

**JANE ADDAMS COLLEGE OF SOCIAL WORK  
UNIVERSITY OF ILLINOIS AT CHICAGO**

Fall, 2009  
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**Social Work 519: Practice III  
Community Health and Urban Development**

**Prerequisites:** Social Work 431

**Credits:** 3

**DESCRIPTION:**

Social Work 519 and 520 constitute an integrated, advanced practice sequence to prepare students for work in Community Health and Urban Development. This concentration prepares students to contribute to building urban communities that are physically, socially, economically and environmentally healthy. The emphasis of the concentration is on community building in solidarity with the poor; the oppressed; racial and ethnic minorities; women; gay, lesbian, bisexual and transgender persons; persons with disabilities; older adults; and other at-risk urban populations within a biopsychosocial and ecological framework. Health disparities, lack of opportunity, and lack of access to the basic requirements of life are among the critical issues requiring attention in at-risk urban communities. The concentration recognizes the systemic connections among people, families, and larger collectives in building community capacity. The Community Health and Urban Development Concentration therefore prepares students for integrated practice with individuals, families, groups, organizations and communities in urban settings in ways that can contribute to community health and strengths within a process of shared power. Given the importance of diversity in healthy ecological systems, the concentration emphasizes practice that honors and supports such diversity by focusing on cultural assets. The primary emphasis of the concentration is on asset-building and capacity-building approaches to community building that emphasize participatory, interdisciplinary, and justice-oriented practice consistent with the promotion of universal human rights and the mission of Jane Addams College of Social Work.

Social Work 519 is the first practice course within this integrated sequence. The focus in this course is on building healthy communities from the grassroots, beginning with health-enhancing work with individuals and families that emphasizes supporting clients' personal power and gifts, promoting health, strengthening social support networks, and collaboration of

clients and workers in effective advocacy, particularly within care and service systems and community-based organizations. The course then moves to advanced work with groups, the principal system level emphasized in the course. Social Work YYY, the subsequent course, integrates the knowledge and skills from this course with those of practice with larger community and organizational systems.

## TEXTS

- 1) Farmer, P. (2003). *Pathologies of Power*. Berkeley: University of California Press.
- 2) Swenson, C. C., Henggeler, S. W., Taylor, I. S., & Addison, O. W. (2009). *Multisystemic therapy and neighborhood partnerships*. New York: Guilford.
- 3) Boyes-Watson, C. (2008). *Peacemaking Circles and Urban Youth: Bringing Justice Home*. St. Paul, MN: Living Justice Press.
- 4) Greif, G.L. (2005). *Group work with populations at risk* (2<sup>nd</sup> ed.). New York: Oxford.
- 5) **6<sup>th</sup> Edition**, *APA Publication Manual*. **This edition is new this year; course papers must use this edition.**

There are also some required readings that are available either in online journals or on Electronic Reserve (ERes) at the library. ERes password is CHUD2009. **Be sure to plan ahead for online readings, as sometimes either publisher or library systems may be down.** Most if not all are also available on the library shelves; students should have the experience of actually locating items in the library at some point. "Recommended" readings may be online, otherwise you will need to obtain them from the shelves or in some cases perhaps by interlibrary loan.

## KNOWLEDGE OBJECTIVES:

1. Students will achieve an understanding of the conceptual underpinnings of asset-building and capacity-building approaches for community building as these frameworks guide practice with all system levels, within an overall biopsychosocial and ecological framework.
2. Students will achieve an understanding of how asset-building and capacity-building approaches to community building advance personal and collective health, empowerment, social justice, and human rights.
3. Students will achieve an understanding of the interconnections among community assets in urban settings. Those assets include cultural assets, human and social capital, civic culture, community-based organizations, economic assets, environmental assets, natural resources, and linkages to larger systems including political and economic systems.

