N. Y. S. NEWSLETTER OF THE SOCIETY OF CLINICAL SOCIAL WORK PSYCHOTHERAPISTS

EMPIRE STATE BUILDING, 350 FIFTH AVENUE, SUITE 3308, NEW YORK, N. Y. 10001 TELEPHONE: 212 564-9166 VOL. IX, NO. 1 JUNE, 1977

THE PRESIDENT'S MESSAGE

As your new President, I want to say "Hi!" to all of you and let you know that I am really looking forward to the next two years. I also want to thank Nancy Palazzolo for the great job she did as President and in helping me become acquainted with the issues of the Presidency.

Well, as you probably already know, we had a membership drive last fall, instituted by Gemma Colangelo, our very hardworking membership chairman who contacted every one of the 11.000 certified social workers in New York State. It was an awesome job, but we have more than one hundred new members as a result and more are pouring in every day.

Since I took office, we have two new chapters-Brooklyn and Rockland. Rosa DucThanh. our chairman of chapter development, is working hard with five groups in Northern and Western New York who are interested in forming chapters.

As of the first of the year, we have a brand new executive secretary, Mitzi Mirkin, who, together with Gemma has been working day and night to deal with both the new members but also with the flood of renewals. We have changed our fiscal year which now runs from January 1 to December 31. When Mitzi isn't working on membership, she is handling mailings, answering telephone queries about the Society, dealing with printers and doing all the work that our fast growing society can and does give to her. Mitzi is a lifesaver and will free your President and other officers to do a lot more. Mitzi is not new to the Society. For a number of years she has functioned superbly as the Secretary for Nassau County Chapter, a job she still holds.

During the last week in March, the New York State Board of Regents voted to implement the third party payments bill. At our general membership meeting on April first, Philip Johnston, Executive Secretary of the New York State Social Work Board said that the first applications would be going out to those 3,000 certified social workers who had requested them within a few weeks.

National Federation has begun a Newsletter, the first issue of which is at Star Mailing and will be going out to you very soon. The second issue, just published, should be reaching you within a few weeks. The aim of the Newsletter is to acquaint each member with what members in other states are doing. Be sure not to miss the article on insurance. It is hoped that Federation will be soon offering professional liability insurance group coverage to members of the State Societies. A number of people have mentioned to me recently that they wished we had a Federation Newsletter and that we should be working on getting low cost insurance for our members.

Please support your local

chapter by letting the Executive Board know what you need and also what you can do for them. We need people who will work on many different committees. Please don't hesitate to call me if vou have ideas or comments to offer. My number is 914-724-8564.

Abbie Blair, President

EDITORIAL

Conrad S. Semler

We would like to take this opportunity to thank the membership for their positive response to the last issue of SCSWP. It is gratifying to know that the many hours devoted in putting out an issue is well received. It gives us the needed boost and motivation to continue to give our Society the publicity and exposure it so very much needs. Regretfully this cannot be done more frequently. We apologize for any shortcomings of the last issue, hoping this issue will make up for, not so obvious at the time, omissions and distortions.

We would like to clarify at this time our policy concerning advertising. All commercial vertising is subject to the following fee scale:

> Full Page \$100.00 Half Page \$50.00 Quarter Page \$25.00

The editorial staff shall determine what is commercial advertising based on who is advertising and the purpose of such advertising. If advertising is to solicit patronage for the purpose of

benefitting a particular agency, chapter or it's sub-committee, then our fee schedule is in effect. However, all state committees and state sub-committees are entitled to free commercial advertising. If a chapter would like to enlist patronage for a particular service and event, we suggest it be submitted as part of Chapter News in the form of an announcement.

