Professional Self-Care
The Importance for Direct Practice, Supervisors, Agencies, and Students

Stressors prevalent in social work can exert a powerful influence on the delivery of service. These include long hours, time constraints, deadlines, large and challenging workloads, limited or inadequate resources, as well as crises and emergencies.

With these points in mind, NASW’s national policy statement titled, “Professional Self-Care and Social Work”, highlights the risks involved in working with clients whose lives often include elements of helplessness and hopelessness. The statement identifies 11 areas including the need for organizational policies, individual self-care strategies, continuing education and the role of supervisors and educators.

This issue of Currents presents keys sections of this policy statement (see page two) in an effort to support our members. In addition, a column by Chapter Executive Director, Robert Schachter, shares the experience of NASW members in the benefits of networking, beyond what might ordinarily be thought about. Two articles are also included, written by Mark Preston of Columbia University School of Social Work, who has been studying issues of staff morale, and Onaje Muid of Reality House, who has linked the notion of “wellness” to how organizations can address the stress of both workers and clients while also having a social justice lens.

Change is occurring rapidly as resources become tighter than ever. This issue of Currents also features three articles that briefly capture what is developing in aging, child welfare and mental health.

For the complete NASW policy statement on Professional Self-Care, go to the NASW-NYC website at www.naswnyc.org.
Professional Self-Care and Social Work

Editor’s Note: The following feature is excerpted from a policy statement approved by the NASW Delegate Assembly in August 2008. The statement on self-care for social workers is published in full in a publication entitled Social Work Speaks, the compilation of all of NASW’s official policy statements, and can be accessed on our website at www.naswnyc.org.

Professional self-care is an essential underpinning to best practice in the profession of social work. The need for professional self-care has relevance to all social workers in the setting within which they practice. The practice of self-care is critical to the survival and growth of the profession. Yet professional self-care has not been fully examined or addressed within the profession.

ISSUE STATEMENT

In light of recent and significant research indicating that social workers engaged in direct practice are likely to develop symptoms of secondary traumatic stress, it is imperative that the social work profession devotes greater attention to and creates greater awareness of these issues.

The critical key to prevention and management of adverse conditions such as stress, burnout, compassion fatigue, and secondary traumatic stress or vicarious trauma is the practice of self-care. Baker (2003) conceptualized self-care as the combination of three processes: self-awareness, self-regulation, and balancing connections between self, others, and the larger community. Professional self-care in social work can be defined as a core essential component to social work practice and reflects a choice and commitment to become actively involved in maintaining one’s effectiveness as a social worker. Furthermore, in promoting the practice of professional self-care, a repertoire of self-care strategies is essential to support the social worker in preventing, addressing, and coping with the natural, yet unwanted, consequences of helping (Lopez, 2007.)

Professional self-care is vital to the profession of social work for several reasons:

• Professional self-care is an essential component in competent, compassionate, and ethical social work practice, requiring time, energy, and commitment.
• Promoting the practice of professional self-care in social work explicitly acknowledges the challenging and often overwhelming nature of our work.
• Professional self-care places emphasis on primary prevention of these unwanted conditions and implies that tools and strategies should be part of one’s overall professional self-care plan. Actively preparing social workers with knowledge and skill for overcoming these experiences is key.
• Professional self-care in social work is critical to maintaining ethical and professional behavior and providing competent services to clients across diverse settings.
• Although the practice of professional self-care applies to all social workers, it is especially critical for social workers providing care to traumatized populations.
• Acknowledging professional self-care in social work is an important first step in preserving the integrity of social workers and in retaining valued professionals in the profession. Actively preparing social workers to effectively face these conditions will support social workers in maintaining their commitment to the profession.

POLICY STATEMENT

NASW recognizes and acknowledges the unique and valuable contributions of the professional social worker. NASW supports the practice of professional self-care for social workers as a means of maintaining their competence, strengthening the profession, and preserving the integrity of their work with clients. Education, self-awareness, and commitment are considered key to promoting the practice of professional self-care. In recognition of social workers as valued professional resources across diverse practice settings, NASW supports

• the establishment and implementation of organizational policies that promote participatory decision making, interactive coping styles, and environments in which organizational values and conflict can be openly discussed and negotiated.
• the establishment and enforcement of organizational policies and practices that address and enhance safety in the workplace. Organizations may be supportive by examining the organizational culture, redefining workload, providing essential supervision, encouraging self-care practices, allowing for group support, and creating a supportive work environment.

The practice of self-care is critical to the survival and growth of the profession, but this has not yet been fully examined or addressed.

The promotion, support, and modeling of the practice of professional self-care by social work supervisors with social work supervisees.
• the promotion and support of the practice of professional self-care by social work administrators. Social work administrators can demonstrate support for self-care by reflecting self-care in policies and in the process of evaluation; offering supportive supervision, ongoing processing and debriefing after traumatic or stressful occurrences, staff retreats, team building with a focus on rejuvenating social work staff; and actively sponsoring healthy lifestyle activities within the work environment, such as walking, running, aerobics, healthy eating, encouraging time off, taking breaks and mental health days, and providing relaxing and nurturing environments for meditating.
• the development of individual professional self-care plans by all social workers that includes a repertoire of personalized strategies for maintaining

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health, preventing burnout and compassion fatigue, and addressing secondary traumatic stress or vicarious trauma. The plan should also include the development or enhancement of interactive coping styles that deal directly with the management of organizational conflict and differences with colleagues. Social workers should cultivate and maintain self-awareness of their personal and professional limitations and monitor their efforts to promote the practice of professional self-care and to support social work colleagues in these processes as well.

