THE GIFT: A NARRATIVE CASE STUDY

By Glen R. Alley, MSW, Lecturer, Department of Social Work, California State University, Long Beach, and Department of Social Work, Whittier College

This narrative reports on the work done with a client in hospice. This case is an example of the importance of cultural traits in working with clients. Using traditional casework methods, the client and the practitioner were able to develop a strategy for problem solving that engaged the client in cultural activities from which she had been absent for forty years. Returning to her culture of origin was the most important work to be completed before she died. She wanted to pass on her cultural heritage to her descendants in her remaining time. She was successful.

Introduction

When practicing multicultural social work, it is frequently difficult to know how to hone in on certain aspects of a person's ethnicity and what parts will be most beneficial to the client. This is difficult to do when we consider that each person is a unique embodiment of his or her culture. Sometimes, the knowledge we gain over the years regarding work with individuals or groups from certain ethnic populations is of little or no use. When client viewpoints or values are not taken into consideration (especially when working with clients of color), we tend to view problem identification through the lens of European American middle-class standards. The use of a "European American middle-class yardstick" approach with non-European American middle-class clients can be devastating both to the therapeutic relationship and to goal achievement (Pinderhughes, 1989).

Practitioners usually assume generalizations about cultural groups that are always "exact and define anyone that they meet from a cultural group" (Alley & Brown, 2001, p.3). Generalizations may be a place to start, but each person's view is distinct, and it is this fact that social workers often ignore. To avoid doing this means that a practitioner attempts to view the client's situation through the client's eyes. Practitioners develop a sense of unbiased empathy, and we ask ourselves several questions: What does one do to be culturally

sensitive? What are the first items to be addressed when one meets someone new? We want to find out who he or she is. We may ask about his or her ancestry and beliefs. As practitioners, we find out what is needed from us, but in a sensitive way. How do clients usually find help? Do they use family, friends, the community, or persons from within? How do clients perceive their problems? What brings them to us? What is their conception of a helping person? (Alley & Brown, 2001; Devore & Schlesinger, 1999).

A few years ago while working for a local hospice agency, this practitioner had the privilege of reuniting a client with her American Indian heritage. This paper is a narrative of the experience with her and what was learned.

The Client

To protect the client's identity, she is referred to as Grace. Grace was 58 years old and had liver cancer. She had been primarily confined to her bed for the previous two months and had experienced increased difficulty in performing her activities of daily living. Her physician informed her that her disease was terminal and recommended hospice. The family met and discussed this. She decided that, although she could seek aggressive treatments and prolong her life a little more, dying with dignity in her own home was what she wanted. Shortly thereafter, a hospice nurse met with Grace and her family and signed her into the program. A hospice social worker's job is not only to assist both

the patient and family in securing needed resources but also to assist them with completing unfinished business.

The first step in this case example was to initiate contact with the family, complete a psychosocial assessment, and, with the assistance of the clients, define what goals they wanted to achieve. The latter is based on a task-centered approach that has been discussed and used by numerous authors and practitioners (Epstein & Brown, 2002).

The Intervention Strategy

Task-centered interventions are simple in design, and all follow the same premises. First, the problem/issues to be addressed in therapy are defined by the client. Both client and practitioner decide the goals they will achieve during the therapeutic process. Target problems are generally kept to a maximum of three. Both client and practitioner develop a contract as to when tasks will be completed, who will complete them, and how they will be done. The target problem is defined and broken down into small, workable components. Alternative problem-solving strategies are developed. Both parties participate in implementing the agreed-upon problem-solving steps. Feedback regarding the effectiveness of the intervention is discussed as intervention proceeds. If the original goals are not accomplished, alternative interventions are implemented. If the goal was met, the practitioner and client either terminate the therapy process or negotiate another problem on which to work. This approach is also time limited in nature (Epstein & Brown, 2002; Tolson, Reid, & Garvin, 1994.)

Client History

Grace lived with her husband of forty years and was visited by her children and grandchildren on a regular basis. She reported that she was a Mexican American and that her husband was born in Mexico but immigrated to this country when he was quite young. The two had met while working at a

local produce-packing house. They courted each other, married, raised children, and, in other words, carved out a small piece for themselves of the "American Dream."

What was strikingly out of place as she recounted her family's story were the few paintings and other kinds of American Indian artwork that decorated her home. There were no Mexican American artifacts in the rooms I saw. In our first meeting, there was no mention of the significance of these American Indian artifacts. However, these held significant relevance regarding the work ahead. This is where this story begins.

