

Education ♦ Advocacy ♦ Community

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Clinical Social Workers Contribute to New Psychodynamic Diagnostic Manual

Joel Kanter, LCSW-C

The National Membership Committee on Psychoanalysis in Clinical Social Work (NMCOP) is one of the five psychoanalytic organizations collaborating over the past several years to publish the Psychodynamic Diagnostic Manual (PDM), an alternative approach to the *Diagnostic and Statistical Manual IV (DSM-IV)* used routinely by clinicians as a guide to assigning diagnoses.

Focusing on personality styles instead of symptoms, this manual offers a new perspective for assessing client functioning. Besides such familiar constructs as Dependent and Narcissistic Personality Disorders, it also includes Self-Defeating and Counter-Phobic Personality Disorders. It has an M-Axis for "mental functioning" characteristics, such as a capacity for regulation, attention, and learning, and an S-Axis which addresses symptoms more commonly associated with the DSM-IV.

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Representing Prince George's County District 25

Melony Griffith, LCSW-C Delegate in the Maryland Assembly

Margot Aronson, LCSW-C

Delegate Melony Ghee Griffith, LCSW-C, reflects on the impact her social work training and experience has on her legislative work. "I use my social work skills all the time: problem solving; connecting resources; building consensus; looking at the systems." As a social worker, she says, she starts with people: who will be affected by this change in legislation? Who might be hurt? What are the unintended consequences?

From the Maryland Legislative Council of Social Work Organizations (our coalition of the Greater Washington and Maryland clinical societies), lobbyist Alice Neily, Council co-chair Betsy Amey, and I met with Del. Griffith on a brisk morning in early December, well before the frenetic pace of the legislative session had begun.

From January to April, Del. Griffith spends long hours in Annapolis representing District 25, Prince George's County, in the Maryland General Assembly. She bal-

continued on page 4

**GWSCSW
Dinner Meeting**

Friday, March 10

Alfio's La Trattoria
4515 Willard Avenue, Chevy Chase, Md

6:30 PM ... Reception
7:00 PM ... Dinner
8:00 PM ... Speaker

Topic:
**Narratives of Grief and Bereavement:
Processes of Transformation and Growth**

Presenter: Joan Berzoff, MSW, EdD

Co-sponsored by the
Smith College SSW Alumni Association

www.gwscsw.org
or call GWSCSW at 202-537-0007

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GWSCSW NEWS & VIEWS

Margot Aronson, Editor
Pat Driscoll, Erin Gilbert, Joel Kanter, Susan Post,
Connie Ridgway, Diana Seasonwein, Mary Lee Stein

News & Views is published four times a year:
March, June, September and December. The
deadline to submit articles and advertising is
the first of the month prior to publication.

Articles (not to exceed 300 words) and letters
expressing the personal views of members on
issues affecting the social work profession are
welcome and will be published at the discretion
of the editorial board.

Signed articles reflect the views of the authors;
Society endorsement is not intended.

For advertising rates see page 27

The next issue will be published
June 2006 and the deadline is April 28.

Email articles and ads to gwscsw@gmail.com

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President's Message

Diana Seasonwein, LCSW-C

One of my favorite sayings is "Life is what happens while you're busy making plans." We all operate with the assumption that we are in control, but in fact, none of us has very much control of events. I was in the middle of writing my President's report when I received a phone call about Society business that had to be dealt with right away. The situation was resolved in what I think was a successful way. However, it pointed out what I already knew intellectually: There is a learning curve to being president. Dunh! And what I've learned today is the importance of communicating with all of our members. Communicating, as we so often have to remind ourselves, is as much about listening as speaking. However, in order for me to listen, I have to hear from you. All of you. Please, let me know what your committees are doing and when. Let me hear your ideas for new projects. Let me hear what I'm doing right, and what needs improvement.

And now I return to my regularly scheduled president's letter.

I have exciting news: We have hired Jan Sklennik as our administrator. Jan has been our partner behind the scenes in putting the newsletter together as well as the directory. Those of us who have had the pleasure of working with her are thrilled that she was available to take on this larger task. Jan has our institutional history and she cares about our society. When you call our number, Jan will be the person answering the phone. She will also be the person picking up all the mail at our new post office box.

Because Jan will be working for us from her own office, we have moved all of our files to her office. Before we shipped them off to her, we tried to go through all of them. In the process, we have discovered some interesting and useful Society history and plan to build on that which came before us. We have not finished the process yet. My hope is that by the time I leave the president's office, I will have produced a set of guidelines for new officers and committee chairs. Of course, we will still keep all the material in the files, but the Society will also have the compact version. I will be able to use some of the material I found in the files, as well as more recent material from our current officers and committee chairs.

An update on the prepaid legal plan: We are in the process of lining up lawyers in each of our three jurisdictions. Lawyers who have expertise in mental health/social work law. As soon as we get the new plan in place, we will let you know. I know that this is a benefit that many of you have requested and have said is important to you.

Being president of our Society is both rewarding and challenging. One of the biggest rewards for me is the feeling of support that I receive from my executive committee and from committee chairs. This experience reinforces my belief that if you want to be part of something, you need to get involved. I can't stress this enough. Thanks to all of you who have given of yourselves, your time, your energy and your ideas. ❖

Treasurer's Report

Janet Dante, LCSW-C

During the period of transition, shifting our administrative records from the office at the Clinical Social Work Institute to that of Jan Sklennik, our longtime database manager who has taken over our administrative tasks, some of your payments were lost or misplaced. If you have experienced any difficulties, we hope to have them all cleared up in the next few weeks. If you think you have a problem that has not been addressed, please contact Jan at 202-537-0007 or gwscsw@gmail.com

GWSCSW is still doing fine financially, but because of the confusion brought on by the move, I don't have all the exact details as in previous reports. Next newsletter, when everything is back to normal, I will have financial figures for you. ❖

Update

The Grown-Ups

Grace Lebow, LICSW

Our group of social work retirees is now open to new members. We have two more meetings scheduled this year and then will resume again in the Fall with a series of six monthly meetings.

Six of us have been meeting monthly since September as an informal discussion and support group, exploring the impact of our professional lives on this challenging later phase of our lives.

We have been getting acquainted with one another and with our past work experiences, and focusing on the present "My Time" stage of life. For some this means looking at future plans to retire, for others it is talking about past or recent retirement. It is interesting to hear the various reactions and dilemmas this retirement stage poses for each of us. It is equally interesting to hear about the variety of volunteer work and other pursuits of the Clinical Society "Grown Ups". Please phone me (301-652-4026) if you would like to attend our next meeting on March 6 or on April 3 at 5:00 PM at my home in Chevy Chase.

Grace Lebow, LCSW-C, is the Retiree Liaison to the GWSCSW Board. With GWSCSW member Barbara Kane, LCSW-C, she launched Aging Network Services in 1982, and the two joined Irwin Lebow to co-author Coping with Your Difficult Older Parent.



presents

Working with Dissociation in Traumatized Patients

Jon Frederickson, MSW

Co-sponsored with the Washington School of Psychiatry

The presentation will focus on a videotaped therapy case in the early stages of treatment, demonstrating how to build ego capacity in a fragile patient. Case vignettes will illustrate how to identify dissociation, how to help patients see dissociation, how to help patients recognize and regulate their anxiety, and how to work with projection.

Saturday, April 29

9:00 AM to 5:00 PM

Washington School of Psychiatry

Watch for a mailing or visit www.gwscsw.org

Call GWSCSW at 202-537-0007

GWSCSW Mentor Program Professional Development Seminars for Clinical Social Workers

Saturday, March 25, 2006

10:00-11:30 am

Saturday, April 22, 2006

10:00-11:30 am

6917 Arlington Road, Suite 224

Bethesda, Maryland 20814

(seminars at this location will be facilitated by Kate Scharff)

1495 Chain Bridge Road, Suite 202

McLean, VA 22101

(seminars at this location will be facilitated by Adina Shapiro)

Cost: Free of charge

To Register, call:

Kate Scharff, 301-951-3776 (MD)

Adina Shapiro, 703-761-3939 (VA)

Del. Griffith, continued from page 1

ances her political role with her full time job as Director of the Prince George's County Center for Healthy Life Style Initiatives (CHLI) and her busy family. (She describes her sons Lloyd, 14, and Cornelius, 10, as "the light of my life.")

Politics was not on the horizon

"I grew up in an air force family, always moving," she told us. Born in Texas. High school and college in Montana. She came East for an MSW at Howard University (1987), and here she decided to put down roots.

"Politics was not on the horizon, but then I bought my first house. It was in Suitland, Maryland, and I loved the neighborhood. But I'd barely moved in when I was robbed... four times! And I decided I didn't want to move." Instead, she worked with others to start a Neighborhood Watch program.

"That was the beginning. We met with other Neighborhood Watch groups and found that our block wasn't the only one with these problems; it was citywide." She was asked to take the message to wider community meetings, where she got to know local resources and civic organizations. Soon she was working to organize a Suitland Crime Action Team, equipped with federally funded cell phones and neighborhood police patrols.

One reason it was hard to get the County to invest its resources in Suitland, she surmised, was that there was only a 20% local turnout at election time. She became a voter registration volunteer and started a voter education campaign.

By now she was being urged to run for County Council, but it was the State level that beckoned. After an unsuccessful first run for the Assembly, she ran a state-wide voter registration drive for the Democrats. While she lost in a mid-term school board election, she garnered an impressive 4,600 write-in ballots and gained the political attention she needed to win in the 1998 election.

Her proudest political achievement, she says, came in 2004 when she was chairing a Joint Working Group on Public School Construction. On a bill that was at first strongly opposed by labor, Del. Griffith requested the Assembly's "phenomenal policy analysts and research staff" to develop an amendment and used

her social work skills to bring everyone to the table in agreement. "And this legislation had the potential of helping everyone: the children, the teachers, the housekeepers, the laborers... the whole community."