- the development of continuing education programs on professional self-care and conditions such as stress, burnout, compassion fatigue, secondary traumatic stress, and vicarious trauma.
- the development of creative and innovative support services for social workers, which may include support groups, professional retreats, Web site resources, online support, and chat groups.
- the recognition by social work education programs of their critically important roles in educating social work students about the practice of professional self-care by integrating such content into existing student standards, policies, foundation and advanced curriculums, field practicum, and assignments and projects.
- the training of social work students about professional self-care in their field experiences and the modeling of these behaviors by field instructors.
- further research to continue the exploration of the prevalence of secondary traumatic stress and vicarious trauma among social workers in a variety of settings and to examine resiliency factors and self-care practices among social workers.
- further development of publications that address the issue of professional self-care and social work and that offer tools and strategies for thriving in social work practice.

Message From The Executive Director

12 Outcomes of Professional Networking in Turbulent Times
A Process of Discovery, Support, and Empowerment

In difficult times such as we are living in, it is more important than ever that we be committed, informed, and energized professionals. Yet, it can be difficult to maintain a professional attitude when there are squeezes on resources. We are being asked to do more than ever, and the needs of clients may be beyond what can be offered. There are no easy solutions to this.

In thinking about self care and what social workers are facing, as we are doing with this issue of Currents, I am reminded of what colleagues at different stages in the field have shared about the value of networking. What I realize is that there are far more aspects to professional networking than any of us might think of on our own.

Here is a list of 12 outcomes of networking with other professionals who may be similar to yourself, or very different. You can judge for yourself what the value of anyone of these might be.

1. Meeting people in similar circumstances, facing similar challenges, who appreciate your experience. Sharing what it means to be a professional social worker with others who get it.
2. Re-connecting to a deeper place within yourself, outside of the work setting, about the value of being a social worker and why you became a social worker in the first place.
3. Learning about job openings before they are announced.
4. Meeting more senior professionals as colleagues who in other settings might be harder to approach, finding that a mentoring relationship can emerge.
5. Discovering that the person who might hire you for a job is active in NASW and is impressed by your involvement.
6. Finding opportunities for leadership development through meeting social workers who are recognized leaders, through participation on committees, or through running for elected office within the Chapter. (Many new professionals are now serving in elected positions within NASW-NYC, and professional leadership is becoming younger.)
7. Having your voice heard and contributing to the direction of the profession and the professional organization.
8. Gaining a broader perspective on the field and observing through others what a lifetime of professional work can lead to.
9. Learning about other organizations, settings, and programs that could expand your understanding and contribute to networking on the job.
10. Becoming familiar with social work advocacy in the context of government and politics, including working closely with the most seasoned advocates and attending meetings with political leaders.
11. Realizing that professional ethics and standards are strongly valued, even in difficult times.
12. Keeping up with changes in the field, including developments in licensing, from colleagues who are considered experts in their area of practice.

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A leader in NASW recently said that you never know what will come out of participation in NASW. I know quite a few social workers who actually met their life partner at committee meetings. One social worker got a major promotion at the medical center based on her contacts in the community, originally made while volunteering at NASW. And social workers continually share that even though they do not have time to attend meetings, they are connected through the Chapter newsletter, the website, and share what they learn with their staff and colleagues at work.

Plugging into a collective larger than oneself can have a powerful effect. The most comprehensive collective for social workers is NASW-NYC: over 9,200 professional social workers just in the City alone. Networking is exactly what we are about.

Please share this article, and the entire newsletter, with any of your colleagues who may need an extra boost at this time. We also welcome your feedback. Feel free to email me at schachter@naswnyc.org.

Wellness as a Framework for Agencies, Social Work and Clients

Onaje Muid, MSW, LMHC, CASAC, FDLC, Clinical Associate Director, Reality House, Inc.

Editor’s Note: Chapter Staff had the opportunity to attend a presentation given by Onaje Muid at a meeting of agency executives. Mr. Muid spoke compellingly about the legacies of historic trauma in this country, described their pervasive impact — particularly on communities of color, and elaborated on how their effects manifest in agency settings. Mr. Muid posed that a framework of wellness is needed on the individual, organizational, and societal levels to prompt a healing process so that we might serve clients and communities in a more effective, equitable, and humane way. Currents invited Mr. Muid to contribute an article to complement the NASW Standards for Professional Social Work and Self-Care, which is centrally featured in this issue.

Self-Care in Difficult Times

Not exempt from fiscal constraints, social workers and their agencies are negatively impacted by fiscal down turns. In fact, due to the symbiotic relationship between the social welfare system and the political economy, social work may be disproportionately impacted as compared to the non-helping professions. The consequences, in terms of professional burdens (larger caseloads with newly-increased client populations and unhealthy work environments), coupled with the social costs such as social disintegration (divorces, strained family relations, etc.) and social dislocation, renders our field more susceptible to the impact of multiple stressors, often referred to as ecological overstress. Social causation theory “suggests that insecure and stressful economic and social conditions strongly increase the probability that a given individual experiencing them will develop social problems or mental disorders” (Barker, 1999, p. 448).

Employed social workers are forced to face the imbalance of resources (i.e. less pay, less quality time and highly pressured supervision) against increasing demands for agency production. Those social workers who have lost their jobs may be strapped with debt and dealing with the possible loss of a home, and are facing the frightening possibility of becoming the person in need on the other side of the desk — a daunting proposition! Whether currently employed or seeking employment, all social workers can benefit from focusing on the practice of professional self care to assist us as we adjust to new and difficult circumstances.