It is our intention to publish SCSWP in the Fall and Spring. The cutoff dates for submitting articles to the State Newsletter will be April 1 for the Spring issue and October 15 for the Fall issue. This will give our staff time to track down chapters who didn't submit articles and edit materials in a more timely manner. Again, all materials must be typed and double spaced. It is important that all articles be submitted by the deadline. When the newsletter is delayed, as this issue, we lose a great deal of valuable advertising. Articles that are late, sent not properly typed, poorly formulated and written, delay publication at the expense of the membership and Society on the whole. We apologize to our advertisers and

hope that all future issues will be published more timely.

In closing, we hope that you enjoy this issue of SCSWP and submit any criticisms or comments you may have in writing to us. We will respond to and perhaps publish in a "Letters to the Editor" column for the Fall issue.

We wish all a happy and safe summer. We hope the fall will be an active, fruitful and eventful season with all chapters contributing through activity to the goals of the Society and the profession.

THIRD PARTY PAYMENTS

Marty Pollens, CSW State Legislative Chairman

This column is a follow-up to my earlier article in the December issue of the Newsletter. Implementation of our Third Party Payments Law is proceeding; however, not without the usual bureaucratic problems that must be anticipated. On the balance side, the new law is beginning to bring our profession increased recognition as an independent, responsible provider.

1. At the General Membership meeting you indicated that a number of insurance companies were providing the social work option at no increase in premium. Which companies have decided on following this policy?

Aetna, Massachusetts Mutual, New England Mutual Life Insurance, Provident Mutual, Union Labor Life and Connecticut General, have all indicated their intention, at least for the first year of providing coverage for clinical social work services, to offer this option at no extra cost to the group. However, the companies have indicated that continuation of this policy is dependent on "good experience" with the groups to which this coverage is offered. That is, should provision of reimbursement of social work services become too costly to the company, a premium increase for the following year might be instituted.

2. Are there any companies that have announced their intention to increase premiums for those groups wishing to purchase the social work option?

Prudential Insurance Company of America, the Phoenix Mutual Insurance Company, the State Mutual Assurance Company, is a partial listing of companies that intend to file for premium increases. To date, however, I have not been notified by the State Insurance Department that such increases have actually been filed for and approved. In other words, this information is to be considered unofficial until I have received official confirmation.

3. What is the general rationale that insurance companies have been following in their intention to file for premium increases?

The rationale provided by the Prudential Insurance Company for the increase in premium is the necessity, felt by the company, to demarcate an "option." In discussions I have had with insurance executives from other companies, there was concern about criticism from agents that the company was "giving something away for free." In other words, the agents would not benefit commission-wise if there were no charge for the additional provider.

Wherever possible, I have

provided insurance company actuaries and legislative analysts with the limited available documentation regarding the cost-effectiveness of clinical social work psychotherapy. In at least two instances, as a result of the personal contact and data provided, I was effective in persuading the company to offer the benefit without extra cost.

4. Is it true that mandatory maternity benefits are being tied to the social work provider option?

My information regarding this specific problem is admittedly incomplete. According to the feedback I have received from colleagues, the Prudential Insurance Company had told its clients that any contract which is changed or amended to include the social work option would have to include mandatory maternity benefits. The premium for the maternity benefits could, cording to my sources, be very costly-up to \$60 per year per employee. Therefore, it could be anticipated that employers would be reluctant to ask for the social work option if such a rider were connected with a very costly maternity benefit. I will have to verify this information and report back to the membership in a later Newsletter.

5. Have you had any reports regarding the willingness of contract holders to request the social work option?

Society members have been reporting numerous difficulties encountered with contract holders. This was to be expected given the construction of the legislation. For example, one major international corporation, operating in New York State, wrote the following to the patient of a Society member:

The Corporate Benefits Staff has reviewed your letter and the N.Y. State bill you forwarded and advise that the New York State Law does not require that employers provide coverage for services rendered by licensed social workers.

Staff also advises that they are in the process of considering... position in this area, and whatever the outcome, it is important to realize that what we do in New York State we would do equally in all other states. Since only approximately twenty states have license laws for social workers, we are very concerned that we do not place ourselves in the position of providing coverage for services by individuals who clearly are ineligible.