Elected in 1998 and again in 2002, Del. Griffith now serves on the Appropriations Committee and the Special Joint Commission on Pensions. Her current subcommittees include Transportation and the Environment; Child Welfare Workgroup, and (vice chair) the Capital Budget Subcommittee. During her first term, she was on the Joint Committee on Children, Youth and Families "and it would have been obvious, with my social work background, to stick with that. But I've never wanted to be a stereotype—the typical female, typical black, typical social worker. No, I want to be able to stretch myself," she says.

Still, she'll be paying close attention to what's proposed for child welfare, for juvenile services, for prevention and health education programs. She'll also be following the trail of those infamous "excess" social work license dollars taken from the Board of Social Work Education last year for a proposed Child Welfare Academy that hasn't materialized.

Most of all, Del. Griffith says, she wants to be seen as "fiscally prudent and socially responsible." Pay-as-you-go makes sense to her. "It's the balance that's so important," she reminds us: on the one hand, the distribution of resources but on the other, as a fiscal leader, protecting resources.

Before our meeting ended, we asked what Del. Griffith would like from Social Workers. Her answer was clear: get out there; participate in career days in elementary schools and high schools; let people know what social workers do. "We paid to learn how to be social workers; I want people to know and respect that. Too many people think of social workers only in crisis." She added, "And by the way, we have to attract new life to the profession!"

Clinical social worker, community activist, delegate to the Maryland Assembly, wife and mother. Melony Griffith promotes healthy lifestyle choices as CHLI Director and she herself lives a life rich in family, community, and service. It will be a pleasure to watch—and support—her progress in Maryland politics. ❖

GWSCSW past president Margot Aronson, LICSW, is editor of News & Views. She is currently serving as temporary chair of the Legislative Committee, and urges interested members to become involved.

PDM, continued from page 1

Local psychoanalyst Stanley Greenspan, MD, chaired the Task Force that developed the PDM. Dr. Greenspan, a professor of psychiatry and pediatrics at the George Washington University Medical School and supervising child psychoanalyst at the Washington Psychoanalytic Institute, is co-author of *The Child with Special Needs* and many other books and articles.

Social worker Barbara Berger was a member of the PDM coordinating committee. Other social workers contributing to the project include Judy Kaplan, Tom Kenemore, Joseph Palumbo, Amy Eldridge and David Phillips.

In addition to NMCOP, the American Psychoanalytic Association, the International Psychoanalytic Association, the Division of Psychoanalysis of the American Psychological Association, and the American Academy of Psychoanalysis and Dynamic Psychiatry participated in producing the PDM.

The official publication date of the PDM is May 2006, but it can be ordered from www.pdm1.org or Amazon.com. (Note: All orders purchased through the Amazon link on our website, www.gwscsw.org, will benefit our Society.) ❖

The Psychodynamic Diagnostic Manual is a diagnostic framework that describes the whole person—both the deeper and surface levels of an individual’s personality as well as his/her emotional and social functioning. This framework opens the door to improvements in diagnosis and treatment of mental health disorders and to a fuller understanding of the functioning of the mind and brain and their development. The goal of the Psychodynamic Diagnostic Manual is to complement the efforts of the Diagnostic and Statistical Manual of Mental Disorders and the International Classification of Disorders’ over the past 30 years in cataloguing symptoms and behaviors.

Press release
American Psychoanalytic Association

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David E. Scharff, M.D., Course Chair

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Tuition:

The annual tuition for this program is \$1,350. Tuition may be paid in monthly installments of \$150; other payment plans can be worked out on an individual basis as needed.

Information/Registration:

Call the Administrative Chairs, Kate Scharff or Jane Prelinger, at IPI Metro, 301-951-3782.

Email your questions to:
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www.ipimetro.org

Issues of sex and sexuality are ubiquitous in life and in psychotherapy. Nevertheless, most mental health training programs do not give sex the attention it deserves. Many of us—even the seasoned among us—feel awkward or untrained in dealing with sex and sexual themes in our practices, creating a safe psychological space for sexual ideas to emerge, or in helping our clients with sexual problems. In recognition of the need to re-open and update our examination of sex and sex therapy, the Metro Washington Center of the International Institute of Psychotherapy (IPI Metro) is pleased to offer this rich and unique curriculum, taught by leaders in the field of human sexuality.

This course will meet one Saturday per month for nine months (September–May), from 9:00 am to 1:30 pm. The exceptions are the Sexual Attitude Reassessment,* which inaugurates the program and runs for two days over the weekend of September 16–17 (Saturday and Sunday) from 9:00 am to 4:00 pm.

*Sexual Attitude Reassessment (SAR): This two-day experiential workshop gives participants the opportunity to examine their sexual values and attitudes in a confidential setting, and to share their thoughts, feelings, and experiences with professional colleagues. Participants should be aware that they will be exposed to explicit sexual material. Those who wish to register for the Sexual Attitude Adjustment weekend only may do so. *The cost of the weekend alone is \$150.*

Course Objectives

1. Participants will develop an enhanced awareness of their own feelings and ideas about sexuality, and a comfort in dealing with sex and sexuality in their clinical practices.
2. Participants will gain an introductory knowledge of:
 - Human sexual development through the lifespan (including childhood sexual trauma)
 - How to take a sexual history and formulate a psychosexual assessment
 - Therapist/client boundaries around the discussion of sexual issues
 - The range of sex therapy interventions (and when to make a referral to a specialist)
 - Male and female sexual dysfunction
 - Paraphilias and sexual compulsions
 - A medical view of sexual dysfunction (including the use of medications)
 - Sexual issues in clinical work with gay, lesbian, bisexual, and heterosexual couples
 - Diagnosing, understanding, and treating gender identity disorders
 - Sex in monogamous and non-monogamous relationships
 - The integration of psychodynamic and cognitive behavioral approaches in the treatment of sexual problems
 - Sex and the physically disabled

IOM Mental Health and Substance Abuse Study: Implications for Clinical Social Work Practice

Connie Ridgway, LICSW, LMT

I was recently asked by the Clinical Social Work Federation to attend a press event—the release of the National Academies of Science Institute of Medicine findings regarding the need for a “broad strategy to improve quality of health care for mental health and alcohol and drug problems.”

The event was packed. The committee list was impressive. The buzz was palpable. But the big question was: is this just another study that has a lot of good ideas but will be shelved, or does it have enough teeth and ability to be implemented?

Watch out, clinical social workers: if these recommendations *do* get implemented, we need to be armed and prepared—the operative word is “evidence-based treatment.” We need to be able to prove that what we do works, based on research and/or other evidence.

The study, *Improving the Quality of Health Care for Mental and Mental and Substance Abuse Conditions*—now online at www.nap.edu—supported a holistic view of health care, and emphasized the importance of addressing mental health and substance abuse (M/SU) disorders in order to improve general medical conditions and overall health. It acknowledged the differences between M/SU care and general medical care—one big difference being the preponderance of individual practitioners in mental health treatment.

My Take on What’s Important

What are the implications for clinical social workers? Many of these recommendations we already do, as good clinicians. Below are three areas which we need to watch carefully.

We will need to prove that what we do works for our clients. We need to advocate for research that shows the effectiveness of different types of psychotherapy. We need to develop relationships with organizations funding such research.

As a person who appreciates knowing what works, I like this statement, but am also very wary of it. Insurance companies can, and have, turned this into a mandate for short-term, “cookbook” type psychotherapy.

In fact, one such insurance company representative at the event asked the panel how, in effect, to weed out those clinicians who don’t practice evidence-based treatment methods.

Psychodynamic methods or intuitive methods or faith-based methods or traditional culture-based methods could be seen as outside of the box of “evidence-based” treatment. Those of us who practice “outside the box” need to think inside the box enough to use the right lingo, and to push for research and other forms of evidence that show the efficacy of such treatment methods (Note: NIMH was *not* a funder of this Institute of Medicine Study and Report.)

The report stated that, “Numerous studies have documented a discrepancy between Mental Health/Substance Use (M/SU) care that is known to be effective and care that is actually delivered...Poor care has serious consequences for the people seeking treatment, especially the most ill.” (*Improving the Quality of Health Care for Mental and Substance-Use Conditions*, prepublication copy, p. 5.) That sounds good, but there may be a tendency to see all methods that have not been proven or “evidence-based” as “poor care.” One way we can prevent this from happening is to be involved in the process—to advocate for inclusion of various interventions in research, and to push for funding of research on psychotherapy.

We need to prepare for a world in which information is shared in a large-scale way. The biggest challenge will be protection of our clients’ privacy and confidentiality. We should find out as much as we can about the National Health Information Infrastructure (NHII) and get involved in its design and implementation.

We need to show that competency standards for our profession do not suffer because of the isolation of solo practitioners. ❖

Connie Ridgway, LICSW, LMT, is a licensed clinical social worker and a licensed massage therapist in Washington DC and Alexandria VA. Her practice, called Full Circle Creative Healing, integrates both mind and body therapies, encouraging our natural state of wholeness. She has been a member of GWSCSW since 1992.

Ethics and Internet-Based Therapy

Robert Fenton, MSW

The GWSCSW Ethics Committee recently researched a question from a member on whether it would be a violation of the Clinical Social Work Federation (CSWF) Code of Ethics to engage in on-line counseling. We believe this information may be of interest to other members who might also be considering conducting internet-based therapy.

A CSWF 2001 position paper on text-based counseling (www.cswf.org/www/therapy.html) states unequivocally that the Federation is opposed to the practice of internet-based treatment, defined as "psychotherapy services that are limited to text-based exchanges between therapist and client." The position paper states that the Federation is not expressing a position on other "forms of electronic communication when used as an adjunct to the therapeutic process," and the paper allows for future amendments to the stated position "as new forms of telehealth develop."

