

Survival '80: The Challenge to Grow

Reported by Martin S. Pollens, Social Action Chair

More than 250 SCSWP members and guests attended Survival '80, the Legislative Rally sponsored by the Society. Conceived and organized by co-chairs Robert E. Addison, Society treasurer, and Martin S. Pollens, Social Action chair, the Rally took place on Saturday, October 27th, at the Carnegie International Center, New York City.

Participants gathered to support the Rally's goals of

- sensitizing the Society's membership and the public to crucial issues confronting the profession
- focusing awareness of clinical social workers on a model of independence and autonomy
- raising funds to broaden the services of advocate/counsel Barry K. Mallin

Society members involved in the planning and implementing of the day-long event included Donna Rohlf (Metropolitan), chair of the luncheon; Kathleen L. Friend (Metropolitan), Robert P. Galardi and Gemma F. Colangelo (Queens), and Phyllis Gordon (Westchester) who spearheaded an intensive campaign to encourage attendance. In addition, the following Society members contributed their services to ensure the Rally's success: Floor Managers: Vera Fuchsman (Westchester); Robert Galardi and Marsha Wineburgh (Metropolitan); Controllers: Rita Benzer and Nan Miller (Westchester); Assistant Controller and Bartender: Sid Gordon, husband of member Phyllis Gordon.

During luncheon the Society's Distinguished Service Award was presented by President Abbie Blair to New York State Senator John E. Flynn, father of Chapter 893/77, the clinical social work third party payments law; to State Senate Minority Leader

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Medicaid Regulation Adopted.

On March 15th the Executive Board of NYSSCSWP formally recommended that all clinical social workers refrain from participating in the private medicaid services established under the State Department of Health regulation NYCRR 505.15. This regulation provides that psychiatrists in private practice receive medicaid reimbursement for services rendered by certified social workers. Retroactive to 1/30/80, a psychiatrist is permitted to hire no more than four certified social workers to provide services including counseling and group therapy. As there is no post-certification supervised experience required, the result is that the poor get lesser trained psychotherapists than do private insurance holders.

Your Board strongly objects to these regulations requiring that payment for clinical social work be funneled through a psychiatrist. This method of payment permits an increase in cost of service with no additional benefit to the user, encourages corrupt practice which leads to medicaid mills and condones fee-splitting practices. Under Sections 162 and 253 of the Insurance Law, direct medical insurance reimbursement is authorized for qualified clinical social workers who provide treatment. Why should not medicaid pay clinical social workers who are performing the services directly? The on-going supervisory requirement in these regulations is unnecessary as qualified social workers are authorized, as independent practitioners, under state law to treat mental and emotional disorders without the supervision of any other professional.

Society members should write, wire or phone their opposition to 18 NYCRR 505.15. Write to: Gov. Hugh Carey, Albany, NY 12224; Sens. Warren Anderson and Manfred Ohrenstein, State Senate, Albany, NY 12224; Hon. Stanley Fink, NYS Assembly Speaker, Albany, NY 12224.



Left to right, Donna Rohlf, luncheon chair; State Senator John E. Flynn; Robert E. Addison, Co-Chair; Marsha Wineburgh, President, SCSWP.



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Issued three times during 1980
April, July, November

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Editor's Note

With this first issue in 1980 we hope to make the *Newsletter* an integral and effective vehicle for Society communication.

Society members are the readers as well as the contributors—therefore, the content and focus of the *Newsletter* can provide a reflection of each member and of the Society as a whole.

Additionally, the *Newsletter* is the Society's image to influential audiences: legislators, members of related professional communities, candidates for membership, professional press editors. We want to reach this varied readership with an interesting and stimulating publication.

Suggestions for features are welcome. Short articles or excerpts from papers are solicited. And letters. These can be a lively and provocative means of discussion, and we hope you will take the time to write.