Another large, international firm advised a patient that since the company was not based or incorporated in New York State and since their insurance was provided by a company that was out-of-state, neither the corporation or its insurance company were bound by New York State Insurance Law. This is a rather circuitous, legalistic way of saying, "we're not interested in taking the option."

I have had further reports from an agency director on Long Island that several school districts and unions (including 1199) were not responding positively to requests for the option.

I had anticipated, from the beginning, that there WOULD be difficulty in persuading especially large corporations and institutions to request the option because of their basic "conservatism" to begin with, and, their fear of greatly increased premium costs. Elsewhere in this report I will discuss, in greater detail, possible strategy in approaching large corporations.

Although we are facing problems with several large corporations, there have been POSITIVE reports that I have received via the Clearinghouse regarding contract holders.

Those Society members who are seeking to persuade the personnel directors of hospitals in the metropolitan area to take the option should be delighted to learn that New York Hospital-Cornell Medical Center HAS elected to request the social work option. In negotiations with hospital officials, it might be helpful to mention the fact that New York Hospital, with its large staff and overhead, will be offering expanded provider benefits.

And, I have also had numerous through the reports Clearinghouse, in addition to firsthand experience in my own practice, that patients in business for themselves, that is, owning contracts, own their requesting the social work option, even when it means potentially increased premium costs. In the process of asking for coverage, these patients of clinical social work psychotherapists have been educating lower level insurance claims personnel about the law.

Another exciting by-product of our legislation comes from New Jersey. A colleague reports that a patient holding an INDIVIDUAL contract issued in NEW JERSEY has been told that benefits will be paid for services of a qualified social worker.

Our recognition as legal providers is essentially a process that will occur in time. It is essential to recognize that even the psychologists had a struggle THEIR LAW WAS AFTER PASSED. The Metropolitan Life Insurance Company refused to claim for services pav the qualified provided by a

psychologist AFTER that profession had achieved its third party payments law. The Moore vs. Metropolitan case emerged as psychology sought to achieve its recognition as a third party vendor.

6. How does the general economic climate in our country relate to our difficulties in persuading contract holders to request the social work option?

While the news about negative responses from some quarters is discouraging, it is important for the profession to keep PER-SPECTIVE in this area.

We are living in an era of double-digit inflation. Health care costs, in particular, have risen at a greater pace than costs, in other sectors. Corporations are all preoccupied with finding ways in which to reduce expenditures.

One large brokerage house in New York City, for example, which has been self-insured, decided, rather recently, to eliminate ANY coverage for outpatient mental health care. The company found that it was paying \$1.10 for every \$1.00 in benefits realized by employees. It was felt that cost factors were just too high.

In connection with the high cost of comprehensive mental health care, you might also be aware that many major medical policies that reimburse up to 80% for general medical care, reimburse only to 50% for mental health care, often with a \$100 deductible. Prior to the entry of clinical social work into the family of legally qualified vendors, policies had become more restricted.

And, in further corroboration of this trend in the insurance field, an article in the November 2, 1977 issue of the Wall Street Journal reported that "as part of their campaigns to pare health-care costs in the face of federal insurance programs, insurers have begun promoting such deductibles to corporate

customers again . . . Metropolitan Life Insurance Company, for example, in the past three months has convinced three companies try deductibles on an experimental basis in limited territories. Metropolitan has designed studies around these programs to see if they do, indeed, reduce the outlay for health care . . . Colorado Blue Cross has proposed reintroducing deductibles, giving companies a choice of \$100, \$250 and \$500 deductibles . . . The Atlanta Blue Cross currently is offering deductibles affecting some 33,000 contracts or policies, mostly for small groups and companies.'

Although our legislation lacks the important mandatory clause, Ken Adams, lobbyist representing our National Federation of Societies of Clinical Social Work on the national level, has told us at the Society's recent Installation and Awards luncheon, "you are far ahead of your colleagues in other states who have no such legislation. Your task now is to gradually, over time, expand the scope of the legislation."