A New Paradigm of Wellness — Where Do We Begin?

“Let it Begin with Me…From Counselor Wellness to Client Success” — so read the theme of the Queens Consortium on Alcohol and Substance Abuse (QCASA) Second Annual Symposium, September 30, 2010. Social workers, like John McAteer, LCSW and Beth Covelli, LCSW-R — Co-Chairs of QCASA — are making significant contributions in turning our attention to the essential subject of self-care for social workers in an effort to birth a new paradigm of wellness in our profession.

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With the leadership of Kathleen Caggiano-Siino, Executive Deputy Director, the Office of Alcoholism and Substance Abuse Services (OASAS) has also embraced such thinking. OASAS believes that wellness is instrumental in whole health and will enhance long-term recovery. (See the OASAS website for details.) With the goal of making the addictions field “a field of choice”, it created a Talent Management Committee, including the Organization and Work Experience Subcommittee. The Committee operates from the working definition of a healthy organization as one that “cultivates a culture of respect within a community that supports personal and professional growth, fairness, open communications and shared values.” This represents the new thinking about what agencies must do to bring themselves into a new order of wellness — an order which sustains balance, harmony, justice and reciprocity, also known as “Maat” — a concept rooted in Egyptian traditions.

The Green Cross Academy of Traumatology (GCAT) has identified the importance of wellness for helping professionals; social workers should attend to their own physical, social, emotional, and spiritual needs as a way of ensuring high quality services for those who look to them for support as a human being. Furthermore, the Academy has established Standards for Establishing and Maintaining Wellness, in which the first step is a commitment to self care — something to be done in a formal fashion with tangible commitments including deadlines, goals, and strategies. (See the GCAT website for details.) However, beyond taking care of oneself, wellness requires that we examine and restructure our agency’s environment. One example of such a re-arrangement is Reality House Inc.

**Wellness as the Number One Organizational Priority**

Often social workers proclaim that a parallel process is at work between the supervisor and counselor, and the counselor and client. However isn’t it also present in all the relationships inside an organization? Reality House Inc (RHI) sought to absorb the greatest benefit from this social dynamic by using it to re-establish its priorities.

The premise used was that clients would experience the best from their counselors if the counselors were experiencing a well environment at the agency. Furthermore, RHI asked: Is an agency that promotes wellness as its number one priority more likely to have an end result of wellness for clients and staff than if it did not? Also, what does wellness look like in an organizational setting?

Employees at RHI are now more inclined to speak about how the work environment is negatively affecting them and with that openness, supervision becomes a real assessment rather than a perfunctory one. Staff at RHI have learned from multiple traditions to help break down barriers between clients and workers. Based on Native American traditions, the organization has established an InterTribal Healing Circle, open to clients, staff and the community, fostering a healing (versus pathology) paradigm. Additionally, drawing from the Lakota tradition that we are all related (Mitakuye Oyasin), counselors at RHI think of their clients as “relatives.”

After wellness, RHI established priorities on social justice, cultural competency, clinical excellence, social constructed supervision, and informed trauma services. Additionally, family strength modeling tilts their practice towards a healing modality to un-do racism, transcend historical trauma, and promote family and community resiliency (Brave Heart, 2003). Even when agencies embrace a wellness framework, it is important to remember that they exist in the professional/social environment and will experience the consequences of the larger society.

**Barriers to Embracing Social Wellness as a National Goal**

The reduction of budgets to human service agencies and the ripple effects...
The national economic downturn coupled with recent reform efforts at the Administration for Children’s Services have forced many child welfare agencies to rethink and restructure the way they do business. Although many of these reforms are in line with good social work practice, implementing any reform comes with additional costs.

The biggest shift has been seen in residential care programs, where a profound downsizing has brought about the closure of numerous group homes, the elimination of specialized case work services, and a slimming of residential treatment centers. Many of the young people living in these facilities are being transferred to community based foster homes. In order to sustain these youth at a lower level, their care must be supplemented with a full array of wrap-around community based supports.

Bridges to Health (B2H) an agency based, Medicaid funded, enhancement service is now the largest program providing these supports. Although B2H is an outstanding service, it cannot make up for the essential community based programs, like mental health clinics, that have been impacted by the economic downturn. Thus, the multitude of issues that these youth bring back to the communities puts an incredible strain on the already taxed system.

Challenges related to staffing and workload also extend to the preventive services arena. Social workers in this practice area are frequently called to advocate with their public officials to maintain a funding safety net beyond the current one-year contract termination as well as to keep caseloads at a manageable 12:1 client to staff ratio.

The new practice norms shaped by these changes have moved child welfare social workers to band together and creatively find ways to manage these increased demands, while also maintaining confidence, zeal and overall solid practice values. At Jewish Child Care Association, a series of self-care practices have been put into play to support staff in these difficult times.

In our Foster Home Services division, the social workers have created a Conditions of Workability group that meets biweekly and addresses workplace concerns, offers collective support, and provides a conduit to voice concerns to senior administration that are present at the meetings. Both our Foster Home Services division, and our Residential programs have adopted the Sanctuary Model® which is a framework for creating a trauma-informed therapeutic culture.

Additionally, all JCCA child welfare social workers are given the opportunity to participate in consultations with expert clinicians on families who are presenting difficult treatment and planning dilemmas. These meetings organized either as a clinical review with the treatment team or as a session with both the treatment team and family, have proven tremendously successful in generating new learning opportunities and alleviating worker’s frustrations.