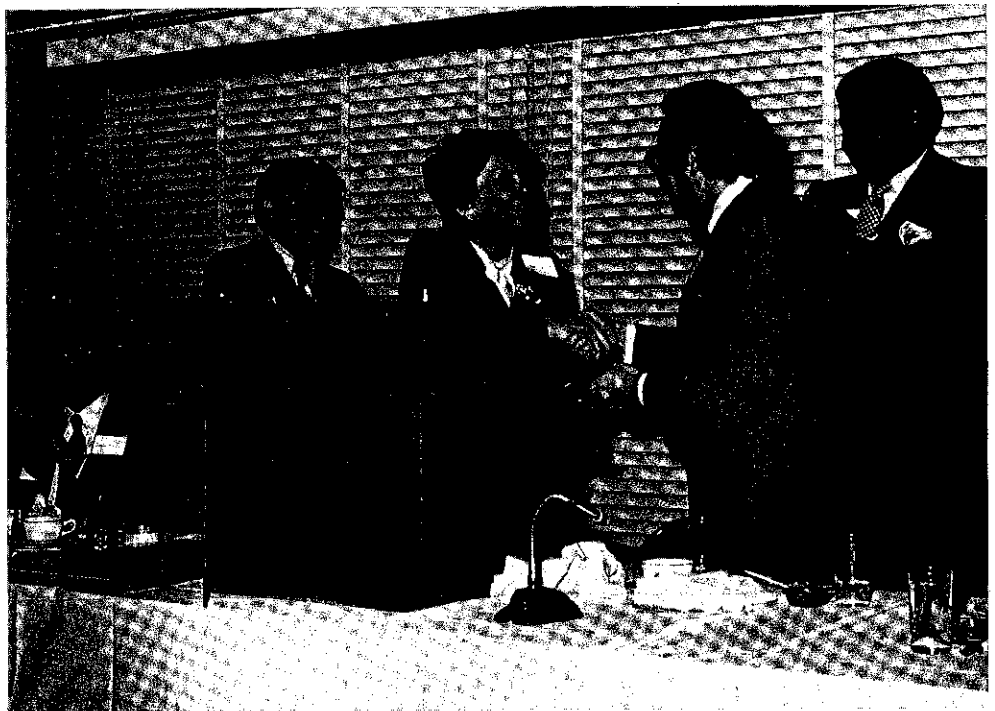
We look forward to working with the Society and to making this *Newsletter* a vital and actively read publication.

Alyce J. Collier, *Editor*

GENERAL MEMBERSHIP MEETING SET

The Society's first general membership meeting in 1980 will take place on Saturday, May 17th in New York City. The time and place will be included in the Meeting Notice which each member will receive.

Members from Upstate who wish to attend will need overnight accommodations. If any member—or friend—has room for a Society colleague during that weekend, please get in touch with Donna Rohlf, 60 West 68th Street, New York City 10023, telephone 212-787-2976.



Suellen Snyder

Abbie Blair, Past President, SCSWP, presents Distinguished Service Award to Senate Minority Leader Manfred Ohrenstein. Others in photo, left to right: Barry K. Mallin, legislative advocate, Martin S. Pollens, Rally co-chair, and Robert E. Addison, co-chair.

Survival '80: The Challenge to Grow

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Manfred Ohrenstein, strong supporter of Chapter 893 and an effective force in the effort to implement State Board regulations; and to Barry K. Mallin, Esq., advocate/counsel for the Society in Albany.

Post-luncheon events began with brief remarks by Dr. Charles Smith, a founding member of SCSWP; past president Florence Radin; Crayton E. Rowe, Jr., past president of the Society, the National Federation and The National Registry; and Beverly Unger, former chair of Social Action. Rowe stressed the importance of maintaining and strengthening standards in clinical social work and reiterated the accomplishments in this area achieved and perpetuated by The National Registry.

To further emphasize the maintenance of standards in the profession, succeeding remarks by Pollens underscored the Society's philosophy of "entrepreneurial psychotherapy," in which patient and therapist are equal partners; a clear contract "protects the interests and privacy of the patient and assures that goals of the patient and psychotherapist are mutual."

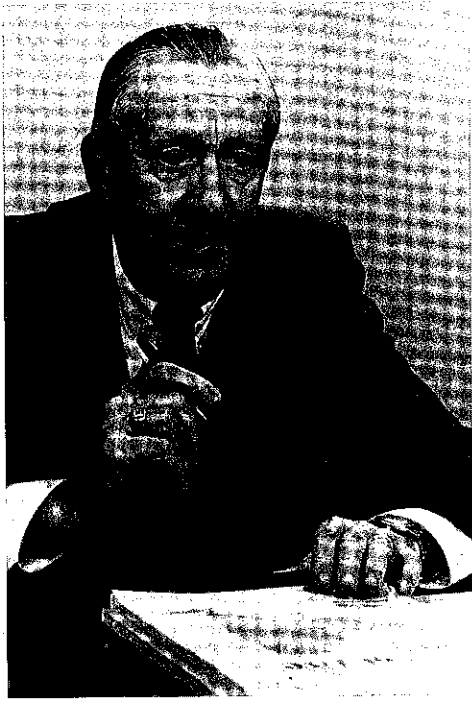
Next on the program, counsel Barry Mallin indicated the more assertive stance projected by the Society during the past year. His complete report appears on page 4.

Moving the program into direct fund raising, Robert Addison most movingly told the audience about the "boy social worker" and how he had come of age. In the manner of a Southern revival meeting, Addison challenged participants to become more active, to begin taking care of themselves, to reach into their pockets "because no one else will take care of you." He declared, "We must grow up. We must begin paying our own way through life." Within a half hour Addison's effective technique succeeded in raising \$4,000 in pledges and checks. The spirit was strong, the audience responsive.