7. What, then, can be done about the large corporations, especially those who are resistant to requesting the additional provider?

In approaching the Corporate Benefits officer of a large corporation, the practitioner must bear in mind that the task will NOT be easy! One must expect the corporate official, especially if the company is resistant to requesting the additional provider, to employ the usual bureaucratic techniques "passing the buck," of pleading "middle man," and other various kinds of fancy legalistic explanations to "cover up" basic attitudes toward the option. It is extremely important, in such a situation, to "wade past" the "content," to disregard the flack, as it were, and to keep in mind ONLY the essential arguments for requesting the social work option: A. The cost-effectiveness of social work psychotherapy

services. A brochure is currently in preparation by the Clearinghouse in association with NASW documenting the pertinent research in this area. Emphasize the more moderate fee scale and experience in other states that have PROVED that costs have NOT gone up as a result of social workers being included as third party yendors.

B. The necessity and importance of employees having the "freedom of choice" to select the provider of their choice from among ALL those legally qualified in this State, any other practice, for all practical purposes, constituting a restraint of trade.

C. The importance of the corporation having as its goal the provision of comprehensive mental health services as provided by ALL qualified practitioners in a given state. In other words, ask why the corporation could not approach the problem from the point of view of SERVICES PROVIDED as opposed to exclusive focus on the PRACTITIONER.

For example, if the identified need is eye examinations, the corporation could make available this service for employees as delivered by ALL QUALIFIED PRACTITIONERS IN THE STATE operating within the scope of their license in this area.

Prior to approaching the corporate official and utilizing the above conceptual arguments, the following are crucial prerequisites.

A. Ascertain the name of the insurance company providing the group health policy for the specific corporation.

B. Call the Home Office of this insurance company; ask for the Chief Group Health Actuary; ask the Chief Actuary if policy has been decided upon regarding Chapter 893 of the Laws of 1977, which includes certified social workers.

C. If the company has NOT made a final determination regarding a premium increase, suggest that our Clearinghouse can provide cost-effectiveness data to assist in making a final decision.

D. If the company HAS made a final determination in the direction of filing for an increase in premiums ask the actuary what the level of increase will be. Request the rational data on which this increase is based. If possible, try to get this information in writing; send a copy to the Clearinghouse.

E. If the insurance company is NOT raising its premium, it becomes easier to approach the Corporate Benefits Officer with this information. Then, if he complains about cost, you can point out that the company will not be charged for the rider.

F. If the insurance company IS raising its premium, then the approach should be one of minimizing the premium crease, but maximizing the investment aspect of the option (as explained in my earlier report). As a result of the lower, more moderate fee scale of clinical social work, the corporation should ultimately enjoy a "better experience rating" with the insurance company and future increases in the premium should be lower than if the employee population was limited to utilizing only the higher priced practitioners. The future will bring increases, but the percentage raise should be substantially less with the introduction of clinical social work Also. providers. emphasize the "freedom of choice" implications inherent in requesting this option. And, point out the reduction of in-patient medical and psychiatric care claims that result from increased utilization and greater availability of practitioners on an out-patient basis, and the less expensive nature of out-patient care.

8. Since it is too early to return to the State Legislature for the mandatory clause, what can be done at this point in time to prepare for such a campaign?

It is ESSENTIAL that all Society members write to continued on page 5

Governor Carey, Perry Duryea, Minority Leader of the Assembly, and Senator Warren Anderson. Majority Leader of the Senate, all of whom have indicated interest in running in the gubernatorial election this year. Sound them out about where they stand regarding a law that would give clinical social work parity in third party payments with psychology and psychiatry. Indicate your interest in supporting and voting for the candidate who is most committed to "freedom of choice" for the PATIENT; send any responses received to Clearinghouse.

