

HLTH AGE 3E03E: ETHICAL ISSUES IN HEALTH & AGING

Department of Health, Aging & Society McMaster University Fall 2016

Instructor: Dr. Jessica A. Gish
Lectures: Tuesday, 7:00-10:00pm
Office Hours: Thursday, 3:30-5:30pm

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**If you require this information in an alternate/accessible format, please contact the Department of Health, Aging & Society (ext. 27227 | e-mail: hasdept@mcmaster.ca).

Course Description

This course is a selected topics course on ethical issues in health and aging. The goal is to reflect on the moral dilemmas that arise in an aging society for older people, family members, health care providers, and policy makers. A defining theme is consideration of the ethical implications of contemporary social facts and exploration of whether these developments are “good” for old and aging people. It will provide an overview of philosophical understandings about old age and introduce the basics of ethical theorizing to analyze every day and difficult situations in health and social service settings where crucial decisions are required to be made. This course is inspired by the “critical turn” in ethical thinking and informed by philosophy, feminist views on ethics, communicative ethics, and critical gerontology. It will provide a brief overview of traditional approaches to ethical thinking while pointing out the need for an approach that is more suited to the experience of late life and the wishes of older people and their families. Systematic moral reflection will occur in this course on the following topics: ageism, embodiment, productive aging, cultural values of autonomy and independence, images and ideals of the third age, family caregiving, social policy, spaces of care (e.g., nursing homes, home care), abuse, self-neglect, Alzheimer’s disease, and aid-in-dying.

Course Objectives

- Introduce students to fundamental concepts in ethics and the basics of moral analysis.
- Examine how dominant views about ethics influence definitions and ideas about what counts as an ethical problem.
- Consider the ethical implications of aging and ageism, including age norms, age practices, and longevity.
- Review ethics and aging at clinical, social, cultural, policy, and individual levels.
- Examine ethical issues that arise at various sites (e.g., home, long-term care, assisted living) where care is provided to seniors.
- Develop knowledge and skill development about how to resolve issues in the policy and cultural arena and discover how individual, personal values sometimes conflict with professional and societal values.
- Advance written, presentation, and group collaboration skills, including learning how to work collaboratively and respectfully with others about complex and sensitive issues.

Course Materials

Holstein, M., Parks, J., & Waymack, M. (2011). *Ethics, Aging, & Society: The Critical Turn*. New York, NY: Springer Publishing Company. (This text is mandatory and available for purchase at the university bookstore)

Schermer, M. & Pinxten, W. (eds.). (2013). *Ethics, Health Policy and (Anti-) Aging: Mixed Blessings*. New York: Springer Dordrecht Heidelberg. (Selected chapters are assigned from this book, which is available as an e-book at the university library)

Additional readings are posted on Avenue to Learn and can be found using the McMaster University Library on-line catalogue. A list of bibliographic references is posted on Avenue to Learn to help you find the articles using the on-line catalogue. You may need this reference list to find the article(s) on your own using the library on-line catalogue if the link to the article breaks down, which occasionally happens. It is your responsibility to download all assigned readings from Avenue to Learn.

Course Style & Method of Instruction

This course involves lectures, in-class discussions, small group exercises, and dialogues to be held in class on scheduled dates. It will be extremely difficult to do well in this course if you do not regularly attend lecture or keep up with assigned readings. It is strongly advised that assigned readings be completed *before* the class in which they are assigned. Lectures will not discuss in full the entire content of assigned readings. Assigned readings will complement and inform lectures by serving as a starting point for more advanced discussion. Powerpoint presentations will be posted on Avenue to Learn in the hours before lecture is scheduled to take place. Slides will be designed to facilitate note-taking during lecture; slides are not facsimiles or replicas of all that students are expected to know from lectures. You are unlikely to succeed in this course if you ignore the assigned readings and only attend the lectures or if you simply read the text and miss class.

Course Requirements & Important Dates

Requirement	Weight	Date
Midterm	35%	October 25
Small Group Dialogue	10%	TBD*
Group Position Paper	10%	TBD*
Class Attendance & Participation	10%	To be assessed on an ongoing basis
Take-Home Final Exam	35%	December 13** (You should submit a printed copy and an electronic copy to the Dropbox on A2L)

* The due date for your small group dialogue will depend on which date and topic you sign up for or are assigned by your Professor. Your position paper is due at the end of lecture on the day your dialogue is scheduled to take place.

** If you are participating in the dementia & aid-in-dying in-class dialogue, your take-home final exam will be due no later than December 20th.

MIDTERM: Your midterm will be based on all course material, including lectures, assigned readings, audio-visual materials (e.g., documentaries, video clips, images), and in-class discussions up until the scheduled date of the midterm. Your midterm will consist of a combination of multiple-choice, matching, true/false, short-answer, and small essay questions. Your midterm is scheduled to take place on **October 25**. You will have two hours to write your exam.

FINAL EXAM: Your final exam is a *cumulative* written, take-home exam. On **November 29** you will be given a set of essay questions in class, and your exams, in both printed and electronic form, will be due on **December 13th** (instructions about exam submission will be provided in class). There may be an element of choice built into the exam giving you flexibility to decide which topical areas you will focus on. You should expect to write at least 3 short essays for this exam. Each essay will be approximately 3-5 double-spaced pages in length. Primary grading criteria will be based on how well your essays demonstrate understanding of substantive course content, including approaches to ethical thinking, core arguments, examples, concepts, findings from assigned readings, and logically develop an argument. Point form responses are unacceptable and will result in a poor grade. Your essays should follow APA formatting guidelines and use in-text citations. More information about your final exam will be provided as the semester unfolds.

CLASS ATTENDANCE & PARTICIPATION: Class attendance will be assessed spontaneously at the discretion of the professor. In addition, small group exercises will be assigned throughout the semester. Students are encouraged to actively participate during in-class discussions and small group exercises to accumulate participation credit. At the end of the semester you will be assigned a score out of 10 that reflects the overall quality of your attendance and participation.