Continuing the enthusiasm, special guest Konrad Fischer, President of the California Society of Clinical Social Work, outlined the accomplishments of the California Society, among which is the first licensing bill in the country for clinical social workers and the establishment of the first Institute for Clinical Social Work to award the Ph.D. In contrast, Fischer spoke of the Sunset Bill and its origins, which provide a compelling argument for the need for licensing and regulation of the independent practice of clinical social work and psychotherapy. The conflict arises, Fischer stated, because a profession must have independence concomitant with its responsibility. His views are set forth in the feature on page 5.

To date, Survival '80 has netted nearly \$6,000, all of which is earmarked for legislative projects. The SCSWP Board has approved a broader scope for Attorney Mallin's efforts on the Society's behalf in Albany during the coming year.

Survival '80—an unqualified success—and proof positive that when we pull together, it's all possible. □



State Senator John E. Flynn, presented with the Society's Distinguished Service Award, declared the importance of the Society's continuing educational program among all members to influence legislators on bills favorable to the clinical social work profession. Within the next decade senator Flynn projects three new areas of health care: Home Health Care, Catastrophic illness and the Hospice Program. Clinical social workers will certainly have a major role—to be defined—in all these areas.



Receiving the Society's Distinguished Service Award, Senate Minority Leader Manfred Ohrenstein remarked: "I am gratified that the Legislature finally recognized the importance of the clinical social work profession, in the mandating of insurance reimbursement for the consumer who receives psychotherapy from licensed clinical social workers, the Legislature has made it easier for the patients to deal more directly with their therapists."

Executive report

The Society's primary commitment has always been to the establishment and maintenance of high standards of professional education and practice. It is important that the professional community, our legislators and the public be reminded of our diversified skills and specializations and it is in this spirit we approach the eve of sponsoring a bill conceived and written by SCSWP designed to give clinical social workers parity with psychiatrists and psychologists in all health insurance contracts in which mental disorders are included.

This brings up an important point—that we must be our own advocates. Whether employed by agencies, industry, hospitals or our own private practice, we bring to the community and to other mental health disciplines a wealth of experience in clinical practice as well as administration and consultation. We supervise, teach and staff the majority of outpatient clinics and agencies in this state. We fill the institutes for advanced training and the universities' doctorate and postdoctorate clinical programs. We have a body of knowledge and expertise to be proud of. So when your Chapter Boards call on you to lend a hand in passing this bill, do so! It is in your interests!

As you may know, Senator Inouye is sponsoring a Federal bill (S.2176) which provides coverage of clinical social work services in the Medicare and Medicaid programs. He needs our support. At least 15 senators are needed to sponsor this bill. It is imperative that each of us send a letter to Senators Daniel Patrick Moynihan and Jacob K. Javits (5327 Dirksen Senate Office Building, Washington, D. C. 20510) asking each of them to co-sponsor S.2176. Be persistent. If you receive a noncommittal form response write a follow-up letter expressing disappointment at receiving such a form letter and ask for a direct answer... "Will you co-sponsor S.2176 and if not what are your reasons?" Persist!

Welcome, Capital District

I recently traveled to Schenectady where I had the pleasure of meeting with the tenth and newest chapter of our Society, the Capital District Chapter. Ruth Hartman, first President and Ruth Ozarow, Vice President, are the founders of this chapter, and they bring to our organization energy, competence and a keen interest in our legislative efforts. In addition, these clinical social workers

are presently participating in an advanced training program in family and marital therapy. They not only created and introduced this program to the Albany District area but, under Ms. Hartman's leadership, are also presently designing a clinical doctorate program in conjunction with the U. of Mass.

Marsha Wineburgh, CSW

NEW STATE OFFICERS ELECTED

Congratulations to our new State Officers:

Robert P. Galardi is our new First Vice President. Although Bert L. Kaplan, Ed.D. was elected, he resigned in early January. Galardi will be in charge of the Society's *Newsletter* and the General Membership meeting on May 17th. He has served on the State Board as chapter president of Queens and brings to the Board his extensive administrative experience.

Donna Rohlf, Metropolitan Chapter, is Second Vice President and Chapter Development Chair. She has served as head of the State Ethics Committee.

Robert E. Addison, co-chair of the Rally in October and a member of Westchester Chapter, has been elected Treasurer.

Anne Marie Lee, Queens Chapter, is Recording Secretary.

Serving the Society as Members-at-Large will be Gemma F. Colangelo (Queens), State Chair of the Membership Committee; Jay Fischer (Brooklyn), Chair of the Insurance Committee; Rosemarie Gaeta, treasurer of the Staten Island Chapter; Phyllis Gordon, Westchester's president; and Florence Dutko Grossman, past president of Nassau.

Committee appointments:

Alan L. Shanef has been appointed State Education Chair. He has had extensive experience heading the Metropolitan Chapter Education Committee.

David Phillips will head the Ethics Committee; he provides an expertise in social work values and has been a member of this committee since its inception.