4. Students will achieve an understanding of both the subjective and objective realities of health, illness, grief and loss, and how these experiences shape and are shaped by the larger systems including neighborhood and community.
5. Students will integrate basic information about major illnesses, risk and protective factors for illness, health risks and disparities, and principles of health promotion for individuals, families and communities, as well as to identify appropriate sources for accessing more specialized knowledge when needed.
6. Students will achieve an advanced understanding of approaches for work with individuals that emphasize mobilization of personal strengths and supports, strengths-based care management, strengthening and contributing to networks of social support, case advocacy and health promotion in urban communities.
7. Students will achieve an advanced understanding of approaches for work with families that emphasize mobilization of personal and family strengths and assets, engaging and mobilizing community systems and supports, and contributing to networks of mutual aid in urban communities.
8. Students will achieve an advanced understanding of approaches for work with groups in urban settings. The approaches emphasized are those that promote and mobilize personal, family, neighborhood, and community health, with primary attention to empowerment-oriented work including self-help and mutual aid groups; issue-focused advocacy and task groups; community health promotion groups; training; and locality-based group work oriented toward strengthening social bonds and social capital.
9. Students will achieve an advanced understanding of particular strengths and needs that persons of diverse cultures, races, ethnicities, genders, sexual orientations, abilities and ages bring to community building.
10. Students will achieve an understanding of the ethical and personal challenges associated with practice with individuals, families, and groups within a community-building framework.
11. Students will achieve an advanced understanding of the importance and challenges of taking an evidence-based perspective on practice with individuals, families, and groups within a community-building framework.

**SKILLS OBJECTIVES:**

1. Students will demonstrate the ability to apply approaches for practice with individuals that emphasize mobilization of personal strengths and supports, strengths-based care management, strengthening and contributing to networks of social support, case advocacy and health promotion within an urban community-building framework.
2. Students will demonstrate the ability to apply approaches for practice with families that emphasize mobilization of personal and family strengths and assets, engaging and mobilizing community systems and supports, and contributing to networks of mutual aid within an urban community-building framework.

3. Students will demonstrate the ability to apply approaches for practice with groups within an urban community-building framework. The approaches emphasized are those that promote and mobilize personal, family, neighborhood, and community health, including self-help and mutual aid groups; issue-focused advocacy and task groups; community health promotion and education programming using groups; and locality-based group work oriented toward strengthening social bonding and social capital.
4. Students will demonstrate the ability to apply the skills associated with initiating and maintaining a dynamic of shared power in collaborative community practice across system levels.
5. Students will demonstrate the ability to apply approaches for engaging cultural resources for practice in urban communities, including the use of ethnoconscious and ethnically-specific approaches.
6. Students will demonstrate the ability to differentially apply interventive strategies with an awareness of the impact of race, ethnicity, culture, sexual orientation, gender, age, and ability in their practice within an urban community-building framework.
7. Students will demonstrate the ability to apply an evidence-based perspective on practice with individuals, families and groups within an urban community-building framework, and to evaluate that practice.

### **COURSE ASSIGNMENTS:**

All students will be held accountable for adhering to academic and non-academic standards of conduct as described in the JACSW Student Handbook, available on the College website. Additional copies can be obtained from the Office of Student Affairs.

**1. Class participation** (20% of the course grade). The course is heavily experiential, and therefore participation is required. Participation is defined as on-time attendance for complete class sessions, attentive non-verbal behavior; offering comments relevant to course discussions, and active participation in in-class laboratory exercises. Your participation in each session will be graded 3.5 on a 4 point scale, unless there is an exceptional reason for a higher or lower grade. Class sessions you do not attend will be graded 0. It is not possible to "make up" missed class sessions, but it is possible to do up to 2 make-up assignments if absence is for an approved, documented reason, and substitute grades for those assignments for participation in a class session.

**2. Interteaching** (35% of course grade). A portion of each class session after the first will be spent in interteaching, a process in which student dyads will work together to explore specific questions applying the required readings for that week to practice situations. Written records will be submitted. To participate in interteaching, students **must have previously read the material**; time in interteaching sessions should not be spent skimming the required readings, but rather on exploring the implications of

the material together. **Everyone is absolutely expected to complete all assigned readings, and to come to every class session prepared.** If you are not prepared, consistent with academic integrity, you should inform the instructor, and then join a dyad, participating as you can, but without obtaining a grade.