The best guidance currently available to Society members regarding online/electronic treatment modalities is this 2001 position paper. Keith Myers, chair of the CSWF Professional Standards Committee, notes that it is "not a technical violation of the Federation's Code of Ethics to engage in internet based therapy." He points out that the position papers of the Federation "are intended to fill in the gaps between revisions of the Code and are as such, advisory."

In the case of Internet Therapy, Mr. Myers reported that over 70% of the Federation's board voted in favor of adopting the 2001 position paper with its strong opposition to Internet text-based therapy.

Mr. Myers suggests that if a legal issue came up for a clinician practicing Internet text-based treatment, he or she would have a difficult time raising the defense that the code of ethics is silent on the issue because of the existence of the position paper.


It is strikingly clear that there is no unanimity among mental health professionals about the efficacy, appropriateness, and ethicality of online counseling or online psychotherapy in any of its many manifestations. For example, the International Society for Mental Health Online, a group formed in 1997 to "promote the understanding, use and development of online communication, information and technology for the international

mental health community" is a strong advocate for on-line clinical work. However, even with their strong advocacy, the ISMHO has a provocative caveat nestled in its descriptive material:

"ISMHO does not endorse or hold any official position about the legitimacy or usefulness of e-therapy (or online counseling)."

The wealth of online material from ISMHO makes it clear that their members see themselves as ardent polemicists for online practice. However, the "official" position of this organization ultimately leaves it up to clinicians to deal with the ambiguities and paradoxes of online practice. An example of one of these paradoxes is the issue of licensing as it relates to on-line clinical work: there is always the chance that the person being treated may live in a jurisdiction other than the one in which the clinician holds a license.

We expect ongoing dialogue within our clinical social work community on *when-if-how* to incorporate Internet psychotherapy into our practices. ❖



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The National Academies of Practice

The National Academies of Practice (NAP) was founded in 1981 in recognition of the need for interdisciplinary collaboration in healthcare. It includes distinguished practitioners and scholars from all the primary health professions: dentistry, medicine, nursing, optometry, osteopathic medicine, pharmacy, podiatric medicine, psychology, social work, and veterinary medicine. Selection is a significant honor—each field is limited to no more than 150 members.

Each year, the NAP sponsors a forum on aspects of interdisciplinary collaboration. This year's meeting focused on pain management and malpractice, with participants drafting policy advisory statements.

Three of our colleagues—GWSCSW's own Audrey Thayer Walker; Abbie Grant, president of the Clinical Social Work Federation (CSWF); and Anne Segall, chair of the CSWF Education Committee—were recently inducted into the NAP.

Other honorees include our GWSCSW past president Golnar Simpson, who is also a past president of CSWF and dean of the Clinical Social Work Institute, and Laura Groshong, chair of the CSWF Government Relations Committee. GWSCSW guest speakers William Meyer and Joan Berzoff have also been so honored.

The NAP website can be found at www.napnet.us. ❖

As a member of GWSCSW, you are also a member of the Clinical Social Work Federation (CSWF).

One of the benefits of membership in the Federation is access to the **Members Only** pages of the Federation Web site:

www.cswf.org

If you are a member of GWSCSW and do not already have a password to access the CSWF Member Only pages, please contact the GWSCSW office to get one.
202-537-0007 • gwscsw@gmail.com

The Washington Center for Psychoanalysis, Inc.

(formerly the Washington Psychoanalytic Society)

Scientific Meetings & Workshops Spring 2006

Fourth Annual Raphling Memorial Lecture

Friday, March 31, 2006 (Register by Monday, March 20)

Title: *The Faultlines and Vulnerabilities of Masculinity*

Speaker: Nancy Chodorow, Ph.D.

Discussant: Stephen Rosenblum, M.D.

Location: George Washington University
Ross Hall, Room #117
2300 Eye Street NW, Washington DC

Time: 8:00 pm

Cost: Free

April Scientific Meeting

Friday, April 21, 2006 (Register by Monday, April 10)

Title: *Love and Power*

Speaker: Ethel Person, M.D.

Objectives: 1) Identify selected psychoanalytic concepts and issues as applied to eroticism in the transference
2) Identify basic technical issues in the therapist's management of eroticism in the transference

Location: One Washington Circle Hotel
One Washington Circle, NW, Washington DC.

Time: 6:30 pm Cocktails, 7:00 pm Dinner
8:15 pm Paper and Discussion

Cost: \$50

CEUs: 1.5 CEUs

Prior Registration is Required

Register online: www.washpsa.org

Call: 202-237-1854

Email: center@washpsa.org

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CSWF

The Clinical Social Work Federation

Abigail Grant, LISW

Work continues on plans for the transition of CSWF from a federation of societies to a membership association representing the voice of clinical social workers on a national basis. Early in February the transition committee met in Alexandria to start solidifying the thoughts and ideas generated through conference calls by three different workgroups.

Kevin Host, CSWF president elect, chairs the committee. The composition of the three workgroups is as follows:

- Mission, Vision Statements and Name considerations (Robin McKenna, South Carolina president; Chad Breckenridge, past CSWF president and past Minnesota president)
- Clarification of relationship of existing/future state societies with the association (Gail Nagel, past South Carolina president; Stephanie Swan, Georgia president)
- Governance and Bylaws (Kevin Host, CSWF president elect; Drew Pledger, North Carolina president; Abbie Grant, CSWF president)

Society presidents and representatives will be kept updated as the committee's work progresses, so that they can keep their members informed. Ideas and suggestions are welcomed and should be addressed to Richard Yanes at cswfed@hotmail.com. ❖

Abigail Grant, LISW, MSW, is president of the Clinical Social Work Federation. Her practice is in Cleveland, Ohio.



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NASW

National Association of Social Workers

Joyce Higashi, LICSW, DCSW

DC-Metro Chapter has been sponsoring a number of stand-alone continuing education programs on a variety of topics this year.

Dr. Stephen Levin, MD, will join us on February 25 to speak on *Love & Sex: A Workshop for Mental Health Professionals*.

Our Social Work Month program on March 31 will be a day-long event featuring speakers on *Advocacy and the Elderly* in recognition of our national focus on aging. The noon luncheon will celebrate our Annual Chapter Awards presentations and recognize the recent DC Council legislation that permits childcare payments to grandparents. DC Council chair Linda Cropp will be our speaker and Veronica Pace, executive director of the Office of Aging of the District of Columbia, will also be present.

On April 29, we are bringing Sharon K. Farber, Ph.D, from NY for a day-long program on *Understanding & Treating Self-Harm Patients: When the Body is the Target*. On May 6, clinical social workers Jacqueline Garrick and Anne M. Rensberger will be presenting a six-hour workshop on *The Social Work Response to Obesity in America*.

We are currently engaged in negotiating a date for an ethics class in May or June.

Finally, we are working with Mila Tecala, who is developing yet another one of her creative classes, this one on designing a successful private practice in today's economy. Please join us when you can! More information at www.naswmetro.org or call Richard at 202-336-8395. ❖

Joyce A. Higashi, DCSW, is executive director of NASW DC-Metro chapter.

DID YOU KNOW... A purchase from
Amazon.com made through the GWSCSW website
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Go to www.gwscsw.org and click the Amazon button!

NMCOP

National Membership Committee on Psychoanalysis

Sarah Pillsbury, DSW, BCD

As the area chair of NMCOP, I am in the process of forming a new study group. Please contact me at (202) 332-9473 or email me at Psarah@aol.com if you have particular ideas or suggestions for topics and times. I would appreciate hearing from you by March 15, so that we can get a new group started soon. There will be no charge, and we anticipate being able to offer CEUs.

The long standing NMCOP study group on "Psychoanalysis and the Brain as it Plays Out in Social Work Clinical Practice" is still going strong. ❖

Sarah Pillsbury is the NMCOP liaison to the GWSCSW Board.

A new presentation from the Beyond the Blame series...

MARRIAGE: End the Blame, Not the Bond

with Dr. Daniel V. Papero

Bowen theory views the marital relationship as a part of a larger family system. How that system functions influences the nature of the marriage, and the marital relationship in turn influences the broader family system. This presentation will describe the marital relationship through the lens of Bowen theory and discuss clinical approaches to a troubled marriage using Bowen theory.

a one-day conference offered in two locations:

Friday, March 24

VA Tech - NoVa Center
7054 Haycock Road
Falls Church, VA

Saturday, March 25

Community College of Baltimore
Essex Campus, 7201 Rossville Blvd
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8:30 AM - 4:30 PM

CEUs available

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THE INSTITUTE OF CONTEMPORARY PSYCHOTHERAPY & PSYCHOANALYSIS

presents

Flying Blind in Psychotherapy

with

Owen Renik, PhD

Saturday, March 11, 2006

8:30 am – Coffee & Registration

9:00 am to 12:30 pm – Program

Bethesda Marriott Hotel

5151 Pooks Hill Road

Bethesda, Maryland

Dr. Renik will use a clinical case to demonstrate his view of how psychotherapy works, in a presentation which will emphasize the role of self-disclosure by the therapist and illustrate the essentials of a truly collaborative treatment relationship. He will describe how certain principles of technique can guide a therapist toward providing needed "corrective emotional experiences," even though the therapist cannot know in advance what the specific needs of a given patient are.

Dr. Renik will extend his discussion to the problem of "How to Get Out of an Impasse." When self-examination and consultation with colleagues fail to help a psychotherapist resolve a treatment stalemate, what can the therapist do?

Dr. Renik will show how the same principles which guide the therapist when "flying blind" can be applied to the impasse dilemma.

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Three CE credit hours will be awarded to participants.

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ADVOCACY & LEGISLATION

■ FEDERAL

Richard P. Yanes, Esq.

Without opposition or fanfare, the mental health parity statute first passed in 1996 and due to expire on December 31, 2005, was extended by the Congress for an additional year. Riddled with gaps and exceptions, the existing law requires group health plans that offer mental health benefits to set the same annual and lifetime caps on mental health coverage that exists in the plan's medical and surgical sections.

