

# The CLINICIAN

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THE NEWSLETTER OF THE NEW YORK STATE SOCIETY FOR CLINICAL SOCIAL WORK

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[www.nysscsw.org](http://www.nysscsw.org)

## PRESIDENT'S MESSAGE

# Focusing on the Next Generations

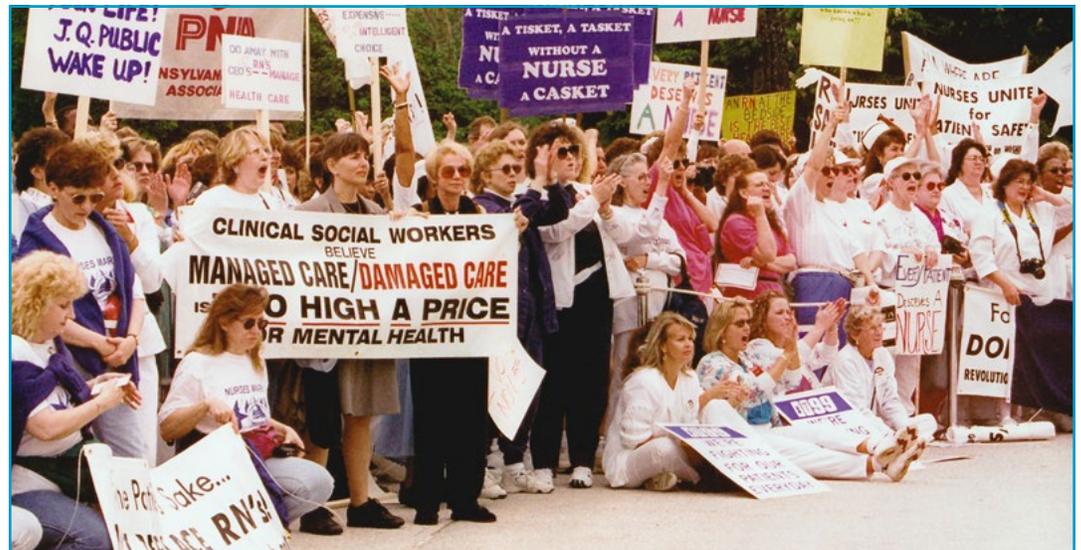
By Shannon Boyle, LCSW

As 2018 draws to a close, we continue to celebrate the 50th anniversary of this extraordinary Society while also focusing squarely on the future. Using many new programs and strategies, we have been reaching out to social work students and new professionals, encouraging them to join, participate actively, and even to take leadership roles in the Society.

For example, a licensed master social worker (LMSW), Zoey Peresman, was elected to the State Board, along with other officers, during the Annual Meeting in October. Taking her seat as the LMSW Representative, she will give voice to the interests, needs and concerns of new professionals, and inform the Board's planning and decision-making.

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## History of the Society, Part II (PAGE 5)



**1996 NATIONAL RALLY:** NYSSCSW leaders joined health care advocates from across the country for a rally at the Capitol on May 10, 1996 to urge Congress to end managed care abuses. Our banner read: Clinical Social Workers Believe Managed Care/Damaged Care is Too High a Price to Pay for Mental Health. Holding the banner is (L–R) Helen Hinckley Krackow, Society President; Fran Aquino, Rockland Chapter President; and Judith Weiss, Staten Island President. (*Newsday* photo reprinted with permission.)

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The Advanced Clinical Education Foundation of the NYSSCSW

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The just-launched New Professionals Program aims to bridge the educational gap between graduation from social work school and entry into the workplace. Nine classes have been developed on a range of elementary clinical issues that will be taught by senior Society members.

The New Professionals Task Force, part of the Membership Committee, helps ensure that we develop courses and networking events that are appropriate for this group. Our popular event, Professional Development Day, drew an audience of 90 last spring to learn about LMSW and LCSW licensing requirements.

Other “tools of engagement” include a cadre of ten student representatives on campus who introduce their classmates to the Society and give us feedback on how to fine-tune our programs and events to meet students’ needs.

The Barbara Bryan Mentorship Program is a longstanding source of support, guidance and inspiration, and the Met Chapter’s Diana List Cullen First-Year MSW Student Writing Awards has given scholarships and one-year memberships to more than 40 students over the last eight years. It has also strengthened our relationships with the deans and faculty of the social work schools.

The ACE Foundation’s outstanding CE programs attract professionals at all stages of their careers. Newcomers who attend any Society functions — CE courses, workshops, networking or social events — find a warm welcoming environment. They may spend time chatting with a member, who will follow up later with a note. More than anything, it is the personal connection that encourages new people to join the Society.



Shannon Boyle, LCSW

Our seasoned members span several generations: the Pioneers, now in their mid-70s; the Baby Boomers, ages 54 to 72, and Generation X, ages 38 to 53, and they are generous with their time and talents. They enjoy engaging with Millennials (ages 22 to 37) and Generation Z (21 and younger). In recent years, we have created many new professional relationships, generation to generation, and it has been an inspiration to us all.

“Adapting to new challenges... we retired the Vendorship Committee and established the Practice Management Committee to address current issues of interest to private practitioners.”

[See Page 10]

The Society is continually adapting to new professional challenges and changes. Recently, we retired the Vendorship and Managed Care Committee and established the Practice Management Committee. The new committee will assume some of the tasks of the old one, while addressing current issues of interest to private practitioners. On behalf of the entire Society, I extend our gratitude to Vendorship’s hardworking members for their many years of service.

For five decades, the Society has been a strong advocate for our profession and for improving mental health services within the community. During these tumultuous times, we will strive to meet the ever-changing needs of those we serve across the state.

Members who become active at the chapter and state levels can reap the greatest benefits from the Society. I hope you will join us in ensuring the advancement of clinical social work for generations to come.

Wishing you many blessings through the holiday season and the New Year.

Shannon Boyle, LCSW  
President

## The CLINICIAN

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# Three New Diplomates Honored

By Richard B. Joelson, DSW, LCSW

The Diplomate is a membership status conferred to NYSSCSW members who have made a distinguished contribution to the field of clinical social work, including teaching, publishing, research and innovation in education or service, and who have shown outstanding leadership in the Society on the state and chapter levels. These are the honorees of 2018.



Society President Shannon Boyle, new Diplomate Lynne O'Donnell, Membership Chair Richard Joelson, and new Diplomate Sandra Indig. Not pictured: New Diplomate Elizabeth Ojakian

**Sandra Indig, LCSW-R, /LP, NCPsyA:** Sandra has been Chair of the Creativity & Neuro-Psycho-Education Committee since its inception. She is a practicing psychoanalyst, arts therapist, published author and poet, and dancer. A graduate of NYU School of Social Work, she has trained and worked as a staff therapist at Washington Square Institute for Psychotherapy and Mental Health. An active member of art societies, she has curated numerous exhibits (including three for the NYSSCSW); and has been awarded residencies to MacDowell Colony for the Arts. She is a past contributing writer and editor for the *Manhattan Arts International Magazine* and was twice nominated for the Gradiva Award (NAAP). Her publications include the book, *Talking Colors: Seeing Words/Hearing Images* (MindMend Publishing) and an article, "Reclamation & Restoration," in *Art, Creativity, and Psychoanalysis*, edited by George Hagman, Routledge Press. In 2011, Sandra was honored by NYSSCSW for contributions to the field of clinical social work. She is an international presenter and lecturer on creativity, creative process, psychoanalysis, and trauma and is in private practice in New York City.

**Lynne F. O'Donnell, LCSW-R, ACSW, EMDR:** Lynne has been practicing as a clinical social worker for the past 38 years. She has worked as a full-time private practitioner since 1989, adding EMDR to her toolbox since Superstorm Sandy. She has developed well-received workshops on Parenting Children to Promote Good Self Esteem, resulting in print and radio coverage. Lynne has worked as a presenter on

Marriage Enrichment weekends for 15 years, and as a field instructor and supervisor for social workers seeking a license for many years. As a consultant with Catholic Charities, she has worked with clinicians and with groups of parents and children on how to negotiate the trauma of 9/11. For 30 years, she and her husband have taught marriage preparation courses at their church. She has also presented a Family and Couple Therapy Practicum at Hunter College Social Work Post Graduate Program, and taught courses on Death and Dying and Generalist Practice at Fordham University's Graduate School of Social Service. A member of the Society since 2007, she has been President of the Queens Chapter for the past three years.

**Elizabeth Ojakian, LCSW, CASAC:** Liz has been a member of the NYSSCSW for 18 years and the Met Chapter Treasurer for the past eight years. She also served on the State Board as Recording Secretary.

In the Employee Assistance (EAP) field for 31 years, Liz been in private practice for 36 years, and an adjunct professor at NYU Silver School of Social Work for 23 years. She was responsible for supervising MSW students who completed their internship at the EAP, among other duties in running the EAP.

She is a graduate of two post-master's analytic programs: one in individual psychotherapy from Metropolitan Institute for Training in Psychoanalytic Psychotherapy (MITPP), and one in group therapy from Postgraduate Center for Mental Health. 

# Reflections on the History of the Society, Part II

By Helen Hinckley Krackow, LCSW, BCD

Because of the importance of licensing to clinical social workers, the New York State Society for Clinical Social Work struggled for decades to enact legislation to define and protect our profession.

During the presidency of David Phillips, DSW (1992-3), our Executive Director, Sue Heller, was contacted by the Governor's office about a conference in Albany that would address careers for women. David asked me to represent the Society on a panel comprised of leaders of social work groups, including Elaine Walsh of the New York City Chapter of NASW, and the presidents of the Bachelors of Social Work and the Hospital Social Workers organizations.

Before I left for the conference, Hillel Bodek, LCSW, our Forensic and Ethics Committee Chair, contacted me with the alarming news that Florida's psychology and social work certifications were about to be "sunsetting," that is, discontinued. Hillel encouraged me to advocate for licensing in New York State in the strongest terms at the conference. Elaine Walsh of NASW, also alarmed by the Florida development, reached out to us to form a coalition to intensify our licensing efforts.

Soon, we were meeting on a regular basis with NASW, the Hospital Social Workers, the deans of the social work schools and others, including the President of the Black Social Workers group. The NASW Task Force was headed by Dr. Eda E. Goldstein, DSW and ours was headed by the indomitable Marsha Wineburgh, DSW, LCSW, our long-standing legislative leader.