**3. Group Project** (20% of course grade; including peer evaluations).

Groups of about 6 students will research, present, and demonstrate one form of capacity-building group work related to the course content, as assigned and scheduled by the instructor. Groups will be formed in the first class session. Groups will have exactly 60 minutes to present the approach in the manner of professional trainers, provide guidance for class members to learn more (references, handouts, contacts, etc.), and demonstrate the approach in an in-class simulation. Will require both online and library research, including exploring the group work literature in books and journals; you may also find examining training literature useful. Expectations include:

- A thorough annotated bibliography that you discuss and distribute to the class on the day of your presentation. Will include recommended readings on the problem or issue you are presenting, as well as on the group work approach you are using. Preparation of this material will require library research that goes well beyond class readings, and it should be clear that the materials listed have informed the presentation and simulation.
- A professional presentation (using PowerPoint or other media and approaches that will engage the class). Group members must actively present most of the material (i.e., just showing a video will not meet this requirement). Material presented both in the bibliography and the presentation should clarify the evidence base for the approach used. This presentation should prepare the class for the group simulation.
- A simulation of a portion of an actual group session in which group member(s) act as facilitators/leaders/circle keepers, and other group members, recruited class members, or both take on the roles of group members. It will often be necessary that those members be prepared in advance for their roles. Be sure that the portion of the session presented clarifies what is unique about the approach used (i.e., we don't want each simulation to show primarily introductions of members, etc.).

Note that each of the parts of this assignment are meant to prepare students with skills they will need as they move into practice. Grading will be done by the instructor (50%), the group members (25%), and the rest of the class (25%). The instructor and class members will each provide a single grade for the group; group members will provide individual grades for each other, since they will have additional information about the contributions made by each person. Class members will also provide comments to the group on their work.

**4. Project Paper** (25% of course grade). Due at the second to the last class session. Assignment is an original 12-20 page, APA (6<sup>th</sup> ed.) style paper,

discussing work in the field in terms of the course knowledge objectives. Sophisticated use of the literature is expected (typically 10-15 outside references, most from books and journals rather than non-peer-reviewed internet materials). A 2-page abstract of the work to be done (including reference list) is due at the 10<sup>th</sup> class session, and counts for 5% of the grade. A detailed outline of the assignment is found at the end of this syllabus.

Note that grades are not curved; cooperation among students is encouraged (except for assignments that are individual, of course), and competition will not benefit anyone in this system. Please keep in mind that the purpose of professional school is not to work for grades, but to prepare for practice that will contribute to collective well-being; grades are used to encourage learning activities and are not a reflection of your value as a human being!

### **STUDENTS REQUIRING ACCOMMODATION FOR DISABILITIES**

Students requiring accommodations for disability must follow established University procedures, as follows:

1. Go to the UIC Office of Disability Services to obtain confidential verification of the disability and a statement of accommodations recommended by that office.
2. Show the UIC Office of Disability Services accommodation letter to the instructor of the class for which the student requests accommodation. In the case of field instruction classes, the letter should be shown to the College field liaison or the Director of Field.
3. Accommodation letters are to be shown to the instructor at the beginning of the course or before the start of the course.

### **STUDENTS NEEDING ACCOMMODATION FOR RELIGIOUS REASONS**

Students needing accommodations for religious reasons should contact the instructor at the beginning of the semester to identify appropriate class work to make up any missed sessions or other work.

**ACADEMIC INTEGRITY:** Complete academic integrity is expected (please see Student Handbook for details). Plagiarism, self-plagiarism, leaving others to do what should be joint work, or other forms of dishonesty regarding work done are serious ethical concerns, and must be handled as such.

**WRITING CENTER:** Excellent writing skills are required for professional practice. Students requiring assistance in this area may self-refer to the UIC Writing Center, or may be referred by the instructor.