Grace grew up outside of Flagstaff, Arizona. She lived in a multi-generation household with her parents and grandmother. Her grandmother would tell her stories at bedtime of the mischievous coyote and great Creator. Sometimes she would even take Grace into the desert to gather plants to make potions and remedies following old practices. However, although her grandmother exposed her to these things, she also warned Grace that she should never tell anyone. To do so would jeopardize her life. Later, Grace recounted stories of Indian children taken from their homes and placed in boarding schools because of their cultural identity. This was a common practice used by the United States, prior to the Indian Child Welfare Act of 1978, as a means to dissolve and undermine American Indian cultures (Jones, 1995).

Grace later moved to Southern California and started a family. Her husband was a member of the Church of Latter Day Saints. She joined the church and became an active member. They had three daughters who grew up, started families of their own, and moved to various cities within the Southland. Although her children later reported that they were aware that they had Apache blood, they were not aware of any distinct, culturally appropriate customs or behaviors that they practiced. They stated that it was not significant to them because they identified with the Mormon Church and their Mexican



American heritage.

General beliefs regarding the work with dying individuals stress the importance of assisting patients with completing goals prior to their death. It is argued that, once these people are able to complete unfinished business, they will experience an easier death. Erikson's theory of personality development "eight stages of man" holds that in the last stage of one's life "ego integrity vs. despair" persons come to terms with their own impending death/ mortality and develop a sense of their lives in retrospect as accomplishment or failure (as cited in Goldstein, 1984).

Defining the Problems and Goals

Our first step in Grace's completing unfinished business was to identify and define what she needed to do. Grace reported that she was afraid that, with her death, the stories of her culture would die with her. She did not believe that her family would pass on their cultural heritage to her grandchildren because they did not know its importance. She reported that she felt lost from her culture. She wanted to regain her knowledge of and connection to the American Indian community and share what she knew with her grandchildren. Grace identified two target problems. The first was her decreased knowledge regarding her people. The second was her lack of knowledge as to where to gather this information.

Grace identified two goals she wished to achieve. Her first goal was to make contact with the American Indian community to regain contact with her cultural roots. The second was to pass her knowledge on to her grandchildren. Since Grace was able to determine what goals she wanted to work on, the probability was high that she would achieve task completion. Grace and I agreed to complete the first goal within one month; after that, goal number two would be completed.

Task Planning and Implementation

At this point, Grace and I decided who would complete which tasks for goal number one. Having limited knowledge regarding the American Indian community, I consulted a Southern California social services resource guide which had no listings that helped. My practitioner task was to contact a friend at California State University, Long Beach, hoping to obtain referrals from him, which Grace would then follow up.

The friend, an instructor in the Departments of Social Work and American Indian Studies, referred us to Little Crow, a highly respected Lakota/Dakota spiritual advisor of the American Indian Unity Church. Grace was given his name and telephone number and she was to contact him. The expectation was that, by following through with the referral, all would work out. It did not.

Grace had difficulty in achieving her task. The helping process seemed to stall. We talked about why she was experiencing difficulty making contact with the spiritual advisor. I asked myself the following questions: Was this a problem of high interest to Grace? Did she understand the task? Did I show her how to complete the task and provide her adequate assistance in completing it? Was the goal specific enough? Did I review the target problem and task sufficiently and adjust the task enough to fit her and her situation? Had all the resources been available to her? "Obstacles to task performance may reside within the mind or reflect the inner psychological state of the individual. Prominent among such obstacles are unwarranted fears and suspicions of others that nevertheless have a strong influence on how the client perceives herself in the world" (Epstein & Brown, 2002, p. 273). Grace later stated that her hesitation was based on the many years of and warnings by her grandmother forbidding her from revealing her American Indian heritage.





Upon receiving this information, I went to see my friend at school. He provided me with two special resources that were worth more than their weight in gold as far as therapeutic interventions are concerned. The first was a hawk feather and the second was desert sage bound in red yarn. Raptors such as eagles and hawks play significant roles within many American Indian cultures. They are generally seen as symbols for the spirit of life and creation. These symbols are important in most, if not all, American Indian cultures. Desert sage is one of several dried plants used in "smudging" or cleansing oneself in ceremonies by having the smoke of the burning sage cover all parts of the body, thus cleansing it before the ceremony. The friend asked me to present these items to her and inform her that they were from a friend and someone who cared.

When I did so, Grace's eyes immediately filled with tears. She cried, not from pain, but from a tension built up that needed to be released. She later reported that she finally felt safe, that she no longer needed to fear revealing her ancestry. The openness of the friend's message, with the offering of the gifts, let Grace know that now she could be open about the importance of her beliefs. From that moment on, she had no difficulties in following through with contacting Little Crow and gathering the information she needed. The first goal was completed.

