## **ACTIVITIES**

# Social Welfare Programs, Policies, and Issues

The following activities from a foundation social welfare policy course help students bridge free-choice books and assigned readings. Each activity may be modified or extended to different settings and student/instructor goals.

#### 1. FREE-CHOICE BOOK READING IN CLASS

Dedicate time in class for students to read their book choice throughout the semester. Brief reading sessions at the start of class (15 to 20 minutes, once per week) scheduled in advance work well. Sessions taper off as students get into their books and the course progresses. Rather than immediately discussing books after each reading session, move on to other activities. Weekly online reactions, structured however students like, are for connecting ideas, questions, and impressions from their free-choice books and other course material (e.g., textbook, background readings, guest speakers, assignments).



The Educator | Resource Q&A includes a discussion on the value and challenges of allocating time for in-class book reading in a foundation social work course.

#### 2. COMPELLING QUESTION NOMINATIONS

This activity combines weekly formulation of individual questions and whole-class grappling with the most compelling ones. Instructors move aside for students to practice facilitating group discussions, which also prepares them for end-of-semester presentations. Here are the steps:



- As part of weekly reactions in their online notebooks, students include a question.
- Compile and print the individual questions (no duplicates; no identifying information).
- Organize students into small groups and distribute 8 or 10 questions to each group.
- Small groups consider and discuss the batch of questions (approx. 20-30 minutes).
- Within each group, <u>nominate the (one) question that is most compelling</u>.
- Groups present and facilitate whole-class discussions around their compelling question.

### 3. [CITY/TOWN/PLACE] IN SOCIOHISTORICAL CONTEXT

Communities in many U.S. cities experience economic and racial/ethnic segregation. However, the marginalization and displacement of communities of color, people with lower socioeconomic position, and other non-hegemonic groups are not new. This activity encourages students to consider policies by first examining the sociohistorical context of the place where they currently live, work, and study. This activity aims to:

- Leverage peer knowledge
- Challenge dominant narratives and myths about place
- Connect local histories and lived experiences with textbook material (which is often limited to national perspectives)

First, assign a critical background reading before class. In our course, we use "Austin, Texas in Sociohistorical Context," a chapter from *Invisible in Austin: Life and Labor in an American City*. For the in-class activity, ask students to form small discussion groups by mingling longer-term residents with newer arrivals. Consider providing discussion prompts that draw from both group member knowledge and the assigned reading. For example, we used the following prompts: What surprised you, if anything, about the history of this place? What does the myth of Austin exceptionalism refer to? How is a dam break in 1900 connected to inequality in contemporary Austin?

### 4. NAMELESS, SCORELESS, FEARLESS PRE-TESTS

Pre-tests, which are ungraded and precede other instruction (e.g., lectures, discussion, etc), are opportunities for students to assess their knowledge, make predictions, consult with peers, and get immediate feedback. To emphasize that pre-tests are low-stakes, and that students are free to make predictions and guesses (including wrong ones) based on prior knowledge, I call these nameless, scoreless, and fearless pre-tests.

In our social welfare policy course, an unannounced, lengthy pre-test kicks off the first of a series of classes on U.S. health policy. This pre-test is also a chance to (re)introduce fundamental concepts (e.g., co-insurance, deductibles, out-of-pocket limits) that some textbooks leave out. First, students work independently to complete the pre-test. Next, they compare and discuss (and adjust) their answers in pairs. Lastly, the instructor reviews each question with the entire class, providing correct answers and using thorny questions as springboards for discussion. Based on pre-test feedback, instructors can gauge which areas call for more attention. The pre-test from the module on U.S. health policy is included below.

### 5. MONTE CARLO QUIZ

Single-item Monte Carlo quizzes generate excitement and also give students a handy framework for note-taking and synthesizing assigned readings with other course materials (e.g., free-choice books). The decision to have a quiz—and the type of quiz question—are determined entirely by chance (instructors should bring a die to class). Students can bring their notes and refer to them during the quiz. See below for instructions and types of quiz questions.



