150 pts

Week 3 Aging & Chronic Illness

Week 3 Loss & Grief with Aging & Chronic Illness: Instructions

Week 3 Aging & Chronic Illness
Apr 18 | 70 pts

Week 3 Extra Credit Artwork Discussion
Apr 18 | 0 pts

5

Home
Modules
Syllabus
People
Grades

Account
Dashboard
Courses
Calendar
Inbox
History

Week 2 Personal Values, Beliefs & Meanings

Week 2 Personal Values and Beliefs: Instructions

Week 2 Personal Values and Beliefs
Apr 10 | 150 pts

Week 3 Aging & Chronic Illness

Week 3 Loss & Grief with Aging & Chronic Illness: Instructions

Week 3 Aging & Chronic Illness
Apr 18 | 70 pts

Week 3 Extra Credit Artwork Discussion
Apr 18 | 0 pts

6

Home
Modules
Syllabus
People
Grades

Account
Dashboard
Courses
Calendar
Inbox
History

This week, you have several options to explore grief narratives from different perspectives. You'll note that some readings are more reflective and some are more pragmatic. The excerpt from Porter's novel offers us a masterful look at a shared metaphor for grief from multiple points-of-view. I encourage you to read the entire book if you get a chance.

Required reading for everyone:

Porter, M. (2015). *Grief is the thing with feathers*. Minneapolis, MN: Graywolf Press. Porter - selected chapters. [↗](#)

Additional required readings: Choose a combination of readings to total at least 10 pages.

Branch, W. T., & Burke, A. (2009). Reflections: If I was going to die: The voices of five dying patients. *Journal of General Internal Medicine*, 23(1), 96-98. [↗](#) (2 pgs)

Reedoff, A. (2017). 4 things about loss that this widow wishes you knew: It's National Widows Day, so here's what I really want. Retrieved from [www.buffpost.com](#) [↗](#) (4 pgs)

Eisenberg, A. (2018). The door that connects two worlds is still elusive. Retrieved from [www.kevinmd.com](#) [↗](#) (2 pgs)

Hallise, J. (2006). A Buddhist's perspective on bereavement. *Endeavour*, 2(3), 240-241. [↗](#) (2 pgs)

7

Home
Modules
Syllabus
People
Grades

Account
Dashboard
Courses
Calendar
Inbox
History

Optional Readings

These readings/video are optional, but they may help inform your responses to this week's case study discussion and help you in your future role as a spiritual care provider:

Banks, A. M. (2019). Dementia and religion: Inside a church's Alzheimer's caregiver support group. *Religion News*. Retrieved from [religionnews.com](#) [↗](#) (8 pgs)

Basting, A. (2020). How to meaningfully reconnect with those who have dementia: TEDMED. [https://www.tedmed.com/talks/how-to-7712366utm_source=TED+MED+Mallory+Lalibum_campaign=284876827c_EMAIL_CAMPAIGN_2018_06_20_05_24_COPY_03&utm_medium=email&utm_term=5_44493aed-284876827c-234446337_e](#) (15:01)

Chast, B. (2014). Can't we talk about something more elegant? The New Yorker. Retrieved from [newyorker.com](#) [↗](#) (12 pgs - graphic novel)

Fair, T. M. (2020). Lessons on older LGBTQ individuals' sexuality and spirituality for hospice and palliative care. *American Journal of Hospice & Palliative Medicine*, 38(6), 595-595. [https://doi.org/10.1177/1049909120978752](#) [↗](#) (6 pgs)

Hosseini, J., Chaurasia, A., & Omerus, M. (2017). The effect of religion and spirituality on cognitive function: A systematic review. *The Gerontologist*, 000(0), 1-10. doi:10.1093/geront/gnx024 [↗](#) (6 pgs)

Mahdies, B., Fakhri-Khoshdel, M., Mohammadi, F., Hosseini, M. A., & Haeili, M. (2017). Effects of spiritual growth therapy on caregiver strain in home caregivers of the elderly with Alzheimer's disease. *Archives of Psychiatric Nursing*, 31, 262-273. doi:

8

Tech Questions



support@liff.edu

Content Questions

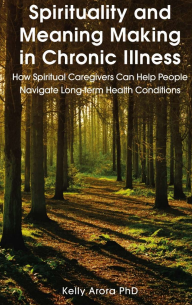


karora@liff.edu

9

finding peace
at the end
of life

*A Death Doula's Guide
for Families and Caregivers*
HENRY FERSCO-WEISS



10

Study Findings

Introduction

Cultural issues impact on behaviours and beliefs, an issue is observed in almost all lifestyle risk factors for access to Human 5

Conclusions

This is the first review of the literature investigating Hasidic populations. Despite, at times significant, reviewed studies reveal that Hasidic Jews have a unique relation to illness and health care across a variety of groups may express similar beliefs and behaviours. An in-depth analysis of Hasidic thought and practice, along with other groups, some behaviour and specific religious and sociocultural characteristics.

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: (Chasidic), (Chasid), (ultra-orthodox Jewish), and (orthodox Jewish). Secondly, references of papers identified were reviewed, as were references of papers identified. Thirdly, experts in the field were asked whether they knew of any additional papers. Fourthly, a final check for inclusion was conducted by reading the abstracts of all identified papers. These initial stages of paper identification indicated a large number of relevant papers. We decided that papers incorporating a range of methodologies, including quantitative and qualitative and case series and case reports would be included. We also decided to include reports on both medical and mental health care. Papers describing optimum practice were excluded as were papers describing optimum practice. 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, ultra-orthodox or orthodox Jewish sample. Where the sample was described as Hasidic, ultra-orthodox 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

Citing sources

(authorlastname, slide/page#)

Ex: (Arora, slide 7) or (Porter, p.15)

2 articles/presentations by the same author:

(authorlastname, Brief reference title, page/slide#)

Ex: (Arora, Intro, slide 3)

11

12

Week 3 Aging, Loss & Grief

This week you are assigned to small groups. **Your initial post is due by 11:59pm on September 28th (50 points).** **Your responses to at least 2 group members are due by 11:59pm on October 1st (20 points).** **You will not be able to see other posts until you have posted.**

13

Respond to all parts of all prompts

1. Describe at least 2 losses you witness in Grant's experiences. Describe at least 2 losses you witness in Fiona's experiences. (150 words max total)

Number your responses to match the prompts

2. Imagine that you are Grant's spiritual caregiver. You meet with him after his day of observation at the care facility (Clip #2). Select quotes from 2 of this week's readings that help prepare you to offer spiritual care to Grant after this experience. Explain why you choose these quotes (150 words max, excluding quotes).

Follow word limits/ranges

3. A few weeks pass before you meet with Grant again. He describes the events shown in Clip #3. Select different quotes from 2 of this week's readings that help prepare you to offer spiritual care to Grant after this experience. Explain why you choose these quotes (150 words max, excluding quotes).

14

Week 2 Personal Values and Beliefs

[Submit Assignment](#)

Due XXXXXXXXXX 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

15

Week 7 Advance Care Planning

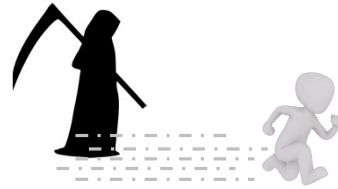


16

Extra Credit Reflections



17



karora@liff.edu

18