

The Lost Art of Caring

*A Challenge to
Health Professionals, Families,
Communities, and Society*

Edited by

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With a foreword by **ROSALYNN CARTER**

Lost Art Of Caring A Challenge To Health Professionals Families Communities And Society

**Anne Martin-Matthews, Judith E.
Phillips**



Lost Art Of Caring A Challenge To Health Professionals Families Communities And Society:

The Lost Art of Caring Leighton E. Cluff, Robert H. Binstock, 2003-05-01 In *The Lost Art of Caring* Leighton E Cluff M D and Robert H Binstock Ph D bring together experts to address the importance of caring the reasons why it has eroded and measures that can strengthen caring as provided by health professionals families communities and society *Aging and Caring at the Intersection of Work and Home Life* Anne Martin-Matthews, Judith E. Phillips, 2010-10-18 There are not many books that address the boundaries of care of older people from a work life perspective This book authored by contributors from various countries looks at the boundaries of care by looking at private and public help professional and personal help and paid and unpaid caregivers It captures and conceptualizes the complexity of the intersection of work and home life as it relates to the provision of assistance and support to older relatives in a variety of care work contexts It explores these issues within a critical framework rather than from an assumed stress or burden perspective which dominates current texts on the topic Readers of this volume will gain a deeper understanding of issues of care provision amongst networks of careers and helpers and of the particular dynamics of care when it is episodic or framed by constraints of space and time as a result of geography In addition each chapter addresses issues of diversity with sensitivity to gender race and ethnicity This book will be of use to academics and graduate students in Gerontology Family Studies IO psychology Gender Studies and Sociology

Let Me Heal Kenneth M. Ludmerer, 2014-09-01 In *Let Me Heal* prize winning author Kenneth M Ludmerer provides the first ever account of the residency system for training doctors in the United States He traces its development from its nineteenth century roots through its present day struggles to cope with new bureaucratic work hour regulations for house officers and more important to preserve excellence in medical training amid a highly commercialized health care system *Let Me Heal* provides a highly engaging richly contextualized account of the residency system in all its dimensions It also brilliantly analyzes the mutual relationship between residency education and patient care in America The book shows that the quality of residency training ultimately depends on the quality of patient care that residents observe but that there is much that residency training can do to produce doctors who practice in a better more affordable fashion *Let Me Heal* is both a stunning work of scholarship and a highly engaging account of how one becomes a doctor in the United States It is indispensable reading for those who wish to understand what it means to learn and practice medicine and what is needed to make medical education and patient care in America better The definitive work on the subject it is destined to become a classic that will be consulted by readers far into the future *The Cultures of Caregiving* Carol Levine, Thomas H.

Murray, 2004-05-21 Publisher Description **The Ethics of Managed Care: Professional Integrity and Patient Rights** W.B. Bondeson, J.W. Jones, 2013-03-09 in the culture of medicine and they saw their mission as a generation of profit for stockholders not necessarily medical care for clients Cost effective medicine was the goal in the context of a profit making enterprise Although preventive health care programs were promised very few were realized and they were not nearly

comprehensive The definition of unnecessary testing slowly expanded to mean virtually any high cost test requiring the service of a medical specialist and low priced generalist physicians with limited diagnostic and therapeutic skills were made available to patients with the instruction they should limit their access to high cost specialists Managed care organizations tended to reward primary care physicians who avoided specialty referrals and severed contracts with those who persisted in sending their patients to outside consultants Most notoriously managed care organizations maintained veto authority over the provision of complex and expensive care and that veto was often wielded in defiance of a physician's recommendation by managed care employees without medical training or experience Managed care did indeed slow the rate in increase of medical costs but not without limitations on the care provided to patients and the professional integrity of physicians Managed care organizations were so successful that they could provide extremely high salaries to their executives even in the context of limiting cost and care It is these developments that the papers of this symposium addressed The most fundamental ethical issue is posed in the first paper by Dr *Challenges of an Aging Society* Rachel Pruchno, Michael A. Smyer, 2007-09-10 In this important and timely collection some of the best minds in gerontology and bioethics including Nancy Dubler Rick Moody Andrew Achenbaum Robert Hudson and Robert Binstock explore the ethical social and political challenges of an aging society A unique combination of disciplines and perspectives from economics to nursing psychology to theology this valuable synthesis of theory and practice provides frameworks and analyses for considering the ethical issues of both individual and societal aging The contributors address the major policy challenges of Social Security Medicare and prescription drugs as well as ethical issues ranging from individual autonomy to family responsibility to distributive justice Specific topics covered include end of life decision making family relations across generations age based intergenerational policies and the reform of Social Security Contributors W Andrew Achenbaum Ph D University of Houston Houston Vern L Bengtson Ph D University of Southern California Los Angeles Robert H Binstock Ph D Case Western Reserve University Christine E Bishop Ph D Brandeis University Thomas R Cole Ph D University of Texas Medical School at Houston Peter A Diamond Ph D Massachusetts Institute of Technology Nancy Neveloff Dubler LL B Albert Einstein College of Medicine Msgr Charles J Fahey Fordham University Lucy Feild Ph D R N Partners Human Research Quality Improvement Program Martha B Holstein Ph D DePaul University Robert B Hudson Ph D Boston University Eric R Kingson Ph D Syracuse University Ronald J Manheimer Ph D University of North Carolina at Asheville Kyriakos S Markides Ph D University of Texas Medical Branch Daniel C Marson J D Ph D University of Alabama at Birmingham H Rick Moody Ph D AARP Peter R Orszag Ph D Brookings Institution Rachel Pruchno Ph D University of Medicine and Dentistry of New Jersey School of Osteopathic Medicine Norella M Putney Ph D University of Southern California Los Angeles Michael Smyer Ph D Boston College Bruce Stuart Ph D University of Maryl Melanie A Wakeman Ph D California State University Los Angeles Steven P Wallace Ph D University of California at Los Angeles John B Williamson Ph D Boston College **Meeting the Challenge of Chronic Illness** Robert L.