All of our officers and committee chairs bring to our Society a great deal of experience and skill. I am looking forward to working closely with them in an effective and progressive program.

Marsha Wineburgh, *President*

LEGISLATIVE EXCHANGE

Report by
Barry K. Mallin, Esq.,
Legislative Advocate

This has been an exciting and productive year for the Society. Together with the executive board and Marty Pollens, Social Action Chair, we have during the past year made progress on a number of regulatory, agency and legislative matters of concern to the Society.

Through our efforts much of the secrecy enveloping the decision-making process of the State Board for Social Work has been broken. Through the Freedom of Information laws we obtained copies of the Minutes of all State Board meetings for 1978 and 1979. Minutes of current meetings are being sent to the Society regularly.

Investigation into the selection process of nominees demonstrated that Society members are eligible and, for the first time, the Society has submitted its own nominees for upcoming seats on the State Board.

Licensing, Chapter 893/77:

As a result of persistent complaints of abuse, the State Board reassessed its procedures for evaluating case histories submitted in applications for licensing under Chapter 893/77. At its meeting of November 9, 1979, the State Board formulated a new policy in which "a small experienced committee" would review the case histories and "appeals would be clear appeals that could be reviewed by a different committee." It is hoped that this will bring a greater degree of professionalism to the evaluation process and result in fairer and less capricious determinations. Members should alert the Society to continuing abuses regarding applications under Chapter 893/77.

Facility Experience:

The State Board also reversed its previous refusal to accept work at certain psychotherapy institutes toward the facility experience qualification under Chapter 893/77. At its meeting of May 24, 1979, the State Board adopted a new policy permitting practice in a clinic operated by a licensed psychotherapy institute to be counted as facility experience.

Medicaid Regulations:

We have been active in two battles on the regulatory front involving state health agencies. Last summer the Society was informed that the State Department of Health would adopt regulations mandating Medicaid reimbursement, under which a clinical social worker could not

bill directly for services provided but must be reimbursed only through a psychiatrist; the services could only be provided under the "continuing direct supervision of a qualified psychiatrist," and the duties and responsibilities of the social worker were to be assigned by a supervising psychiatrist. The regulations were a clear threat to the principle of professional autonomy.

In spite of a vigorous campaign—and indication by the Department of Health that adoption has been defeated—the State Health Department has just recently adopted the regulations. Our fight now enters a new phase, and the thrust by the Society will be to have this regulation repealed.

Outpatient Regulations:

On February 25th we testified for the Society at a hearing held by the State Office of Mental Health on proposed regulations regarding outpatient mental health facilities. We opposed the regulations for the reasons that they diluted and ignored professional standards for mental health specialists and failed to recognize the professional standing and essential role of clinical social workers in an outpatient facility.

Insurance Reimbursement/Parity Bill:

During the past year, we established a closer relationship with the State Insurance Department, which has been instrumental in prodding insurance company malingers to speed up the implementation of Chapter 893/77.

The Insurance Department was cooperative in relaying data on the experience of insurance companies under Chapter 893/77. We learned that insurance company claims of huge premium increases for third-party coverage are greatly exaggerated. This is the kind of information that we must gather and disseminate in laying the groundwork for a vendorship bill that will permit clinical social workers true parity with psychiatrists and psychologists. A parity bill has been drafted by the Society and is currently being reviewed by James Clyne, Deputy Superintendent of the State Insurance Department and by State Senator John E. Flynn. We are persisting in our efforts on this bill and will be meeting in the coming months with legislators from both houses in Albany, with the Governor's office and with officials from the State Insurance Department.

A position paper detailing the reasons for the passage of a third-party parity bill for clinical social workers by the New York State Legislature was distributed at the October Rally. Thanks go to those members at the Rally who gathered more than 1100 signatures on petitions in support of the bill. This kind of cohesive membership effort provides tangible assistance in the fight for passage of the bill.

New Bill:

At our request, an amended bill to provide for the licensing of social work psychotherapists has been introduced in the legislature by Assemblyman Robert Wertz of Suffolk County.

Special Interests:

During the past year, we took a stand against legislative efforts of certain mental health professional groups to gain control over the mental health professional community. Our lobbying efforts have alerted members of the legislature to the potential danger of permitting one special interest group to dominate or monopolize the mental health field. □

IN COMMITTEE . . .

ETHICS

The trend toward licensing; growing financial participation by third parties; and complaints from organized consumer groups have been just a few of the factors which have led many professional groups to become increasingly concerned about ethical practice by their membership. Clinical social workers, of course, have a long tradition of sensitivity to issues of professional values and ethics as they are manifested in practice. Current trends make it important that the Society as a whole and each of its members become even more prepared to deal with the many complex issues in regard to ethical questions.

A committee of the State Society has been formed and is currently completing a preliminary revision of the Society's Code of Ethics. When finished, this draft

revision will be submitted to the Board of Directors and to the various chapters for their input and suggestions. When the revised Code is ultimately approved, adjudication machinery will be established to interpret it and deal with complaints brought under its provisions.

