

## 2020 PROGRAM - INTIMACY AND SEXUALITY DURING ILLNESS AND LOSS



### DESCRIPTION:

Holistic treatment of individuals who are terminally ill or bereaved should include the needs of the whole person. Yet the most basic of human desires, those that include intimate and sexual relationships, are frequently avoided, dismissed, or unaddressed by healthcare, social service, clergy and bereavement professionals. Patients, family caregivers, and clients can be inhibited by the deeply personal nature of intimacy and sexuality and often do not raise concerns with professionals.

In this program, Hospice Foundation of America will identify barriers to intimacy and sexuality for terminally ill persons and the bereaved. The program will emphasize the knowledge and skills that professionals must have to sensitively address intimacy and sexuality and suggest interventions that can help dying and bereaved persons address these elemental human needs.

### LEARNING OBJECTIVES

At the conclusion of this webinar, participants will be able to:

1. Define and contrast intimacy and sexuality and describe how these needs may affect the care and well-being of dying and bereaved individuals;
2. Describe barriers to meeting the needs of intimacy and the sexual desires of individuals who are coping with life-threatening illness;
3. Discuss sensitivities, skills and knowledge that end-of-life professionals should possess to use appropriate interventions that address the intimacy and sexual needs of dying persons;
4. Describe the intimacy and sexual needs of individuals who are bereaved and identify barriers that inhibit opportunities to address such needs;
5. Discuss sensitivities, skills and knowledge that end-of-life professionals should employ when addressing issues of intimacy and sexuality with bereaved individuals;
6. Identify the ethical issues, including boundaries, that healthcare professionals should be aware of when helping clients and patients meet intimate and sexual needs.
7. Discuss how barriers to intimacy can be overcome in the midst of a public health crisis that restricts visits and contact with family and friends at end of life.
8. Identify three ways that grief is impacted by when intimate contact near death or during the dying process is prohibited and when death rituals such as memorials and funerals are delayed; Discuss counseling interventions to support these grievers.

### PROGRAM DETAILS

This educational program combines a moderated discussion, informative interviews, and additional complimentary learning materials.

The program is mainly for professionals already working in the field but is practical for all levels of education – entry level, intermediate or advanced. Health professionals, psychologists, counselors, clergy, social workers, nurses, and other health care workers, educators, and community members who support older adults. The program is 2 hours in length and there are 2 hours of CE available for wide variety of professional boards (no fee for CE). The On Demand program is available to watch until September 23, 2021.

### TECHNICAL REQUIREMENTS

To view this online program, you will need a computer and screen, reliable internet access, and speakers. The program video link is through Vimeo.

## MODERATOR

Frank Sesno, is Director of Strategic Initiatives, The George Washington University School of Media & Public Affairs, a former anchor for CNN, and a longtime moderator of the *Living with Grief*<sup>®</sup> program. He is an Emmy-award winning journalist and creator of PlanetForward.org, a user-driven web and television project that highlights innovations in sustainability, and he is the author of *Ask More: The Power of Questions to Open Doors, Uncover Solutions and Spark Change*.

## EXPERT PANELISTS

**Carrie Arnold, PhD, FT, MEd, RSW, CCC**, obtained a Bachelor of Arts (Honours) in Psychology, a Master of Education (Counselling), both from the University of Western Ontario, and a Ph.D. (Psychology) from Saybrook University. She is a Certified Canadian Counsellor with the Canadian Counselling and Psychotherapy Association, is registered with the Ontario College of Social Workers and Social Service Workers and is an approved service provider with the First Nations and Inuit Health Branch of Health Canada. Dr. Arnold provides psychotherapy to adolescent and adult clients in the areas of grief, loss, and trauma. Her publications include articles on issues related to the experiences of adolescent girls, attachment and loss, and an edited volume entitled *Understanding Child and Adolescent Grief: Supporting Loss and Facilitating Growth* (Routledge). Additionally, Dr. Arnold has launched The Grief and Loss Research Lab at King's University College. Current research interests include the use of photo narrative with the bereaved, as well as medical assistance in dying (MAiD). Dr. Arnold is currently an assistant professor, thanatology, at King's University College at Western University.