SMALL GROUP DIALOGUE: You will be organized into small groups of 5 to 10 persons with the size of these groups ultimately depending on final course enrollment. You are expected to participate in one small group dialogue on an assigned topic. Each group will be assigned to an argument or counterargument from a list of previously selected topics (see below on pg. 7) and required to develop a 15-20 minute presentation that outlines the group's position on the issue. As part of your presentation, your group should outline in summary form key arguments on your position, including recommendations for policy and practice. Each group is expected to prepare a short powerpoint presentation as a way to introduce arguments, main points, and research consulted. Your powerpoint presentation will be posted on Avenue to Learn to be used as a resource tool for your classmates. You are expected to make arrangements outside of class time to prepare for this assignment.

Expectations for Dialogue Tone & Atmosphere

For this assignment your group is expected to engage in an open and friendly dialogue with another group about a specific topic. The intent of the presentation is to present some preliminary thoughts and ideas for policy and practice that reflect your position of choice. After your presentation, the opposing group is required to ask the presenting group questions for

clarification as well as raise points for further reflection that either support, expand upon, revise, or raise concerns about the arguments and recommendations made by the presenting group.

Each group should exhibit a tone that is contemplative, rather than argumentative. The ensuing conversation or “dialogue” must be polite, friendly, and warm; different points of view must be invited and accepted by everyone participating in this assignment. Groups (and individual group members) should not speak in a “monological” voice; a monological voice is when a singular point of view dominates and monopolizes the conversation and claims authority or privileged knowledge about the topic at hand. Instead, each group must aim to produce a dialogue or the acceptance of differing points of view and promote thinking about things in different ways. As you can see, this assignment is not a conventional “debate” in which one group is nominated as a “winner.” Instead, the presentation and discussion will be successful if differing points of view are respected, listened to, and reflected upon. Groups (or individual group members) will be penalized if they treat the assignment as if it is a conventional debate.

Forming Groups

You are allowed to form small groups on your own or will be assigned to a group by the Professor if you wish. Your choice is likely to depend on the topic, position (for vs. against), and scheduled date that is of interest to you. Groups will be assigned to topics, positions, and dates on a first-come, first-serve basis. At any time after the first day of class, you can e-mail your Professor to sign up for a topic and/or position. To do so, your group must contain at least 3 to 5 people in it. Be prepared that a small group may be combined with another small group. Your e-mail should contain all of the following for each group member: student name, MAC ID, e-mail address, date the dialogue is scheduled, and position of choice (for vs. against). Ideally, the group dialogue schedule will be finalized by **Tuesday, September 13th**. If you have not signed up for a dialogue by this time, a topic and group will be assigned to you.

To facilitate communication with your group members, a group or on-line space can be created for your group on Avenue to Learn. In this space you can send e-mails, post comments on a discussion board, and share documents with group members. Please note that all comments posted in the space are visible to your Professor. If you wish for a group to be created on Avenue to Learn, please notify your Professor. To access your group, log in to Avenue to Learn and click on the tab “communication” and then “groups.” If it is preferred, other virtual platforms are publically available and can be used to facilitate the completion of this assignment (e.g., google docs, facebook).

Dialogue Structure

The dialogue structure for this assignment is inspired by Habermasian communicative ethics, which aims to develop open, honest, and democratic dialogue between all members of a localized discursive community. A discursive community is any small group of people who exist in a defined area or have similar interests. For example, you are a member of a discursive community as a small group of students taking this course who share an interest in the topics of aging, health, and improving the lives of older adults.

The intent of communicative ethics is for a group of people to vocalize their “real” interests in a localized setting using fair and impartial discussion as part of the process of coming to agreement on issues of common interest. Critical ethics scholars advocate that the communicative ethic is well suited to grounding conversations about aging in institutional (e.g., hospitals, nursing homes, assisted living facilities) and non-institutional or micro-communities (e.g., curling rinks, family dinners, book clubs, neighbourhoods), so this assignment is designed to build your ability to communicate in this manner.

Taking inspiration from this procedural view of ethics, you are highly encouraged in your presentation and dialogue to avoid the use of universal or abstract principles. Instead, you should consider the actual needs and issues of those making up the discursive community that is relevant to your dialogue topic (e.g., older persons, family members of loved ones with dementia) as well as the views of the discursive community that you are a part of (e.g., undergraduate students with views on aging and late life). As such, you are encouraged to reflect on your own age identity (personal feelings about the aging process) and knowledge about aging at personal and cultural levels. For example, do the objectives of the anti-aging industry reflect ideals by which you want to live by? Does the anti-aging industry meet your “needs” or align with your personal preferences and values? Is the rhetoric of active or productive aging something that works for you as someone who will be old one day?

In the spirit of communicative ethics, the structure of the dialogue assignment is designed to give everyone an equal opportunity to participate and to allow time for thoughtful reflection on a specific topic. During the class discussion component, you may find the group coming to a consensus on the dialogue topic (e.g., the group is either for *or* against anti-aging). If this happens, the group has come to agreement about what social and moral norms should be or may have identified suggestions for how to revise current social norms in a way that will lead to the creation of a better life.

For each dialogue topic it will be interesting to see whether consensus is achieved on the issue because it can be very difficult to come to consensus. In spite of being respectful of others, conflict and differences may emerge. However, if consensus is achieved it will be interesting to reflect on what the overall consensus is on the issue and what this consensus has to say about the needs, interests, and values that emerge in your discursive community.