The licensing bill went into effect in 2004 with a scope of practice for LMSWs written by NASW, and a comprehensive, specific, page-long scope of practice for LCSWs, written by Hillel Bodek. The previous version for certification was a mere two-sentence description that omitted key areas of our practice.

**Managed Care:** In the 1980s, all mental health clinicians began to feel the effects of managed care practices in the marketplace. In May 1993, our State Education Committee held a conference titled, "Negotiating the Maze of Managed Care" under the direction of Dianne Heller Kaminsky, LCSW. The Society struggled to develop strategic responses to managed care. One controversial idea at the time was to form group practices to market to managed care companies. The other was to lobby and demonstrate against the abuses of managed care.

The National Mental Coalition was formed at this time by Karen Shore, Ph.D. and Ivan Miller, Ph.D., and I served as Treasurer. On the local level in New York City, we formed the Alliance for Universal Access to Psychotherapy, comprised of representatives of our Society, the New

York State Psychological Association, The New York State Psychiatric Association, NASW, and over 20 analytic institutes. Our purpose was to share information and promote state regulation of managed care. We met every Friday, from late 1993 to 1999, with Society member Beth Meehan, CSW and a psychologist, Dick Briggs, Ph.D. serving as Co-chairs. Rosalind Gilbert, CSW was the Legislative Chair.

This organization helped me prepare testimony for hearings held in 1994 by Rep. Richard Gottfried of the New York State Assembly Health Care Committee, and Rep. Alexander "Pete" Grannis of the State Assembly Insurance Committee. Barbara Brenner, Ph.D., MSW, the NASW President, and Beth Meehan also testified at the hearings. We wanted social workers to be included at the "point of service" and to have an impact on the regulation of managed care. The Society also met with several managed care companies to discuss fees in contracts and arbitrary terminations that hinged on costs, not on "medical necessity."

A spirited joint rally was held on May 10, 1996 on the steps of the Capitol in Washington, D.C. Three Society leaders carried a sign declaring: *Clinical Social Workers Believe Managed Care/Damaged Care is Too High a Price to Pay for Mental Health.* (See photo on the cover.),

Our advocacy work continued in earnest during the presidency of Allen A. Du Mont (1998-2001). We continued to lobby in Albany and Washington, D.C., but we were never successful in getting fees increased.

**Responding to 9/11:** Sadly, all the Society's energies were consumed by the terrorist attacks of 9/11, which took place during Allen DuMont's presidency. Our members sprang into action the first night as volunteers with the American Red Cross and other organizations. We were stationed in

CONTINUED ON PAGE 22



Clinicians sprang into action on 9/11 as volunteers. (Photo courtesy American Red Cross)

# Education Program for New Professionals Launched

By *Marsha Wineburgh, DSW, ACE Treasurer*

We are proud to announce the inauguration of the New Professionals Program which seeks to bridge the educational gap between social work school and entry into the world of work. Nine classes covering a range of elementary clinical issues are being offered by senior Society members who have extensive teaching experience: Susan G. Appleman, LCSW, CASAC; Michael Crocker, DSW, LCSW; Louise DeCosta, Ph.D., LCSW; Richard Joelson, DSW, LCSW; Karen Kaufman, Ph.D., LCSW; Susan Klett, PhD, PsyD, LCSW-R; Greg MacColl, LCSW and Marsha Wineburgh, DSW, LCSW-R.

Because contact hours are not required for new graduates for the three years after their LMSW licensing, a wide range of topics are being offered: Trauma, Initial Phase of Treatment, From Freud to Relational Theory, Addiction and Substance Abuse, Agency Survival, Contributions of Carl Jung, Dialectical Behavior Therapy (DBT), and Gateways in Social Work.

If any member is interested in offering an office-based session, please contact our Director of Professional Development, Dr. Susan Klett.

Since its inception, ACE has been flourishing, with 234 clinical programs approved for continuing education for LMSWs, LCSWs and other mental health professionals. Many presentations are still available for State Committee and Chapter education programs. Check our website for listings or contact Dr. Susan Klett at [suzanneklett@aol.com](mailto:suzanneklett@aol.com). 

## HEADQUARTERS UPDATE

Fall is always an exciting time for the Society. We held a very lively and informative Annual Membership Meeting and educational program at a new location, the Fifth Avenue Presbyterian Church.

Over the summer, we prepared several programs and events for the coming months. Check the events calendar at [nysscsw.org](http://nysscsw.org) and [ace-foundation.net](http://ace-foundation.net) to register.

It has been a year since we launched our new online program registration system, and to date we have had to make only a few changes. The system has really streamlined administrative work.

Keep an eye out for your 2019 Society Membership renewal form, coming soon to your mailbox and email.

We wish everyone a very happy and healthy holiday season.

*Kristin*

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## COMMITTEE REPORT | ETHICS

Under the leadership of Martin Lowery, LCSW the committee has been continuing to review the NYSSCSW Code of Ethics. Our intent is to update where necessary, including using new language to reflect the changes to practice that have been brought about by technology, telemedicine, social media and electronic health records (EHR). We continue, as always, to answer members' questions about ethical issues that may arise in the course of their practice. 

# Seven MSW Students Win 2018 Writing Awards

By Chris Ann Farhood, LCSW, Scholarship Coordinator



## STUDENT WRITING AWARD WINNERS 2018

L–R: Christina Tesoro, Hunter; Rachel Wertentheil, Wurzweiler; Hannah Bellinger, Fordham; Christine Menna, NYU; Tkeyah Whaley, Touro; Rigdzin Pema Collins, Columbia; and James Ponticello, Jr., Lehman.

The 8th Annual Diana List Cullen Memorial First Year MSW Student Writing Scholarship Awards Ceremony was held on November 14, 2018 with participation by seven metropolitan area graduate schools of social work, a record number.

The Scholars honored were: Rigdzin Pema Collins from Columbia University School of Social Work, Hannah Bellinger from the Graduate School of Social Service at Fordham University, Christina Tesoro from the Silberman School of Social Work at Hunter College, James Ponticello Jr. from the Master of Social Work Program at Lehman College, Christine Menna from the Silver School of Social Work, New York University, Tkeyah Whaley from the Touro Graduate School of Social Work and Rachel Wertentheil from the Wurzweiler School of Social Work at Yeshiva University.

Each Scholar received a \$500 award, a free one-year membership in NYSSCSW, and the opportunity to present to a group of social work professionals at the ceremony. Guests of honor included deans and faculty from the graduate schools, as well as supervisors, family, friends and colleagues. Shannon Boyle, MSW, LCSW, President of NYSSCSW and Karen Kaufman, Ph.D., LCSW, Met Chapter President, welcomed the attendees. Susan Appelman, LCSW, Chair of the Met Chapter Education Committee, memorialized Diana List Cullen, then introduced the scholars, whose papers she had vetted, and Committee members Ellen

Weber, LCSW-R, Dorothy Buzawa, LCSW and Genie Wing, LCSW-R.

Each graduate school had sent Chris Ann Farhood, LCSW, Scholarship Coordinator, three clinical papers written by a first-year MSW student. The papers were read as a set by the Education Committee, and the scholar paper was selected as the most outstanding of the three submissions from each school.

The scholars presented synopses of their papers, followed by a Q and A session with the audience. Two trending themes emerged in the presentations: the meaning of the therapeutic connection, and termination. The scholars' presentations were thoughtful, incisive and inspirational, and they fielded questions from faculty and experienced clinicians with grace and aplomb.

The Scholarship was initiated in 2011 by the Met Chapter Membership Committee, chaired by Richard Joelson, DSW, LCSW, to support MSW students and reinforce connections with metropolitan area graduate schools of social work. Judging by the quality of the works presented by the graduate students, the future of clinical social work is in very good hands. ■

## Democrats Capture Control of State Senate

[Excerpted from an article by Karin Carreau, MSW, Lobbyist]

In the midterm elections, Democrats won control of the U.S. House of Representatives and the New York State Senate. State Senate Races: Democrats apparently flipped eight seats previously held by Republicans.

If the unofficial results hold, they will have an unequivocal majority for the first time since 2009-2010. The 63-member body will be comprised of 39 Democrats, 23 Republicans and Senator Simcha Felder, a Brooklyn Democrat who has conferenced with Republicans. An unprecedented 17 members are new to Albany (15 Democrats and 2 Republicans).

The outcome will catapult Senator Andrea Stewart-Cousins (D-Yonkers) into the position of Senate Majority Leader, the first time a woman has held the position. The shift in control will have far-reaching policy and logistical implications, as each of the Committee Chairmanships will be up for grabs.

Congressional Races: All 27 of New York's seats in the U.S. House of Representatives were in play, with two being viewed as the most competitive races in the nation. High drama played out in the 11th District (Staten Island) with Democrat Max Rose, a veteran of the U.S. Army who served in Afghanistan, unseating Republican incumbent Dan Donovan.

Upstate in the 19th District, the grueling battle ended with Democrat Antonio Delgado, a lawyer and Rhodes scholar, defeating first-term Republican incumbent John Faso 49% to 46%. While the district has been a battleground in previous cycles, the fever reached a new pitch this time around and appeared to have been a referendum on President Trump, who won the district in 2016. The 19th

District spans all or part of eleven counties in the Capital Region, Hudson Valley, Catskills and Central New York.

On Long Island, second term incumbent Republican Lee Zeldin fended off Democratic challenger Perry Gershon in the 1st Congressional District, and longtime incumbent Republican Peter King narrowly defeated Democrat Liuba Grechen Shirley in the 2nd District.

**Primary Elections:** In the Assembly, Democratic Assemblywoman and Deputy Speaker Earlene Hooper (a social worker) lost in Nassau County (District 18). She was an important contact for us, understanding the need for appropriate education and experience to provide accurate diagnosis and mental health treatment. 🗳️



NYSSCSW Legislative Chair Marsha Wineburgh, Social Work Lobbyist Karin Carreau, State Senator-Elect Jessica Ramos (D-Queens) and Brian Romero, LMSW, Chair, NASW-NYS PAC.

## Social Work Lobbyist Carreau Honored by NYSPA

Karin Carreau, MSW, a social work lobbyist, was honored by the New York State Psychiatric Association (NYSPA) in October with its first "Champion for Parity Award." NYSPA is a medical specialty society of more than 4,000 psychiatrists practicing in the state.