Kane, Reinhard Priester, Annette M. Totten, 2005-12-21 Chronic conditions such as arthritis heart disease and Parkinson disease are the principal cause of all sickness and death in the United States and represent the vast majority of health care expenditures Although we now live in a world dominated by chronic conditions health care is still organized around a commitment to treating acute illnesses Meeting the Challenge of Chronic Illness examines current deficiencies in chronic illness care and explores ways to improve it Addressing the challenges of shifting from the primacy of acute illnesses to the predominance of chronic conditions the authors identify the components necessary to reorganize and reform health care properly prepared health care workers involved patients and families appropriate use of new technologies especially information systems an appropriate role for prevention and the creation of funding approaches that will provide necessary incentives This book calls on policy makers health care providers and educators to address one of the greatest challenges facing the health care system **Strengths-Based Nursing Care** Laurie Gottlieb, 2012-08-22 Print CourseSmart

Public Expectations and Physicians' Responsibilities John Crellin, 2018-10-08 This guide for practice managers in a question and answer format explains accounting procedures and describes GMS health authority and other sources of income The book covers payroll pension personnel and complaints matters and advises on optimizing income for the practice

Health Care in America John C. Burnham, 2015-05-15 A comprehensive history of sickness health and medicine in America from Colonial times to the present In Health Care in America historian John C Burnham describes changes over four centuries of medicine and public health in America Beginning with seventeenth century concerns over personal and neighborhood illnesses Burnham concludes with the arrival of a new epoch in American medicine and health care at the turn of the twenty first century From the 1600s through the 1990s Americans turned to a variety of healers practices and institutions in their efforts to prevent and survive epidemics of smallpox yellow fever cholera influenza polio and AIDS Health care workers in all periods attended births and deaths and cared for people who had injuries disabilities and chronic diseases Drawing on primary sources classic scholarship and a vast body of recent literature in the history of medicine and public health Burnham finds that traditional healing care and medicine dominated the United States until the late nineteenth century when antiseptic aseptic surgery and germ theory initiated an intellectual social and technical transformation He divides the age of modern medicine into several eras physiological medicine 1910s 1930s antibiotics 1930s 1950s technology 1950s 1960s environmental medicine 1970s 1980s and beginning around 1990 genetic medicine The cumulating developments in each era led to today s radically altered doctor patient relationship and the insistent questions that swirl around the financial cost of health care Burnham s sweeping narrative makes sense of medical practice medical research and human frailties and foibles opening the door to a new understanding of our current concerns *Medicine and Care of the Dying* Milton James Lewis, 2007 This book is for palliative care practitioners and all health care professionals with an interest in end of life care *Policies for an Aging Society* Stuart H. Altman, David Shactman, 2002-07-26 Zeldes Columbia University