The specific structure of the small group dialogue will be as follows:

- Round 1: Presentation of “Arguments for” (15-20 minutes)
- Round 1: “Arguments against” questions “Arguments for” (5 minutes)
- Round 2: Presentation of “Arguments against” (15-20 minutes)
- Round 2: “Arguments for” questions “Arguments against” (5 minutes)
- Round 3: “Arguments against” response (5 minutes)
- Round 3: “Arguments for” response (5 minutes)
- Class discussion: Open to entire class (10 minutes)

Preparing for the Dialogue

Each student should research the topic on their own briefly. As part of your research, you should consider conceptual and theoretical materials discussed in lecture, reflect on videos shown in

class, and consult assigned readings or any other readings suggested by your Professor (see Appendix: Supplementary Resources for In-Class Dialogue, pgs. 18-21). You may also consult additional academic sources found through independent research. After preparing individually for the assignment, you will need to meet with your group, plan arguments, and assign responsibilities for the dialogue (e.g., who says what, who should respond to questions asked of the group, who will e-mail the powerpoint presentation to the Professor, etc.). To ensure that the dialogue is completed in a timely manner, ensure that your powerpoint presentation is *e-mailed* to your Professor at least *two* hours *before* class is scheduled to begin. We may or may not have discussed the dialogue topic in lecture prior to the scheduled dialogue. However, if you complete your reading and do some research, you will be adequately prepared to discuss the issue with your classmates.

As part of your presentation planning, you will need to keep in mind Holstein et al.'s (2011) approach to ethical thinking in aging and specific definition of what counts as moral knowledge. You may find it useful to consult empirical research to generate reflection on what is actually happening in real life practices to support your point of view. But more importantly, you should remember that critical perspectives on ethical thinking do not define moral knowledge as involving the application of universal laws and principles. Critical scholars recognize that moral knowledge is contained in stories, films, poems, or any other artifact emerging from people's lives as they are actually lived which generates unsettled feelings and questions about what appropriate moral action should be. For Holstein et al. (2011) moral knowledge is not found in the minds of moral experts but in the lives of people who are doing age work or concrete age-related activities and practices. Thus, this assignment encourages you to use in your presentation, if you deem it to be relevant, different sources of moral knowledge. For example, you are highly encouraged to reflect on what you know from narratives (socially and culturally constructed versions of stories) and stories (personal or local versions of narratives) that you find in your own lives.

In preparing your arguments, keep in mind what Holstein et al. (2011) term the "relational" or revised view to doing ethical thinking. Fundamentally this means that ethical practice involves recognition of how a person's sense of self is embedded in relations with other people and the variegated contexts which shape those relations. Your ethical reflection in this assignment needs to consider what types of selves are being made in society today and whether these are the kinds of selves that should be made to be.

Use of Visual Materials or Powerpoint

Each group should prepare a short powerpoint presentation that summarizes key arguments for the opposing group and non-participating students. Your presentation should be a concise summary of your group's main points and arguments, including recommendations for policy and practice. It should also include references to empirical data that support main points either discussed in your textbook or found through independently conducted research. Remember to keep your points short. Point form is acceptable, but your presentation should be free of grammatical and spelling errors. It is expected that your group will need to consult published research to do well on this assignment following from Holstein et al.'s (2011) recommendation that consultation of empirical research is part of the method of ethical thinking.

Dialogue Topics & Schedule

Dialogue No.	Dialogue Topic	Date	Group/Position 1	Group/Position 2
1	Anti-Aging	September 27	There is nothing wrong with anti-aging medicine and life extension. Aging is a disease.	There is everything wrong with anti-aging medicine and life extension. Aging is a natural process.
2	Productive Aging	October 18	A “good old age” means being productive and engaged in the community.	A “good old age” does not require being productive and engaged in the community.
3	Family Caregiving	November 1	Families should bear the primary responsibility for taking care of older family members who are dying and/or need help living alone independently in the community.	Families should not bear the primary responsibility for taking care of older family members who are dying and/or need help living alone independently in the community.
4	Dementia & Romantic Relationships	November 22	Persons with dementia should be able to pursue new romantic relationships in long-term care. Families should not be told about new romantic relationships when they occur.	Persons with dementia should not be able to pursue new romantic relationships in long-term care. Families should be told about new romantic relationships when they occur.
5	Dementia & Aid-in-Dying	December 6	Aid-in-dying should be possible for persons with dementia. An advance directive for a person with dementia is a good idea.	Aid-in-dying should not be possible for persons with dementia. An advance directive for a person with dementia is not a good idea.

Criteria for Evaluation

The overall objective is not about winning or losing the dialogue, but about engaging in the process of communicative ethics or ethical deliberation. The goal of your group’s presentation is to present thoughtful arguments in support of your position and then engage in respectful dialogue about a specific topic. The following criteria will be considered in assessment of your group’s performance:

- **Depth of analysis** (consideration of the harms and benefits of the provided position)
- **Thoughtful reflection & response** (questioning the other group’s argument in a way that enables further evaluation of personal/group preferences and/or cultural norms)
- **Engagement in the process of communicative ethics** (consideration in your discussion and response to the needs and interests of the group in question; for example, is the topic/position

up for discussion creating a society that is good for older people, family members, and/or health care providers? Is the topic/position creating a society in which you want to live and that is good for you?)

- **Presentation** (oral and written techniques during the presentation and adherence to time limits)

GROUP POSITION PAPER: Using your assigned topic, you will prepare a 7-8 page paper together with your group members that documents your position on the issue. Your group's position paper is due on the day of your scheduled dialogue. Your position paper should outline key points articulated during your presentation and discuss references to theoretical arguments, concepts, and empirical material discussed in class, assigned readings, or found through independently conducted research.

** IMPORTANT NOTE: Each group (e.g., anti-aging – for) has the option of submitting two independently written and graded group position papers. For example, a group of 5 students can be further divided into a group of 2 and 3. It is expected that group members will work together to prepare the presentation, collect research and examples, and identify key arguments and recommendations. However, when it comes time to complete the written work, a group may opt to write two papers independently, even if there is overlap in the content that is discussed. Because this is a group assignment, individuals are not permitted to submit individually written assignments. This option may be preferred for a group that is larger in size.