# The Nameless, Scoreless, Fearless U.S. Health Policy Pre-Test

## TRU

UE/FALSE:	<ol> <li>The Patient Protection and Affordable Care Act was signed into law in 2008.</li> <li>TRUE</li> <li>FALSE</li> </ol>
Medicaid is partly funded through federal matching grants given to states.	3. 7.332
a. TRUE	
b. FALSE	<ol> <li>Deinstitutionalization resulted in a 75% decrease in the number of people in state mental health institutions from 1955 to 1980.</li> <li>a. TRUE</li> </ol>
Medicaid is the nation's public health insurance program for people with low income, covering 1 in 5 Americans.     a. TRUE	b. FALSE
b. FALSE	<ul><li>10. The Social Security Act of 1935 included health insurance for senior citizens.</li><li>a. TRUE</li><li>b. FALSE</li></ul>
<ul><li>3. Medicare is a federal–state partnership funded with block grants.</li><li>a. TRUE</li><li>b. FALSE</li></ul>	
	MULTIPLE CHOICE:
<ul> <li>4. Medicaid coverage has evolved over time and varies by state.</li> <li>a. TRUE</li> <li>b. FALSE</li> </ul>	11. The Medicaid program is and usually provides healthcare benefits based on eligibility criteria established by  a. non-profit / county governments  b. means-tested / state governments  c. over-developed / income-levels
<ol> <li>Traditional or 'original' Medicare includes two parts: hospital insurance (Part A) and medical/provider/outpatient insurance (Part B).</li> <li>a. TRUE</li> </ol>	d. social insurance / evidence-based practices
b. FALSE	<ul><li>12. Which of the following about the Patient Protection and Affordable Care Act (ACA) is not true:</li><li>a. the ACA received wide bipartisan political support when it was enacted</li></ul>
<ul> <li>6. Both Medicare and Medicaid provide benefits to people with disabilities.</li> <li>a. TRUE</li> <li>b. FALSE</li> </ul>	<ul> <li>b. the ACA extended coverage of young adults until the age of 26</li> <li>c. the ACA has been debated in the U.S. Supreme Court</li> <li>d. the ACA's individual mandate went into effect in 2014 and is still in place</li> </ul>
	e. the ACA extended health insurance coverage under Medicaid and CHIP

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7. All people who are poor and uninsured qualify for Medicaid in Texas.

a. TRUE

b. FALSE

- 13. Lawrence works for Texas A&M and has employer-provided healthcare insurance with a \$3,000 deductible. Montse works at UT Austin and has health insurance with a \$1,500 deductible. Who will pay more before their health insurance starts to cover a larger share of their medical bills?
  - a. Montse
  - b. Lawrence
- 14. As an alternative to original Medicare (Part A and B), people eligible for Medicare can choose the Advantage plan (Part C), which works like:
  - a. Traditional healthcare insurance
  - b. Medicaid
  - c. Life insurance
  - d. Fee-for-service plans
  - e. None of the above
- 15. Before the ACA and Medicaid expansion, the federal government would cover at least 50% of Medicaid costs (with states paying the remainder). If states choose to implement expanded Medicaid, the federal government covers how much?
  - a. 45% to 55%
  - b. 90% to 100%
  - c. 10%
  - d. None of the above
- 16. The Ryan White Comprehensive AIDS Resources Emergency (CARE) Act of 1990, named after a teenager from Indiana who acquired HIV during treatment for hemophilia in the 1980s, provides research grant funding for:
  - a. Access-to-care programs
  - b. Care delivery for hard-to-reach populations
  - Education and training of health care providers treating people living with HIV through a network of eight regional centers and three national centers
  - d. Oral health care for people with HIV
  - e. Evaluating and addressing the impact of HIV/AIDS on disproportionately affected minority populations
  - f. All of the above

c. d.	Inpatient Expensive Experimental Generic Outpatient	
a. b.	l.S. public has an/a Unfavorable Favorable Neutral	_ opinion of Medicaid.
19. If Texa	as accepted Medicare expansion, ho	w many additional people would