On a congratulatory front, social workers have the opportunity to send “kudos” in their weekly staff meetings, as well as to attend a series of potluck lunches, thank you breakfasts and culturally themed events that are held throughout the year. Additionally, awards for excellence in practice are given at an annual celebration and notable accomplishments are recorded in the agency’s monthly newsletter.

In many respects, despite the challenging times, professional child welfare social workers are able to rely on their inventiveness, self-knowledge, collaboration with others, and informal agency resources to remain motivated and provide quality services to clients in even the toughest of economic environments.

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For more information, call (914) 723-3222 or visit our website at www.naswnyc.org.
**Job Stress: Definition, Historical Origins, and Intervention Strategies**

Mark S. Preston, MSW, MPA, Ph.D., Assistant Professor, Columbia University School of Social Work

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**Editor’s Note: Dr. Mark Preston’s research on staff morale and the effects of stress in the workplace is directly connected to the Chapter’s continued focus on addressing working conditions for social workers and self-care. Dr. Preston shares specific examples of how supervisors can plan a vital role in ameliorating the effects of stress, highlighting the importance of implementing job stress interventions that address not only the individual worker, but also the work environment.**

Fiscal constraints, layoffs, high caseloads, and other macro and micro organizational issues have heightened the level of job stress in social services agencies. Moreover, as the costs associated with job stress—individual ill-health, reduced organizational productivity, and increasing health care expenditures—have become more visible, the importance of worker well-being has also increased. This article aims to succinctly define job stress, explain its historical origins, as well as suggest evidence-based, cost-effective intervention strategies for reducing stress and improving the well-being of social work professionals.

**Definition of Job Stress**

Despite its frequent use, no agreed upon definition of job stress currently exists. Nonetheless, Kahn and Byosiere have identified three areas of consensus. First, job stress results from the influence of external stimuli (stressor). Second, it involves the personal evaluation of external stimuli (appraisal). And third, job stress negatively impacts mental, emotional, physical, and/or behavioral functioning (strain). In short, job stress is a dynamic process in which subjective cognitive appraisals of job-related stressors produce negative health and/or behavioral strain outcomes.

From this general definition, scholars have developed four perspectives for understanding job stress: First, originating from medicine, the response-based view classifies job stress as a strain outcome in the form of either a cognitive (dissatisfaction), physiological (illness), and/or behavioral (absenteeism) response. Second, the stimulus-based view applies an engineering analogy to job stress. Its chief concern is identifying stressors (e.g., caseloads or layoffs) capable of weakening one’s internal means of resistance, rather than the outcome associated with these stresses. Third, derived from organizational psychology, the interactional view emphasizes the interplay between two distinct stressors. For example, stress arises when social workers managing high caseloads are delegated little, to no control, over assigned job duties.

The fourth perspective is the transactional view. Emerged from cognitive psychology, job stress is construed as a reciprocal person-environment relationship involving subjective judgments of the work milieu that influence the presence or absence of strain outcomes. Only the transactional view encompasses Kahn and Byosiere’s three definitional elements (external stressor, cognitive appraisal, and mental/physical/behavioral outcome); and as such, is the perspective currently favored by most stress researchers.

**Historical Origins**

Drawing heavily from the theory of evolution, Walter Cannon and Hans Selye are credited with establishing stress as a legitimate scientific phenomena. Evolution, according to Darwin, is the on-going physiological adaptation of a species to its external environment that helps ensure its long-term survival. Cannon coined the term “fight or flight” to explain the physical reactions of people when they encounter a potentially threatening event or situation. Consistent with Darwin, Cannon considered the ability to respond quickly to an external threat (by fighting or fleeing) a positive evolutionary response that advanced human survival.

Selye extended Cannon’s work by exploring the long-term impact of stress. He developed a three-stage theory to explain how organisms respond to noxious stimuli. In Stage 1 (alarm), the body aggressively reacts to the foreign threat. Next, various internal biological systems actively fight the danger and, if successful, the body gradually returns to normal functioning in Stage 2 (resistance). If, however, the foreign threat continues (Stage 3) internal resources are eventually depleted (exhaustion) and negative mental and/or physical outcomes, including death, occur.

By placing stress within an evolutionary framework, Cannon and Selye fundamentally shaped our understanding and treatment of job stress in three important ways. First, in line with Darwin’s organism-environment fit model and the transactional perspective, job stress is perceived as a worker-work environment misfit. Second, because both men presented evolutionary adaptation as a reactive process, social workers experiencing stress are often depicted as passive victims, rather than active beings. Third, job stress today is seen as a person-centered problem with most stress interventions designed to facilitate reactive coping, as opposed to proactive adaptation of the work context.

**Intervention Strategies**

Contrary to Cannon and Selye, Darwin envisioned species as active participants in the evolutionary process and, as such,
were capable of reciprocally shaping their host environments. Consequently, any effective model of social worker well-being should simultaneously address the person and the environment. That said, job stress interventions generally fall into two broad categories: 1) primary interventions that modify the work context (e.g., job redesign), and 2) secondary interventions focused on the employee (e.g., stress management classes). While the former is more effective at minimizing the negative long-term effects of job stress, the latter is far more prevalent in social services agencies. One explanation for this is the high costs associated with organizational-level change. Fortunately, the job stress literature has identified several work characteristics that can effectively reduce stress at little cost to the agency.

Because direct supervisors play a central role in the well-being of social workers, I highlight three core work characteristics that help strengthen this dyadic relationship and can positively impact social worker well-being: 1) job control, 2) social support, and 3) feedback. Job control pertains to sufficient autonomy and decision-making authority. Sufficient job control is essential when discretion over duties and methods is required, such as high workloads situations.