**Alua Arthur, JD**, is a death doula, attorney, and the founder of Going with Grace, an end of life planning organization that exists to support people as they answer the question 'What must I do to be at peace with myself so that I may live presently and die peacefully?' From private end of life consultations to online coursework to train death doulas, she is tirelessly committed to bringing awareness to death and dying and passionately believes considering death can inspire the way we live.

**John Cagle, MSW, PhD**, is an assistant professor at the University of Maryland-Baltimore, School of Social Work with a substantive interest in improving care at the end of life. As a translational health services researcher, his efforts have focused on identifying effective models of care and support for dying patients and their families – and implementing those models into routine clinical practice. His research is informed by nearly a decade of clinical work as a hospice social worker. Dr. Cagle completed his PhD from Virginia Commonwealth University where his dissertation thesis explored the needs and experiences of informal caregivers of advanced cancer patients. After being awarded his doctoral degree in 2008, he trained as an NIA-funded postdoctoral fellow at the University of North Carolina at Chapel Hill, Institute on Aging as well as the University of California, San Francisco, Division of Geriatrics. His current research examines disparities in care at the end of life, psychosocial barriers to pain management, and improving palliative care outcomes in long-term care settings. His research has been supported by a number of public and private entities, including the Hospice Foundation of America, the National Palliative Care Research Center, the John A. Hartford Foundation, the National Institute on Aging, the Agency for Healthcare Research and Quality, the National Hospice and Palliative Care Organization, and the Foundation for Care at the End of Life.

**Kenneth J. Doka, PhD, MDiv**, is Senior Bereavement Consultant to Hospice Foundation of America (HFA) and the recipient of the 2019 Lifetime Achievement Award from the Association of Death Education and Counseling (ADEC). A prolific author and editor, Dr. Doka serves as editor of HFA's *Living with Grief*<sup>®</sup> book series, its *Journeys* newsletter, and numerous other books and publications. He has been a panelist on HFA's *Living with Grief*<sup>®</sup> program for 28 years. Dr. Doka is a past president of ADEC, a former board member of the International Work Group on Death, Dying and Bereavement, and an Advisory Board member to the Tragedy Assistance Program for Survivors (TAPS). He is the recipient of The International Work Group on Death, Dying, and Bereavement's prestigious Herman Feifel Award and ADEC's Award for Outstanding Contributions in the Field of Death Education. In 2006, he was grandfathered in as a Mental Health Counselor under New York's first state licensure of counselors. Dr. Doka is an ordained Lutheran minister.

## PROGRAM OUTLINE

- I. **Intimacy and Sexuality during Advanced and Terminal Illness (60 minutes)**
  - a. The difference between sexuality and intimacy as basic human desires and needs.
  - b. How advanced illness treatment, terminal diagnosis, and conditions of the illness (medication, equipment, physical/mental status, bodily functions) can impede sexuality and intimacy.
  - c. Professional responses to sexuality and intimacy concerns of patients: A history of neglect
  - d. Developing effective, sensitive and appropriate professional queries and responses to patient and family concerns regarding sexuality and intimacy.
  - e. Coping with lack of intimacy due to visitation restrictions imposed for public health reasons.
- II. **Intimacy and Sexuality after Loss (45 minutes)**
  - a. Understanding ways that loss of a loved one may affect sexuality and intimacy.
  - b. Identifying taboo concerns: Starting the discussion about sexuality and intimacy with bereaved persons.
  - c. Grief reactions and outcomes triggered by lack of intimacy at end of life and curtailed death rituals due to public health concerns.
- III. **Professional Caregiver Relationships with Patients, Clients, and Families (15 minutes)**
  - a. Negotiating personal boundaries
  - b. Sensitivity to ethical issues
  - c. Self-care

## COPYRIGHT NOTICE

**HFA's program is copyrighted. Its use and dissemination is restricted and unauthorized duplication is prohibited.** CE Credits for this program may only be obtained through HFA. CE instructions will be provided to the registered contact for the organization (or to the registered individual) prior to the live air date and to attendees at the end of the program.

## CONFLICT OF INTEREST

Planners (Panelists and Review Committee Members) disclose no conflict of interest relative to this educational activity.

## FOR QUESTIONS, COMMENTS, OR ADDRESSING GRIEVANCES

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