17. Medicare Part D helps cover the cost of \_\_\_\_\_\_ prescription drugs.

- covered in our state?
  - a. 251,000
  - b. 357,000
  - c. 879.000
  - d. 1.685.000
  - e. 2,759,000
- The Consolidated Omnibus Budget Reconciliation Act (COBRA) of 1985/1986 does all the following except:
  - Allows a person to keep his or her group coverage for up to 18 months after leaving employment
  - Protects patient information by limiting accessibility to protected health information (PHI) and guarantee its security
  - c. Prohibits the use of federal funds to cover non-emergency medical services for undocumented residents
  - d. Stipulates that a person must pay the entire cost of group health insurance, including the portion previously paid by the employer

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21.	Two common cost-sharing components of health insurance include i) a copay, which is a predetermined you usually pay when you receive				
		cal services, and ii) coinsurance, w		-	
		ince covering the rest.		_, , ,,	
	a.	premium / estimate			
	b.	fee / mandate			
	C.	rate / percentage			
	d.	bill / loan			
22	. Medi	care beneficiaries pay monthly pro	emiums for:		
	a.	Part A			
	b.	Part A and B			
	C.	Part B and C			
		Part B, C, and D			
	e.	Medicare beneficiaries are exem	pted from insurance	premiums	
23.	disabi	dition to people age 65 and older	people diagnosed wi		
		cal conditions, regardless of their a			
		onic obstructive pulmonary disease	f. Bell's palsy and drop	sy	
	b. Diab		g. Depression		
		-stage renal disease	h. Multiple sclerosis		
		nan immunodeficiency virus	i. Pancreatic cancer		
	e. Amy	otrophic lateral sclerosis	j. Fibromyalgia		
24.	. While	both are types of managed care	organizations (MCO),	are	
	usuall	ally less costly but patients must stay in-network and get a referral from their			
	prima	nary care physician (PCP) to see medical specialists (i.e., less patient choice);			
	whereas often have higher premiums and deductibles but more				
	flexibility when choosing providers.				
	a.	Private Fee-For-Service (PFFS) /	Program of All-Inclusi	ive Care (PAC)	
	b.	<ul> <li>b. Health Maintenance Organization (HMO) / Preferred Provider Organization (PPO)</li> </ul>			
	c.	Exclusive Provider Organization	(EPO) / Flexible Spen	ding Account (FSA)	
	d.	Civilian Health and Medical Prog	ram of the Uniformed	Services (CHAMPUS	

e. None of the above

## **Monte Carlo Quiz**

A Monte Carlo quiz is like a pop quiz except that the decision to have a quiz during any given class is determined entirely by chance!



**How it works:** At the beginning of class, a student will roll a die. If an odd number is rolled, a quiz will be given. If multiple readings were assigned, we'll roll again to determine which reading the quiz will cover. The student rolls the die again to see <a href="https://www.what.edu/will.cov">what kind of question</a> will be asked (see below). There is only <a href="https://www.one.gov">one question per quiz</a>.

The quiz is not open book (unless noted otherwise), but <u>you may bring notes and refer to them during the quiz</u>.



- **1.** <u>Knowledge</u>: Describe the major thesis, the central idea or set of ideas, in the reading.
- **2.** <u>Comparison</u>: Identify two concepts or principles presented in the chapter or article and, when you first mention each, underline and define it. Then, show how the concepts or principles in some way(s) are both similar to and different from one another.
- **3.** <u>Application</u>: Select a concept or principle in the chapter or article, clearly define or describe it, and then indicate how it applies to social work practice and/or impacting change at the structural level. Provide sufficient details to justify convincingly that the concept or principle indeed applies as you suggest.
- **4.** <u>Critique</u>: Write a critical perspective on some aspect of the chapter or article, citing evidence that prompts you to agree or disagree with the author's perspective.
- **5.** <u>Passion</u>: Citing page number(s), quote verbatim a statement or brief passage that elicits in you some type of emotional response. Then identify your emotional response, describe the meaning(s) that the statement or passage has for you, and provide actual or possible reasons for your response.
- **6.** <u>Student's Choice</u>: Answer any of the above five questions.