General Guidelines

- Position papers should be **7-8 pages, double-spaced.**
- Position papers should be written in **12 point, Times New Roman font.**
- Margins should be set at **2.54 cm** (top, bottom, left, right).
- Position papers should be submitted in **hard-copy format** only (e-mail submissions will not be accepted).
- Position papers should be **stapled** and not bound in any type of assignment cover.
- Position papers can include the use of headings and sub-headings to organize ideas, themes, and arguments.
- Position papers should avoid the extensive use of direct quotes because it can be difficult to assess student understanding of the material presented.
- Position papers should reference **at minimum 4 pieces of independently conducted research** outside of assigned readings.
- **APA format** should be used for in-text citations and bibliographic references at the end of your response paper.
- Provide a **cover page** that includes all of the following information: names of group members, course title, assignment title, assignment due date, and the Professor's name.

Criteria for Evaluation

- **Depth of analysis** (consideration of the harms and benefits of the provided position; writing is analytical rather than descriptive of course content; the paper is well researched)

- **Thoughtful reflection & response** (discussion of relevant issues, themes, and concepts from course material; understanding of a traditional compared to a critical or relational approach to ethical thinking is demonstrated where necessary)
- **Organization of the paper** (the position paper is well organized and meets page length requirements)
- **Writing style** (use of university-level English, spelling, grammar, and sentence structure)
- **Referencing** (use of APA is appropriate, consistent, and accurate throughout the text and in the bibliography)

Assessment of Group Participation for the In-class Dialogue and Position Paper

Members of each group will be assigned the same grade for the dialogue and position paper, though the dialogue and position paper will be marked independently of one another. Thus, it is possible to receive a higher score on the in-class dialogue and a lower score on the position paper (and vice-versa).

All group members are expected to contribute equally and in a productive manner for this project. If group members experience difficulty contacting and getting a group member to participate, they should notify the Professor as soon as possible. If it is deemed appropriate, *the Professor reserves the right to remove any non-participating group member from his or her group with the consequence of receiving a grade of 0 for the in-class dialogue and/or the position paper.* A non-contributing group member will not be able to make up missed work by way of an alternative assignment.

After your dialogue each student will have the opportunity to evaluate the individual contributions of group members. You will be asked to assign each of your group members a grade out of 10. Individual student evaluations will be used to adjust accordingly a student grade by the Professor if group evaluations suggest overall that this action is appropriate. Scores can be adjusted to reflect either poor or excellent participation using the following definitions. *Poor participation* is defined as not keeping in regular contact with group members, failing to respond to e-mails, missing group meetings, contributing in a minimal way to the preparation required for the presentation or position paper, and/or being ill prepared for the presentation and dialogue. *Excellent participation* is defined as a high quality individual contribution that entails being a group leader, taking initiative to organize group members, delegating tasks to group members, and/or taking the lead on writing the position paper or preparing the powerpoint presentation. When doing your evaluations, you should consider whether it is appropriate to reward an individual student(s) for highly quality work.

Tips and Suggestions for Succeeding in this Course

1. Attend lecture. It is my experience that students who come to class regularly do better in social science courses.
2. Keep up with assigned readings. Assigned readings will be the basis for lecture material, sometimes complementing readings and at times covering new ground. It is especially important to keep up with assigned readings because there will *not* be enough time in lecture to cover all of the content in the textbook. Some material you will be responsible for learning on your own through individual self-study.
3. When studying for exams remember that *all* lecture materials, including assigned readings, audio-visual materials (e.g., documentaries), and in-class discussions are considered testable materials on examinations.
4. Powerpoint presentations will be used during lecture but note-taking is crucial to doing well in this course. To the best of the Professor's ability, powerpoint presentations will be posted on Avenue to Learn in the hours *before* lecture is to take place. If you simply review powerpoint presentations in lieu of coming to class, you will not do well in this course. Powerpoint presentations will be designed to facilitate student note-taking and will not be a replica of all that was discussed during lecture. Taking notes in class is productive for two reasons. First, it ensures that you stay focused on course materials rather than distracted by facebook, twitter, or any other electronic mode of distraction. Second, it facilitates the learning process by giving you practice writing and thinking with new material, which in the process makes present material that is unclear. In this case you should ask a question of the Professor to obtain clarification and/or spend time outside of the classroom engaging with explanations presented in assigned readings.
5. Exchange contact information (e.g., e-mail address and/or phone number) with a classmate or "buddy" early in the semester. I will *not* provide lecture notes to students that miss class, thus your first point of contact should always be your "buddy." I will be happy to discuss course material during office hours that you do not understand but only after you have reviewed lecture notes from a classmate.

Grading

Grades for each course requirement will be added together at the end of the term. The final total will be translated into the following letter grade according to the grading system documented below:

Grade	Equivalent Grade Point	Equivalent Percentages
A+	12	90-100
A	11	85-89
A-	10	80-84
B+	9	77-79
B	8	73-76
B-	7	70-72
C+	6	67-69
C	5	63-66
C-	4	60-62

D+	3	57-59
D	2	53-56
D-	1	50-52
F	0	0-49

INSTRUCTOR POLICIES

Class Communication, Email & Office Hours: Please do *not* e-mail your Professor using Avenue to Learn. The best way to contact your Professor is to e-mail directly using your McMaster University account. Unfortunately e-mails that are sent to Professors from Avenue to Learn are bounced back when they are replied to. For this reason it is most effective and efficient if you email your Professor regularly from your McMaster e-mail account and not from Avenue to Learn.

If you have a substantive question that comes out of lecture, you are welcome to e-mail me but I prefer to see students during office hours. It is much easier to provide clarification about substantive questions in person than it is over e-mail. If you send a question about course content using e-mail, be prepared that I may simply ask you to come see me in person if the answer requires extensive explanation.

Please do not e-mail questions that can already be answered by information that has been given to you during lecture or is present on the course outline, documents posted on Avenue to Learn, or in university regulations (e.g., course calendar). There will be ample time to ask questions in class about course material, assignments, and exams, so please feel free to do so. E-mails to your Professor (and TA) should contain: “**HLTH AGE 3E03**” in the subject line. Otherwise your e-mail may be deleted as spam or directed to a junk mail file.