The award was given in recognition of Carreau's work and the role she played in the passage of the mental health and substance use disorder parity compliance reporting legislation (A.3694-C/S.1156-C). Carreau works closely with NYSSCSW's lobbyist, Diana Georgia, Esq. on clinical social work legislation.

Barry Perlman, M.D., chair of NYSPA's Committee on Legislation, had recommended Carreau for the honor, and the Association's Awards Committee unanimously approved. Carreau is considered a valuable ally in the fight for enactment and full implementation of the parity laws. She is currently working to assure compliance, which is crucial to maintaining and enhancing access to care and treatment.

This acknowledgement of social work's effective role in collaborative efforts to improve mental health services in New York serves to highlight our enriched interdisciplinary relationships. 🗳️

**Elimination of Agency Exemption from Our Licensing Laws:** Finally, after 14 years of extensions, the legislature passed a budget bill ending state agency exemptions. For more than a decade, agencies could hire unlicensed employees to provide mental health services. The State Education Department (SED) is currently writing the regulations for this law. We expect a draft soon.

**LCSWs and Workers Compensation Coverage:** We have been seeking to add LCSWs as providers of mental health services for Workers' Compensation patients since 1987. Luckily, the WC Board has requested more mental health providers at a time when the opioid crisis continues to grow. We have been working closely the WC Board to advance our most recent bill. Assembly member J. Gary Pretlow and Senator Fred Akshar introduced our bill, but in the last days of the legislative session, the unions and the business community opposed it strongly. Needless to say, we will continue to push our bill forward in the next session.

**Parity for Health and Mental Health Insurance Coverage:** The Clinical Society has joined an initiative with other mental health organizations to require insurers and health plans to submit certain data to the Department of Financial Services and the Commissioner of Health as a way of measuring compliance with federal and state parity laws. The bill passed both the Assembly and Senate (at the last possible minute) in response to coalition of 22 organizations lobbying for its passage. We now are focusing on the governor to sign it into law.

**Conversion Therapy Ban:** This bill would ban licensed mental health professionals from providing conversion therapy to patients under 18. It again passed the Assembly but is mired in politics in the Senate. Efforts will continue in 2019.

**Professional Partnerships:** We continue to work in a coalition with Title VIII Licensed Professions to advance an omnibus bill to allow corporate partnerships between licensed professions. We are having more success in the Senate than the Assembly, which remains very conservative on issues related to corporate practice.

**Protecting Our LCSW Scope of Practice:** Private practice mental health practitioners once again attempted to move legislation to allow them to bill Medicaid directly

for their psychotherapy services. Currently, only agencies can bill Medicaid directly (and for much higher rates than individual practitioners would most likely be offered). Defeated once again, this group will probably persist in trying to pass legislation that indirectly recognizes their right to diagnose. Currently, unlike LCSWs and Licensed Psychologists, the scopes of practice for LMFTs, LMHS, LPS and CATS do not allow them to diagnose independently.

**Medicare Letters Were Incorrect:** Ordinarily, we do not include federal activities in this column, but the hiring of eGlobalTech to develop Comparative Billing Reports (CBRs) by the Centers for Medicare and Medicare Services (CMS) has prompted our attention. Many LCSWs and psychologists nationwide have been sent letters about their Medicare practice using erroneous data to support incorrect conclusions. Many psychotherapists have found these letters intimidating, suggesting the emergence of third party (managed care) intrusions in the treatment of the elderly, a most vulnerable population.

Laura Groshong, LICSW, Director of Policy and Practice for the Clinical Social Work Association (CSWA), has written to Medicare and the Department of Health and Human Services calling attention to the problems with CBR's incorrect analysis. Some of the problems with the report are:

- Comparing the practice of LCSWs with psychiatrists is erroneous. Medication management does not equate with psychotherapy.
- Diagnosis and patient needs are not considered in the statistics, only the number of sessions.
- Data reported in the CBR did not match data submitted by LCSWs.
- Comparing LCSW practices in urban settings with nationwide averages. (The upper westside of Manhattan probably has more elderly than all of Montana.)

We will follow this issue closely and report as it evolves. Rumor has it that eGlobalTech was paid \$25 million for this shabby statistical report. [C](#)

## FOCUS:

# The Business of Psychotherapy

A new Practice Management Committee has been created to address the complex business issues that practitioners face in the digital age. It will focus on documentation, record keeping, electronic billing and payment, HIPAA, software, and telemedicine, as well as the insurance issues that have been the purview of the Vendorship and Managed Care Committee since 1985. Helen Hoffman, LCSW is retiring as Chair of Vendorship, which will be phased out. Jay Korman, LCSW, is Chair of the new committee,

The new committee has already begun to update Billing Essentials, a compendium of resources for submitting claims and receiving payments. The Provider Enrollment contact lists for reaching the various insurance carriers is also being updated. We ask that anyone who has current phone and contact information to add kindly provide it to us. The lists will be posted on the Society's website and updated periodically.

We will also report on the impact of technology of all kinds on our practice, for example, the smart phone. How can we ensure the confidentiality of information pertaining to clients that has been stored on our smart phones? Please see the accompanying article for steps to take when purchasing a new smart phone.

We look forward to reporting on a broad range of issues of interest to clinicians. Please contact us with any topics you would like the committee to explore. We look forward to hearing from you. 

*Thinking of replacing your smart phone?*

## TAKE STEPS TO PROTECT YOUR PATIENTS' PRIVACY



If you're planning to get a new smart phone, please consider the privacy of your patients before trading in your old phone. Data stored on your phone, like phone numbers, calendar listings, and text messages, can compromise your patients' privacy and your own. To avoid problems:

- **KEEP** your old phone and forego the trade-in. It can be a backup in case your new phone fails. In fact, there are plenty of uses for old smart phones beyond just taking up space in a drawer.
- **OR TRADE IN** your old phone. First copy the data from your old phone to the new one. Then **DELETE THE DATA FROM THE OLD PHONE**, including phone numbers, photos, texts, calendar entries, and email accounts.
- **PERFORM** a "factory reset" on the old phone to restore its original data, erasing everything else. Check it again to be sure the old data is gone. You may also need to remove and destroy the SIM card (store personnel can usually assist).

# Gender Responsive Psychodynamic Treatment for Those Struggling with Addiction and Substance Misuse

Presentations by Michael Crocker, DSW, LCSW, MA and Betsy Spiegel, LCSW

Everyone experiences addiction and recovery differently. Psychotherapy for those struggling with addiction must take into account attachment styles, features of a client's psychodynamic character formation and, importantly, gender. The struggles and challenges that women face are not necessarily the same as those of men. Gender responsive psychotherapy considers the differences, according to presentations by Betsy Spiegel and Michael Crocker at the NYSSCSW Annual Meeting in October.

In general, Crocker said, clients who use drugs to self-medicate are attempting to solve an affect problem, but the solution becomes the problem, one that must be resolved for the client to move forward.

Addiction for women can relate to ruptures and losses in connection, while for men, it can relate to defensive autonomy and an impaired ability to use emotions relationally. For men, the inclination towards addiction can relate to unprocessed feeling states that are manifested instead as actions — either the use of substances, or engaging in out-of-control behaviors, or both. For women, the use of substances or certain behaviors may be related to issues of marginalization and the accompanying struggle for self-identity. For both women and men, issues of attachment and character formation further compound the problems.

Crocker stated that men's vulnerability to substance misuse is often related to what Levant, Pollack and Peck have referred to as normative male alexithymia — men's inability to identify their feeling states and

use them relationally. Instead, they experience their feeling states in the body and are at risk of turning to bodily means to address them. This is a result of a socialization process facilitated by mothers, fathers, teachers and peers, he said.

Among many issues, the workshop addressed the continuous change in the meaning of gender and how it impacts our clients and practices; the value of the ecological model in under-



Michael Crocker and Betsy Spiegel.

standing social constructs related to gender, violence, power, control and marginalization; and strategies to facilitate communication related to these charged issues.

## Women and Addiction

Spiegel stated that women's lives are informed, from early psychological development to late adulthood, by their differences from men. Nowhere

is this more clearly demonstrated than in women who become addicted to a myriad of substances and compulsive behaviors. She described women's path on the separation/individuation journey to object constancy. Ruptures along this path can lead to pathological behavior and excessive compulsivity. Spiegel also elaborated on issues of attachment and the true and false self, as described by Winnicott.

When development milestones are not traversed successfully, a woman is left with feelings of inauthenticity and the inability to inhabit her real self, leading to the self-destructive use of substances to restore a sense of serenity.

In addition, women's journeys on the sexual identification path are troubled and confusing. Women, unlike men, identify with the same person who nurtures them, the mother; whereas men leave the mother to identify with the father. For women, the ties induced by this bonding linger, containing more ambiguity and continued merger with the mother. Women are left with lives of connections and an ability to access more intuition. A woman's life is lived in relationships with others.

It is not surprising, Spiegel said, that men and women bottom out over different stimuli when becoming addictive. Women dive into substance abuse when the web of attachments have fallen apart and/or someone important has either left them or died. Men become more task-oriented and often bottom out when they fear job loss or have been fired, when their ability to succeed has been

CONTINUED ON PAGE 20

# Some Thoughts on My Life in the NYSSCSW

By Allen A. Du Mont, LCSW, BCD, SFNAP, Past President

What do you say after 42 years of being a member of this Society? Not that it was fun while it lasted. It was, and continues to be, much more than that — by turns hopeful, inspiring, challenging and, sometimes, disappointing and discouraging.

In short, it was a fulfilling life as a clinical social work professional supported by our singular organization, one that had to break out and go its own way to establish the legitimacy of our profession. From a handful of activists, we became a force to be reckoned with, loudly asserting that CSWs were uniquely equipped to provide counseling services to the poor and middle class alike. No longer would we be pushed aside. With a cadre of indefatigable fighters like Marsha Wineburgh, and after a long struggle, we won the battle for licensing and claimed our rightful place in the clinical community.

It has been quite a ride! Like many others, I found a professional home when I joined the Society, a place to start, a place to belong. I was able to forge seminal relationships with like-minded colleagues who could provide support, collaboration, information and inspiration. Being a member helped me grow and gave me the opportunity to help others grow as well.