Chapter members who have ideas regarding revision of the current Code or issues which they feel pose ethical dilemmas are encouraged to communicate with the Committee Chair, David Phillips. We are also interested in members who would like to work directly with the committee on code revision and/or will be prepared to work within the chapters on evaluation of the preliminary revision. Get in touch with David G. Phillips, CSW, Director of Social Work, Postgraduate Center for Mental Health, 124 East 28th St., New York, NY 10016, (212) MU 9-7700.

David G. Phillips, CSW →

PERSPECTIVES

Konrad Fischer, MSW, President of the California Society of Clinical Social Work, submitted the following article at the request of the SCSWP. The feature has been edited for publication. Mr. Fischer was also a featured speaker at the October Rally on the topic:

TOWARD A WORKING DEFINITION OF CLINICAL SOCIAL WORK

By Konrad Fischer, MSW

Clinical social work is a professional discipline based upon a practice theory derived from clinical observation, theories and data provided by biological, psychological and social sciences. It is an independently contracted service rendered directly or indirectly to individuals of all ages—from very young children to elderly persons—as well as to couples, families and groups. Case-work, group work, psychotherapy, consultation, administration, community organization, education and research may all have application for clinical social work knowledge and skills. They

REFERRAL SERVICE

The Referral Service Committee has been working actively since the fall to coordinate services and programs. Active chapters at this time are Brooklyn, Metropolitan, Nassau, Queens and Westchester. The Rockland Chapter is currently establishing its referral service, as is the New Jersey Society. A representative from Bergen County has attended meetings for information on beginning its service.

From October through January of this year we engaged the services of public relations and media consultants, who organized and coordinated a radio campaign for the Society. Periodic 30-second public service spots were broadcast on some twenty top Metro area stations during this period. Although only a small percentage of calls resulted in definite referrals, it is encouraging to note that the number of calls coming in grew throughout the period. To date this has been the most effective advertising vehicle. The Committee plans to continue this media format as well as devising sustained print media campaigns in journals and newspapers.

In addition to these efforts on the State level, each chapter is pursuing its own referral program ideas. The increasing momentum of activity at each level should increase visibility in the community and stimulate additional referrals.

Barbara Pichler, CSW

may be used effectively in the areas of health, education, welfare, business and government. Clinical social work has as its objective the assistance of the client in growth and development, facilitating endeavors and objectives individually and in concert, and ameliorating and/or preventing maladaptive conditions and processes. By diagnosis, treatment and evaluational procedures practiced in conformity with a shared code of ethics, clinical social work can accomplish these goals.

Professional status is extended to an individual who has achieved agreed-upon qualifications of competence by virtue of his/her education, training and demonstrated attainment of special knowledge and skills. Status is acquired by earning a degree from an accredited educational institution. Additional professional credentials and status recognized by society are of three types:

(1) **Tacit sanction:** There is no common or statutory law prohibiting either identifying oneself as a clinical social worker or engaging in its activities (practice); there is no qualification or fee requirement.

(2) **Title licensing or registration:** A statutory law prohibits identifying oneself as a clinical social worker without a license. Licensure usually entails some form of accreditation and a fee.

(3) **Licensure of practice:** In addition to title licensing, the statutory law indicates what kinds of activities are to be engaged in, who is exempt from the prohibitions and under what conditions. Requirements may include specific qualifications, examinations and standards of competence.

Licensing is intended to provide a degree of control (policing) over an identified population and/or process to insure protection of the public interest. This by its very nature establishes a vested interest group. Looking at the track record of boards and commissions which regulate professions and business, one notes that they often serve the interests of those whom they are meant to regulate rather than the public they are sworn to serve.

All clinical social work is independent practice regardless of the setting, services rendered, clientele or method of payment. The only exception to this is when special authority and responsibility are inherent by virtue of the assumption of a special role, e.g., appointment of a clinical social worker as a commissioner to a clinical social work licensing board. The requirements for board membership may be a license or a graduate degree. However, the authority of qua commissioner is held by the clinical social worker as an agent of the institution, not personally, regardless of his professional

status. *Responsibilities to the client system are always primary, however.* The policies of the agency do not and cannot take precedence over clinical judgment and ethics.

Direct and indirect service mean merely whether a social worker and the contractee fulfill the conditions as supplier and consumer without a third party or parties. For example, from the point of view of the client/clinical social worker contract at an agency, consultation and supervision of the social worker would be viewed as indirect service even though they are direct services when viewed by the social worker/contract supervisor.

There is also confusion in the macro-micro system of services. A skillful clinical social work community organizer (macro/indirect) must have knowledge and skills in case work and group work (micro/direct) with fundamental knowledge and skills vis-a-vis individual biopsychosocial processes and problems just as a clinical social work case worker (micro/direct) must have the knowledge and skills regarding the cultural, sociological, political, economic, familial forces impacting the patient.