Computers & Cell Phones: You are welcome to bring your laptops with you to class, but when in class you should only be using your word-processing program. Please keep all electronic social networking out of the classroom. This means absolutely *no* twittering, texting, or facebooking during class time. My concern lies in the potential that this behaviour has for disrupting the learning of others in the classroom not electing to participate in it. If necessary, I will ask those who are breaking this policy to leave the classroom.

Late Assignments: All written work must be submitted in person on the due date as per the assignment instruction guidelines. Assignments that are received by e-mail in electronic form in lieu of a hard copy or under the Professor’s door will NOT be accepted. As described above, your assignment must be received in person in lecture on the assignment due date to avoid late penalty. Your assignment cannot be submitted to the digital drop box in place of an in person submission of a hard copy of your assignment. It is extremely time consuming for your Professor and Teaching Assistant to print student assignments individually in a class of this size, thus it is absolutely mandatory that you submit paper copies of your assignment. Planning your work, scheduling time, and meeting deadlines can be especially challenging, but are important skills to develop and part of the reality of life outside of the university. As an incentive to develop this skill and to be fair and equitable to all students, *late assignments will be penalized at the rate of 5% per day that the assignment is late (including weekends)*. If an assignment is due at the beginning of lecture or tutorial, it will be considered one day late if it is received at any time after the end of class. Late penalties will be waived if the office of the Associate Dean of Social

Sciences notifies the Professor that you have submitted to that office the appropriate documentation to support your inability to submit the work by the due date.

IMPORTANT NOTE: *Please do NOT e-mail or approach the Professor before or after lecture to request an extension for an assignment.* In general, I do not grant extensions for assignments outside of the academic missed work university policy. In the event that you would like to request an extension on your assignment, make arrangements to come see me during office hours to discuss the specific circumstances surrounding your request. All requests that come to me outside of office hours will be denied. Your Teaching Assistants do not have the authority to grant extensions independent of consultation with the Professor.

Missed Course Work: In this course if you miss an exam or assignment due date because of an excused absence, it is the Professor's policy that credit will not be transferred to another course assignment. You must complete all exams and assignments in a timely manner in this course.

IMPORTANT NOTE: Please familiarize yourself with revisions to the university policy for the McMaster Student Absence Form (MSAF) because under no exceptions will the previous rules and guidelines be enforced. These policy revisions became effective in the spring/summer 2015 term.

- The MSAF can be used for medical and nonmedical (personal) situations.
- Approval of the MSAF is automatic (i.e. no documentation is required).
- The upper limit for when an MSAF can be submitted has been reduced from 'less than 30%' to 'less than 25%' of the course weight.
- The MSAF provides relief for missed academic work resulting from medical or personal situations lasting up to 3 calendar days. If your medical or personal situation lasts longer than 3 days, you must report to the Faculty Office to provide appropriate supporting documentation.

Return of Assignments: In accordance with regulations set out by the Freedom of Information and Privacy Protection Act, the University will not allow return of graded materials by placing them in boxes in departmental offices or classrooms so that students may retrieve their papers. Tests and assignments must be returned directly to the student. The Professor will make arrangements for you to pick up your assignments in person during scheduled office hours. You may also provide the Professor with a stamped, self-addressed envelope for the return of assignments by mail.

Review of Marks: A great deal of time and attention will be spent marking your assignments and effort will be made to provide feedback about your assignment. If you would like additional feedback about the grade you received, please book an appointment with your Teaching Assistant or attend their scheduled office hours. If you disagree with the mark you received for your assignment, please adhere to the following procedure:

1. Document in at least 2 to 3 paragraphs (1 full page, single-spaced, type-written) why you think you deserve an improved mark. Ensure that your comments address specifically your concerns about the marking and explain in detail why you think your assignment meets the expectations of the assignment as outlined in the grading rubric. Your response should reflect on *all* of the written feedback provided by the Teaching Assistant.

2. Submit your written commentary and original assignment to the Department of Health, Aging & Society (attention: the name of your TA). Then, book an appointment with your TA to discuss the marking of your assignment.
3. If the TA and you are unable to resolve the dispute, book an appointment with your Professor. Prior to the meeting ensure that your Professor has a copy of your written commentary as well as the original assignment.
4. Please note that your TA and Professor have the ability to *increase or decrease* the original assignment score.
5. All disputes involving the TA and Professor must be resolved *at least one month* within the date in which you received your mark.

Videos: We will watch several documentaries in this course, which will be used to illustrate concepts from course material and to generate in-class discussion. These videos will be extremely difficult to obtain outside of class time, thus it is important that you are in class to see them. Exams will assess your understanding of the documentary as it relates to course material as well as your general knowledge about your viewing of the film.

UNIVERSITY POLICIES

Academic Accommodation of Students with Disabilities: Students who require academic accommodation must contact Student Accessibility Services (SAS) to make arrangements with a Program Coordinator. Academic accommodations must be arranged for each term of study. Student Accessibility Services can be contacted by phone 905-525-9140 ext. 28652 or e-mail sas@mcmaster.ca. For further information, consult McMaster University's Policy for Academic Accommodation of Students with Disabilities: <http://www.mcmaster.ca/policy/Students-AcademicStudies/AcademicAccommodation-StudentsWithDisabilities.pdf>

Academic Integrity: You are expected to exhibit honesty and use ethical behaviour in all aspects of the learning process. Academic credentials you earn are rooted in principles of honesty and academic integrity.

Academic dishonesty is to knowingly act or fail to act in a way that results or could result in unearned academic credit or advantage. This behaviour can result in serious consequences, e.g. the grade of zero on an assignment, loss of credit with a notation on the transcript (notation reads: "Grade of F assigned for academic dishonesty"), and/or suspension or expulsion from the university.