When work is emotionally demanding, social support becomes critical. Types of supervisor social support includes task-specific (e.g., strategic help), emotional (e.g., active listening), and informational (e.g., advice).

Another essential work characteristic is instrumental or goal-related feedback. Feedback facilitates the attainment of goals, which when perceived as meaningful or important fosters positive well-being. Forms of instrumental feedback include process (how to achieve the goal) and outcome (was the goal attained) feedback. Process feedback is more valuable for new social workers, while outcome feedback is more useful for experienced social workers.

Jointly, factors relating to job control, supervisor social support, and supervisor instrumental feedback account for roughly 20% of job stress. Therefore, primary stress interventions (in conjunction with secondary interventions) directed towards advancing these high impact cost-effective work characteristics can have a substantial effect on the well-being of social work professionals.

For a complete list of references, please visit our website at www.naswnyc.org.

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**Major Changes in NY’s Publicly-Funded Outpatient Mental Health System**

*Peter Beitchman, DSW, LMSW, Executive Director, The Bridge*

Over the past several years, New York State has embarked on a multi-pronged initiative to restructure the publicly-funded mental health treatment and rehabilitation system. On October 1, 2010, the State Office of Mental Health (OMH) implemented mental health clinic restructuring on an interim basis, pending final approval by the federal Centers for Medicaid and Medicare Services (CMS). And in New York City, the first OMH-licensed Personalized Recovery Oriented Services Programs (PROS) have been launched over the past few months, replacing Continuing Day Treatment and other programs as the core outpatient rehabilitation program for persons with serious mental illness.

During the development of the restructuring plan there was board consultation and advocates have applauded several aspects of the plan — the ability to provide multiple reimbursable services on the same day, the establishment of the indigent care funding pool, HIPPA protections, the ability to provide more integrated health and mental health services in clinics, recently passed companion legislation that will bring Medicaid managed care reimbursement rates more in line with the cost of providing services, and the increase in the base Medicaid rate for clinic services. However, serious concerns remain.

First, in the absence of CMS approval, providers are dealing with the administrative challenges of an enormously complicated interim billing system. Further, CMS has yet to approve OMH’s plan to allow reimbursement for off-site services to the home-bound elderly and children, who lost reimbursable services on October 1, 2010. While OMH has reached to the City Department of Health and Mental Hygiene to remedy the off-site services problem, a solution has not yet been found.

In the absence of CMS approval, the promised indigent care pool has not been established to provide services to the non-insured, leaving thousands of New York City residents vulnerable to losing mental health services. And although Medicaid managed care reimbursement rates to clinics will be increased, the issue of inadequate reimbursement by private insurance companies has not been addressed.

Beyond these immediate concerns, advocates fear for the long-term viability of the mental health clinic system. A study conducted by The Coalition of Behavioral Health Agencies, for example, found that when restructuring is fully phased-in, its representative sample of clinics will experience significant financial deficits that
Geriatric Social Work Facing A Daunting Task in New York

Susan Moritz, LCSW, Director of Older Adult Services at Lenox Hill Neighborhood House

In December 2006, the New York City Department for the Aging (DFTA) announced their intention to redesign its network of aging services. The changes were necessary so that New York City would be ready for the expected onslaught of boomers who would overwhelm the existing system, and to respond to changing demographics that left communities with large groups of elders and no locally based services. The three service areas DFTA focused on were case management, home delivered meals, and senior centers. These programs make up what DFTA considers its core services and are funded through federal, state and city dollars.

The changes coupled with the current fiscal crisis have resulted in more loss, and have created barriers to services for our clients. The loss of long standing relationships with workers and organizations (who either lost contracts or communities as the city carved out new service areas), the loss of available services (cuts to homecare and case management services) and the closing of senior centers as well as new requirements for assessment and eligibility are seen by many as obstacles to accessing and providing services.

Social workers implementing these programs and services are faced with a daunting task that frequently leaves us feeling frustrated and frankly, angry. Our clients are frail, often isolated, and present with a myriad of emotional issues and concrete needs that require skillful negotiation, creativity, patience and, most of all, time to address. We are not merely giving a meal or putting in homecare. We are utilizing these services as a means to address the much larger issues of social isolation, safety, and an individual’s emotional well being. Chipping away at the limited funding that exists for aging services creates a climate that discourages good social work practice, and is an affront to those trying to provide more than the bare minimum. However, it is the deep commitment we have to our clients and a firm belief in the work we do that allows us to persevere despite the obstacles.

Jane Brody Speaks at Gerontological Social Work Committee Meeting


Left to Right: Jane Brody, New York Times Health Columnist; Beth Finkel, chair, NASW-NYC Gerontological Social Work Committee; and Jane Ryder, AARP
These live monthly hour long teleconferences are exclusively for NASW members. The Lunchtime Series highlights the latest social work issues being addressed by NASW. Besides a live teleconference, members can access the transcripts and audio/podcast component of the teleconference 24/7 through NASW’s website.

www.socialworkers.org/ce/online/lunchtime/lcourses/home.aspx

A source for professional advice, inspiring stories, and a social worker directory.

http://www.helpstartshere.org/

A place for social workers to connect in real time over the Internet. The site has a planned Calendar of Events of chat topics (plus an archive of old chats) and a bulletin board/forum through which members can post topics and concerns.

www.socialworkchat.org/

The Chapter invites you to visit the websites below to make full use of your membership benefits. Whether you are looking to expand your skills or connect with peers, the information on NASW’s National websites can enrich your professional development and assist you throughout your career. These featured links are only three of the many ways for you to find up-to-the-minute topics and rich opportunities to share ideas and build networks with social workers across the country.
4th Annual Leadership Awards Dinner

Honoring Emerging Social Work Leaders and Top Leaders in The Profession in New York City

Thursday, December 2, 2010
5:30 p.m. to 8:30 p.m.