Cost is frequently cited as an insurmountable barrier to mental health parity. However, a recent independent study of parity as instituted in the Federal Employee Health Benefits (FEHB) Program since 2001 concludes there has been negligible impact on plan costs, with little or no impact on plan quality of care. Access to and utilization of mental health and substance abuse services showed no increase for adults and children, while substance abuse services alone showed a slight but consistent increase across all plans.

In fact, it appears as if premium increase for mental health services in FEHB policies amounted to less than 1% and may be as low as 6/10ths of a percent. This confirms a previous analysis conducted by the Office of Personnel Management, which attributed most of the increase in cost to improved benefit levels.

The FEHB study can be found at <http://aspe.hhs.gov/daltcp/reports/parity.htm>. ❖

Richard Yanes, Esq., is executive director of the Clinical Social Work Federation.

■ MARYLAND

Alice Neily

The 2006 legislative session began on Jan 11 with great acrimony, as an unprecedented twelve bills—passed by the 2005 legislature but vetoed by Governor Ehrlich—were reinstated with overrides voted along strictly partisan lines. In particular, the WalMart bill was highly divisive, leaving political wounds.

Construction on the floors of the House building initially slowed the introduction of new bills. However,

as a rule more bills are introduced in the fourth year of any term than in any other, and one can expect that by April 11, when the session ends, legislators will have reviewed about 4,000 bills.

The status of any initiative can change in the course of a few hours. As of this writing, several proposals will be of special interest to clinical social workers. Your legislative committee will keep you informed via your listserve (gwscsw@yahoo.com), and let you know when it is time to make calls to your representatives.

First, there are a handful of proposed bills concerning the way in which providers are compensated for services, designed to make the reimbursement process easier and to make it more difficult for insurers to deny services.

Second, certain proposed policy changes would affect the Maryland social work scope of practice, enabling clinical social workers (with appropriate training) to participate in the competency evaluation process for children who are in the court system, and possibly in the evaluation of disability (re: mental health) in the Workers' Compensation system as well.

Finally, certain initiatives would bring clients greater access to the mental health system. Among these proposals are a cost of living adjustment (COLA) in pay rates for community-based mental health providers, a study of Case Rates for children psychiatric rehabilitation programs, and a bill to increase funding for secondary prevention services to children through local management board (LMB) appropriations. Still another proposal would mandate pre-authorization for emergency psychiatric hospitalizations to a two hour time period and provide relief in the form of longer authorization periods.

Much that happens in Annapolis this year will be setting the stage for change after the November election. If LCSW-Cs are to be invited to the decision-making table in the future four years, visibility this year is crucial. Please support your legislative committee with a strong grassroots showing of calls, notes and emails in response to legislative alerts. ❖

Alice Neily of Capital Consultants of Maryland is the lobbyist for the Maryland Legislative Council of Social Work Organizations, a coalition of GWSCSW and the Maryland Society for Clinical Social Work.

■ VIRGINIA

Christopher Spanos

Virginia's legislators convened on Wednesday, January 11, 2006, so that Governor Warner could present a state budget for the next biennium and deliver his final State of the Commonwealth address. The Governor then left office at noon on Saturday, January 14, and the General Assembly session began with a newly-elected Governor, Lieutenant Governor and Attorney General, along with a 100 member House of Delegates. (The forty-member Virginia state Senate will stand for election in 2007.)

Alert: If passed, 2006 proposal would affect social work licensure

This year's Assembly has before it a proposal to require public social workers to be licensed by the Commonwealth. The proposal provides that, effective July 1, 2009, no person may use the title "social worker" or be designated as a "social worker" without a license issued by the Board of Social Work. In addition, the bill increases the membership of the Board of Social Work from seven to nine members, authorizes the Board to establish specialties within the profession and to issue licenses accordingly to qualified persons, permits the Board to issue licenses without examination to a person who has been continuously employed as a social worker for at least 10 years, and directs the Board to promulgate emergency regulations to conform its existing regulations to the new law.

[Breaking news: There is also a proposal to change the LCSW designation to "licensed professional social worker."*]*

Your legislative committee representatives for Virginia, Alice Kassabian and Dolores Paulson, have been participating in discussions with your lobbyist and the legislative committee of the Virginia Society for Clinical Social Work regarding pros and cons of this proposal, and planning lobbying strategies. They will keep you updated via your listserve (gwscsw@yahoo.com) on the status of the above and on other proposals relating to mental health and clinical practice issues, as they emerge. ❖

Government and Public Affairs Counselor Christopher J. Spanos of the Spanos Consulting Group is the Virginia legislative lobbyist for GWSCSW and the Virginia Society for Clinical Social Work.

GWSCSW Legislative Panel

The Legislative Panel is a newly created resource for the GWSCSW Legislative Committee. Panelists with knowledge in categories such as child welfare, juveniles, geriatrics, chronically mentally ill, Medicare, etc) have agreed to respond to queries from committee members about particular bills and initiatives. The response may be in the form of a few words ("This bill is a great idea; please support it"), or a paragraph that our lobbyist could add to testimony, or even an offer to testify in person.

Thanks to the following for volunteering:

Emily Brown on legislation regarding divorce-related issues and extramarital affairs.

Connie Ridgway on legislation regarding social work issues in the District

Martha Horne on legislation regarding juveniles, suicide prevention and geriatrics

Vaughn Howard on legislation regarding addictions

Tybe Diamond on legislation regarding disaster preparedness

Judy Gallant on legislation regarding children

Bonnie Gallagher on legislation regarding HIV/AIDS

Judy Ratliff on legislation regarding geriatrics

Joyce Harrison on legislation regarding domestic violence

Jackie Urow on legislation regarding juveniles and on Virginia issues

To volunteer for the Panel, email gwscsw@gmail.com. (Note that this is a no-strings-attached panel; the committee understands that sometimes a response may be "No opinion," or even, "Sorry, I don't have time to take a look at the bill.") ❖

CLINICIANS & MONEY

Health Savings Accounts: An Alternative for Clinicians to Consider

Peter Cole, LCSW

Bearing in mind the high cost of health insurance for clinical social workers in private practice, I thought it might be useful to bring readers up to date with the new Health Savings Plans. These plans may save you money if you are in private practice or if your employer does not pay for your health insurance. Health Savings Accounts along with accompanying high deductible health insurance (HSA plans) have replaced the old Medical Savings Accounts (MSA plans) in federal legislation that was signed in December 2003. They represent a considerable improvement over the old MSA plans.

Here is how HSA Plans work:

First, you purchase a high deductible health insurance plan that is specifically designed to qualify for the Health Savings Plan. You are then qualified to open a Health Savings Account—which is a tax-sheltered savings account similar to an IRA. However, unlike an IRA (which is for retirement savings), the purpose of a Health Savings Account is to save for healthcare expenses. Deposits are tax-deferred and can be withdrawn tax-free and penalty free to pay for qualified healthcare expenses. HSA funds can be readily withdrawn by check or debit card to pay routine medical bills and expenses such as OTC and prescription medicines with pre-tax dollars. If you have high medical costs in a given year, your health insurance kicks in once your deductible is met. Premiums on high deductible health insurance are generally considerably less expensive than premiums on health insurance with low deductibles.

One group of social workers who may find these plans favorable are folks who supplement traditional medicine with alternative approaches that are not covered by most health insurance plans. Such consumers can now pay for treatments such as acupuncture or chiropractic with pre-tax dollars from their HSA. (Note: consult with a qualified tax accountant to make certain that your medical expenses qualify for Health Savings

Account tax-free treatment.) Psychotherapy is also allowed.

HSA funds can be used to pay for expenses associated with the diagnosis, cure, treatment or prevention of illness or injury. This includes doctor's office visits, medications (both OTC and prescription), dental expenses (including orthodontia), and vision expenses. Cosmetic surgery usually does not qualify, but laser eye surgery does qualify. Another interesting feature is that you can use HSA funds to pay long-term care insurance premiums.

If you have money left in your Health Savings Account at the end of the year, those funds stay in the account and continue to earn interest on a tax-favored basis.

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These funds can be used to pay for future medical expenses, or can be saved for retirement. If there are funds in the account when you reach age 65, those funds can be used for retirement expenses penalty free in much the same way IRA funds are used in retirement.

How much can be contributed to an HSA?

The IRS has issued the official maximum contribution levels for health savings accounts in 2006. For taxpayers with self-only coverage, the maximum 2006 contribution is \$2,700; for family coverage, the maximum is \$5,450. Limitations on contributions are based on how many months the coverage for a qualified health plan is active. For every month that a qualified health plan is active, 1/12 of the maximum annual allowable contribution can be deposited into an HSA.

A good source of information on HSAs is the US Dept of Treasury website. Go to www.treas.gov and enter HSA in the search box. It will bring up a list of articles with valuable and up-to-date information. Major health insurers such as Blue Shield, Aetna and Blue Cross have useful information as well.

Improvements from the old MSA plans include the following:

- The new HSA plans are open to anyone who has a qualifying high deductible health insurance policy (the old MSA plans were available only to the self employed and small businesses).
- Lower deductibles on qualifying health insurance are available than in the old MSA plans.
- HSA plans are not limited to the self-employed and small businesses, as the MSA plans were. Now, practically anyone with a qualifying high deductible health insurance policy can open an HSA.

It is possible that an HSA plan along with a high deductible health insurance policy could save you money both on taxes and on your healthcare expenses. With today's high health care costs, an HSA plan is an option you may want to explore. ❖

Peter Cole, ChFC, LCSW, is director of Insight Financial Group. He specializes in financial planning for psychotherapists throughout California and is the author of Mastering The Financial Dimension of Your Practice: The Definitive Guide to Private Practice Development and Financial Planning. He can be reached at 800-426-1399.