Also, please, please, contact your local Congressman and ask him for his support and cosponsorship of HR 4330. This bill would insure our inclusion as a MEDICAID/MEDICARE provider in agency and private settings. Such legislation, if passed into

law, would set the stage for our participation in National Health Insurance. And, it would set a national precedent that could be utilized in our efforts on the Albany level to achieve the mandatory clause. These efforts are all interrelated.

9. How do I contact the Clearinghouse?

Please send only written inquiries to the Clearinghouse at 3 Webb Road, North Tarrytown, N.Y. 10591. The Clearinghouse is not sufficiently staffed to handle phone queries. Your letters will be answered within the week. Please send copies of any correspondence received from contract holders or from insurance companies.

LATE BULLETIN

I am advised that the Mandatory Maternity Benefits Law is being challenged by the insurance

companies and an Appeals Court decision on its constitutionality is expected shortly. Roland Ostrower of NASW advises that the lower courts have ruled that maternity benefits must be included whenever a policy is amended, altered or revised, but not if it is merely renewed. One way in which to obtain coverage for CSW's without having to add maternity benefits is to recommend that the insurance company utilize an internal administrative decision to include social workers as eligible providers, rather than a policy amendment.

Good News. The prestigious and world-famed Sotheby Parke Bernet Gallery has informed its personnel that "as of Feb. 1, 1978, our insurance coverage has been extended to allow for reimbursement of fees for MSW therapists."

PSRO

To briefly report on the progress of the Professional Standards Review Committee, the possibility of forming a social work coalition involving the SCSWP, NASW-Metropolitan Chapter and the Society for Hospital Social Work Directors looks more favorable. With the formation of such a coalition, the social work profession in New York State would have a truly representative body which could request a seat on the liaison networks which advise both local and state medical PSR committees. These committees are empowered by HEW to set standards and criteria for health care review and peer evaluation for physicians as well as allied health professions, of which we as certified Social Workers, are. There are about ninety other groups in New York State including nursing, pharmacists, dentists, etc. seeking representation on these PSR liaison networks.

In the December, 1977 issue of the NASW Newsletter, the membership of the Metropolitan Chapter of our State PSR Committee was mentioned. At this time, I would like to introduce

Marsha Wineburgh, State Chairperson

the chairpersons of our other chapter PSR Committees, all of whom have been important in helping to formulate and implement a unified effective approach to the Medical PSR Committees in their areas: Staten Island Chapter- Theda Salkind; Queens Chapter - Ann Marie Lee: Suffolk Chapter-Rubenstein: Herb Nassau Chapter-John Verbeeck: Westchester/Rockland Chapter-Gloria Aronson. We are hoping to have a chairperson from the new Brooklyn and Mid-Hudson Chapter shortly.

STATE REFERRAL & INFO SERVICE

The State Referral Service committee met April 15 at the home of Abby Blair. The meeting was attended by representatives from Queens, Westchester, Staten Island, Manhattan, and Mid-Hudson. The meeting was

useful to all of us as we exchanged ideas and strategies for developing our respective services. The State board has allotted some monies to us this year, so we will be organizing some methods of effective general

Barbara Pichler, Chairperson publicity for the services. This meeting also gave us a chance to define and discuss problems in the internal mechanism of running a responsible referral service.

CLINICAL SUPERVISION FOR SOCIAL WORKERS

In response to many requests, The Society of Clinical Social Work Psychotherapists, Inc. has established a division of Supervision and Consultation Services.

All social workers will now be able to avail themselves of private supervision and consultation at very reasonable fees. The service is intended for social workers, both in agencies and in private practice, either as a supplement to ongoing supervision, or to serve as primary supervision or consultation.

Supervisors are "Fellows" of the Society, meaning they have extensive training and experience.

Many have specializations in a particular area of clinical practice. We are offering both individual and group supervision. To allow us to do the most effective matching of your preferences, please complete the addressed form below, detach and mail it now. We will give you a choice of names as much as this is feasible. You will be notified within two weeks of your request.