Grand Harmony Restaurant
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NASW-NYC, through its 4th Annual Leadership Awards, recognizes social workers who demonstrate exemplary leadership qualities and a unique commitment to the improvement of social and human conditions, assuring a promising future for the profession and the communities they serve.

Join us as we kick off our 4th year honoring the next generation of social work leaders, and our first year honoring the top, established leaders in the field. This dinner is a unique opportunity to have a fun-filled time, enjoy a wonderful dinner, and network with NASW leaders and colleagues as we celebrate the outstanding accomplishments of our leaders. Last year, this was one of the signature events of NASW-NYC. We hope to see you there!

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TOP LEADERS IN THE PROFESSION

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Consider placing an ad in the ad journal.
Please note: your contribution will not be tax deductible as it may go to support our lobbying and advocacy agenda.
LCSW TEST PREPARATION

Saturday, November 20, 2010
10:00 a.m. - 5:00 p.m.

Presented by Dawn Hall Apgar, Ph.D., LSW, ACSW

For information on how to register, please visit our website at www.naswnyc.org or call (212) 668-0050 ext. 235.

This workshop will:

- Provide information on the format and structure of the LCSW examination.
- Help participants develop successful test-taking strategies.
- Provide review material in each of the content areas.
- Review practice questions.

Invest In Yourself With Continuing Education

Catherine Baker-Pitts
Monday, November 8, 6:00 p.m. to 9:00 p.m.

Transformative Leadership: Motivation, Inspiration, and Fundamental Change in the Human Services
Willie Tolliver
Tuesday, November 9, 6:00 p.m. to 9:00 p.m.

Grant Writing: It’s All About Our Clients
Roberta Herche
Thursday, November 11, 6:00 p.m. to 9:00 p.m.

The Use of Play Therapy Over the Course of Child Treatment: Underlying Issues and Best Practices
Theresa Aiello
Saturday, November 13, 10:00 a.m. to 5:00 p.m.

“But I’m NOT an “Addict!”: The Hidden Epidemic of Prescription Drug Abuse
Dan Pitzer
Monday, November 15, 6:00 p.m. to 9:00 p.m.

Gender Beyond the Binary: Clinical Work with Transgender and Gender Non-Conforming People
Ady Ben-Israel
Wednesday, November 17, 6:00 p.m. to 9:00 p.m.

Adolescent Latina Suicide Attempters: A Dramatic Social Issue
Carolina Hausmann-Stabile
Monday, November 29, 6:00 p.m. to 9:00 p.m.

Giving Our Clients What Their Brains Need: What Clinicians Are Learning from Neuroscience
Amy Gladstone
Saturday, December 4, 10:00 a.m. to 1:00 p.m.

A Pound of Flesh: The Effects of Incarceration on Individuals, Children, Families and Communities
Carl Mazza
Monday, December 6, 6:00 p.m. to 9:00 p.m.

Transforming Trauma: An Introduction to EMDR
Nancy Bravman
Tuesday, December 7, 6:00 p.m. to 9:00 p.m.

Perinatal and Postpartum Mood Disorders: What Social Workers Need to Know About the Number One Complication of Pregnancy
Susan Dowd Stone
Thursday, December 9, 6:00 p.m. to 9:00 p.m.

The Non-Verbal Level: Where the Truth Comes Out
Johanna Climenko
Saturday, December 11, 10:00 a.m. to 5:00 p.m.

Navigating Difficult Conversations About Race, Culture, Class, and Sexual Orientation in Social Work Settings
Joan Adams and Cheryl Franks
Tuesday, December 14, 2010, 6:00 p.m. to 9:00 p.m.

For information on how to register, please visit our website at www.naswnyc.org or call (212) 668-0050 ext. 235.
NASW-NYC WELCOMES NEW INTERNS

Sasha Neha Ahuja is an MS student at the School of Social Work at Columbia University. Her social work practice is informed by her interest in transformative justice, from macro-systems analysis to grassroots organizing. She comes to the social work profession as a proud graduate of Hunter College and as a youth worker/youth organizer in the South Asian/Indo-Caribbean community in New York City. Sasha is also an avid biker/runner and committed birth/abortion doula.

Emily Saltzman is a Masters student at Hunter College School of Social Work concentrating in Community Organizing, Planning and Development. She received her BA from Lawrence University in Wisconsin. Emily is looking forward to spending the year as an intern with the Undoing Racism™ Internship Project. In addition to doing her own anti-racist work, Emily has experience organizing within the lesbian, gay, bisexual, transgender and queer communities both here in NYC and in the Midwest.

Germika T. Pegram is a second-year student pursuing her MSW at New York University Silver School of Social Work specializing in the area of Policy and Practice. In 2004, Germika earned her BS in Psychology from Virginia Union University of Richmond, Virginia. She has been dedicated to working with a community of diverse stakeholders and is enthusiastic to be part of the Undoing Racism™ Internship Project team because she is eager to increase the awareness of racism and seeks to find effective ways to eliminate this paralyzing issue within our society.