THE INSTITUTE OF CONTEMPORARY PSYCHOTHERAPY & PSYCHOANALYSIS

presents

Affective Neuroscience: The Implications for Psychotherapy

with

Douglas Watt, PhD

Saturday, April 29, 2006

8:15 am – Registration

9:00 am to 4:30 pm – Program

Bethesda Marriott Hotel
5151 Pooks Hill Road
Bethesda, Maryland

Anyone who attended ICP&P's conference on the role of Spirituality in Psychotherapy and Psychoanalysis (October, 2004) will remember Dr. Watt's lucid illustration of the compelling links between human spirituality and the tenets of contemporary science. At ICP&P's Twelfth Annual Conference, Dr. Watt will begin with an explanation of the neuropsychological underpinnings of prototype emotional states such as fear, rage, separation distress, play, and attachment. He will show how these prototype emotions are blended with cognitive structures to create complex "cognitized" emotions such as shame and guilt. He will also touch on work illuminating the processes underlying empathy and their implications for the practice of psychotherapy.

Dr. Watt serves on the faculty of the Boston University School of Medicine, the Boston Graduate School of Psychoanalysis and the Institute for the Study of Violence. He has published more than two dozen articles, as well as many book chapters and theoretical overviews on emotion, consciousness, and other issues in clinical and theoretical neuroscience, including a recent review of the implications of cognitive and affective neuroscience for understanding human spirituality. He serves on the editorial boards of several journals that deal with the neural substrates of emotion, cognition, and conscious states.

INFORMATION

Brochures for this conference will be mailed to all on ICP&P's mailing list in mid-March. If you are not on the mailing list and wish to be added, send the pertinent information to ICP&P:

3000 Connecticut Avenue NW, Suite 108-A
Washington, DC 20008.

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PRESIDENTIAL PROFILES

Profiles of people who have made our Society great—our past presidents

Golnar Simpson

Connie Ridgway, LICSW

"I like being a pioneer," Golnar Simpson told me on a recent Saturday in her office as Dean at the Clinical Social Work Institute. "The threads of my life story are about establishing places and then moving on." Our Society has been graced by Golnar's pioneering since 1983--she has worn various hats that have all spelled more recognition, respect and achievement for social workers.

I met Golnar in 1992, the last year of my studies at Catholic University's MSW program. She was invited to talk about the brain—a subject she almost single-handedly introduced to social workers, at a time when few people other than neurobiologists were talking about it. She was quick to tell me recently: "This is not about biology alone—this is about integration." She sees study of the brain as a way to give us language to talk about our concerns for people--the effects of deprivation, stress, and violence on the brain—as well as our belief that people can heal, as evidenced by research on the plasticity of the brain. And, that the most healing thing of all is relationship with someone who can provide an appropriate holding environment for the person. Her passion is endless for integrating diverse fields to benefit our clients and their lives in the community.

Golnar began her social work studies at the first school of social

work in Iran; she was excited about social work's interest in social justice concerns and its broad, multidisciplinary view of people. Upon graduation, she established special social service programs for children. She came to the US for further graduate studies in social work, obtaining an MSW from Virginia Commonwealth University. She then met her husband, a psychiatrist, and together they set up the first mental health clinic in Warrenton, Virginia, coordinating clients' care with the local government services located in the same building. Again, integration and innovation were primary factors in the inception and operation of the clinic.

Envisioning the Clinical Social Work Institute

Golnar joined the Society in 1983 after obtaining a Doctorate of Social Work at Catholic University. She saw the need for more clinical emphasis at the doctoral level, which planted the seeds in her imagination to help envision the Clinical Social Work Institute. She was Chair of the Curriculum Committee of the original Task Force that established the Institute and she is its Founding and current Dean. Coming up through the ranks and holding various offices, she served as President of the Greater Washington Society for Clinical Social Work from 1993 to

1995. She was then elected president of the Clinical Social Work Federation (our national arm) and served from 1998 to 2000. In 1995, she was inducted into the National Academy of Practice in Social Work (one of ten Academies of the National Academies of Practice, an interdisciplinary health care advocacy and public policy organization) as a Distinguished Practitioner and later served as the Chair of Social Work Academy. She also has been in private practice since 1979.

Education, both of social workers and of the public about social work, has been her mission and passion in these prominent posts. The national offices have helped her give social workers a voice and a stage for advocacy. Golnar also has been a force to bring together diverse organizations and get them talking to each other instead of engaging in turf battles.

Friendship, support, and a place to learn from others

But it is our own clinical society that has nurtured her, provided friendship, support and a place to learn from others. Golnar says, "I have always been proud of the fact that our Society has been one of the most dynamic and innovative Societies on the national scene, and it has been a great privilege for me to be its representative. I found my 'professional voice' through

my membership in our Society. Making connection with so many of our Society's dedicated clinical social workers over the years, meeting many professional goals together and through my representation of our Society, making contacts with clinical social workers across the nation, has enriched my professional and personal life at many different levels. I am most grateful for the privilege of serving our Society and our profession. I also know that in these critical times, we must continue to work together to meet our challenges."

She wants to pass on to newer members a sense of empowerment, of valuing our profession, and of the love of learning and integration that have inspired and informed her life. Thank you, Golnar. ❖

Connie Ridgway, LICSW, LMT, is a licensed clinical social worker and a licensed massage therapist in Washington DC and Alexandria VA. Her practice, called Full Circle Creative Healing, integrates both mind and body therapies, encouraging our natural state of wholeness. She has been a member of GWSCSW since 1992, and has recently joined the newsletter editorial board.

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Out & About

This column shares news about members' professional accomplishments—publications, speaking engagements, seminars, workshops, graduations—as well as volunteer projects and special interests or hobbies. Here is what some of our members have been up to...

Former GWSCSW president **Marilyn Austin**, MSW, PhD, BCD is a poet as well as a social worker. Two of her recent poems "Recipe" and "Getting Older" have been selected for inclusion in *The International Library of Poetry* where her first poem was published in a prior volume. Marilyn has expanded her literary forms to include drama. She has just completed a play that is as yet untitled.

Recognition has come again for **Audrey Thayer Walker** MSS, BCD, this time from the National Academies of Practice (see page 9). Audrey was elected to membership as a Distinguished Practitioner and installed on November 5, 2005. Her selection reflects her years of leadership in clinical social work, as well as the close collaborative work she fostered with psychiatrists and psychologists while Chief Social Worker in Psychiatry at George Washington and in her subsequent private practice.

Carol Hendler, LCSW-C, CSAT, was elected Vice Chair of the Montgomery County Board of Social Services for the September 2005–June 2006 term. This is a voluntary advocacy interdisciplinary group with members from social work, medicine, law, government administrators and liaisons from the Department of Social Services. The Board explores the problems and condition of various county social services, forms advocacy positions when indicated, and lobbies in Annapolis for specific needs as necessary. They keep the County Executive informed about current social service issues. Carol chairs the focus group on Foster Care and is responsible for briefing County Executive Douglas Duncan about foster care this month. Carol reminds us that the Board welcomes visitors at meetings. Further information can be found on the Montgomery County website.

Ruth Neubauer, LCSW will be teaching a course, *Psychoanalytic Ideas*, at the Institute for Learning in Retirement at American University, as well as a course on *Attachment*, also for the general public, at Politics and Prose book store. An interview with Ruth and Karen Van Allen MSW about their work with women over fifty was aired in February on Pacifica Radio.

Katherine Brunkow has been appointed Supervising and Training Analyst at the Washington Psychoanalytic Institute.

Pat Driscoll, LICSW, is editor of this column. Please send information about your accomplishments to Pat at Out & About at gwscsw@gmail.com.

DID YOU KNOW...

Pain Connections, founded by social worker Gwenn Herman, is a non-profit organization that provides support groups throughout the DC metro area and information and referral for people living with chronic pain. The web address is www.pain-connection.org.

(Our thanks to Mona Mendelson, LCSW-C, for this information.)



The Partnership for Prescription Assistance brings together America's pharmaceutical companies, doctors, other health care providers, patient advocacy organizations and community groups to help qualifying patients who lack prescription coverage get the medicines they need through the public or private program that's right for them. Many will get medications for free or nearly free. The Partnership's mission is to increase awareness of patient assistance programs and boost enrollment of those who are eligible.

Through its website, www.pparx.org/Intro.php, the Partnership offers a single point of access to more than 475 public and private patient assistance programs, including more than 150 programs offered by pharmaceutical companies.

To access the Partnership for Prescription Assistance by phone, call toll-free, 1-888-4PPA-NOW (1-888-477-2669).

(Our thanks to Tybe Diamond for this information.) ❖

Association for Psychoanalytic Thought

March 12, 2006

Thomas Hoffman, MD, presenter
"Psychoanalytic Understanding of Organizations"

May 21, 2006

Charles Parks, PhD, presenter
"The Treatment of Trauma and Abuse in a Latency Age Girl"

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WWW Wanderings

Joel Kanter

For those interested in social work research, the Institute for the Advancement of Social Work Research maintains a useful website at www.iaswresearch.org. Anyone can sign up for their non-interactive listserve, which sends a weekly summary of social work conferences, research projects and grant solicitations.

For those interested in psychoanalysis, the Northern California Society for Psychoanalytic Psychology maintains an interesting website at www.fortda.org. Also, the British Psycho-Analytical Society website contains many interesting articles and book reviews at www.psychanalysis.org.uk

Finally, www.psychematters.com has dozens of analytic papers available online by such distinguished authors as Lew Aron, Jessica Benjamin, Peter Fonagy, Thomas Ogden and Robert Stolorow. ❖

Joel Kanter, LCSW-C, author/editor of Face to Face with Children: The Life and Work of Clare Winnicott, is GWSCSW vice president for education and serves as moderator of the Society's listserve. Joel is in private practice in Silver Spring, Maryland.