When I first joined the Queens Chapter, I was maintaining a small private practice while completing psychoanalytic training. At the same time, I held a full-time position with child protective services (lasting for almost 30 years), serving in supervisory, training and administrative roles. When I enrolled in a social work doctoral program at NYU, I became interested in family approaches to intervention, and this spurred me to start a Family Therapy Committee for the Society. That same year (1980), the Society chose family approaches as its educational theme.

“It has been quite a ride! I found a professional home when I joined the Society, a place to start, a place to belong.”

After several years, I was invited to become a candidate for the chapter presidency, which I did with hope and a little apprehension. The presidency opened a world of opportunities for me to tackle key issues.

Our forebears in the Queens Chapter were pioneers, the first to form a local chapter. In 1973, they broke away from the then Manhattan-based State Society. However, in the early 1990s, various changes led to a loss of vitality in the chapter and attendance at meetings declined.

I wrote a letter to the members and they responded with enthusiasm. In effect, the dormant spirit of our forebears was reawakened, restoring our vibrant, productive chapter.

Following my tenure as Chapter President, I served in various posts, which enabled me to learn the workings of the Society. In 1997, I put my name forward as a candidate for State President and was elected to serve from 1998 to 2001.

## Managed care battles

The late 1990s was a busy time for the NYSSCSW. As a principal member of the Clinical Social Work Federation, we developed an alliance with the Clinical Social Work Guild and the Office and Professional Employees International Union (OPEIU) to fight in Congress against the abusive practices of managed care. But we did not achieve the success we had hoped for, and the Society withdrew from the CSWF.

The OPEIU Guild survived and went on to win a significant legal victory against Horizon Blue Cross in New Jersey. But that success did not translate into growth in membership, perhaps because of the mistaken idea that the battle had already been won. It had not. In fact, the multi-billion-dollar insurance industry continues to control, impede and obstruct progress in health care financing

despite research showing that support for mental health care can lead to lower costs for health care overall.

#### **Anchors and connections**

At each point in my career, the Society has served to anchor me and connect me with my professional roots. Like many who have honed their organizational skills in the Society, I have served on the boards of several other organizations.

I was on the Board of ICAPP, the International Conference for the Advanced Professional Practice of Clinical Social Work. This storied organization of seasoned clinicians held educational conferences in far-flung locales. During my tenure, along with my colleagues Helen Krackow and Florence Lieberman, we welcomed noted scholars and practitioners to our conferences.

I was also nominated to the National Academies of Practice, an organization representing 14 health professions that promotes

inter-professional education and practice. I became the first social worker to hold the position of Vice President for Membership and had the opportunity to nominate many distinguished practitioners.

I am devoted to volunteering and all that it entails: being active, learning, collaborating, voicing my opinion, proposing new ideas and trying to see them through. I am always on the lookout for new Society members to join and become active.

I have come to realize that one person's active engagement can spur creativity in others. The synergy that is generated carries us all forward. It is a dynamic that has helped me throughout my professional life.

As Erik Ericson pointed out, generativity is a major developmental task in the human life cycle. We pass on the benefits we have received from our forebears and, in doing so, derive satisfaction from the knowledge that we have helped to make the world a better place for those who follow. 

“I am devoted to volunteering and all that it entails: being active, learning, collaborating, voicing my opinion, proposing new ideas and trying to see them through.”

## **NYSSCSW PRESIDENTS 1968–2018**

**Robert Lampert**  
1968–1969

**Florence Radin**  
1970–1971

**Alan Grossman**  
1972–1973

**Crayton Rowe**  
1974–1975

**Nancy Palazzolo**  
1976–1977

**Abbie Blair**  
1978–1979

**Marsha Wineburgh**  
1980–1981

**Margaret Isbell**  
1982–1983

**Jacinta Marschke**  
1984–1985

**Adrienne Lampert**  
1986–1987

**Robert Evans**  
1988–1989

**Philip Banner**  
1990–1991

**David Phillips**  
1992–1993

**Helen Hinckley Krackow**  
1994–1997

**Allen A. Du Mont**  
1998–2001

**Helen Hinckley Krackow**  
2002–2003

**Hillel Bodek**  
2004–2007

**Jonathan Morgenstern**  
2008–2011

**Marsha Wineburgh**  
2012–2015

**Shannon Boyle**  
2016–Present

# NYSSCSW ANNUAL EDUCATION CONFERENCES\*

Dec. 6, 1980	Countertransference and the Therapist's Turmoil
March 14, 1987	The HMOs Are Here! The PPOs Are Here! Critical Issues for Clinical Practice
May 8, 1993	Negotiating the Maze of Managed Care (25th Annual Conference)
Nov. 20, 1993	Joint NYU and NYSSCSW: Frontiers of Psychotherapy
Nov. 19, 1994	The Nature of Change in Psychotherapy: Multimodal Approaches to Treatment (26th)
Feb. 1996	1st Annual Hypnosis Conference
May 18, 1996	The Forgotten Father (27th)
Nov. 16, 1996	Joint NYU and NYSSCSW: Treating the Difficult Client: Who is Difficult and to Whom?
March 19, 1997	2nd Annual Hypnosis Conference
May 17, 1997	Siblings: Impact on the Individual, the Family & Interpersonal Relationships (28th)
March 15, 1998	3rd Annual Hypnosis Conference
May 16, 1998	Secrets and Lies; Fantasy, Reality, Intrapsychic & Interpersonal Dimensions (29th)
Nov. 14, 1998	Joint NYU & NYSSCSW: Loneliness, Isolation, Disillusionment: Creating Hope and Connections in the Therapeutic Relationship
May 5, 1999	The Power of Love and Hate: Its Impact on Self and Other (30th)
May 13, 2000	Self-Disclosure & Countertransference: Uses & Abuses (31st)
Nov. 4, 2000	Joint NYU and NYSSCSW: Looking for Meaning in All the Wrong Places: Clinical Issues and Implications
May 12, 2001	Complexities of Gender and Sexuality: Clinical Implications (32nd)
May 11, 2002	Collaborative Dialogue: The Clinical Process (33rd)
May 2003	Creativity and Play in the Clinical Hour (34th)
May 15, 2004	The Many Faces of Love: Pathways and/or Barriers to Intimacy (35th)
Dec. 11, 2004	Clinical Entrepreneurship in Changing Times
May 2005	The Body, Sex, and the Self: Intrapsychic and Interpersonal Explorations (36th)
May 2006	Awakenings: From Despair to Hope in the Clinical Process (37th)
March 24, 2007	Clinical Social Work Practice & Managed Care
May 12, 2007	When Feelings are Split Off: From Dissociation to Integration in the Clinical Process (38th)
May 10, 2008	Identity: The Psychological Concept of a Largely Unconscious Process of Self in Relation to Other (39th)
May 2, 2009	Out of Sorts: Meeting the Challenges of Working with Anxiety and Mood Disorders (40th)
May 8, 2010	Lives Disrupted: Contemporary Approaches for the Treatment of Trauma (41st)
May 7, 2011	The Multiple Dimensions of Narcissism and How to Survive Them (42nd)
May 2012	Caught in the Grip: Obsessive Compulsions (43rd)
May 4, 2013	Enhancing the Treatment Experience: A Day of Networking and Learning (44th)
May 10, 2014	Facing Impasses: Identifying and Working Through (45th)
April 25, 2015	Contemporary Clinical Practice: New Developments and Historical Perspectives (46th)
March 12, 2016	Master Clinicians: Past in the Present (47th)
April 27, 2017	Rediscovering the Art of Relationships (48th)
April 21, 2018	Stages of Life/Rites of Passage (49th)

\*If you have information about our early conferences, please contact Headquarters at 800-288-4279.

# Stages of Life/Rites of Passage

## The Evolution of Adolescence(ts): Challenges and Dilemmas, New and Old

*Presentation by Neil Altman, Ph.D.; Reviewed by Dore Sheppard, Ph.D., LCSW*

Neil Altman, Ph.D. gave a captivating presentation on the evolution of adolescence, its challenges and dilemmas, old and new. True to his relational orientation, he provided a “two-person” experience, and “a time for us to talk together” by encouraging audience questions and viewpoints, and providing thoughtful responses, while facilitating a fruitful dialogue.

One of Altman’s main points was his view of adolescence as culture-bound. In Western culture, a common understanding of adolescence, past and present, is the adolescents’ tendency to take risks, make autonomous decisions and healthfully “rebel” when they disagree with adult values, decisions and political policies. Western adolescents have been very persuasive in “setting limits with adults” and illuminating societal ills. In the 1960s, their deep concern over the Vietnam War led young people to organize anti-war demonstrations and, more recently, the epidemic of school shootings has led them to organize gun control demonstrations. The audience concurred that the demonstrations and incisive political statements made by adolescents across the country were indeed impressive. Altman pointed out that rebelliousness can also be viewed as “thinking outside the box” of common, everyday adult views.

Many psychoanalytic cultural theorists view adolescence from a multicultural perspective, as does Altman. He has lived and worked in India and written extensively on cultural issues. He has found that American adolescents and those growing up in India and Portugal have different expectations of, and ways to express, their autonomy and individuality. Respect for family values are more integral factors in shaping the identities of Portuguese and Indian adolescents. They tend not to engage in direct confrontation and rebelliousness and may accept cultural norms such as arranged marriages or working at an early age.

Essentially, Altman views culture as having many “meaning systems and subsystems.” He pointed out that Erikson’s view of adolescent autonomy makes sense within Western cultural systems but is not as relevant for those societies that foster collectivism and embedded respect for the family and society.

Altman also emphasized the importance of viewing Western adolescents in relation to current technology. He showed how social media can negatively or positively impact adolescents and their sense of identity. For example, the number of “likes” or social invitations an adolescent (or even an adult) receives may affect his or her sense of security and well-being. Altman’s illuminating and humorous discussion of Facebook, Snapchat, Twitter, and Instagram helped even the least technologically savvy among us better understand what adolescents deal with and experience emotionally in their daily use of social media.

Altman also explored the issues of parenting adolescents. How can we help parents achieve a meaningful balance between fostering their children’s autonomy, rebelliousness and creativity, while at the same time setting reasonable limits on their behaviors? He remarked about the potential danger of “overidentifying” with the adolescent or being too “moralistic.”

Overall, Altman’s presentation itself achieved a meaningful balance in providing a wealth of information while engaging the audience in lively discussions of adolescent development. 