Jennifer Nguyen is a second-year student pursuing her MSW at Columbia University, with a concentration in Social Enterprise Administration. Through a social work value base, she expresses career interests in the sustainability of organizations through fiscal management and program analysis. As an NASW-NYC intern, she is contributing to the planning of the Annual Meeting, convening a community leader meeting to address licensing issues, while furthering outreach to students to strengthen NASW’s relevance to burgeoning professionals.
New York City Councilman Thomas White, Jr., of Queens passed away on Friday, August 27 at age 71. Mr. White graduated from the State University at Stony Brook with a Masters degree in Social Work and dedicated his life to addiction treatment services and the community.

As Executive Director of Queens Village Committee for Mental Health for J-CAP Inc., Councilman White revitalized addiction treatment in Southeast Queens and inspired thousands of individuals in recovery. “Thomas White, Jr., advocated for recovery from addictions for over forty years,” said the J-CAP Board of Directors in a statement. “His commitment to the treatment of addictions in the community and beyond will live on through the programs he created and the people he helped.”

Mr. White served as the City Council Member for the 28th District in Queens for fifteen years and was hailed by Council Speaker Christine Quinn as a tireless fighter for programs to benefit the neighborhoods of his district. “He searched for ways to break the cycle of poverty and violence. He fought for job training and placement programs, and investments in long term economic growth,” she said.

In Memoriam - David Roth

David Roth, an NASW Social Work Pioneer, passed away on September 25 after a long illness. He was a founding member of the New York City Chapter of the NASW, having served on the planning committee to form the Chapter in 1954.

Mr. Roth served the Chapter in a number of capacities—as a Board Member, Treasurer, a leader of PACE and the finance committee—and has left an indelible mark on New York City’s social work community. He joined the Jewish Child Care Association (JCCA) in 1947 and served as Personnel Director and Associate Executive Director before assuming the position of Executive Director, a position he held from 1979 to 1993. His unflagging dedication to children and families and his significant contributions to JCCA and other child advocacy organizations will long be remembered.

In addition to his career at JCCA, Mr. Roth was also a Senior Fellow at the Child Welfare League of America and a representative of CWLA on United Nations NGO committees.

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Connecting Social Workers to Opportunities and Services

The NASW-NYC Marketplace is where NASW-NYC brings social workers into connection with organizations and individuals providing opportunities and services of interest to social workers. Many offerings fill the pages that follow that we think you will find to be helpful, timely and even inspiring. We invite you to take advantage of these opportunities for yourself, and encourage you to consider sharing them with your colleagues.
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Brooklyn Heights – Attractive part-time furnished offices in psychotherapy suite. Convenient to all subways. Large waiting room. A/C and Intercom system. Secure 24-hr. building. Contact Debra (718) 624-3192; debra.laks@gmail.com.

Park Slope – Therapy offices on a park block in historic neighborhood. Available hourly, some half days and full days. Congenial group of long-term renters. Furnished, A/C, buzzer/ intercom, WIFI, common waiting area with refrigerator. Quiet, airy, pleasant and well-kept. Contact tvega1@gmail.com.

Ocean Pkwy, Brooklyn (between Church and Caton) – One or two spacious, attractive rooms full or part-time, in nicely innovated professional suite. Shared waiting room, kitchen. Lobby floor, 24-hr doorman. Convenient public transportation for Brooklyn and Manhattan. Call: (718) 633-6311 or (646) 400-4858.

Bensonhurst (Bay Parkway and 67th St.) – Large office, new building. Comfortably furnished with windows, central air. Near transportation, handicapped accessible. Available hourly, half day, or full day. Contact Dr. Albano at (917) 593-1679.
Forest Hills, Queens – Part-time office space in lovely 3-office suite. All offices have windows, fans, and air-conditioning. Comfortable waiting area, restroom, kitchenette, and intercom system in each room. Convenient to all transportation, and ample parking. Please call for more information (718) 997-9536

Ridgewood, Queens – Two newly renovated, furnished psychotherapy offices for full-time/ part time or fee for service. Intercom system and waiting area are available as well as help to build private practice for LCSW’s if needed. Contact Rosa Beltre, LCSW at (718) 456-9666

Forest Hills, Queens – Affordable fully furnished part-time offices exclusively for mental health professionals. Individual, group, analytical rooms. Ideal for networking. Near LIRR, buses and subway, Queens Blvd. Two hour metered parking. Forest Hills Center for private practice. (718) 786-4990 or e-mail karen@fhipa.com

Forest Hills, Queens – Part-time office space in lovely 3-office suite. All offices have windows, fans, and air-conditioning. Comfortable waiting area, restroom, kitchenette, and intercom system in each room. Convenient to all transportation, and ample parking. Please call for more information (718) 997-9536

Garden City, 7th Street – Part-time/ Full-time office space to sublet in professional office suite in doorman building. Newly renovated. Networking possibilities. Great Neck office also available. Contact N. Michael (800) 711-9775

SOCIAL WORK SERVICES

Group and Individual Consultation – Experienced in all forms of therapy. NYU faculty, published author: counter-transference, harm reduction. In a supportive group discuss effective techniques, working with the “difficult” client, avoiding premature termination, retaining clients. Group meets every other Tuesday, 7 to 8 p.m., first visit free. Village, near subway. Mark Sehl, Ph.D., LCSW (212) 228-3467, www.marksehl.com

AFFORDABLE CLINICAL CONSULTATION Services – to support your professional growth. Psychodynamic, gestalt and systems methods. 27 years practice and supervisory experience. Institute senior faculty. Enhance your clinical skills with individuals, groups, couples and families. For free initial phone consultation, call Louis Levy, LCSW, CGP at (212) 722-0505 or e-mail grouprx18@aol.com