Specific times will be arranged by you and the supervisor. Meetings will be held at the supervisor's office.

Fees are: Individual Supervision of 45 Min.,

\$15.00 Group Supervision of $1\frac{1}{2}$ hours, \$8.00

This is another service which the Society of Clinical Social Work Psychotherapists, Inc. is offering the social work community in an attempt to widen communication and increase the high standard of professionalism in our field.

Return to: Susan Hyman Dowell, C.S.W. Society of Clinical Social Work Psychotherapists 425 East 86th Street (Suite 1D) New York, N.Y. 10028

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CHAPTER NEWS

QUEENS CHAPTER

Robert Galardi Just in case you missed us last issue and were wondering what became of the Queens Chapter, here we are, with lots of things happening: Congratulations to ROSA DUC THANH!!! She was elected Vice President of the State Society A hearty "thank you" to KHANU CHANDNANI. who worked with the State Program Committee, planning the memorable and delicious 10th Annual Luncheon last January Continued recognition and success for GEMMA COLANGELO, who has the unique distinction of holding two important State positions: Membership Chairperson Member at Large Good luck to AUDREY ALBERT, who recently volunteered to represent the Queens Chapter on the State Social Action Committee. If this sounds like a lot of support to the State from Queens, we also "host" the executive board meetings, fairly regularly, at the Queens Children's Psychiatric Center in Bellerose.

In between State duties, Queens Chapter members keep things "cooking," at home:

Our referral service has recently undergone a complete "revitalization," including revision certain membership requirements. policies procedures. In addition, vigorous effort in the form of advertising and community contacts has brought the service additional referrals and recognition within the borough. Who's responsible for this? Our Referral Service Committee, headed by PAT LANDY, ANN MARIE LEE and NORMA VARGA.

What else is happening? Plenty!!!

General Membership meetings continue on a regular monthly basis with planned speakers and topics. Just a brief sampling: February—WALTER SAMROCK,

MSW. NYC Patrolman and Society member, described to chapter members his work with the Police Department in their Counseling Service Division, where he provides counseling and elp to NYC patrolmen and their families with alcohol or emotional problems. Walter used Albert Ellis' "Rational Emotive Therapy" in attempting to reach and involve policemen referred to his service for help. In March, several chapter members attending a regular seminar with **James** Masterson will address us on theories and treatment of preoedipal, borderline patients.

Besides our "en famille', program, the Program Committee of the Queens Chapter is planning a spring workshop, which should interest, perhaps delight and certainly stimulate, all Society members and nonmembers. The topic will be "Sex Therapy." Stand by for details and notices! What could be more professionally appropriate, Spring and Sex therapy!

NASSAU CHAPTER

Mitzi Mirkin

There ought to be a dictionary term for a chapter whose membership has just shot over the hundred mark, but, if there is, I don't know it. So let's just give pats ourselves 100 congratulations (that's one from each member, folks!), and settle down to the serious business of accumulating our second hundred. This kind of makes the growing pains worthwhile. though, doesn't it?

Program-wise, we've had a meeting and a workshop since last we wrote, and both, we're happy to say, were well-attended and well-received. Fate smiled on us, and all our programs were scheduled between snow storms, not during them.

On February 3rd, the subject was "Dreams", from varying approaches, discussed by three of our members. Jovce Edward read a scholarly and stimulating paper on the use of dreams in furthering development. Marty Greene emphasized his adaptational, interactional approach treatment. Richard Harrison talked about how dreams are used as a release of tension and also dealt with his use of dreams as a means of getting to the conflictual areas of a patient.

On March 11th, we ran a threesession, member-led workshop at the Hofstra University Student Center. In a workshop titled, "Transference and Interpretation: Edo Psychological Point of View", Bert Kaplan discussed the need to understand maturational development in order to effectively treat the borderline patient. He illustrated his talk by giving examples of his own intervention with some difficult cases.