Robert B Hudson Boston University Journal of Health Politics Policy and Law **Essentials of Teaching and Learning in Nursing Ethics** Anne Davis, Verena Tschudin, Louise Tew, 2006-02-24 This title is directed primarily towards health care professionals outside of the United States This book aims to fill a gap with an in depth exploration of nursing ethics content from the western philosophical tradition and some of the methods used in teaching this content It addresses cross cultural issues in using specific ethics content It also reveals the poverty of the present dualism model in nursing ethics and replace this with a more complex and more useful model that invites debate Its scope is both wide and deep but that is needed to enrich the basis for teaching nursing ethics Outlines and critiques all current ethical theories and considers their application to nursing practice Explores ethical issues in numerous cultures Includes case studies drawn from a range of countries Written by leading nurse educators and philosophers in the field **Life and Death in Intensive Care** Joan Cassell, 2005 A penetrating look at the values systems and life and death dramas in the world of the surgical intensive care unit The Fountain of Youth Stephen G. Post, Robert H. Binstock, 2004-04-08 A wide variety of ambitions and measures to slow stop and reverse phenomena associated with aging have been part of human culture since early civilization From alchemy to cell injections to dietary supplements the list of techniques aimed at altering the processes of aging continues to expand Charlatans quacks and entrepreneurs proffering anti aging products and practices have always exploited uniformed customers and instilled doubt and apprehension toward practices intended to extend life Recently however the pursuit of longevity has developed into a respectable scientific activity Many biologists are substantially funded by the government and the private sector to conduct research that they believe will lead to effective anti aging interventions While many embrace this quest for prolongevity extended youth and long life others fear its consequences If effective anti aging interventions were achieved they would likely bring about profound alterations in the experiences of individual and collective life What if aging could be decelerated to the extent that both average life expectancy and maximum life span would increase by forty percent What if all humans could live to be centenarians free of the chronic diseases and disabilities now commonly associated with old age What if modern scientists could find the modern equivalent to the Fountain of Youth that Ponce de Leon sought This book addresses these questions by exploring the ramifications of possible anti aging interventions on both individual and collective life Through a series of essays it examines the biomedical goal of prolongevity from cultural scientific religious and ethical perspectives offering a sweeping view into the future of aging **Inheritance in Contemporary America** Jacqueline L. Angel, 2008-01-28 Publisher Description **The Politics of Green Transformations** Ian Scoones, Melissa Leach, Peter Newell, 2015-01-09 Multiple green transformations are required if humanity is to live sustainably on planet Earth Recalling past transformations this book examines what makes the current challenge different and especially urgent It examines how green transformations must take place in the context of the particular moments of capitalist development and in relation to particular alliances The role of the state is emphasised both in terms of the type of incentives required to make green

transformations politically feasible and the way states must take a developmental role in financing innovation and technology for green transformations The book also highlights the role of citizens as innovators entrepreneurs green consumers and members of social movements Green transformations must be both top down involving elite alliances between states and business but also bottom up pushed by grassroots innovators and entrepreneurs and part of wider mobilisations among civil society The chapters in the book draw on international examples to emphasise how contexts matter in shaping pathways to sustainability Written by experts in the field this book will be of great interest to researchers and students in environmental studies international relations political science development studies geography and anthropology as well as policymakers and practitioners concerned with sustainability

An Introductory Philosophy of Medicine James A. Marcum, 2008-05-07 In this book the author explores the shifting philosophical boundaries of modern medical knowledge and practice occasioned by the crisis of quality of care especially in terms of the various humanistic adjustments to the biomedical model To that end he examines the metaphysical epistemological and ethical boundaries of these medical models He begins with their metaphysics analyzing the metaphysical positions and presuppositions and ontological commitments upon which medical knowledge and practice is founded Next he considers the epistemological issues that face these medical models particularly those driven by methodological procedures undertaken by epistemic agents to constitute medical knowledge and practice Finally he examines the axiological boundaries and the ethical implications of each model especially in terms of the physician patient relationship In a concluding Epilogue he discusses how the philosophical analysis of the humanization of modern medicine helps to address the crisis of care as well as the question of What is medicine The book's unique features include a comprehensive coverage of the various topics in the philosophy of medicine that have emerged over the past several decades and a philosophical context for embedding bioethical discussions The book's target audiences include both undergraduate and graduate students as well as healthcare professionals and professional philosophers This book is the 99th issue of the Series Philosophy and Medicine and it can be considered a crown of thirty years of intensive and dynamic discussion in the field We are completely convinced that after its publication it can be finally said that undoubtedly the philosophy of medicine exists as a special field of inquiry

Aging Nation James H. Schulz, Robert H. Binstock, 2008-05-15 Schulz and Robert H

The New Politics of Old Age Policy Robert B. Hudson, 2005 The successor to Robert Hudson's *The Future of Age Based Public Policy* this volume offers a variety of perspectives on these policy issues that directly effect America's aging population particularly the relative merits of using chronological age to determine eligibility for government programs

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