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**Neil Altman, Ph.D.** is a faculty member at the William Alanson Institute in New York City, Honorary Member of the William Alanson White Society, and Visiting faculty at Ambedkar University of Delhi, India. Among other editorial positions, he is Editor Emeritus and Associate Editor of *Psychoanalytic Dialogues: The International Journal of Relational Perspectives*. Dr. Altman has published over 60 journal articles about race, social class, and culture in psychoanalytic work, community-based clinical work, and about child and adolescent therapy. His most recent book is *Psychoanalysis in Times of Accelerating Cultural Change: Spiritual Globalization* (2015).

**Dore Sheppard, Ph.D., LCSW** is an Associate Professor at the NYU School of Social Work. He is a recent graduate of the NYU Postdoctoral Program for Psychotherapy and Psychoanalysis. He is currently a Member-at-Large and Past President of the Rockland Chapter of NYSSCSW and served as Second Vice President of the State Society. He maintains a private practice in Nyack and Manhattan.

## Adult Couples in Transition: What's Love Got to Do with It?

*Keynote presentation by Judith P. Siegel, Ph.D., LCSW; Reviewed by Susan Klett, Ph.D., Psy.D., LCSW-R*

Judith Siegel, Ph.D., LCSW engaged the audience with her warm relational style as she addressed and explored specific challenges, dilemmas and opportunities faced by couples during the crucial time of mid-life. She shared her wealth of knowledge and her work with couples from the standpoint of an object relations theory and a systems approach with an integration of psycho-education.

Siegel opened her presentation referring to Freud's conception of the healthy adult as having the capacity to love and to work and highlighted Erik Erikson's (1959) findings on the developmental crisis faced during mid-life. Reflecting on the cultural shift in gender roles and the widening contemporary age span considered mid-life, Dr. Siegel posed a question: "how do couples navigate this transition with additional stressors created by the conflicts of self-fulfillment vs. fulfillment of family and careers?"

Whether a couple seeks treatment during mid-life to end a marriage or to repair their bond and deepen intimacy, Siegel provided us with the basics and essentials for effective couple treatment. She began her Power Point presentation by outlining comprehensive principles of assessment. She stressed the significance of a non-judgmental stance, encouraged the therapist's curiosity about each partner and discussed the necessity of establishing a safe and secure holding environment to contain anxiety and other affective states. She encouraged exploration of each partner's ego ideal and its influence on their expectations, questioning the main point of conflict from both perspectives, noticing if blaming

predominates and setting limits on the couple's destructive behaviors. In this initial stage of treatment, Siegel also pointed out the significance of tuning into countertransference, using it to understand the couple and the importance of listening for enactments. Finally, she noted that an assessment of the couple's commitment, including whether they have the ability for self-reflection and the capacity to develop an observing ego should determine the course of treatment.

“Whether a couple seeks treatment during mid-life to end a marriage or to repair their bond and deepen intimacy, Siegel provided us with the basics and essentials for effective treatment.”

Siegel discussed the importance of probing for history, childhood disappointment and resentment throughout sessions with couples in order to make sense of frustrations and opposing needs and to sharpen our listening for projections and misinterpretations. She emphasized the significance of working slowly from moment to moment to facilitate clear communication between partners.

When working with couples in mid-life, Siegel emphasized the significance of helping both partners to manage a healthy balance between mutual respect for career goals and equality

with family and home responsibilities. She highlighted the importance of the therapist's use of self to role model empathic attunement and validation. Siegel has the unique ability to offer clear, precise and focused teaching of complex concepts, such as internalized objects, projection identification, splitting and attachment styles, to enrich and expand our reach in helping couples to reconnect and deepen intimacy.

In conclusion, Siegel skillfully engaged the audience in a lively discussion whereby she elaborated on the complexities of working with couples and handling various transference issues. She further discussed ways that she used research on marital satisfaction to guide her listening. Most of all, she offered a masterful means of facilitating mutual recognition between couples for both the beginning therapist and the experienced clinician. 

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**Judith Siegel, Ph.D., LCSW** is a Professor at the NYU Silver School of Social Work, and Director of the Post-Graduate Certificate Programs in Child and Family Therapy and Advanced Clinical Assessment. Her books, including *Repairing Intimacy*, *What Children Learn from their Parents* and *Marriage*, have been translated in seven languages. She practices and provides supervision in Manhattan and White Plains.

**Susan A. Klett, Ph.D., Psy.D., LCSW-R**, is Director of Professional Development of the ACE Foundation of NYSSCSW, on faculty of several institutes in New York City. She is co-author of *Analysis of the Incest Trauma: Retrieval, Recovery, Renewal* (Karnac, 2015), former contributing editor of *Issues in Psychoanalytic Psychology*, and has published widely. She maintains a private practice in Manhattan working with individuals, couples and groups.

## Being in Time: The Problem of Hope in Older Adulthood, the Last Developmental Frontier

*Presentation by Elissa K. West, LCSW; Reviewed by Marie McHugh, LCSW*

**E**lissa K. West presented a thoughtful and affecting clinical treatise on older aging, delivered with candor, humor and hope. West started by defining older aging as being well into the seventies, eighties, nineties and beyond. A comprehensive look at the biological, social and cultural factors involved in the aging process provided a fuller understanding of the effect on the psyche.

West utilized the clinical case of a 91-year-old female patient to illustrate the difficulties and challenges intrinsic in living a long life, while making clinical points and emphasizing the benefits of psychoanalytic treatment. Throughout her presentation, West referenced and quoted developmental and psychoanalytic theorists, including Jung, Winnicott, Erickson and Becker, making for a rich scientific and philosophical discourse on the complexities of older aging.

West said that the hard realities inherent in older aging, combined with the false beliefs internalized over a lifetime from an ageist culture and society, weigh heavily on the human psyche. She posited that the widely used decline model of aging gives way to fears about not only the loss of health and mobility, but ultimately loss of the mind. However, according to her extensive research, most experts agree that the actual prevalence of Alzheimer's disease is overstated, and that most older people have no mental impairment at all. Additionally, according to the research, the capacity for learning and growth in later life remains impressive. Contrary to what many believe, research shows that in healthy people, the brain does not

lose neuroplasticity, and in fact can compensate for deterioration in specific areas of the brain.

Depression was noted by West to be the most prevalent, yet unrecognized condition affecting the health and well-being of older adults. Inherent in living a long life are the inevitable losses compounded over time that include family, friends, peers, relationships, and roles in life, as well as changes in health and mobility. Yet, depression in the elderly is frequently dismissed in an ageist bias as just part of older aging, rather than as a treatable condition. Untreated depression will eventually undermine the immune system and overall health. West asserted that the inadequate recognition of the psychosocial and socioeconomic status of the older person leaves mental health needs ignored that have a root cause in isolation, malnutrition and a lack of intimate companions.

West proposed that there is an overemphasis on the negative aspects of aging that “denies the fountain of old age: our being and inner world.” She asserted that older people report higher levels of life satisfaction compared to younger people and development continues under the right conditions. Treatment often involves the re-working of developmental needs from each successive developmental stage, offering a second chance to master or work through an earlier stage. Transferences to old age and old people arise. Additionally, West reflected on the paradox of the psyche continuing to expand while the body keeps contracting; the fundamental dynamic of our developmental struggle in old age. It was suggested that the slowing down of the body creates opportunity for a rich and meditative experience, allowing for the profound concept of being in time. West ended by expounding upon being in time and the process of becoming from spiritual and philosophical perspectives, giving depth and meaning to the subject of older aging. 



Speakers Jack Novick, Kerry Kelly Novick, and Neil Altman; ACE Director, Susan Klett; and Speakers Elissa K. West and Judith P. Siegel

**Elissa K. West, LCSW** is a graduate of ICP's analytic psychotherapy training program. She has been in private practice for over 25 years with a special focus on treating older adults. She founded ICP's Older Adult Treatment Service program (OATS) in 1996 and served as director for 7 years. She also founded AHA! At Home Attention, Psychotherapy At Your Home, an online directory for homebound people in NYC to locate a home-visiting psychotherapist. She currently leads analytic therapy groups for adults in their 70s and 80s.

**Marie McHugh, LCSW-R** is a certified psychoanalyst in private practice in Manhattan.

## Metropolitan Chapter

Karen Kaufman Ph.D., LCSW, President

The 2018/19 season began with several stimulating CE programs offered to the membership:

At the annual membership meeting in October, Michael Crocker, DSW, Chair of the Committee on Sexuality & Gender, and Betsy Spiegel, LCSW, Chapter Member-at-Large and former Chair of the Addictions Committee, presented *From the Opioid Crisis to Other Substance Misuse Issues: Gender Responsive Psychodynamic Treatment for Addictions*. This program will be repeated in February 2019, also offering CE hours. [See summary of presentation on page 11.]

The Committee on Psychoanalysis hosted *Into the Mind of the Psychoanalytic Therapist: When the Personal Becomes Professional*, presented by Steven Kuchuck, DSW.

The Education and Membership Committees will sponsor the annual Diana List Cullen Student Writing Contest event in November with faculty, friends & family of the students in attendance. The local schools of social work participate, and the contest winners receive a cash prize and membership in the Society. We look forward to their future participation in our community.

The Mentorship and Peer Consultation Committee continues to engage recent graduates and new professionals in groups that support their entry into the field with guidance and practical information.

In addition, several of our board members are working with the ACE Foundation to create and teach programs in a series for new professionals. These courses cover a wide range of clinical topics intended to deepen understanding and clinical skills and encourage new graduates and young professionals to continue advanced training in areas of interest.

The Aging Client and Aging Clinician Committee hosted a program on *The Gift of Years: Growing Older Gracefully*, and the Membership Committee will host the ever-popular social gatherings, member receptions and happy hours, where new and prospective members can meet long term members along with our committee chairs and board members.

Our popular holiday party will take place on December 16 at the Writing Room, formerly Elaine's, on the upper east side.

In the coming year: The Education Committee will present its brunch series on the topics of neurofeedback, collaborative therapists, and retirement; and the Committee on Substance Use Disorders and Behavioral Addictions will offer a program this winter on microprocessing addictions with Dr. Richard Rosenthal.

Family Practice is planning a program on adoption in January, presented by Bernie Michael Glintz, LCSW, BCD and the Group Therapy Committee is hosting a lunchtime series on forming and maintaining therapy groups.