The information derived from applicable disciplines: biology, psychology, sociology, as well as from clinical observation, have not developed as comprehensive and internally consistent theoretical models comparable to the physical sciences. Predictability and reliability are thus reduced. Theories formulated in the physical sciences make possible a higher degree of exactitude, requiring less interpretation and personal judgment by the technician. Clinical social work is therefore an art or discipline depending more upon intuition, empathy and creativity.

Our differences as practitioners—special skills, interests, styles, etc. make for our professional uniqueness. We look at complicated interactive and interfacing systems from a variety of viewpoints, theoretical models and priorities and help the client system to clarify objectives and goals and assist in achieving them.

From my perception it seems most pernicious that some clinical social workers confuse the *field* of clinical social work with the *profession* of clinical social work. The field—like the field of medicine—is much broader and involves ancillary professions and disciplines. Just as medicine includes bacteriology, epidemiology and surgery, etc., so in clinical social work we have anthropology, economy, sociology, etc. To paraphrase the statement about war and peace, the *field* of clinical social work is too important to be left in the hands of the professionals. □

Chapter Update

BROOKLYN

The second reunion of the chapter's Referral Service took place March 21st. In the late spring Brooklyn Chapter members Rosemary Lavinski and Lynda Cohen will conduct a workshop on "Crises of Adult Life." All Society members are welcome and should get in touch with either Cohen or Lavinski for details.

Ruth Margolis, CSW

MID-HUDSON

The Mid-Hudson Chapter has been reactivated. Many requests indicate interest in membership and in Mid-Hudson's programs on clinical social work issues. Membership recruitment continues, including efforts to reach students in the area.

At the last program meeting Betsey Bergman, CSW, led a discussion on how one's lifestyle as a psychotherapist affects one's other important relationships. She addressed the question of balancing professional and personal concerns, needs and interests.

Our next meeting is scheduled for April 15; Carolyn Bersak, CSW, will talk on "Treatment of the Borderline Patient—Theory and Technique." Ms. Bersak is a doctoral student at Adelphi University and an instructor in the social work department at Marist College and in the Hudson Valley Adelphi program.

We look forward to developing an active chapter both through increased membership and by varied programs that will meet the needs of seasoned professionals as well as newer members. We would welcome hearing from Society members willing to offer workshops in Poughkeepsie.

Evelyn Hill, CSW

NASSAU

At a general membership meeting and inaugural party on October 7th, Nassau chapter members met their newly elected officers: president Margaret M. Isbell; vice president Maria P. Warrack; corresponding secretary Nancy Van Dyke; treasurer Rima Ogrin; and members-at-large Joan Berman, Selma Lane, Joan Nobler, Gloria Sandler (membership) and Marcia Zigelbaum (program). Under the leadership of past president Florence Dutko Grossman, Nassau tripled in size and provided its membership with interesting and stimulating programs.

During her term Margaret Isbell plans to encourage individual involvement by all chapter members. She brings to the presidency an intriguing and varied background ranging from

service as a Captain in the USAF, teaching in the Delaware State Penitentiary, and acting as Robert Kennedy's emissary in touring European prisons to gather information on educational systems.

As part of the chapter's ongoing educational effort, a three-session workshop November 10th was attended by some fifty people. Joyce Edward, a Diplomate of the Society, began the program with a paper entitled "Borderline Organization as Related to Vicissitudes in the Separation-Individuation Progression". Dr. Mahler's theoretical contributions were examined in terms of the way in which they illuminate early developmental difficulties leading to borderline and/or narcissistic organization. Ms. Edward also summarized Dr. Kernberg's and Dr. Kohut's theories of the borderline personality.

The second paper, delivered by Dr. Martin Greene, concerned "The Function of the Silence of the Therapist in Actualizing and Working Through Object Loss". He illustrated how the fear of silence is related to loss of love, and how denial defenses are used to keep the experience below consciousness. The dynamics of this kind of resistance was demonstrated with case material. Dr. Richard Harrison explored the theory and techniques involved in "Treatment of the Obsessive-Compulsive Personality". Dr. Harrison presented a detailed account of the treatment of such a patient, elucidating how his technique was related to the theoretical orientation. His presentation included not only dialog, dreams and transferential material, but counter-transferential reactions as well.

On December 7th Nassau held another in a series of closed meeting case studies. Society Fellow Patsy Ann Turrini discussed her treatment of a medium borderline patient. She showed how a knowledge and use of the Mahler-Blanck theory, combined with preverbal reconstruction, helped the patient grow and mature. This paper will be incorporated into a text on the use of ego psychology to be published under the auspices of the Hunter College School for Social Work.

An all-day seminar on Family Therapy was held March 8th at which Gerda Schulman, MSW, LL. D., presided. Short Term Therapy is the topic for the April 12th seminar at North Shore University Hospital, Manhasset; Leopold Bellak, M. D., will speak.