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Washington DC 20016

(202) 237-1202

Email: admin@wdc-cswi.org

Website: www.wdc-cswi.org

Update: National Licensing Standards

Laura Groshong

Work on the National Licensure Standards project of the Clinical Social Work Federation (CSWF) standards is continuing, with the most active areas at the moment being the development of ethics requirements in statutes for clinical social workers, and the development of licensure standards for doctoral social work.

GWSCSW members Dolores Paulson, Alice Kassabian, and Pat Baker are active participants on the committee focused on licensure standards for the doctoral level. The committee has been surveying all graduate schools and PhD graduates as to how many were trained in—and are doing—clinical work.

Unfortunately, progress on the overall project has been somewhat slowed by the transitional nature of the Federation as its organizational structure undergoes change. We need to see how the newly configured organization wants to pursue the project before going ahead full bore. ❖

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The Mind/Body Connection – May 5 & 6

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GWSCSW BOOK CORNER

The GWSCSW Book Corner shines the spotlight on publications of our very own home-grown member authors. The series began in the December issue with *Coping with Your Difficult Older Parent*, co-authored by longtime members Grace Lebow and Barbara Kane, with Irwin Lebow.

The series will resume in our June issue with *Psychodynamic Psychotherapy: Learning to Listen in Multiple Perspectives* by Jon Frederickson. Long a GWSCSW member, Jon will be presenting a workshop on Saturday, April 29, titled *Working with Dissociation in Traumatized Patients* and co-sponsored by GWSCSW and the Washington School of Psychiatry (see page 22).

Among the member books Erin will be reviewing in our next issues are Joel Kanter's *Face to Face with Children: The Life and Work of Clare Winnicott*; Kate Scharff's *Therapy Demystified: An Insider's Guide to Getting the Right Help, Without Going Broke*; and Linda Kuzmack's *Woman's Cause: The Jewish Woman's Movement in England and the United States, 1881–1933*.

Please contact Erin Gilbert with information about your publications (and those of your too-modest colleagues) at gilberel@hotmail.com. ❖

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The GWSCSW Referral Panel provides practice information on participating GWSCSW members in DC, Maryland and Virginia. Population, specialty, groups, insurance participation, theoretical orientation, languages spoken and lots more!

301-530-4765 ~ www.gwscsw.org

REFLECTIONS

As the years and clients go by, our techniques and thinking evolve. We encourage members to share their experiences in this regard in our occasional "Reflections" column.

Spirituality and Therapy

Fred Devett, LCSW, LMFT

The story is told of a Russian Staretz (monk) who was criticized for wasting time in extended and deep conversation with an old peasant woman about the care of her turkeys. "Not at all," he replied, "her whole life is in those turkeys." How often in sessions with our clients we hear "turkey" stories and think, "What was the point of that?" "Why is she insisting I hear this?" and wonder "What did that session accomplish?" Had we been listening, really listening, we may have glimpsed the essence of a life laid bare, the heart of why this individual is here, or what they are most seeking. Such mysteries are not always clearly included in our treatment plan. Within those "turkeys," deep spirituality often holds the place of healing therapy.

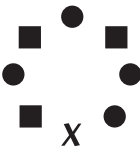
"Spirituality" in just about any form grabs attention these days. For many, the reverse is often just as true, feeling "grabbed" by spirituality! I would like to offer some reflections both from perspectives as a therapist and from personal experience. For purposes here, I will offer three: The use of "Higher Power" and Recovery as an entry into spirituality; a working "universal" definition of spirituality; and what I "do" in a clinical setting as a result of these discoveries. Each, of course, merits a much more in-depth discussion, but perhaps they will spark additional musings in the reader.

Any client seriously working a Twelve Step Recovery Program has identified and appealed to his or her "Higher Power" in a significant way. When once I realized that I was neglecting an important aspect of treatment if I did not attend—on a regular basis—to how these individuals were relating to their Higher Powers, I was on the road to a significant change in my general approach to treatment. How did this person articulate his or her "Higher Power"? How was he growing in understanding of that relationship? How was that relationship extending recovery throughout his life? At the heart of sobriety and recovery, it was essential to address and understand this area, because it was central to the change process. It was then only a short jump to search for language to engage any

client when nearing these innermost depths. (It really is about the turkeys!) I was discovering how intimately related identity and spirituality are—and how they are continually being expressed in daily living.

Having pushed my exploration of boundaries between the therapeutic and the spiritual for many years, I have tried to hold myself to using the word "spiritual" in as universal a way as possible, to include anyone's use of the term without imposing religious or theistic overtones on it or to expect such use. To that end, I've discovered, hidden in the most basic laws of the Universe, a very suitable definition. In its most succinct expression, I see spirituality as "negative entropy." The Law of Entropy, the Second Law of Thermodynamics, states that the Universe tends toward decay, destabilization, always in a steady state of decline, progressing to a state of lesser order. Consider "spirituality," then, as how one pushes against this dissolution. "Holding it together in a falling apart world" sums it up. Whatever helps us pick one foot up after the other, or to climb the highest peak, expresses the depth of what is our "spirituality." In that expression—that energy—we, in our bodies, live out the meaning of the root of the word spirit, "breath."

And so it became clear to me that clients speaking of their "spirituality" were telling me how they were



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embracing aliveness, pushing on toward a more ordered life, resisting entropy, overcoming the wearing downness of life itself. A step toward Life and against Death.

Gradually the implications of this realization open up, but I am convinced it has been fertilized by a second discovery: the power of silence. "Stilling the waters," one might say, remembering a day several years ago when I participated in a healing ritual which began in the morning with a bowl of muddy water. By late afternoon, the water had cleared as the mud settled. A centrifuge, a couple filtrations or other such manipulations might have given us a similar result, but letting the bowl sit, undisturbed, those few hours, allowed the water to clear itself. That day showed me a new glimpse of what "undisturbed" and "silence" can do.

The better therapy hour is increasingly turning out to be the one in which I listen more and say less. I mean really more and really less. Long gaps of silence (well, they certainly seem long to me). Short—really short—interventions (fewer compound and complex and compound/complex sentences, fewer points in the lists, less repeating and interrupting, etc.). These efforts, I think, make the clinical work more "spiritual" because it is thereby opened to the deeper and undirected interior movements of the client.

In short, I am learning to listen for the turkeys. The quieter I still myself, the more "spiritual" the therapeutic hour seems to become. Spiritual because I watch the client walk what may look like a labyrinth to me, but to her or him, is a step-by-step path of self-discovery wherein, often for the first time, he has an uninterrupted opportunity to listen to themselves. That's mighty powerful stuff.

The current interest in Spirituality will soon subside as a new interest draws the limelight. When it does, hopefully we will be left attuned at least a little more to the inspirations of Life that spirituality's popularity has awakened, especially within the art we practice in this science of psychotherapy. ❖

Fred Devett, LCSW, LMFT is licensed as both a Clinical Social Worker and Marriage Family Therapist. He practices psychotherapy in Madison, Wisconsin. He can be reached at www.integralpsychology.com or fdevett@tds.net. This article was first published in the Wisconsin Society for Clinical Social Work newsletter.

SAVE THE DATE!

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METRO | The Metro Washington
Center of the
International
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Institute

INFORMATIONAL OPEN HOUSE

Thursday, May 18, 2006

*Please join the IPI Metro faculty and students
for wine and cheese and to learn about exciting
training and supervision opportunities
for the academic year 2006–07*

CERTIFICATE TRAINING PROGRAMS

The Introduction to Psychodynamic Psychotherapy Program

A one-year course offering weekly classroom instruction and supervised clinical work; for beginning clinicians or those new to psychodynamic therapy.

The Introduction to Object Relations Therapy Program

A one-year course offering weekly classroom instruction and supervised clinical work; for intermediate clinicians.

The Clinical Seminar Program

A series of nine monthly seminars focusing on in-depth study of central Object Relations concepts and their clinical applications; for clinicians at all experience levels.

Sex and Sexuality in Contemporary Psychotherapy

A series of nine monthly seminars focusing on increasing clinicians' knowledge and comfort in dealing with a range of issues around human sexuality; open to clinicians at all experience levels.

Clinical Supervision

A series of nine monthly seminars exploring the central concepts of clinical supervision; open to all mental health professionals.

Master Teacher Series

A series of seminars offering the opportunity to study directly with eminent theoreticians/clinicians at the leading edge of the field.

INFORMATION ABOUT THE OPEN HOUSE

Location Offices of IPI Metro
6917 Arlington Rd., Suite 224
Bethesda, MD 20814

Schedule 6:30–7:30 PM: Wine and Cheese Reception
7:30–8:30 PM: Discussion of 2006-07 Training Programs

RSVP Appreciated!
Kate Scharff, Director of Training, IPI Metro
301-951-3782

www.ipimetro.org

Upcoming GWSCSW Events Feature Distinguished Speakers

Joan Berzoff on March 10, 2006

The Friday, March 10, GWSCSW dinner meeting will feature Joan Berzoff, MSW, EdD, who will use personal narratives to illustrate how grief and bereavement work can lead to client transformation and growth. Ms. Berzoff is co-director of the doctoral program and director of the End of Life Certificate Program at Smith College School for Social Work.

Author of *Inside Out and Outside In: Psychodynamic Clinical Theory and Practice in Contemporary Multicultural Contexts*, and the co-editor of *Living with Dying: A Handbook for End-of-Life Healthcare Practitioners*, Ms. Berzoff is the recipient of a Social Work Leadership Award from the Open Society and has been recognized as a Distinguished Scholar by the National Academies of Practice (see page 9). She is also in private practice in Northampton, Massachusetts.

Jon Frederickson on Saturday, April 29

One of our Society's most popular Continuing Education instructors is *Jon Frederickson, MSW*, author of *Psychodynamic Psychotherapy: Learning to Listen in Multiple Perspectives*. His all-day presentation *Working with Dissociation in Traumatized Patients* on Saturday,

April 29, will focus on a videotaped therapy case in the early stages of treatment, demonstrating how to build ego capacity in a fragile patient. Case vignettes will illustrate how to identify dissociation, how to help patients see dissociation, how to help patients recognize and regulate their anxiety, and how to work with projection.