Grace's next goal was to pass this knowledge on to her children. The identified problem here was that she did not know how to do this. We discussed several options. One was for her to write down her stories in the form of a journal (she did not own a computer or typewriter). Another idea we generated was for her to record her stories on a tape recorder. The problem here was that she did not have one. As we discussed the above strategies, Grace decided that it would be easier for her to use an audio tape recorder due to her lack of energy. As the disease process progressed, she found it more difficult

to engage in activities. Writing would expend too much physical and mental energy. Our next step was to find her a tape recorder. We discussed the matter with one of her daughters. As Grace explained what she wanted to do, her daughter liked the ideas and, within one week's time, had purchased her mother a small, hand-held recorder. With this barrier out of the way, Grace set out to meet goal number two.

Grace completed four, ninety-minute tapes. She began with her people's story of creation; she then told stories of her people's history and how they are today. Lastly, Grace told about her own grandmother and the traditions and knowledge passed on to her. The sage was burned before this step was begun, and it was decided that the hawk feature would be passed on to her oldest grandchild. Shortly after completing goal number two, Grace slipped into a comatose state and died a few weeks later.

Grace was able to ensure that her cultural legacy would not be lost to the next generation. She experienced in hospice what we call a good death. She died without pain, and her wishes were honored. Although I spent considerable time with Grace on achieving her goals, she was not the sole focus of my attention. As she grew closer to death, my attentions turned toward her family. The family members made decisions regarding funeral arrangements and other matters. I provided resources and counsel according to the family's decided needs.

Summary and Discussion

Several components were essential to the completion of this case. The task-centered approach was used within a multicultural context. Other theories, particularly ego psychology, were also used to develop a care plan that suited the needs of all clients involved. Of equal importance, the client was involved with problem identification, intervention (task achievement), and problem resolution. This case also was successful due to its short-term

structure. Using a more traditional long-term psychotherapeutic approach would have been inappropriate in consideration of the client and the time left for her to complete her life's work. This is one example of how a task-centered approach can fit almost any setting. Saying her good-byes, the family's dealing with their impending loss, and making plans were all essential to this case's successful completion. However, the cultural renewal and her passing this cultural legacy to her daughters and grandchildren were the essence of the work Grace needed to accomplish in the few months she had left.

Grace brought the lessons of multiculturalism and ethnic sensitivity to life for me, as well as her family. The lessons we are taught in social work programs (about the importance of culture and understanding its importance to clients) had never come to life more clearly at any time before Grace. Often notions of theory and practice are vague concepts until and unless they are directly applied. Grace's identification with her cultural background was essential when developing the treatment plan. For most clients, their cultural identity is needed to understand them and to plan intervention. For Grace, had I not asked about the American Indian art. I might have ignored the essence of her unfinished business. Realizing the importance of Grace's cultural identification has made me more aware of its importance with other clients. Had I not encountered Grace, I might never have truly understood how important it can be.

The use of a cultural expert was essential in this case. My friend, the American Indian expert, gave insight into what the client needed to accomplish before she died: to embrace her ancestral origins again. Although the treatment process got stuck, Grace's embracing her ancestry again unstuck the treatment process. The friend let Grace know that she could, indeed, now be open about her ancestry, that she did not need to fear for her life any longer, that she no longer needed

to fear being openly American Indian. The treatment strategy that Grace and I decided on from the beginning made much sense. When we got stuck, it took an outside expert to free us from our dilemma.

Without Grace's being able to trust me and without my acknowledging and accepting the importance of a client's culture, Grace might not have achieved her final work: a good death.

References

- Alley, G. R., & Brown, L. B. (2001). *Multiculturalism and Ethnic Sensitivity*. Unpublished manuscript, American Indian Studies, California State University, Long Beach.
- Devore, W., & Schlesinger, E. (1999). Ethnic-Sensitive Social Work Practice. Boston: Allyn & Bacon.
- Epstein, L., & Brown, L. B. (2002). Brief Treatment and a New Look at the Task-Centered Approach (4th Ed.) Boston: Allyn & Bacon.
- Goldstein, E. G. (1984). *Ego Psychology* and *Social Work Practice*. New York: The Free Press.
- Jones, B. J. (1995). The Indian Child Welfare Act Handbook: A Legal Guide to the Custody and Adoption of Native American Children. Chicago, IL: American Bar Association.
- Pinderhughes, E. (1989). Understanding Race, Ethnicity, and Power: The Key to Efficacy in Clinical Practice. New York: The Free Press.
- Tolson, E. R., Reid, W. J., & Garvin, C. D. (1994). *Generalist Practice: A Task-Centered Approach*. New York: Columbia University Press.

Copyright of Reflections: Narratives of Professional Helping is the property of Cleveland State University and its content may not be copied or emailed to multiple sites or posted to a listserv without the copyright holder's express written permission. However, users may print, download, or email articles for individual use.