Please watch for announcements on the listserv for all the chapter activities. We invite you to join us in a vibrant and stimulating community of colleagues. Consider taking a leadership role in the chapter or share your expertise with a committee of interest to you. Contact information for all board members and committee chairs is available on Met's page of the website. We invite you to get in touch.

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### Met Chapter Committee on Psychoanalysis

Report by Don Appel, LMSW

#### Post Script: *The Squid and the Whale*

On a Friday evening in May, more than 20 therapists and two "civilian" guests enjoyed the screening of the award-winning film, *The Squid and the Whale*, directed by Noah Baumbach, a presentation of the Met Chapter's Psychoanalysis Committee. The evening began with short opening remarks by the Committee Co-chairs, Barbara Lidsky, LCSW and Janice Michaelson, LCSW.

Baumbach's autobiographical film depicts a family in crisis — the parents, riddled by infidelity and narcissism, eventually divorce — and shows the impact of these events on their two sons. The therapists in attendance held a lively and informed discussion, applying their various theoretical perspectives to the analysis of the characters and plot.

Janet Burak, LCSW said, "I originally saw the film when it came out, but I welcomed the opportunity to discuss it from a psychological perspective. It was a great experience."

Debby Appel, an attorney and guest of the committee added, "I represented clients in more than 700 divorces. I was having flashbacks during the movie because it really showed all of the pain that takes place during divorces, and that's why I no longer do them."

The film was released in 2005 and won many prestigious awards, including the New York Film Critics Circle Award for Best Film and Best Screenplay, as well as an Oscar nomination for best Writing / Original Screenplay.

## Mid-Hudson Chapter

Rosemary Cohen, LCSW, President

In April, the Board of the Mid-Hudson Chapter invited the members to a social event in Poughkeepsie at the home of Gloria Robbins, LCSW-R, BCD, Membership Chair and her husband Dr. Ron Robbins. The event brought together members who live and practice in the five Mid-Hudson Valley counties that comprise the Chapter: Dutchess, Ulster, Orange, Putnam and Sullivan. It was conceived and planned by Board members Judith Elkin, LCSW and Susan Deane-Miller, LCSW, along with Gloria Robbins, Linda Hill, LCSW, Carolyn Bersak, DSW and other members of the Membership Committee.

The several generations of clinicians in attendance reviewed our history. The Chapter began in the late 1960s with a group of colleagues who met in each other's homes to present clinical workshops. The advent of personal computers and the Internet has enabled us to reach out to the entire professional health and mental health community.

We offer our four annual CE hours-approved workshops in conference rooms equipped with the latest audiovisual technology, and we currently partner with Mental Health America, Dutchess County. In September, our workshop season began with Keith Jordan, LCSW who presented "Counseling for Cooperative Co-Parenting." On November 17, Michael Moran, LCSW will present "Addressing Sexual Issues in [Emotionally Focused] EFT Couples Therapy."

## Queens Chapter

Lynne O'Donnell, LCSW-R, ACSW, President

Our chapter has been challenged once again by the need to find meeting space. Administrative changes led to our loss of access to Queens Hospital Center. We have pursued multiple leads on new spaces, but to no avail, resulting in the cancellation of our September and November seminars.

We now have access to a wonderful space at Queens College that is accessible by car and bus, and another possible space that would also be easily accessible. We expect to have a decision soon.

Our hope is to provide three seminars during the winter/spring of 2019. The first seminar we plan to offer is, "Sexual Issues and Concerns in Couples Therapy," presented by Pat Waldeck, LCSW.

This fall, we formed a teleconference peer support group with a focus on the utilization of EMDR in our practice. It will convene once or twice a month on Tuesday mornings at 11.

On another note, we welcome our new members, Charlene Chan and St. Cherie Gonzalez. Once our meeting space confirmed, they will be able to attend wonderful seminars and great networking opportunities going forward.

We wish everyone a beautiful holiday season and thank you for your patience and support. We look forward to seeing you in the New Year!



NYSSCSW Queens and Nassau Chapter members were among the attendees at a presentation by Kenneth Hardy, Ph.D. (first row, center), entitled "Racial Tension, Racial Trauma" held at Molloy College in October. The NYSSCSW co-sponsored the event with NASW of Nassau and Suffolk, Fordham Graduate School of Social Service, and Molloy College. Dr. Hardy is Director of the Eikenberg Institute for Relationships and a noted author and speaker about issues of diversity, trauma and oppression.

## Westchester Chapter

Andrea Kocsis, LCSW, President

Susan Jocelyn, Ph.D., Leadership Committee Chair

Our chapter continues to grow in membership and vibrancy as our committees and practice groups flourish. We hold meetings on the first Saturday of each month at the Mental Health Association of Westchester County in White Plains.

Our day usually begins at 9:00 am with meetings of the clinical interest groups, including Peer Consultation; Group Therapy Practice; Mentorship/Private Practice/Career Building; and Integrating Mindfulness, Applied Neuroscience and Psychotherapy Practice. Networking, refreshments and a brief business meeting takes place between 10:00 and 10:30 am, followed by a 2-hour CEU presentation and discussion.

Several months a year, we host 3-hour CEU presentations. At those meetings, our Practice Groups meet at 8:30 am and the presentations end at 1:00 pm.

The dynamic presentations, all offering CEUs, have included: Story and Narrative in Psychotherapy: Theory and Techniques; Technology & Social Media: A Clinician's Guide to Digital Age Adolescents; Expose The Code: Exploring Racial Dog Whistles in the Therapy Room; Mindfulness & Psychotherapy in a Changing World: Understanding & Practicing Mindfulness With Our Clients & Ourselves; Thinking About Attachment & Trauma Through the Eyes of a Child; Work with the “#Me Too” & Other Abuse Survivors: Acknowledging & Clearing Vicarious Trauma; and Depressed, Borderline or Bipolar?

Each year, our February meeting has offered a film and discussion. This year, we presented “Enough Said,” starring James Gandolfini and Julia Louis-Dreyfus. It stimulated a lively discussion about relationships among lovers, parents and children, and friends.

Our Leadership Committee meets at a bi-monthly luncheon. We have other very active committees: Education; Membership & Program Registration; Hospitality; Newsletter; Legislative; & Website. Our Membership and Program Registration Committee engages newer members, students and graduates from local schools of social work to provide them professional support as they enter the field of social work. We add new members every year.

Our monthly meetings attract dozens of members who seek to achieve their continuing education units via our presentations. Members and non-members alike attend, not only to experience the practice expertise of the speakers, but also the warm collegiality and professional support that our chapter offers. 📍

## Staten Island Chapter

Janice Gross, LCSW, President

In April, we had a large, enthusiastic turnout at RUMC for Brian Quinn, LCSW who presented “Depressed, Borderline, or Bipolar?” for 6 CEU credits.

We began the 2018-2019 program year on October 19 at SIUH Regina MGinn Center with a presentation by Dr. Susan Jocelyn, “Everything You Want to Know About Benzodiazepines But Did Not Know Enough to Ask.”

We continue to have steady attendance by members and other professionals at our conferences. Now, we are planning an evening of Networking, Socializing and Dining for these colleagues on January 11, 2019 at Es Ca Restaurant from 6:00 pm to 8:30 pm.

Looking ahead, our Spring Conference is scheduled for April 6 at RUMC. It will feature Michael Crocker, DSW, LCSW presenting “Out of Control Sexual Behavior,” for 3 CEU credits. Michael DeSimone, LCSW, Ph.D. will close out our calendar in June with a presentation on “Clinical Issues: Working with Adolescents.” 📍

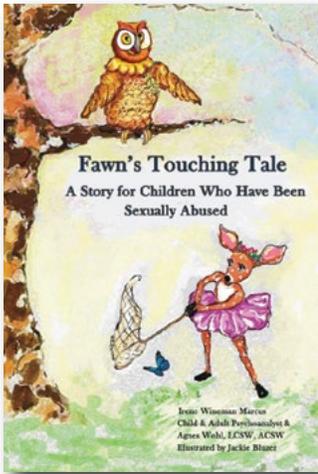
## ACE: Fall Speakers Continued from page 11

compromised. In both cases, bottoming out leads to paralyzing shame.

Spiegel referenced Carol Gilligan, whose research revealed that young teenage girls, ages 11 to 14, begin to withdraw from the world, making themselves invisible. Their ennui is the result of the realization that they will not participate as fully in the world as their male counterparts. They will be consigned to life in the shadows, secondary to men and their accomplishments. While the women's movement has had a positive impact, Spiegel said, some withdrawal and confusion remains for women, along with resistance to aspiring to leadership positions.

What does this mean for treatment? Since women have learned to gain approval from men, it is difficult for them to reveal their authenticity or “real self” in a co-ed situation. In addition, issues of sexuality tend not to be openly discussed in 12-step programs. Thus, same sex groups are important at the beginning of treatment for a fuller disclosure.

Freedom often mandates a change of relationships and career choice for women, Spiegel said. As women gain authenticity, they may be drawn to service-oriented professions, and/or leave corporate life for entrepreneurship. 📍



## Fawn's Touching Tale:

*A Story for Children Who Have Been Sexually Abused*

By Irene Wineman Marcus and Agnes Wohl, LCSW, ACSW;

Illustrated by Jackie Bluzer

*Reviewed by Gwenn A. Nusbaum, LCSW, BCD, CGP*

“Things aren’t what they seem,” hauntingly foreshadows the reality of incest occurring even in families that appear to be idyllic and “calm on the outside.” Thus, in this child-friendly illustrated tale about a fawn sexually abused by her father, the authors depict and tackle salient issues pertinent to childhood sexual abuse including symptoms, family dynamics, and optimal interventions employed to therapeutically address this trauma. Likewise, they are careful to understand that even when these strategies are used to help, the child must still be followed in terms of monitoring her development and capacity to process and integrate what happened.

I am impressed by the fact that, in addition to dealing with protecting Fawn from her father, Marcus and Wohl underscore Fawn’s fears about disclosing her abuse to others, specifically the non-perpetuating mother, tackling another significant theme resonant in the treatment of survivors of childhood traumas. For example, often the child is afraid that she (or he) will not be believed or that she has done something wrong. In addition, the question of why Fawn’s mother didn’t know what was happening, and both Fawn and her mother’s need to reckon with this, is broached.

In my work with adults whose incest was never recognized or attended to growing up, this issue is particularly complex and wounding, generally experienced as the mother’s failure to protect, hence betraying her daughter.