Jon is chair of the Advanced Psychotherapy Training Program and is on the faculties of the Clinical Psychotherapy and Supervision Training Programs at the Washington School of Psychiatry. He is also an adjunct faculty member of Georgetown University and maintains a private practice for psychotherapy, supervision, and consultation in Washington, DC.

The workshop will be held at the Washington School of Psychiatry, which is co-sponsoring the event.

Beth Cohen in May, Date TBA

Beth Cohen, PhD, author of *Case Closed: Holocaust Survivors in the US, 1945–1954*, will present her research on the social work response to holocaust survivors who were resettled in the U.S. during the post-war period. Her work raises important questions about treatment of trauma and dislocation, issues in today's headlines. ❖

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COMMITTEE REPORTS

Continuing Education

Dolores Paulson, DSW

Courses for the 2006–2007 continuing education program are currently being developed. There is still time to share your ideas regarding courses you might like to teach or courses you might like to see taught. The committee, as always, welcomes your input.

One of our very devoted committee members, Nancy Nollen, has resigned from the committee in order to pursue her many other interests. We thank her for her many years of service and her valued contributions to the work of the committee's educational endeavors. She will be missed.

The committee welcomes two new members, Elizabeth Thomas and Ted Billings; we look forward to working with them as we develop the coming year's program

Courses remaining in the academic year are listed in this newsletter. Your registration is invited. Thanks to all of you, we are in the midst of another very successful year!

Ethics

Robert Fenton, MSW

The Ethics Committee welcomes three new members:

Roz Rakoff, MSW practices in Falls Church. She works with adults and specializes in substance abuse recovery.

Stacia Super, PhD is a psychoanalyst/psychotherapist who treats children, adolescents and adults in Chevy Chase, MD. She has previ-

ously served on the boards of the Illinois Society for Clinical Social Work and the Clinical Social Work Institute and has supervised social work and psychology interns and psychiatry residents.

Susan Horne-Quatannens, MSW, practices in Alexandria where she works with adolescents and adults. She has served as president of our Society and on numerous committees. She is also completing a two-year term on the board of the Clinical Social Work Institute.

The ethics committee is pleased to continue to offer assistance to members. Please direct all inquiries to the chair, Robert Fenton at either 202-296-6997 or robertfentonsw@aol.com.

Legislation & Advocacy

Margot Aronson, LICSW

With three jurisdictions to cover, we have a lot of balls in the air. Dolores Paulson and Alice Kassabian represent our interests and try to keep us up to date with what's happening in Virginia; Joyce Harrison and Nancy Cedar Wilson do the same for Maryland. In the District, Mary Lee Stein and Danille Drake participate for us on, respectively, the CareFirst Watch Coalition and the DC Confidentiality Coalition.

More committee members will make the workload easier to share, so that we can become more effective advocates and get more information to our members. We need you!

If you have ANY time to spare, we'd like you to join the commit-

tee, get oriented to the advocacy world, and take a small (or large!) role. And if you have no time but are interested, please consider being a resource-with-no-strings-attached by joining the Legislative Panel. See page 13 for details.

Membership

Melinda Salzman, MSW

Our Ambassador program is up and running! Several new members have now met with their ambassadors to learn more about the society, facilitate introductions to other society members, and learn more about each others' work. New members and current members: if you would like to be matched with an ambassador or a new member, please call Melinda Salzman at 301-585-7352.

As of this writing, we are preparing for a New Member Tea, graciously hosted by Diana Seasonwein at her home on February 26. This occasion will be an opportunity for new members, ambassadors, board members and committee chairs—and, of course, current members—to meet. We hope this event will become an annual tradition, and invite all of you to attend.

We are also planning a Dessert Party & Informational Meeting at Catholic University on March 24, to introduce social work students to the Society.

The committee includes Melinda Salzman, Chair; Carolyn Dozier; Joyce Harrison; Susan Marks; and Irene Walton.

Mentor

Adina Shapiro, LCSW-C

The Mentor Committee is looking for a new co-chair, as Kate Scharff has resigned. Adina Shapiro will continue as co-chair.

There is still some room at the Professional Development Seminars being held in Virginia and Maryland in March. These seminars are free of charge and open to all. (See notice on page 3) Please contact Adina at 703-761-3939 to register.

Newsletter

Margot Aronson, LICSW

Three years ago, Tricia Braun created two newsletter columns celebrating Society members: *Out & About* and *Presidential Profiles*. Now that Tricia's time is taken up with her vice presidential efforts, we welcome Pat Driscoll, who will prepare *Out & About*, and Connie Ridgway, who'll be continuing the *Presidential Profiles* series.

Who else is on the editorial board? Susan Post has taken on the management of the Committee Reports. Erin Gilbert celebrates our GWSCSW authors in the *Book Corner*; she'll have a new review for our next issue. Joel Kanter revives his *WWW Wanderings* column with social work research websites.

In her role as GWSCSW president, Diana Seasonwein reviews all articles; while she's at it, she helps out with editing. Pat Driscoll is also helping with editing, and Mary Lee Stein proofreads our galleys.

Even as the editorial board grows, opportunities abound: for example, you might want to put

together the *Did You Know...?* column or *Our Online Society*. A few more pairs of proofreading eyes would be very helpful, and editors are always welcome. Call me at 202-966-7749 to volunteer.

Outreach

Tybe Diamond, MSW, BCD
Susan Post, MSW, BCD

Thirty percent of U.S. troops returning from the Iraq war have developed stress-related mental health problems three to four months after coming home, according to the Army's surgeon general report released this month. The problems include anxiety, depression, nightmares, anger and an inability to concentrate. A smaller number of troops, often with more severe symptoms, are diagnosed with post-traumatic stress disorder. Many others face problems adjusting when they come home. Such problems are sometimes more acute in members of the National Guard, who return to civilian jobs when they leave active military duty.

The anxiety and stress are understood by military experts as normal reactions to combat, seeing dead and mutilated bodies, and feeling helpless to stop a violent situation. However, such reactions can lead to problems with spouses and children, substance abuse and create difficulties in day-to-day living.

Of the many Society members who responded to our survey of volunteer interests, providing clinical services to the military was the primary interest for the majority. Walter Reed requests a commitment of at least a half day per

week to provide therapy services, and an agreement to complete the Red Cross/ Walter Reed Army Medical Center (WRAMC) credentialing process.

Their overall attitude towards our proposal has been appreciative and welcoming. However, institutional agreements move slowly and there is now a request for the CVs of our proposed volunteers; they plan to assess where we could best fit into their system, and then negotiate with the Red Cross the volunteer/credentialing process. They may want to start the process with a couple of "test cases."

Tybe Diamond and Susan Post, co-chairman of the Outreach Committee, will soon meet again with the Chief of the Department of Psychiatry to discuss plans for implementation. Once we have an institutional agreement with WRAMC, our committee members will be contacting our volunteers again to review the current status of their interest and readiness to begin, since some time has elapsed since our initial phone contacts.

It is not too late to join in this project. Should you be interested in joining the Outreach Committee or in volunteering at WRAMC, please contact Tybe or Susan at ibtybe@aol.com or rspost@speakeasy.net.

Referral Panel

Eileen Ivey, LCSW-C
Pat Garcia Golding, LCSW-C

The co-coordinators have been busy in the last month, processing the annual applications to the referral panel. Thus far, with the deadline not yet passed, we are pleased to have over a dozen new

referral panel members and most of last year's members renewing. We have also been working with the web designer to make some needed corrections to the website, such as adding specialties and localities which were inadvertently left out. Please do visit the website, if you haven't already done so, at www.metropsychotherapy.info. We hope you'll be as pleased with the attractive and professional way it represents us as we are.

Should you have missed our reminder notes posted to the list serve, the application in the last issue of the newsletter and the deadline and still wish to be part of the referral panel (the subset of GWSCSW members to whom we can make referrals and be legally protected), please contact one of us as soon as possible. We send additions and corrections to the data entry person and the web designer in batches and may be able to include your information in the next batch.

The other major thrust of our work will be marketing the website and its participants. We have an ambitious marketing plan which includes—among many ideas—contacts with Employee Assistance Programs (EAPs), pediatricians, ob/gyns and internists, Bar Associations, and the military.

This is a particularly ambitious plan because, at present, our committee consists of only the two of us. Please think seriously of joining us to do some brainstorming, writing and calling to market the referral panel. Whether you have only a few hours to give or are able to make a larger commitment of time and effort, we want your help and your creativity! We would like to have a meeting in early March to get this effort underway. And, if you have previously offered to volunteer and we did not get back to you, give it a second shot and contact us again! Eileen Ivey (301-652-1030 or e.ivey.lcswc@verizon.net) and Pat Garcia Golding (301-907-7888 or goldgar202@aol.com). ❖

Welcome New Members!

Full Members:

Dawn Anderson, Katrina Boverman, Debra Caplowe,
Alison Fellowes Comly, Larry Goldes, Eugenie Hershaft,
Kathryn McCormack-Chen, Jennifer Newman, Jennifer Novak,
Helen Power, Diane Scheininger, Tim Seeney,
Barbara Tahler, Jane Yoder

Graduate Members:

Sawyer MacMillan, Jennifer Madden, Ji-Hae Park,
Heather Powers, Paul Sullivan

Student Members:

Emily Baldwin, Elizabeth Carmichael, Paul Delgrosso,
Thomas Doerr, Pauline Gianoplus

For All Members

Call the
Federation Hotline
(800) 270-9739

your link to our...