The second session was called "Differential Diagnosis: Implications for Treatment", and was presided over by Stanley Foodim. Stan pulled together for us the important diagnostic categories and illustrated the importance of having a clear diagnosis in order to treat the patient effectively. He also used examples of cases where differential diagnosis was vital for the success of treatment.

In the third workshop—"Use of Hypnosis in Clinical Practice;;— there were four members present from the Long Island Society of Clinical Hypnosis, including Anthony Gaito, a member, too, of our Nassau chapter, S.C.S.W.P. They pointed out the need for relaxation, as well as for thinking of a pleasant experience, in order to help establish a climate for successful treatment.

Our Public Relations Chairperson, Peggy Isbell, in a burst of continued on page 8 Springtime energy, has sent a release dealing with Third Party Payments to approximately 65 Long Island newspapers. If this should pop up in your local paper, please bring it to the attention of Peggy, at 369 Carpenter Ave., Sea Cliff, N.Y. 11579.

STATEN ISLAND

Sam Sterk

SOCIAL ACTION

Our social action chairperson, Arthur Stein, has been active in helping Marty Pollens with the Legislative Committee. With Art's aid, the S.I. Chapter recently invited major political figures from the Island to hear our concerns and to enlist their aid as it regards deficiencies of the third party payment bill. Mr. Tony Ruggiero, special aid to Senator Marchi came and gave us a number o f constructive suggestions. He suggested that we document statistically how we are being utilized both in the public as well as the private sectors. We have to demonstrate how the use of social workers reduces cost as it compares to other mental health professions and reduces length of inpatient hospital care and reduces absenteeism and tardiness from work situations. Mr. Ruggiero also felt that we should elicit the aid of Senator Landes and others who aided us in the past in the legislature to reintroduce the bill so as to amend it to eliminate the clause discretionary contract holders now have. Mr. Ruggiero emphasized how politicians are most concerned about costs and dollars and that we should gear our efforts in that direction. It might be worthwhile for the State Society to engage a research specialist to accomplish these aims. State Assemblyman, Elizabeth Connelly of Staten Island who is the Chairman of the Mental Health Committee in the Assembly has indicated a strong interest in meeting with us in her office to discuss issues of importance to our profession. We had a similar response from State Assemblyman Louis DeSalvio. Mr. Stein needs to be congratulated for his superb social action efforts.

ON THE SOCIAL FRONT

The Sterks recently had a party for the members of the Staten Island Chapter which was a big success. We hosted a combined membership drive and public relations dinner party. We invited all Social Workers who reside and/or work on Staten Island and acquainted them with our organization and its functions.

REFERRAL AND IN-FORMATION PANEL

Some calls and inquiries have been coming in. Under the able leadership of Mrs. Theda Salkind, chairperson, contacts are being made with attorneys on the Island to see if we can work together. Other panel members are making community contacts. We will be listed in a community mental health resource list for private referrals on the Island.

PROGRAM DEVELOPMENT AND CONTINUING

EDUCATION

On February 4, 1978, Mr. Khanu Chandnani, a fellow in the Queens Chapter and member of the State Program Committee presented a workshop for us on the "Psychoanalytic Treatment of Transsexual Patient." stimulating and informative discussion ensued. We on Staten Island express our thanks to Khanu. Mr. Richard Mingoia, Chairman of this committee, has been most able to stimulate group discussions on topics of analytic and clinical issues as well as Eastern philosophies.