It is your responsibility to understand what constitutes academic dishonesty. For information on the various types of academic dishonesty please refer to the Academic Integrity Policy, located at <http://www.mcmaster.ca/academicintegrity>. The following illustrates only three forms of academic dishonesty:

1. Plagiarism, e.g. the submission of work that is not one's own or for which other credit has been obtained.
2. Improper collaboration in group work.
3. Copying or using unauthorized aids in tests and examinations.

Avenue to Learn: In this course we will be using Avenue to Learn. Students should be aware that, when they access the electronic components of this course, private information such as first

and last names, user names for the McMaster e-mail accounts, and program affiliation may become apparent to all other students in the same course. The available information is dependent on the technology used. Continuation in this course will be deemed consent to this disclosure. If you have any questions or concerns about such disclosure please discuss this with the course instructor.

Course Modification: The instructor and university reserve the right to modify elements of the course during the term. The university may change the dates and deadlines for any or all courses in extreme circumstances. If either type of modification becomes necessary, reasonable notice and communication with the students will be given with explanation and the opportunity to comment on changes. It is the responsibility of the student to check his/her McMaster email and course websites weekly during the term and to note any changes.

Faculty of Social Sciences E-mail Communication Policy: Effective September 1, 2010, it is the policy of the Faculty of Social Sciences that all e-mail communication sent from students to instructors (including TAs), and from students to staff, must originate from the student's own McMaster University e-mail account. This policy protects confidentiality and confirms the identity of the student. It is the student's responsibility to ensure that communication is sent to the university from a McMaster account. If an instructor becomes aware that a communication has come from an alternate address, the instructor may not reply at his or her discretion.

Email Forwarding in MUGSI: <http://www.mcmaster.ca/uts/support/email/emailforward.html>

*Forwarding will take effect 24-hours after students complete the process at the above link

Turnitin.com: In this course we will be using a web-based service (Turnitin.com) to reveal plagiarism. Students will be expected to submit their work electronically to Turnitin.com and in hard copy so that it can be checked for academic dishonesty. Students who do not wish to submit their work to Turnitin.com must still submit a copy to the instructor. No penalty will be assigned to a student who does not submit work to Turnitin.com. All submitted work is subject to normal verification that standards of academic integrity have been upheld (e.g., on-line search, etc.). To see the Turnitin.com Policy, please go to: <http://www.mcmaster.ca/academicintegrity>

WEEKLY LECTURE & READING SCHEDULE

Week	Date	Topic	Holstein	Schermer & Pinxten (ebook)	Other Readings	In-class Activity
1	September 6	<i>Introduction to the course</i>	xi-xxii			Discuss course outline & dialogue process Set-up dialogue groups
2	September 13	<i>Approaches to Ethical Thinking</i>	CH1 & CH2		Baldwin (2015): Narrative ethics for narrative care	Finalize dialogue groups
3	September 20	<i>The Aging Body</i>	CH3	de Beaufort: Will you...when I'm sixty four?		<i>Video: Let's Face It: Women Explore Their Aging Faces</i>
4	September 27	<i>Anti-Aging & Life Extension</i>	CH5	Vincent: The anti-aging movement contemporary cultures and the social construction of old age		<i>Video: Do You Want to Live Forever?</i> DIALOGUE #1: Anti-Aging
5	October 4	<i>Third Age, Productive Aging & Social Policy</i>	CH4 & CH6		Rudman & Molke (2009): Forever productive Stephens et al. (2015): Volunteering as reciprocity	In-class discussion about what is 'productive aging' <i>Video: Age No Problem</i>
6	October 11	MIDTERM RECESS				

7	October 18	<i>Third Age, Productive Aging & Social Policy</i>	CH6 & CH7			Midterm review & Discussion of midterm expectations DIALOGUE #2: Productive Aging
8	October 25	MIDTERM				
9	November 1	<i>The Nursing Home & Working with Clients and Patients</i>	CH8 & CH9		Agich (1990): Reassessing autonomy in long-term care Baur & Kaur (2011): Resident councils between life world and system Metze et al. (2015): ‘You don’t show everyone your weakness’	Lecture & small group exercises on assigned readings
10	November 8	<i>Care, Social Policy & Justice</i>	CH6 & CH7		Aronson (2004): ‘You need them to know your ways’ Funk (2010): Prioritizing parental autonomy	DIALOGUE #3: Family Caregiving
11	November 15	<i>Abuse & Self-Neglect</i>	CH10		Band-Winterstein (2012): Narratives of aging in intimate partner violence Band-Winterstein et al. (2012): Elder self-neglect	Lecture & small group exercises on assigned readings <i>Video: Mr. Nobody</i>
12	November 22	<i>Alzheimer’s Disease</i>	CH11	Touwen: Former wishes and current desires: Demented patients and their family members’ effort to decide what they would have wanted	Moser (2008): Making Alzheimer’s disease matter. Enacting, interfering and doing politics of nature	Review final exam requirements DIALOGUE #4: Dementia & Romantic Relationships

13	November 29	<i>Care at the End-of-Life</i>	CH12	den Hartogh: Death wishes of the elderly: Is there a task for doctors?	Alvargonzález (2010): Alzheimer's disease and euthanasia	Hand-out final exam <i>Video: Terry Pratchett: Choosing to Die</i>
14	December 6	<i>Care at the End-of-Life & Course Wrap-up</i>				Course evaluation DIALOGUE #5: Dementia & Aid-in-Dying

APPENDIX: Supplementary resources for in-class dialogues

The list below is not exhaustive. Please consider these lists as a starting point for your research and idea generation for this assignment. None of the readings below will be tested on examinations for this course.

Anti-aging:

Cole, T. & Thompson, B. (2001/2002). Anti-aging: Are you for it or against it? *Generations*, 25(4): 6-8.

Ehni, H-J. (2013). A “longevity dividend” for all? New interventions into aging and justice. In M. Schermer & W. Pinxten (eds.), *Ethics, Health Policy and (Anti-) Aging: Mixed Blessings* (pp. 225-236). New York: Springer Dordrecht Heidelberg.