**CELLULAR TELEPHONES AND PAGERS:** Cellular phones and pagers may not be used in class. Please consult with your instructor regarding genuinely emergency situations.

### **COURSE SESSIONS:**

**Session 1 (8/25). Conceptual underpinnings of asset-building and capacity-building approaches for community building and health in urban communities.**

- The biopsychosocial and ecological frameworks
- Personal and community assets (social capital and civic culture; cultural, physical, natural, environmental, and human capital; spiritual and religious resources)

**Readings for Sessions 1 & 2:**

Required:

Ford Foundation (2004), *Asset Building for Social Change*. (online at: [http://www.fordfound.org/pdfs/impact/assets\\_pathways](http://www.fordfound.org/pdfs/impact/assets_pathways)) [**URLs sometimes change; please do the work necessary to access items that may not be immediately available at listed URLs.**]

Institute of Medicine (2003). Summary. In *Unequal treatment: Confronting racial and ethnic disparities in health care*. (online at: [http://books.nap.edu/openbook.php?record\\_id=10260&page=1](http://books.nap.edu/openbook.php?record_id=10260&page=1)) Also available on **ERes** under title "Summary: Unequal Treatment"

Farmer, P. (2003). *Health, healing, and social justice*. In *Pathologies of Power*, pp. 139-159. Berkeley: University of California Press.

Recommended:

Minkler, M. (2005). Introduction to community organizing and community building. In Minkler, *Community organizing and community building for health*. (**ERes**)

**Session 2 (9/1). The place of asset-building and capacity-building approaches to community building in advancing personal and collective health, empowerment, social justice, and human rights.**

**Readings for Sessions 1 & 2:** (continued from previous)

Required:

Ford Foundation (2004), *Asset Building for Social Change*. (online at: [http://www.fordfound.org/pdfs/impact/assets\\_pathways](http://www.fordfound.org/pdfs/impact/assets_pathways)) [**URLs sometimes change; please do the work necessary to access items that may not be immediately available at listed URLs.**]

Institute of Medicine (2003). Summary. In *Unequal treatment: Confronting racial and ethnic disparities in health care*. (online at: [http://books.nap.edu/openbook.php?record\\_id=10260&page=1](http://books.nap.edu/openbook.php?record_id=10260&page=1)) Also available on **ERes** under title "Summary: Unequal Treatment"

Farmer, P. (2003). *Health, healing, and social justice*. In *Pathologies of Power*, pp. 139-159. Berkeley: University of California Press.

Recommended:

Minkler, M. (2005). Introduction to community organizing and community building. In Minkler, *Community organizing and community building for health*. (**ERes**)

**Session 3 (9/8). Human rights, oppression and health disparities in practice with urban communities; Ethical and personal challenges in practice with individuals, families, and groups in health and community development.**

**Readings for Session 3:**

Required:

*Universal Declaration of Human Rights* (1948). New York: United Nations. (online at: <http://www.un.org/Overview/rights.html>)

*International Covenant on Economic, Social, and Cultural Rights* (1966). New York: United Nations. (online at: [http://www.unhcr.ch/html/menu3/b/a\\_cescr.htm](http://www.unhcr.ch/html/menu3/b/a_cescr.htm))

Farmer, P. (2003). On suffering and structural violence (pp. 29-50), & Rethinking health and human rights (pp. 213-246). In *Pathologies of power*. Berkeley: University of California Press.

Ford Foundation (2004). *Close to home: Case studies of human rights work in the United States*. Available online at: [http://www.fordfound.org/pdfs/impact/close\\_to\\_home.pdf](http://www.fordfound.org/pdfs/impact/close_to_home.pdf)

Recommended:

Furman, R., Downey, E. P., & Jackson, R. L. (2004). Exploring the ethics of treatments for depression: the ethics of care perspective. *Smith College Studies in Social Work, 74*, 525-538.