CLINICAL CONSULTATION for LCSWs – Psychodynamic, effective use of self. 25 years experience, former Clinic Director, Institute Faculty. Expertise with child/adolescents. Supportive, challenging, flexible. Credit to R. Convenient Village location. Mona Daniels LCSW (212) 627-2080

Clinical Consultation Provided By Experienced Clinician – Former NYU Asst. Professor and agency director. Supportive, eclectic, psychodynamic approach to work with individuals, couples, sexual problems, families and groups. Affordable and accessible. Manhattan’s East 20’s. Initial session gratis. Flo Ceravolo, LCSW, ACSW, (212) 533-7310

Institute-Trained LCSW-R Supervision for LCSWs Seeking Their R – I am interested in deepening your clinical understanding and helping you hone your own style. Specialties include personality disorders, addictions, and community mental health. Over 20 years as clinician/ supervisor/ director in private practice and agencies. Office is on 24th St. off 6th Ave. Free 30 min. consultation. Lu Lasson (212) 229-7409

BRINGING CLASSIC YOGA INTO THE PSYCHOTHERAPY SESSION – Professional Training. January 21, 22, February 18, 19; 2-5:15 p.m. 12 CECs. Integral Yoga Institute, 227 W. 13th St., NYC. Info: www.yogainpsychotherapy.com; Registration: www.iyiny.org, (212) 929-0586, ext. 0

RENUEW ONLINE Fast, Easy, Convenient.

Now NASW members can renew their memberships online. If your membership expires within the next three months, you are eligible for online renewal.

1. Go to www.socialworkers.org
2. Click on “Member Log In.”
3. Enter your NASW username and password.
4. Click on “Member Center.”
5. Click on “Renew Your NASW Membership Online.”

e-Renew today.
### Currents Advertising Schedule, Rates, and Policies

#### Advertising Schedule:
Any ad that is time sensitive in relation to the date of an event or a deadline should be placed in the newsletter early enough to ensure that NASW members will have time to respond. Consult the schedule below to guide the timing of ad placement. All publication dates are subject to change.

For a full description of our advertising policies please visit our website at [www.naswnyc.org](http://www.naswnyc.org).

<table>
<thead>
<tr>
<th>Issue</th>
<th>Deadline</th>
<th>Receipt by Members</th>
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<tbody>
<tr>
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<td>August 10th</td>
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<tr>
<td>November</td>
<td>October 10th</td>
<td>Last week in October</td>
</tr>
<tr>
<td>January/February</td>
<td>December 10th</td>
<td>Third week in January</td>
</tr>
<tr>
<td>March</td>
<td>February 10th</td>
<td>Last week in February</td>
</tr>
<tr>
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#### Ad size, Dimensions, Price

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<tr>
<th>Ad size</th>
<th>Dimensions</th>
<th>Price</th>
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<tr>
<td>Full Page</td>
<td>10 h x 7 1/2 w</td>
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<tr>
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<td>$550</td>
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<tr>
<td>1/4 Page sq.</td>
<td>4 7/8 h x 3 1/16 w</td>
<td>$500</td>
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<tr>
<td>1/4 Page hor.</td>
<td>2 7/16 h x 7 1/2 w</td>
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<td>1/6 Page</td>
<td>4 7/8 h x 2 3/8 w</td>
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</tbody>
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#### Classified Rates:
$13.00 per line, 40 characters/line with a six line minimum. There will be an additional $15 charge on all ads not received via email.

#### Employment Advertising:
Advertising is also available on our website at [www.naswnyc.org](http://www.naswnyc.org). Contact Monika Dorsey at webads@naswnyc.org or (212) 668-0050 x223.

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You are exposed to *many* potential malpractice lawsuits.

**Be smart – protect yourself, your livelihood, and future ability to help others!**

Here are some **FACTS** about your safety net...

**NASW Assurance Services Sponsored Professional Liability Insurance:**

- **FACT** You can apply for liability coverage amounts of $1,000,000 per claim/$1,000,000 aggregate per year or as much as $2,000,000 per claim/$5,000,000 aggregate per year.
- **FACT** The cost of $6 a month (or even less) for the first year is the best value in the marketplace.
- **FACT** You can tailor flexible coverage options to meet your needs – it’s perfect for independent contractors, private practitioners, exclusively employed individuals, partnerships, corporations, schools, students, and more.
- **FACT** This program insures the largest pool of social workers worldwide, so you’ll have the added security of strength in numbers for rate stability and claims experience.
- **FACT** The NASW Professional Liability rates have not increased in over 15 years.
- **FACT** Online policy renewal with convenient credit card payment option is now available.

**You can apply now, with no risk.**

Just call the American Professional Agency, Inc. and ask for the Social Work Department at (800) 421-6694.

To get more information online and download an application, visit [www.naswanyc.org](http://www.naswanyc.org).

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### CAREERS.socialworkers.org

**The Social Work Career Center**

Looking for social work jobs? Keeping your career options open? Graduating soon? If the answer is “yes” to any of these questions, POST your resume with the Social Work Career Center.

The Social Work Career Center is a robust career Web site for social workers, where you can search national job listings and find professional development and career resources.

Visit the Social Work Career Center today to:
- Post your résumé to reach social work employers
- Search and apply for social work job postings nationwide
- Receive e-mail alerts when a new job has been posted
- Learn about social work salary trends, publications, social work practice areas, licensing, and much more.