We note with pride that Isidore Shapiro, Nassau County Commissioner of Mental Health, and a Diplomate of the Society from Nassau Chapter, has been named by Governor Carey to the New York State Council for Mental Hygiene Planning. This fifteen-member, unsal-

aried panel establishes statewide goals and plans for services to the mentally disabled.

Mitzi Mirkin

QUEENS

This past October the Queens Chapter held its second all-day Annual Education Conference at Queens Children's Psychiatric Center in Bellerose. The guest speaker was Dr. William Kirman, psychoanalyst and educator, author of the recent book, *Psychoanalysis in the Schools*, who addressed the group on "The Aggressive Child, in School and in Therapy". The topic was directed to both educators and therapists working with children.

Dr. Kirman presented some thought probing and controversial ideas for dealing with the aggressive child, both in the classroom and in the consulting room. Dr. Kirman's theoretical appreciation of the origin of aggression is psychoanalytically based, but his methods of handling a child's expression of this behavior are varied, imaginative, sometimes controversial, but most interesting, and this provoked much stimulating comment and reaction from listeners.

During the afternoon several workshops highlighted specific forms of aggressive behavior: e.g., the out-of-wedlock teenage mother; the withdrawn child in the community, etc. All the workshops were well attended and a professionally stimulating and enjoyable day resulted.

The Queens Chapter is five years old. A champagne party given for chapter members and spouses commemorating the anniversary was held January 6th at the home of chapter president Robert P. Galardi.

The Queens Chapter, as some earlier chapters, was independently established within the Society in 1975. Its first president, Cecil Dunn, was dedicated to forming a separate chapter for clinical social workers within the borough where they worked and lived. Initially the chapter was "small" in terms of membership but more recently has increased its membership to forty and is defined now as a "medium" sized chapter of the Society.

Queens Chapter members have always addressed themselves to the general goals of the State Society and have actively supported state functions. Members holding state level positions include Robert Galardi, new first vice president; Gemma Colangelo, who retains her position as state membership chair, has been appointed member-at-large; and Anne Marie Lee remains the Society's recording secretary. Election of new chapter officers will take place in May.

Note: New telephone number for Queens Referral Service is 212-539-6887; Haruko Brown, CSW.

Robert P. Galardi, CSW

ROCKLAND

Rockland County, the smallest county geographically in New York State, is home to one of the newer chapters in the Society, begun two years ago.

In the beginning the chapter struggled to find ways and means to attract both members and prospective members to meetings, without much success. The format of meeting in someone's office after work on Friday was not conducive to attracting healthy attendance. The chapter's second year saw dramatic changes. Meetings were held in members' homes on Friday evenings. The business portion of the meeting was kept to an hour and was followed by a clinical presentation by a different member at each weekly meeting. This more social ambiance helped considerably. Chapter meetings have generated a steady increase in attendance.

Recent clinical presentations have included: "Sex Therapy with People Who Have Suffered Physical Disfigurement Through Illness or Surgery"; "The Use of Art in Family Therapy"; "Beginning a Private Practice"; and "Exploring Group Therapy".

A good indication of an actively functioning organization is the activity of its committees. We are pleased to report that we now have a working referral program, as well as social committees which are "alive and kicking".

At this writing the chapter plans an Open House March 1st to attract new members. Plans are in progress for the chapter's first all-day workshop this fall.

Active membership renewals as well as new applications for membership attest to Rockland's health and vitality. Chapter members are encouraged to active participation on the state level; at the same time, we urge the State Executive Board to hold at least one of its monthly meetings in Rockland next year.

Monty Kary, CSW

WESTCHESTER

The Westchester Chapter's fall All-Day Professional Institute took place September 15th at New Rochelle Hospital Medical Center. Gertrude and Rubin Blanck each read a paper relevant to the theme, "A Developmental Overview of Narcissistic and Borderline Problems and the Implications for Technique." At this writing the chapter's spring Institute is scheduled for March 22nd at Phelps Memorial Hospital, North Tarrytown, with the theme of "Transference and Countertransference: Issues, Problems and

Implications." Keynote speaker Joseph Giordano will speak on "Ethno-Cultural Issues in Transference and Countertransference." Four 4-hour workshops are scheduled by SCSWP members: *Workshop 1: Countertransference and the Beginning Clinical Social Worker*; Chair—Ruthe Feilbert-Willis, MSW, CSW; *Workshop 2: Differences Between Patient and Therapist—Issues for Countertransference*; Chair—Phyllis Gordon, MSW, CSW; *Workshop 3: Issues of Transference in the Differential Use of Individual and Group Psychotherapy*; Chair—Renee Pellman, MA, Ph. D., *Workshop 4: Beginning Cotherapy and Transference Issues*; Chairs—Robert E. Addison, MSW, CSW, Nohmie B. Myers, MSW, CSW.