Csikai, E. (2004). Social workers' participation in the resolution of ethical dilemmas in hospice care. *Health and Social Work, 29*, 67-76. (online)

Hess, P. M., & Hess, H. J. (1998). Values and ethics in social work practice with gay and lesbian persons. In G. P. Mallon (Ed.), *Foundations of social work practice with lesbian and gay persons* (pp. 31-46). New York: Haworth Press. (ERes)

**Session 4 (9/15). Subjective and objective realities of health and illness in the context of family and urban communities.**

- Major illnesses, adjustment to major illnesses, and redefinition of self
- Cultural understandings of health, illness and help-seeking behavior; Family roles and family health issues
- Grief and loss.

**Readings for Session 5:**

Required:

Lyons, A. C., & Chamberlain, K. (2006). Chapter 2: Thinking about health and the body. In *Health psychology: A critical introduction* (pp. 40-69). New York: Cambridge. (ERes)

Aranda, M. P. (2008). Relationship between Religious Involvement and Psychological Well-Being: A Social Justice Perspective. *Health & Social Work, 33*(1), 9-21. (online)

Murguia, A. (2003). Use and implications of ethnomedical health care approaches among Central American immigrants. *Health and Social Work, 28*, 43-53. (online)

DeCoster, V. A., & Dabelko, H. L. (2008). Forty-four Techniques for Empowering Older Adults Living with Diabetes. *Health & Social Work, 33*(1), 77-80. (**online**)

**Session 5 (9/22). Evidence-based practice and practice evaluation in integrated community practice and community-building.**

- The evidence-based practice process
- Evaluation of practice in community development and health

**Readings for Session 5:**

Required:

Rosen, A. (2003). Evidence-based social work practice: challenges and promise. *Social Work Research, 27*, 197-208. (**online**)

Embry, D. D. (2004). Community-based prevention using simple, low-cost, evidence-based kernels and behavior vaccines. *Journal of Community Psychology, 32*, 575-591. (**online**)

Miller, R. L. (2003). Adapting an evidence-based intervention: tales of the Hustler Project. *AIDS Education and Prevention (Supplement A), 15*, 127-138. (**online**)

Meyer, A., & Comer, E. (2005). Using evidence-based practice and intervention research with treatment groups for populations at risk. In Greif, Chapter 26.

Recommended:

Pollio, D. E. (2002). The evidence-based group worker. *Social Work with Groups, 25*(4), 57-70. (**ERes**)

Green, G. L., McAllister, C. L., & Tarte, J. M. (2004). The strengths-based practices inventory: A tool for measuring strengths-based service delivery in early childhood and family support programs. *Families in Society, 85*, 326-334.

Secret, M., Jordan, A., & Ford, J. (1999). Empowerment evaluation as a social work strategy. *Health and Social Work, 24*, 120-127.

Ferguson, H. (2003). Outline of a critical best practice perspective on social work and social care. *The British Journal of Social Work, 33*, 1005-1024.

**Session 6 (9/29). Risk and Protective Factors related to health for individuals, families and communities; Disability and aging in community context.**

**Readings for Session 6:**

Required:

Sharkey, P. (2007). Survival and death in New Orleans: An empirical looks at the human impact of Katrina. *Journal of Black Studies, 37*(4), 482-501. (**online**)

Grote, N. K, Bledsoe, S. E., Larkin, J., Lemay, E. P., & Brown, C. (2007). Stress exposure and depression in disadvantaged women: the

- protective effects of optimism and perceived control. *Social Work Research, 31*(1), 19-33. **(online)**
- Antle, B. J. (2004). Factors associated with self-worth in young people with physical disabilities. *Health and Social Work, 29*, 167-175. **(online)**
- Rice, S. (2005). Group work with Elderly persons. In Greif, Chapter 10.