Dumas, A. & Turner, B. (2015). Human longevity, utopia, and solidarity. *The Sociological Quarterly*, 56: 1-17.

Harris, J. (2013). Immortal ethics. In M. Schermer & W. Pinxten (eds.), *Ethics, Health Policy and (Anti-) Aging: Mixed Blessings* (pp. 189-196). New York: Springer Dordrecht Heidelberg.

Melman (2008). The ethical, legal, and social implications of antiaging technologies. In C. Y. Read, R. C. Green, & M. A. Smyer (Eds.), *Aging, biotechnology, and the future* (pp. 69-78). Baltimore, MD: John Hopkins University Press.

Phillipson, C. (2015). The political economy of longevity: Developing new forms of solidarity for later life. *The Sociological Quarterly*, 56: 80-100.

Schermer, M. (2013). Old age is an incurable disease – or is it? In M. Schermer & W. Pinxten (eds.), *Ethics, Health Policy and (Anti-) Aging: Mixed Blessings* (pp. 209-224). New York: Springer Dordrecht Heidelberg.

Sethe, S. & de Magalhães, J. (2013). Ethical perspectives in biogerontology. In M. Schermer & W. Pinxten (eds.), *Ethics, Health Policy and (Anti-) Aging: Mixed Blessings* (pp. 173-188). New York: Springer Dordrecht Heidelberg.

Sprott (2008). What is genetic research on aging likely to produce, and what are the ethical and clinical implications of those advances? In C. Y. Read, R. C. Green, & M. A. Smyer (Eds.), *Aging, biotechnology, and the future* (pp. 3-9). Baltimore, MD: John Hopkins University Press.

Productive aging:

Bank, D. (2009). Encore careers and the economic crisis. *Generations*, 33(3): 69-73.

Boudiny, K. (2013). ‘Active ageing’: from empty rhetoric to effective policy tool. *Ageing and Society*, 33(6): 1077-1098.

de Lange, F. (2013). Imagining good aging. In M. Schermer & W. Pinxten (eds.), *Ethics, Health Policy and (Anti-) Aging: Mixed Blessings* (pp. 135-146). New York: Springer Dordrecht Heidelberg.

Ekerdt, D. (1986). Busy ethic: moral continuity between work and retirement. *Gerontologist*, 26(3): 239-244.

Freedman, M. (2006-2007). Social-purpose encore career: baby boomers, civic engagement, and the next stage of work. *Generations*, 30(4), 43-46.

Freedman, M. (2002). Civic windfall? Realizing the promise in an aging America. *Generations*, 26(2): 86-89.

Goggin, J. (2009). Encore careers for the twenty-first-century aging-friendly community. *Generations*, 33(2): 95-97.

- Gonzales, E., & Morrow-Howell, N. (2009). Productive engagement in aging-friendly communities. *Generations*, 33(2): 51-58.
- Hank, K. & Erlinghagen, M. (2010). Volunteering in “old” europe. *Journal of Applied Gerontology*, 29(1): 3-20.
- Kojola, E. & Moen, P. (2016). No more lock-step retirement: Boomers’ shifting meanings of work and retirement. *Journal of Aging Studies*, 36: 59-70.
- Lamb, S. (2014). Permanent personhood or meaningful decline? Toward a critical anthropology of successful aging. *Journal of Aging Studies*, 29: 41-52.
- Martinson, M. & Halpern, J. (2011). Ethical implications of the promotion of elder volunteerism: A critical perspective. *Journal of Aging Studies*, 25, 427-435.
- Martinson, M. (2006-2007). Opportunities or obligations? Civic engagement and older adults. *Generations*, 30(4): 59-64
- Minkler, M. & Holstein, M. (2008). From civil rights to...civic engagement? Concerns of two older critical gerontologists about a “new social movement” and what it portends. *Journal of Aging Studies*, 22(2): 196-204.
- Morrow-Howell, N. (2013). Productive engagement of older adults: Elements of a cross-cultural research agenda. *Ageing International*, 38(2): 159-170.
- Quinn, J. (2010). Work, retirement, and the encore career: Elders and the future of the American workforce. *Generations*, 34(3): 45-55.

Family caregiving:

- Cash, B., Hodgkin, S., & Warburton, J. (2013). Till death us do part? A critical analysis of obligation and choice for spousal caregivers. *Journal of Gerontological Social Work*, 56: 657–674.
- Crooks, V.A., Williams, A., Stajduhar, K.I., Cohen, S.R., Allan, D., & Brazil, K. (2012). Family caregivers’ ideal expectations of Canada’s Compassionate Care Benefit. *Health and Social Care in the Community*, 20(2): 172-180.
- Heehyul, M. (2016). Predictors of perceived benefits and drawbacks of using paid service among daughter and daughter-in-law caregivers of people with dementia. *Journal of Women and Aging*, 28(2): 161-169.
- Lai, D. (2008). Intention of use of long-term care facilities and home support services by Chinese-Canadian family caregivers. *Social Work in Health Care*, 47(3): 259-276.
- Lee, C. (2001). Experiences of family caregiving among older Australian women. *Journal of Health Psychology*, 6(4): 393-404.
- Sabat, S. (2011). Flourishing of the self while caregiving for a person with Dementia: A case study of education, counseling, and psychosocial support via email. *Dementia*, 10(1): 81-97.
- Sánchez-Izquierdo, M. & Caperos, J. (2015). Positive aspects of family caregiving of dependent elderly. *Educational Gerontology*, 41(11): 745-756.
- Williams, A.M., Donovan, R., Stajduhar, K., & Spitzer, D. (2015). Cultural influences on palliative family caregiving: Service recommendations specific to the Vietnamese in Canada. *BMC Research Notes*, 8, 280. doi: 10.1186/s13104-015-1252-3

Williams, A., Eby, J., Crooks, V., Stajduhar, K., Giesbrecht, M., Vuksam, M., Cohen, R., & Brazil, K., & Allan, D. (2011). Canada's compassionate care benefit: Is it an adequate public health response to addressing the issue of caregiver burden in end-of-life care? *BMC Public Health*, 11: 335.