In addition to regular formal meetings, Westchester holds monthly group discussions for members interested in peer supervision. Each month a different case is presented for discussion and review

by group members. A consistent number of social workers in the community have expressed interest in these programs.

Chapter members are informed of the latest legislative news from Albany and Washington and, when appropriate, are requested to write to legislators in support of bills currently pending.

We are pleased to report that membership increased to 142 from 100 in less than two years. Considerable credit goes to the Information and Referral Committee, headed by Rita Benzer and Nan Miller.

Westchester will hold elections in May. As the nominating committee prepares the slate of officers, chapter members are discussing the future direction of the Society and the Westchester Chapter, which will continue as a focus for sharing professional information among its members and as an active participant in the social work community.

Phyllis Gordon, CSW

Proposed Amended Third Party Payment Bill

This proposed bill will correct the inequitable and discriminatory system of only reimbursing the patients of psychiatrists and psychologists, while denying such reimbursement to patients of clinical social workers for the same psychotherapeutic services. The bill, now in force in New York State and reproduced in its entirety, contains the proposed amendments. Text enclosed in brackets indicates desired deletions; underscored copy shows proposed additions.

Section 1. Subdivision sixteen of section one hundred sixty-two of the insurance law, as added by chapter eight hundred ninety-three of the laws of nineteen hundred seventy-seven, is amended to read as follows:

16. Every insurer issuing a group policy for delivery in this state which policy provides reimbursement to insureds for psychiatric or psychological services or for the diagnosis and treatment of mental, nervous or emotional disorders and ailments, however defined in such policy, by physicians, psychiatrists or psychologists, must [make available and if requested by the contract holder] provide the same coverage to insureds for such services when performed by a social worker, within the lawful scope of his practice, who is certified pursuant to article one hundred fifty-four of the education law and in addition shall have either (i) three years post degree experience in psychotherapy, which for the purposes of this subdivision shall mean the use of verbal methods in interpersonal relationships with the intent of assisting a person or persons to modify attitudes and behavior which are intellectually, socially or emotionally maladaptive, under supervision, satisfactory to the state board for social work, in a facility, licensed or incorporated by an appropriate governmental department, providing services for diagnosis or treatment of mental, nervous or emotional disorders or ailments, or (ii) three years post degree experience in psychotherapy under the supervision, satisfactory to the state board for social work, of a psychiatrist, a certified and registered psychologist or a social worker qualified for reimbursement, or (iii) a combination of experiences provided for in paragraphs (i) and (ii) totalling at least three years. The state board for social work shall maintain a list of all certified social workers qualified for reimbursement under this subdivision. Such coverage shall be [made available] effective at the inception of all new policies and, with respect to policies issued before January first, nineteen hundred [seventy-eight] eighty-one at the first annual anniversary date thereafter, without evidence of insurability and at any subsequent annual anniversary date subject to evidence of insurability.

Section 2. Subdivision eight of section two hundred fifty-three of such law, as added by chapter eight hundred ninety-three of the laws of nineteen hundred seventy-seven, is amended to read as follows:

8. Every health service or medical expense indemnity corporation issuing a group contract pursuant to subdivision six of this section or a group remittance contract for delivery in this state which contract provides reimbursement to subscribers or physicians, psychiatrists or psychologists for psychiatric or psychological services or for the diagnosis and treatment of mental, nervous or emotional disorders and ailments, however defined in such contract, must [make available and if requested by the contract holder or in the case of group remittance contracts by a specified proportion of contract holders determined by the corporation] provide the same coverage to persons covered under the group contract for such services when performed by a social worker, within the lawful scope of his practice, who is certified pursuant to article one hundred fifty-four of the education law and in addition shall have either (i) three years post degree experience in psychotherapy, which for the purposes of this subdivision shall mean the use of verbal methods in interpersonal relationships with the intent of assisting a person or persons to modify attitudes and behavior which are intellectually, socially or emotionally maladaptive, under supervision, satisfactory to the state board for social work, in a facility licensed or incorporated by an appropriate governmental department providing services for diagnosis or treatment of mental, nervous or emotional disorders or ailments, or (ii) three years post degree experience in psychotherapy under the supervision, satisfactory to the state board for social work, of a psychiatrist, a certified and registered psychologist or a social worker qualified for reimbursement, or (iii) a combination of experiences provided for in paragraphs (i) and (ii) totalling at least three years. The state board for social work shall maintain a list of all certified social workers qualified for reimbursement under this subdivision. Such coverage shall be [made available] effective at the inception of all new contracts and, with respect to contracts issued before January first, nineteen hundred [seventy-eight] eighty-one at the first annual anniversary date thereafter, without evidence of insurability and at any subsequent annual anniversary date subject to evidence of insurability.

Section 3. This act shall take effect January first, nineteen hundred eighty-one.

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