Recommended:

- Greene, R. R., & Cohen, H. L. (2005). Social work with older adults and their families: Changing practice paradigms. *Families in Society, 86*(3), 367-374. **(online)**
- Bergman, M. M., & Scott, J. (2001). Young adolescents' wellbeing and health-risk behaviours: gender and socio-economic differences. *Journal of Adolescence, 24*, 183-197. **(online)**
- Takamura, J. C. (2001). Towards a new era in aging and social work. *Journal of Gerontological Social Work, 36*(3/4), 1-11.
- Whitley, D. M., Kelley, S. J., & Sipe, T. A. (2001). Grandmothers raising grandchildren: are they at increased risk of health problems? *Health and Social Work, 26*, 105-114.
- Linsk, N. L. (1997). Experience of older gay and bisexual men living with HIV/AIDS. *Journal of Gay, Lesbian, and Bisexual Identity, 2*(3/4), 285-308.
- Ron, P. (2004). Depression, hopelessness, and suicidal ideation among the elderly: a comparison between men and women living in nursing homes and in the community. *Journal of Gerontological Social Work, 43*(2/3), 97-116.

**Session 7 (10/6). Individuals, families and communities (Circles); Meetings with project groups.**

**Reading for Session 7:**

Required:

- Boyes-Watson, Chapter 1: "The gift of circles", Chapter 2: "Urban Youth and Modern Monsters", Chapter 3, "The circle as a strategy in youth development"
- Appendix G (Balanced and Restorative Justice Strategies), Chicago Public Schools Policy Manual, available at:  
[policy.cps.k12.il.us/documents/705.5.pdf](http://policy.cps.k12.il.us/documents/705.5.pdf)

**Session 8 (10/13). Work with individuals and families in urban communities.**

The person-environment practice model with at-risk individuals and families  
 Mobilization of personal and family strengths and supports  
 Strengths-based care management  
 Advocacy for health promotion

**Readings for Session 8:**

Required:

- Swenson, *MST & Neighborhood Partnerships*, pp. 1-59.
- Linsk, N. L., & Mason, S. (2004). Stresses on grandparents and other relatives caring for children affected by HIV/AIDS. *Health and Social Work, 29*, 127-136. (**online**)
- Hendrix, L. R. (2003). Intercultural collaboration: an approach to long term care for urban American Indians. *Care Management Journals, 4*(1), 46-52. (**ERes**)
- Radina, M. E., & Barber, C. E. (2004) Utilization of formal support services among Hispanic Americans caring for aging parents. *Journal of Gerontological Social Work, 43* (2/3), 5-23. (**ERes**)

Recommended:

- Conway-Giustra, F., Crowley, A., & Gorin, S. (2002). Crisis in caregiving: A call to action. *Health and Social Work, 27*, 307-311. (**online**)
- Brun, C., & Rapp, R. C. (2001). Strengths-based case management: individuals' perspectives on strengths and the case manager relationship. *Social Work, 46*, 278-288.
- 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*, 1-19.

**Session 9 (10/20). Work with individuals and families in urban communities.**

- Mobilization of personal and family strengths and assets
- Engaging and mobilizing community systems and supports
- Contributing to networks of mutual aid in urban communities

**Readings for Session 9:**

Required:

- Swenson et al. *MST & Neighborhood Partnerships*, pp. 61-160.
- Kemp, S. P. (2001). Environment through a gendered lens: from person-in-environment to women-in-environment. *AFFILIA: Journal of Women and Social Work, 16*(1), 7-30. (**online**)
- Speziale, B., & Gopalakrishna, V. (2004). Social support and functioning of nuclear families headed by lesbian couples. *AFFILIA: Journal of Women and Social Work, 19*, 174-184. (**online**)

Recommended:

- Bowen, G. L., Martin, J. A., Mancini, J. A., & Nelson, J. P. (2000). Community capacity: antecedents and consequences. *Journal of Community Practice, 8*(2), 1-21.
- Mosley, A. M. (1998). Community partnerships in neighborhood-based health care: a response to diminishing resources. *Health and Social Work, 23*, 231-235.