In this brief, soft-covered tale, the authors deftly brave complex issues in a way that is accessible to therapists working with children, and to parents who want to start a dialogue and help language a story of sexual trauma, betrayal, disappointment and loss. In this way, the book is a particularly useful narrative and may serve as an initial tool for facilitating a discussion and fostering a sexually-abused child and her parents to engage in a more communicative dialogue within the family as well as with a team of professionals. Such early interventions and attuned attention to incest in childhood, provided in close proximity to the actual event(s), may be extremely useful, if not essential, in helping ward off subsequent developmental problems and undue suffering in the lives of children growing into adulthood. 

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**Gwenn A. Nusbaum, LCSW, BCD, CGP** has specialized in treating patients with histories of childhood sexual traumas and acute “everyday” traumas for over 30 years. She has published in both professional and poetry literary journals, as well as taught, presented, and led workshops at various psychoanalytic institutes. Maintaining a private psychotherapy practice in the East Village, she is also focusing on those suffering from traumatic and unresolved or ambiguous losses.

the lobbies of the Plaza and Pierre hotels, and on the piers, at makeshift support centers for family members and first responders. Mark Maginn, CSW led the social work efforts at St. Paul's Chapel in support of first responders. We continued our work in the days and weeks that followed.

In the aftermath of the tragedy, the Society offered crisis management training to our members. In 2002, we held a joint conference with New York University School of Social Work on the traumatic effects of the disaster on our patients and ourselves.

Before 9/11, social workers were not known for their role in mental health care. However, the extraordinary press coverage of the disaster changed the perceptions of the press and public. Hundreds of clinically trained social

“The first time that social work clinicians were recognized by the media as mental health experts in their own right, on par with psychologists and psychiatrists, was after 9/11.”

workers could be found in trauma centers across the city, and reporters naturally turned to them for comment about the impact on families and first responders. It marked a break-

through — the first time that social work clinicians were recognized by the media as mental health experts in their own right, on par with psychologists and psychiatrists.

**Forming a Guild:** As part of the effort to impact managed care, the Society, through the Clinical Social Work Federation, formed a specialized union called a guild. We were members of the Office and Professionals Employees International Union. Unfortunately, this effort had limited impact on managed care. During my third term as President, we withdrew from the guild because a health care policy they provided our members was underfunded and insufficient to meet members' needs. Shortly thereafter, the Society withdrew from CSWF due to the mismanagement of its Executive Director and leadership. It was truly a sad moment. However, we do support their successor organization, the Clinical Social Work Association.

**Supreme Court Recognition:** In *Jaffee v. Redmond* (1996), the United States Supreme Court created a psychotherapist-patient privilege in the Federal Rules of Evidence, and held that confidentiality privileges granted to psychiatry and psychology would be extended to clinical social work.

Our Society contributed \$15,000 to fund an amicus brief in the case. Hillel Bodek provided much of the thinking that went into preparing it.

In an earlier decision, the New York State Supreme Court, *People v. Scala* (1985) recognized clinical social workers as expert witnesses. Serving as Chair of the

Society's Forensic and Ethics Committee, Hillel was a key advocate for this outcome.

**Practice Committees and Projects:** Over the years, the Society has sponsored several practice committees to offer specialized education and visibility to our members. Most notable is the Creativity and the Arts committee, which evolved to become The Committee for Creativity and Neuro-Psycho-Education in Clinical Practice. It is Co-chaired by Sandra Indig, LCSW-R/LP, ATR-BC and Inna Rozentsvit, MD, Ph.D., MBA, MSciEd.

Another longstanding committee, Hypnotherapy, was headed by William Ballen, CSW. The newest committee, Aging Issues, is headed by Henni Fisher, LCSW and me.

During my third term as President, Hillel Bodek wrote a scholarly document showing that the schools of social work were not meeting federal standards for the number of course hours covering mental health issues. The State Board of Social Work used the document to increase the number of hours of coursework required for students.

During the presidencies of Hillel Bodek and Jonathan Morgenstern, LCSW, a Policy Manual was developed for our Strategic Planning Committee, chaired by Judy Crosley, LCSW. We were guided by a consultant in organizational structure, Marian Sroge.

In 2008, during Jonathan Morgenstern's presidency, the Board felt we needed help in several organizational issues of a broad nature, such as website development, accounting and legal matters. With the guidance of Marian Sroge, we hired Total Management Solutions to run our office. The company is headed by Sheila Guston and staffed by Kristin Kuenzel and Jen Wilkes. This transition meant that we had to say good-bye to Mitzi Mirkin, who had ably served for 25 years as Executive Secretary.

Another transition during my first term as President was the change in editors of our newsletter. We said good-bye to our longtime editor of the CSSWP newsletter, Alice Collier, and hired Ivy Miller, whose first issue of *The Clinician*, as it was renamed, was published in the winter of 1995. We have used the newsletter to encourage members to write about clinical work, to publicize our practice committees and conferences, and to review members' books and presentations. We also publish columns on practical issues and inform the members of our legislative advocacy.

During Marsha Wineburgh's tenure as President (2012-2015), the By-laws were amended for the first time in 25 years. A key accomplishment was the launch in 2014 of the Advanced Clinical Foundation Education Foundation (ACE) of the NYSSCSW. ACE is approved to provide continuing education contact hours for licensing to LMSCs, LCSWs, LPs, LMFTs and LMHCs within New York State. It has created many teaching opportunities for Society

It is again time to revisit some of our favorite cultural institutions and renew opportunities to share clinical insights with fellow patrons of the arts. Those who regularly attend our gatherings welcome the opportunity to exchange views with like-minded colleagues.

Our agenda is based on member feedback, particularly suggestions for future events. Our most popular recent request was a visit to the Jewish Museum on 92nd Street this past July to see the beautiful yet shocking and evocative paintings of Chaim Soutine. Our group, mostly in pairs of two or three, noted parallels between the animal and human, between beauty and pain and much more. We also saw the once-in-a-lifetime exhibit of Zurbaran: Jacob and His Twelve Sons, Paintings. The show explored the works in historical, cultural and religious contexts.

#### PAST COMMITTEE PRESENTATIONS

- Beholder's Share through the Lens of Neuroscience, Art, and Psychoanalysis. Rockland Chapter, May 8
- 41st ANNUAL IPA (International Psychohistorical Association) Conference, NYU, May 30–June 1

#### UPCOMING COMMITTEE PRESENTATIONS

- Fear and Fearlessness, 2019 IPA Conference, NYU (location and date TBA)

#### UPCOMING MUSEUM VISITS (subject to change):

- Sunday, November 11: The Jewish Museum: Chagall, Lisitzky, Malevich: the Russian Avant Garde, 1918-1922
- Sunday, December 2: Metropolitan Museum of Art: Seeing the Divine: Painting in Northern India and the Christmas Tree. Optional: Irish-Appalachia Concert (with \$65 fee to museum)
- Sunday, February 16, 2019: MoMA: Bruce Nauman: Disappearing Acts

Your ideas and suggestions for events that enrich and deepen our clinical practices are welcome. 

Sandra Indig, LCSW-R/LP, ATR-BC, State Committee Chair, [sindig@earthlink.net](mailto:sindig@earthlink.net)

Inna Rozentsvit, M.D., Ph. D, MBA, MSciEd, NeuroPsychoEducation Chair, [inna.rozentsvit@gmail.com](mailto:inna.rozentsvit@gmail.com)

## History of the Society, Part II Continued from page 22

members. Susan A. Klett, Ph.D., Psy.D., LCSW is ACE's Director of Professional Development.

The Friday E-News was developed in 2012 and continues to be edited by Helen T. Hoffman, LCSW. It offers timely information to our members each week via email.

In 2018, our valiant Vendorship and Managed Care Committee Chair, Helen Hoffman, retired from that position after many years. Her committee's efforts will be undertaken by a new group, the Practice Issues Committee, chaired by Jay Korman, LCSW.

During the Presidency of Shannon Boyle, LCSW, which began in 2016, the Code of Ethics is being revised for the first time in many years. The popular listserv developed during Hillel Bodek's 2006-07 presidency by our esteemed colleague Robert Berger, Ph.D., LCSW, is now administered by a State Listserv Committee.

Our 50th anniversary celebration in 2018 was marked by many special events, including a delightful afternoon cruise around lower Manhattan aboard the yacht "Atlantica." Photos of this and many other Society activities graced the pages of two full-color anniversary issues of *The Clinician* published that year.

**Growing membership:** A summary of our history would not be complete without mention of the membership

recruitment efforts of Richard B. Joelson, DSW, LCSW, Chair of the Membership Committee. Membership has grown significantly for the first time since we our efforts to win licensure. Richard's committee has contributed greatly to our close relationship with the schools of social work, especially through the student writing scholarship program administered by Chris Ann Farhood, LCSW. The Membership Committee now has student representatives at the social work schools.

In addition, we have added an LMSW position to our Board to encourage communication between new professionals and the Society's leaders. The ACE Foundation has developed special courses for new professionals and many social networking opportunities. And, of course, we have provided a Mentorship Program for new professionals for 30 years.

I have highlighted only a portion of the Society's efforts of the last 25 years to firmly establish clinical social work practitioners as mental health psychotherapists. I am proud of this Society's extraordinary accomplishments on behalf of our members, our profession, and the larger community. It will be exciting to see where we will go in the next 50 years. 

Note: Part I of the NYSSCSW History appeared in the Spring 2018 issue.