PUBLIC RELATIONS

I have noticed that in recent months, we have seen a number of very fine Television programs dealing with mental health issues such as depression, marital problems, battered wives, etc.. None of these programs have had a clinical social work

psychotherapist represented in their discussion. Panel members represented tupically psychiatrists and psychologists. This has got to change. We need to get into the media . . . T.V., Radio, Newspapers and magazines . . . on a regular basis to let the public know about our expertise. It is my recommendation that the Public Relations Committee be reactivated in order to deal with this proposal. We need visibility and with the diverse training of our members and great deal of knowledge and talent we have in this organization, we can be represented in the media if we make ourselves known. Another purpose for this public relations committee would be to act as a "watch dog" on the media. I have personally come across articles and books about mental health issues which mention psychiatry and psychology but omit clinical social work. I think that each one of us ought to be a public relations person and continuously work to make ourselves as professionals and our organization visible. For example, here on Staten Island, I have called the newspapers to respond to skewed articles and inform them when social work has been omitted from a particular topic. As a result, I have made some connections with the media and was recently interviewed for a feature story on marital problems and marital therapy from a clinical social work psychotherapist's point of view.

INSTRUCTORS NEEDED FOR FAMILY THERAPY COURSE

I am coordinating and designing an inservice training seminar on Family Therapy for a community mental health center on Staten Island. I am interested in an experienced and well trained family therapist to help teach the course. This should only be considered by those practitioners who would like exposure and greater teaching experience as at this continued on page 9

point there would be no financial remuneration. However, this may open the door for future possibilities. All of those interested in teaching family therapy for one and one-half hours per week should contact me personally at 212-356-3835.

WESTCHESTER CHAPTER

Mary Woods An exploration of Social Work Manpower issues was held on Saturday, May 6 at St. Agnes Hospital, White Plains. Gloria Aronson-Weinberg and Carol Rosenzweig led the program with guests from NASW. There will be a follow-up Manpower Symposium in the fall with the possible inclusion of the Schools of Social Work.

On June 4, the Westchester Chapter held its Installation of Officers ceremony for their new officers. Their terms of office will be beginning June 1978 up until June 1980. We would like to convey our best wishes to all our newly elected officials. In addition we would like to convey our appreciation to Geraldine Costa for generously offering her home in Larchmont for this affair.

The Westchester Chapter is looking forward to an eventful and productive year, in the planning is a fall institute with various workshops on both clinical and professional issues.

BULLETIN BOARD

JOB OPPORTUNITIES

The Psychoanalytic Institute for Clinical Social Work is recruiting instructors to teach an array of Continuing Education Courses. Courses are on the theory and technique of neurosis, borderline, psychosis, psychosomatic disorders, and the technique of group, family, child and marriage therapy.

Applicants must have an MSW, be State Certified, have advanced psychoanalytic training, at least 10 years clinical experience. Some teaching experience is preferred.

Send resumes to:

Marlene Menifee
Director of Training
Psychoanalytic Institute for
Clinical Social Work
1065 Park Avenue, Su. 10A
New York, N.Y. 10028

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The division of Professional Licensing of The State Education Department has begun the process of determining eligibility for THIRD PARTY PAYMENTS. All applications approved will be retroactive to 1/1/78. Applications can be obtained from:

Social Work Unit State Education Dept Division of Professional Licensing Services 99 Washington Ave. Albany, New York 12230 All dues are to be paid on January 1st of each year. Please do not send dues semi-annually. This will greatly reduce the enormous amount of time and energy on the part of the executive secretary, the membership chairperson and the treasurer. In addition this will accrue a sizeable savings in postage and stationary costs. I anticipate your full cooperation and thank you.

Abbie Blair

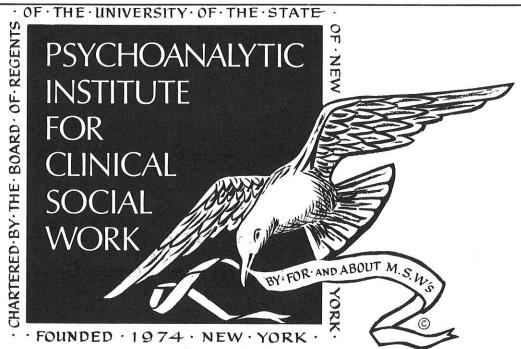
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