- **Managed Care Specialist**
for advocacy, information and assistance with managed care and insurance
- **Forensic Specialist**
for consultation regarding clinical social work and the law
- **Public Relations Specialist**
for assistance with press, radio, TV and media issues and the professional image of clinical social work
- **New Clinicians Specialist**
for mentorship, advisement and other issues for new clinicians

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ALL CALLS ARE CONFIDENTIAL

GWSCSW Course Offerings: 2006

These are the selections being offered by the Continuing Education Courses Committee of the GWSCSW this year. We have tried to insure that the topics meet the needs and interests of the clinical social work community. The program's focus is clinical. Non-clinicians will be admitted to classes at the discretion of the instructor. Some courses have small additional fees for educational materials. Courses that are starred (*) are especially designed for recent MSW graduates as well as members beginning a new interest. Fees are reduced by 50% for members who received their MSW within the last five years. Some scholarship funds are available. Participants will be issued a Certificate of Attendance at the conclusion of each course. CEUs are available. If you have any questions regarding a particular course please contact the instructor listed. Call Dolores Paulson, 703-790-0786, for scholarship information.

★ The Role of Attachment and Attachment Injuries in Couples

This workshop will focus on couples from an attachment perspective. It will discuss the four primary attachment styles, how to determine an individual's attachment style as well as a couple's, and how a particular style (both within the individual and the couple) drives relational interactions. It will also identify the newly defined concept of attachment injury as it is manifested within the couple. Through the depiction of attachment injury incidents and suggestions for resolution, therapists will be able to identify and treat such injuries and the impasses that accompany them.

Eileen Stanzione, MSW, LCSW-C
3000 Connecticut Ave, NW, Suite 201
Washington, DC 20008
(301) 293-6999

Mondays, 12:00 – 2:00 PM
2 sessions: March 13 & 20, 2006
Members: \$60
Non-members \$100

📖 Attachment Theory and the Psychoanalytic Process

This book, edited by Mauricio Cortina and Mario Marrone, should be of interest to clinicians regardless of their orientation. Attachment theory "cuts across the boundaries of clinical modalities." Attachment theory, the brainchild of child psychiatrist and psychoanalyst John Bowlby, has begun to have a worldwide impact in the last ten years. In this book the editors gathered a distinguished group of clinician-scholars from around the world to examine and extend Bowlby's legacy.

Ruth Neubauer, MSW, LCSW-C
3301 Woodbine Street
Chevy Chase, MD 20815
301-652-7884

Friday, 12:00 Noon – 2:00 PM
May 19, 2006
Members: \$30
Non-members \$50

GWSCSW COURSES REGISTRATION FORM

Name _____

Address _____

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E-Mail _____

Social Security No. _____ - _____ - _____ Number of Years in Practice _____

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_____	_____	\$ _____	\$ _____
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_____	_____	\$ _____	\$ _____
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Amount Enclosed: (make check payable to GWSCSW) \$ _____ \$ _____

Please return to: Dolores S. Paulson DSW • The Ashford Center • 7643 Leesburg Pike • Falls Church, Virginia 22043

We are accepting course proposals NOW for 2006–07 Continuing Education Courses.

Contact Dolores Paulson 703-790-0786 to get a copy of the Continuing Education Faculty Handbook which will give you information about the program and all the details you need to prepare a course you are interested in teaching for GWSCSW.

The Continuing Education Courses Brochure for 2006–07 is published in the Summer '06 and will be mailed to you.

ADVERTISEMENTS

Advertisements, accompanied by full payment, must be received by the GWSCSW by the first of the month preceding publication. Material should be sent to GWSCSW, PO Box 3235, Oakton VA 22124 or gwscsw@gmail.com. For questions about advertising, call 202-537-0007.

Classified Ads: 75¢ per word	Display Ads: Full page 7 x 9¼	\$300	Half page	\$175
Minimum price \$15 (20 words)	Quarter page 3¾ x 4½	\$100	Horizontal: 7 wide x 4½ high	
	Eighth page 3¾ x 2¼	\$ 50	Vertical: 3¾ wide x 9¼ high	

Size of display ads indicated above is width by height. These are the only sizes that will be accepted. Electronic submission (PDF) preferred. Publication does not in any way constitute endorsement or approval by GWSCSW which reserves the right to reject advertisements for any reason at any time.

OFFICE SPACE WANTED

NORTH ARLINGTON SUBLET NEEDED: One day a week in an office that is child and play therapy friendly. The closer the space to Ballston, the better. Please contact rachael1@juno.com

OFFICE SPACE AVAILABLE

DUPONT CIRCLE: Hourly or part-time sublet. Spacious, charming, sunny office and waiting room. Great location two blocks from metro. Call Sarah Pillsbury (202) 332-9473 or email Psarah@aol.com.

FOGGY BOTTOM: Spacious office overlooking inner courtyard, available full-time or half-time. 3 Washington Circle NW (23rd and Pennsylvania) One block to Metro. Medical building with interdisciplinary mental health professionals (social work, psychology, psychiatry). Call 202-331-1547.

GEORGETOWN: Large sunny office available for rent full-time or half-time in suite with three other therapists. Shared kitchen. Contact Sheila Resnick 202-337-3100.

MCLEAN, VA: Attractive, bright, spacious office to share with psychiatrist in central McLean. Fully furnished. Call 703/821-0761.

ROCKVILLE: Office space available full-time in brand new therapy office suite with four offices, shared waiting room and kitchen. Furnished. Conveniently located off 270 at Montrose Road. Reasonable rent. Call 301-770-7677.

SILVER SPRING: Attractive office with a nice view of trees and sky, in a suite with four seasoned therapists. This office is small and perfect for therapy with individuals and couples. Walking distance to Metro and wheelchair accessible. \$375/month includes cleaning services and all utilities except phone. Please call Laurie Kaslove at 301-495-2997.

TENLEY: Office for rent. Bright, sunny, nice sized (180 square feet) office. Two blocks from Tenley Metro stop. Excellent parking. Call 202-966-7498.

TYSONS: Furnished office in lovely office park. Available by the day or hour. Tysons area on Route 7, inside the Beltway. Prime location. Plenty of free parking. Call 703-790-0786.

VAN NESS METRO/CONNECTICUT AVENUE: Large, windowed office in psychotherapy suite. Residential building, 2 blocks to Metro. Kitchenette, waiting room. Days and evenings available. Call Judy Wentworth 202-244-9242.

TRAINING

SOCIAL WORK LICENSING: Prep Courses and Home Study Materials. For sample questions, schedule, and information call Jewell Elizabeth Golden, LCSW-C, LICSW, BCD, 301-762-9090.

GROUPS

ADOLESCENT THERAPY GROUPS: Ongoing psychotherapy groups for adolescents 11–22. Call Britt Rathbone, LCSW-C, 301-230-9490. www.rathboneandassociates.com.

FREE PEER SUPPORT GROUPS: For children or adolescents who have experienced significant loss (death, divorce, other separation) in Silver Spring, Maryland. Call RAINBOWS MD/DC Chapter at 301-495-0051 for more information.

SEXUALITY CONSULTATION GROUP FOR THERAPISTS: Tuesdays, 6 weeks beginning March 21, \$360. An opportunity for therapists not trained in sex therapy to gain knowledge and skills in the area of sexuality and be able to work more comfortably and effectively with individuals/couples. Format will be didactic and case discussion. 4600 Connecticut Avenue, NW. Deborah Fox, Certified Sex Therapist, 202-363-1740.

MISCELLANEOUS

FOR YOUR OFFICE AND/OR HOME: www.liminalspace.com photographs by Ruth Neubauer, MSW

As a member of GWSCSW, you are also a member of the Clinical Social Work Federation (CSWF). One of the benefits of membership in the Federation is access to the **Members Only** pages of the Federation Web site:

www.cswf.org

If you are a member of GWSCSW and do not already have a password to access the CSWF Member Only pages, please contact the GWSCSW office to get one.
202-537-0007 • gwscsw@gmail.com

UPCOMING EVENTS & IMPORTANT DATES

March 9 GWSCSW Dinner Meeting

Time: 6:30 PM

Location: Alfio's La Trattoria
4515 Willard Avenue, Chevy Chase, Md

Presenter: Joan Berzoff, MSW, EdD
*Narratives of Grief and Bereavement:
Processes of Transformation and Growth*

**April 29 Working with Dissociation
in Traumatized Patients**

Time: 9:00 AM – 5:00 PM

Location: Washington School of Psychiatry
Wisconsin Avenue, NW
Washington DC

Presenter: Jon Frederickson, MSW

**March 13 & 20 The Role of Attachment and
Attachment Injuries in Couples***

Time: 12:00 – 2:00 PM

Location: Connecticut Avenue NW, Washington DC

Presenter: Eileen Stanzione, MSW, LCSW-C

**May 17 Attachment Theory
and the Psychoanalytic Process***

Time: 12:30 – 2:00 PM

Location: Woodbine Street
Chevy Chase, Maryland

Presenter: Ruth Neubauer, MSW, LCSW-C

**March 24 GWSCSW Dessert Party and
Informational Meeting for CUA Students**

Time: 3:00 – 4:00 PM

Location: Catholic University of America

May TBA GWSCSW Event

Location: TBA

Time: TBA

Presenter: Beth Cohen, PhD
The Social Work Response to Holocaust Survivors

**March 25 Mentor Program
Professional Development Seminar**

Time: 10:00 – 11:30 AM

Location 1: Arlington Road, Bethesda

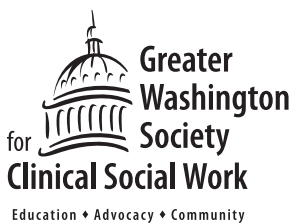
Presenter: Kate Scharff, LCSW-C

Location 2: Chain Bridge Road, McLean

Presenter: Adina Shapiro, LICSW

**GWSCSW continuing education courses.*

See page 26 for more information, call GWSCSW at 202-537-0007 or see Web site at www.gwscsw.org



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