# NEW MEMBERS OF NYSSCSW\*

## CHAPTER / NAME

NAS Adamo, Moriah  
 MET Addo-Dombo, Patricia  
 MET Adlman, Nancy, LCSW-R  
 MET Altman Dominus, Stephanie  
 MET Amaya-Oates, Rita  
 MET Aronson, Lauren  
 MET Batista-Thomas, Bryan, LMSW  
 MET Becker, Leslie  
 MET Bell, Carly, LCSW  
 WES Bornstein, Susan, LMSW  
 SUF Brooks, Tesia  
 SUF Bruno, Rosemarie, J.D., LCSW  
 SUF Bukovsky, Katherine  
 MET Carlucci, Karen, LCSW  
 QUE Chan, Charlene, LCSW  
 NAS Cohen, Sam, LCSW  
 MET Collins, Emily  
 WES Cuevas-Troche, Carmen, LCSW-R  
 MET Daley, Renee, LCSW, MSSW  
 MET Dalton, Meghan  
 MET Dewidar, Samira  
 MET Diamantini, Paolo  
 MET Diaz-Ferrero, Silvia, BCD  
 MET Dickman, John  
 MET Digregorio, Dana  
 ROC deSimone, Rebecca, LMSW  
 WES Dreher, Karen, LCSW-R  
 MET Dubin-McKnight, Karen, Ph.D.  
 MET Durkee, Colman, LMSW  
 MET Ellerbeck, Alice  
 MET Enriquez, Cristina  
 MET Eskenazi, Ellen  
 MET Feintuch, Shimmy, LCSW  
 MET Fierstein, Rob, LCSW-R  
 MET Fitton, Emily, LCSW  
 NAS Fryman, Rachel, LCSW  
 NAS Garneau, Kathleen, LCSW  
 MET Gadsden, Samara  
 MET Gibson, Tex  
 MET Giebel, Adriane  
 MET Ginsburg, Michael, LMSW  
 NAS Goldfischer, Karen, LCSW  
 QUE Gonzalez, Cherie

## CHAPTER / NAME

WES Gottlieb, Robin, LMSW  
 MET Grilli, Salina, DCSW  
 MET Hall, Alivia  
 MET Hasan, Shazia, MA  
 MET Jaffee, Rhonda, LCSW  
 MID Jordan, Keith, LCSW-R  
 MET Kaplan, Debra  
 MET Kaplan, Rhona  
 MET Kavanagh, Justena, LCSW-R  
 WES Kido, Christopher  
 MET Karess, Martha, ACSW  
 MET Kuper, Frema, LCSW  
 MET Kupris, Larisa, MA  
 ROC Laidlaw, Ian, LCSW, MA  
 MET Lanzoni, Margaret  
 MET Lassen, Victoria  
 NAS Levenson, Frances  
 MET Lichtstein, Julie, LCSW-R  
 MET Lipman, Martha  
 MET Locker-Torres, Elena  
 MET Mantrone, Leslie  
 WES Mason, Gabrielle  
 MET Massey, Vaughn  
 NAS Matos, Javier  
 MET McCready, Alyssa  
 MET McMullen-Williams, Ajani  
 MET Mendoza, Cheska  
 MET Messoro, Elisa, LCSW-R  
 MET Mineo, Mark  
 MET Monsegur, Steven  
 NAS Moscoe, Andrea  
 MET Mulzoff, Ariel  
 ROC Murphy, Danielle  
 MET Nathanson, Tracy, LCSW  
 SUF Neithardt, Eric, LCSW-R, MBA  
 MET Nolan, Christina, LCSW-R  
 MET Ocana, Michael  
 MET O'Connell, Tara  
 MET O'Connor, Patrick  
 ROC Oquendo, Miraida  
 MET Orfori, Gladys  
 MET Pass, Trudie, LCSW-R  
 MET Pema Dolma Gutman, Julia

## CHAPTER / NAME

NAS Pineda, Lisa, LCSW-R  
 WES Polsky, Gail, LCSW-R  
 MET Rabin, Zalisa, LCSW-R  
 MET Raykin, Galina, LCSW-R  
 ROC Reyes, Katiria  
 MID Rhodes, Michelle, LCSW-R  
 MET Roach, Neshea  
 NAS Roberts, Debra, LCSW-R  
 MET Robinson, Paul, LCSW  
 MET Rodriguez, Raymond, LCSW-R  
 QUE Rothman, Suzanne  
 MET Rutkovsky, Julia, LMSW  
 MET Sarju, Nathalie  
 MET Schinasi, Lydia  
 NAS Shapiro Lee, Jennifer, LCSW  
 MET Shaw, Rebecca  
 MET Shenfeld, Michelle, DSW  
 MET Silva, Janel  
 MET Simmons, Herbert  
 SI Simonetti, Ellen  
 WES Simpson, Kara, LCSW-R  
 MET Slater, Allison, LCSW  
 NAS Sloane, Laurie, LCSW  
 SI Suklevski, Julia, MSSW  
 MET Sullivan, Madonna, LCSW  
 MET Tang, Yiyin  
 SUF Trifaro, Pamela, LCSW-R  
 NAS Touma, Samya  
 QUE Tu, Jun  
 MET von Klitzing, Catherine  
 MET Wallgren, Pia  
 MET Ward, Karol  
 MET Weiler, Marti, LCSW, LMSW  
 MET Weissman, Rachel  
 MET Weitz, Cathy, LCSW-R  
 MID Weyer, Edda, LCSW-R  
 MET Whaley, Tkeyah  
 WES Williams, Patricia, LCSW-R  
 ROC Wong, Bobbie-Angela  
 MET Yuen-Sing Chan, Andrea  
 MET Zhang, Qian  
 MET Zhou, Renmengya

**CHAPTER KEY:** MET—Metropolitan, MID—Mid-Hudson, NAS—Nassau County, QUE—Queens County, ROC—Rockland County, SI—Staten Island, SUF—Suffolk County, WES—Westchester County. \*These new members joined between January 1 and October 1, 2018.

## The Self-Defeating Private Practitioner, PART 1

In the course of my years as a teacher, consultant, and supervisor to clinical social workers and other mental health professionals in various stages of their independent practices, I have taught these clinicians everything I know about how to develop and maintain a successful private practice. I have also learned a great deal about why so many of them struggle in their efforts to launch a practice and to succeed.

All of us who see clients privately are likely to hear stories about why some left treatment and came to us, or, why they did not return to the former psychotherapist. We also learn why we were chosen to be their therapist as opposed to others with whom they had consulted.

I believe that there are many ways in which clinicians, unknowingly, self-defeat in the course of their efforts to build and successfully maintain a private practice. Two major areas with which many of us have difficulty were identified and described in the first two articles for this column in *The Clinician*: problems concerning money and fees (Spring, 2010) and marketing issues (Fall, 2010).

There are many other attitudes, beliefs, and behaviors that serve to undermine clinicians who practice independently of an agency or clinic setting. This article will address self-defeating issues having to do with telephone behavior. In Part 2 (Fall 2011) I will discuss ways to avoid self-defeat in relation to your office (clean that bathroom!), communicating with referral sources (do so!), marketing your practice (do so!), and handling termination (with a more flexible approach to the process, if necessary).

### Telephone Behavior

New clients who were given several names of therapists have reported that one of the reasons they came to see me was that I was the only one who returned their phone calls, or that I returned their calls on the same day rather than two, three, or more days later. I am astonished every time I hear this.

Another set of comments concerns the phone manner of the therapist who does return the call: *Unfriendly; Cold, Abrupt; I felt like I was bothering him; S/he didn't really seem to want to answer my questions; S/he sounded to me like I must sound to the salesperson who calls me at dinnertime*; and more. It seems that some therapists are not any more comfortable talking with strangers than they are talking with us.

Prospective clients who have been referred by a known source may simply be calling to make an appointment. For many prospective clients, however, it is a fragile moment

when they finally make that often-long-delayed call to begin the process of entering therapy. This is the first opportunity to engage the client and establish an initial connection to him or her. Many prospective clients who feel uncomfortable or even put off during the first call will never make it to the first visit with that clinician.

Some potential clients call to arrange an appointment and save their many questions for the first visit. Most of us, undoubtedly, hope for and prefer this caller. However, many prospective clients, especially those who are ambivalent, fearful or seeking help under duress, will require answers to their questions on the phone before ever coming in for a session. How this conversation is handled by the therapist might well make the difference between a new client and a non-client.

If a therapist is uncomfortable or unhappy with a prospective client needing a lot of information during the first phone contact, it is likely to be evident and affect the quality of the encounter. Some callers ask difficult questions that must be handled sensitively, e.g., *What is your fee?; What is your orientation?; How long will it take?; Should I bring my spouse?; Now that I've told you a little about my problem, do you think you can help me?* Many therapists find handling questions about the fee to be quite a dilemma, for there is probably no really safe or "good" answer," at least on the phone.

Some therapists dodge the question by saying they do not discuss fees on the phone and attempt to postpone the fee discussion until the client agrees to come in. The caller may find this answer evasive and permanently end the encounter. With a direct answer, arguably a superior response, the therapist also runs the risk of an abrupt end to the encounter. The prospective client may be comparison-shopping and the stated fee may eliminate a therapist right away, or the client may make an appointment, then not show up.

It is important to remember and utilize well the social work "rules of engagement" we learned those many years ago. The first phone contact is, possibly, the beginning of treatment. Be attentive, receptive, steady, ready to be of service, and generous, so that the person who seeks you out feels recognized and accepted sympathetically as a person in trouble. One approach includes responding directly to the question of fee and also inviting the client to come in to discuss the various parameters of treatment including time and frequency, as well as fee. This conveys an interest in developing a working alliance and a flexible approach which might include a fee reduction, if necessary. 



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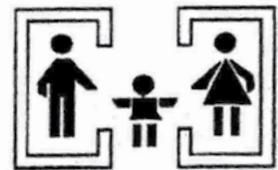
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**Optional marketing services** including website development and networking opportunities are available.

Each location includes ample parking, electronic locks for exits and entrances.

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Clinical Social Work, Inc.  
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## Clinical Social Work Association

**Membership in CSWA is an investment in your professional growth and development. Remember, CSWA is the only national organization that advocates for your interests! VISIT OUR WEBSITE AND BECOME A MEMBER TODAY!!**

CSWA has been on the front lines to ensure your ability to provide quality clinical care in the foreseeable future. We are currently actively involved in promoting clinical social work mental health services in the Essential Health Plan and protecting Medicare reimbursement. These legislative and policy changes, at the national level, directly affect your ability to practice within your individual states.

CSWA is an independent membership organization which means that social workers need to join as individuals, even if you are member of a state society. Without membership in organizations at state and national levels, your interests are not being protected. The CSWA needs your support to continue with the important work being done nationally -- advocating for the clinical social work profession.

Please join us and receive the following benefits as a result of your membership:

- Legislative advocacy for adequate reimbursement for licensed clinical social workers.
- Ongoing efforts for more effective mental health treatment coverage in the essential benefits.
- State society advocacy and consulting.
- Up-to-date clinical information that informs your practice.
- Free consultative service for legal and ethical questions.
- Discounted comprehensive professional liability insurance.

[www.clinicalsocialworkassociation.org](http://www.clinicalsocialworkassociation.org)

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