**Session 10 (10/27). Collaborative and interdisciplinary practice in health systems; culturally competent service delivery.**

**Readings for Session 10:**Required:

- Bronstein, L. R. (2003). A model for interdisciplinary collaboration. *Social Work, 48*, 297-306. **(online)**
- Reese, D., & Sontag, M. (2001). Successful interprofessional collaboration on the hospice team. *Health and Social Work, 26*, 167-176. **(online)**
- Ringel, S. (2005). Group work with Asian-American immigrants: A cross-cultural perspective. In Greif, Chapter 12.
- Bertera, E. M. (2003). Psychosocial factors and ethnic disparities in diabetes diagnosis and treatment among older adults. *Health and Social Work, 28*, 33-43. **(online)**
- Acevedo, V. (2008). Cultural Competence in a Group Intervention Designed for Latino Patients Living with HIV/AIDS. *Health & Social Work, 33*(2), 111-120.

Recommended:

- Kim, F. Y. (2002). The role of cognitive control in mediating the effect of stressful circumstances among Korean immigrants. *Health and Social Work, 27*, 36-47. **(online)**

**Session 11 (11/3). Practice with groups: Self-help, mutual aid and activity groups in urban communities. (Activity group presentation)****Readings for Session 11:**Required:

- Ephross, P. H. (2005). Introduction: Social Work with Groups: Practice Principles. In Greif.
- Wright, W. (2002). But I Want to Do a Real Group: A Personal Journey from Snubbing to Loving to Theorizing to Demanding Activity-Based Group Work. *Social Work with Groups, 25*(1/2), 107-112. **(ERes)**
- Daste, B. M., & Rose, S. R. (2005). Group work with cancer patients. In Greif, Chapter 1.
- Greif, F. L. (2005). Common themes for parents in a methadone maintenance group. In Greif, Chapter 6.
- Mulroy, E. A. (2005). Group work in context: Organizational and Community Factors. In Greif, Chapter 25.

Recommended:

- Goodman, H., & Munoz, M. (2004). Developing Social Group Work Skills for Contemporary Agency Practice. *Social Work with Groups, 27*(1), 17-33. **(ERes)**
- Cohen, G. D., Perlstein, S., Chapline, J., Kelly, J., Firth, K. M., & Simmens, S. (2006). The impact of professionally conducted cultural programs on the physical health, mental health, and social functioning of older adults. *The Gerontologist, 46*, 726-734. **(online)**

Wituk, S.A., Tiemeyer, S., Commer, A., Warren M., & Meissen, G. (2003). Starting self-help groups: empowering roles for social workers. *Social Work with Groups*, 26(1), 83-92. (**ERes**)

**Session 12 (11/10). Practice with groups: Diversity, cultural resources, and ethnically-specific approaches in group work in urban communities. (Ethnically-specific group presentation)**

- Strengths and assets of diverse cultures, races, ethnicities, genders, sexual orientations, abilities and ages for community building.
- Culturally specific and ethnoconscious group services.

**Readings for Session 12:**

Required:

- Burdge, B. J. (2007). Bending gender, ending gender: Theoretical foundations for social work practice with the transgender community. *Social Work*, 52, 243-250. (**online**)
- Ball, S., & Lipton, B. (2005). Group work with gay men. In Greif, Chapter 20.
- Englehardt, B. J. (2005). Group work with lesbians. In Greif, Chapter 21.
- Harvey, A. R. (2005). Group work with African-American youth in the criminal justice system: A culturally competent model. In Greif, Chapter 16.
- Jones, L. V., & Hodges, V. G. (2001). Enhancing Psychosocial Competence Among Black Women: A Psycho-Educational Group Model Approach. *Social Work with Groups*, 24(3/4), 33-52. (**ERes**)

Recommended:

- Franklin, R., & B; Pack-Brown, S. (2001). TEAM BROTHERS: An Africentric approach to group work with African American male adolescents. *Journal for Specialists in Group Work*, 26, 237-245. (**ERes**)
- Gutierrez, L. M., & Ortega, R. (1991). Developing methods to empower Latinos: the importance of groups. *Social Work with Groups*, 14(2), 23-43. (**ERes**)

**Session 13 (11/17). Practice with groups: Health Promotion groups in urban communities. (Health promotion group presentation)**

**Readings for Session 13:**

Required:

- Swenson et al., *MST & Neighborhood Partnerships*, pp. 161-199.
- Getzel, G. (2005). Group work services to people with AIDS during a changing pandemic. In Greif, Chapter 3.
- Hurdle, D. E. (2001). Social support: a critical factor in women's health and health promotion. *Health and Social Work*, 26, 72-79. (**online**)
- Lou, V. W. Q., & Zhang, Y. (2006). Evaluating the effectiveness of a participatory empowerment group for Chinese type 2 diabetes patients. *Research on Social Work Practice*, 16, 491-499. (**online**)

**Session 14 (11/24). Practice with groups: Empowerment and advocacy groups in urban communities. (Empowerment/advocacy group presentation) *Final Paper Due***

**Readings for Session 14:**

Required:

- Parker, L. (2003). A social justice model for clinical social work practice. *Affilia, 18*, 272-288. **(online)**
- Boyes-Watson, C. (2009). Chapter 4: "The circle as a space of empowerment"
- Greif, G. L. (2005). Group work with urban African-American parents in their neighborhood schools. In Greif, Chapter 22
- Breton, M. & Nosko, A. (2005). Group work with women who have experienced abuse. In Greif, Chapter 14.
- Cohen, M. B., & Mullender, A. (1999). The Personal in the Political: Exploring the Group Work Continuum from Individual to Social Change Goals. *Social Work with Groups, 22*(1), 13-31. **(ERes)**

**Session 15 (12/1). Practice with groups: Enhancing social and community connections, circles and conferencing in urban communities. Integration of course material and linking to community practice.**

- Review and integration exercises related to course themes and critical readings
- Transition to practice 4

**Readings for Session 15:**

Required:

Boyes-Watson, C. (2009). Chapter 5: "The circle as a space of accountability"; Chapter 6: "The circle as a place of healing"; Chapter 7: "Opening the heart within systems"; Chapter 8; "Bringing justice home"

Recommended:

- Ulrich, Gretchen. (1999). Widening the Circle: Adapting Traditional Indian Dispute Resolution to Implement Alternative Dispute Resolution and Restorative Justice in Modern Communities. *Hamline Journal of Public Law and Policy, 20*, 419-52.
- Pranis, K. (1998). *Conferencing and the community*.  
[http://iirp.org/library/nacc/nacc\\_pra.html](http://iirp.org/library/nacc/nacc_pra.html)  
**(online)**

## **Final Paper Assignment, Social Work 519**

**1. Abstract**, due on **October 27th**, about 2 pages, double-spaced, APA style. Abstract should describe:

- The general area of practice you will be writing about in the paper
- The service setting in which the paper is grounded
- Description of the planned literature search
- Description of the observations being made/planned

**2. Final Paper**, due on **November 24th**. Assignment is an original 12-20 page, APA style paper with sophisticated use of references, discussing work in the field in terms of the course knowledge objectives. Think of this paper as an observational study of the agency, as you might make if you were a consultant to the organization. The following is a suggested outline, although you may organize the paper in any coherent way. **You must use headings to organize your paper.** A possible outline:

- a) Describe the agency in enough detail to establish the context of your work (mission, auspices, service structure, client base, etc.). (~ 1 page)
- b) Describe the extent to which agency clients (or clients of the agencies with which your agency works) struggle with justice or human rights issues. (~ 1 page)
- c) Discuss the extent to which the agency's work is implicitly and explicitly grounded in human rights and social justice perspectives. (provide evidence) (~ 2 pages)
- d) Provide a literature review related to one or more goals/issues being addressed by the agency, and what is known about practice related to those goals/issues (alternative models and approaches, best practices, the evidence base). (~ 2-4 pages)
- e) Discuss the extent to which the agency's work in the area identified could be considered state-of-the-art and evidence-based. (provide evidence) (~ 1-2 pages)
- f) Discuss the extent to which the agency emphasizes capacity-building and asset-building approaches. (provide evidence) (~ 1-2 pages)
- g) Discuss possible directions for improvement of agency practice. (~ 2 pages)
- h) Discuss what you have learned about yourself through your practice in the agency. (at least one page)