Yan, E. (2014). Abuse of older persons with dementia by family caregivers: results of a 6-month prospective study in Hong Kong. *International Journal of Geriatric Psychiatry*, 29(10): 1018-1027.

Zhan, J. (2006). Joy and sorrow: explaining Chinese caregivers' reward and stress. *Journal of Aging Studies*, 20(1): 27-38.

Dementia & romantic relationships:

Baur, M., Nay, R., Tarzia, L., Fetherstonhaugh, E., Wellman, D., & Beattie, E. (2014). 'We need to know what's going on': Views of family members toward the sexual expression of people with dementia in residential aged care. *Dementia*, 13(5): 571-585.

Baur, M., Fetherstonhaugh, E., Tarzia, L., Nay, R., Wellman, D., & Beattie, E. (2013). 'I always look under the bed for a man'. Needs and barriers to the expression of sexuality in residential aged care: The views of residents with and without dementia. *Psychology & Sexuality*, 4(3): 296-309.

Gordon, M. & Sokolowski, M. (2004). Sexuality in long-term care: ethics and action. *Annals of Long-Term Care*, 12(9). Retrieved from: <http://www.annalsoflongtermcare.com/article/3402>

Ho, A. (2008). Relational autonomy or undue pressure? Family's role in medical decision-making. *Scandinavian Journal of Caring Science*, 22: 128-135.

Kontos, P., Grigorovich, A., Kontos, A., & Miller, K-L. (2016). Citizenship, human rights, and dementia: Towards a new embodied relational ethic of sexuality. *Dementia*, 15(3): 315-329.

Loue, S. (2005). Intimacy and institutionalized cognitively impaired elderly. *Care Management Journal*, 6(4): 185-190

Mahieu, L., Anckaert, L., Gastmans, C. (2014). Eternal sunshine of the spotless mind? An anthropological-ethical framework for understanding and dealing with sexuality in dementia care. *Medicine, Health Care and Philosophy*, 17(3): 377-387.

Rowntree, M. & Zufferey, C. (2015). Need or right: Sexual expression and intimacy in aged care. *Journal of Aging Studies*, 35: 20-25

Sherwin, S. (2010). A relational perspective on autonomy for older adults residing in nursing homes. *Health Expectations*, 14: 182-190.

Sokolowski, M. (2012). Sex, dementia and the nursing home: Ethical issues for reflection. *Journal of Ethics in Mental Health*, 7: 1-5.

Tarzia, L., Fetherstonhaugh, D., & Bauer, M. (2012). Dementia, sexuality and consent in residential aged care facilities. *Journal of Medical Ethics*, 38: 609-613.

Van Thiel, G. & van Delden, J. (2001). The principle of respect for autonomy in the care of nursing home residents. *Nursing Ethics*, 8(5): 419-431.

Walker-Renshaw, B., & Ladner Gervais, B. (2012). Assessing capacity to consent to sexual activity: Legal considerations. *Journal of Ethics in Mental Health*, 7: 1-4.

Wildeman, S., & Dunn, L. (2015). Incapacity in Canada: Review of laws and policies on research involving decisionally impaired adults. *American Journal of Geriatric Psychiatry*, 21(4): 314-325.

Dementia & aid-in-dying:

Bolt, E., Snijdewind, M., Willems, D., van der Heide, A., & Onwuteaka-Philipsen, B. (2015). Can physicians conceive of performing euthanasia in case of psychiatric disease, dementia or being tired of living? *Journal of Medical Ethics*, 41: 592-598.

Caron, C., Griffith, J., Arcand, M. (2005). End-of-life decision making in dementia: The perspective of family caregivers. *Dementia*, 4(1): 113-136.

Cooley, D. (2007). A Kantian moral duty for the soon-to-be demented to commit suicide. *American Journal of Bioethics*, 7(6): 37-44.

Draper, B., Peisah, C., Snowden, J., & Brodaty, H. (2010). Early dementia diagnosis and the risk of suicide and euthanasia. *Alzheimer's & Dementia*, 6, 75-82.

de Boer, M. E., Hertogh, C., Dröes, R., Jonker, C., & Eefsting, J. (2010). Advance directives in dementia: Issues of validity and effectiveness. *International Psychogeriatrics*, 22(2), 201-208.

Hertogh, C. (2009). The role of advance euthanasia directives as an aid to communication and shared decision-making in dementia. *Journal of Medical Ethics*, 35, 100-103.

Hertogh, C., de Boer, M., Dröes, R-M., & Eefsting, J. (2007). Would we rather lose our life than lose our self? Lessons from the Dutch Debate on Euthanasia for patients with dementia. *American Journal of Bioethics*, 7(4): 48-56.

Ho, A. (2008). Relational autonomy or undue pressure? Family's role in medical decision-making. *Scandinavian Journal of Caring Science*, 22: 128-135.

Johnston, M-J. (2011). Metaphors, stigma and the 'Alzheimerization' of the euthanasia debate. *Dementia*, 12(4): 377-393.

Menzel, P. & Chandler-Cramer, M. (2014). Advance directives, dementia, and withholding food and water by mouth. *Hastings Center Report*, 44(3): 23-37.

Rabins, P. (2007). Can suicide be a rational and ethical act in persons with early or pre-dementia. *American Journal of Bioethics*, 7(6): 47-49.

Stollmeyer, A. (2005). Politics of care: dementia and accounting versus caring for mortification. *Journal of Clinical Ethics*, 16(2): 116-126.

Rurup, M., Onwuteaka-Philipsen, B., van der Heide, A., van der Wal, G., & van der Maas, P. (2005). Physicians' experiences with demented patients with advance euthanasia directives in the Netherlands. *Journal of the American Geriatrics Society*, 53: 1138-1144.