

The CLINICIAN

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

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VENDORSHIP AND MANAGED CARE COMMITTEE

Challenges to Our Practice: A Ten-Year Look Back

By Helen T. Hoffman, MSW, LCSW, Chair

As I begin my eleventh year of writing about the business of professional practice, I am struck by all the complex issues that psychotherapists have had to confront over the last decade. Listed below are some key developments and how you have handled them.

Your ability to adapt has been tested time after time, yet you have remained resilient, proving that success goes to the dedicated professional, the life-long learner. With the support of the NYSSCSW, clinical

social workers have risen to each challenge and surely will continue to do so.

New technology: Many of you have become technologically savvy. You have begun filing claims on line and, in the process, you have developed written privacy policies required by HIPAA. Some clinicians have mastered record keeping software, and many can now accept electronic and credit card payments, or deposit checks electronically from their cell phones.

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Two New Diplomates

At the October 2017 Annual Meeting, two distinguished Society members were honored as Diplomates. They are (l.) Lisa Miller, LCSW-R and Janice Gross, LCSW, pictured with Richard Joelson, DSW, LCSW.

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Photo: Orhan Akkurt

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CLINICAL

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The New York State Society for Clinical Social Work, Inc.

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State of the Society 2017

By Shannon Boyle, LCSW, President

The past year has been a busy one for all the hardworking Society members who volunteer their time and expertise to keep us moving. I would like to take this opportunity to recognize those who have served on the State Board of Directors last year as elected Board Members, Chapter Presidents and State Committee Chairs. Their contributions make it possible for this organization to function successfully.

Elections for upcoming vacancies on the State Board were held at the October 2017 Annual Membership Meeting. Congratulations and special thanks to the candidates elected to serve for two-year terms, beginning January 1, 2018. They are: Andrew Daly, LCSW-R, First Vice President; Chris Ann Farhood, LCSW, Treasurer; Patricia Traynor, LCSW, Member-at-Large (Nassau Chapter); and Joyce Daly, LCSW-R, Member-at-Large, (Staten Island Chapter).

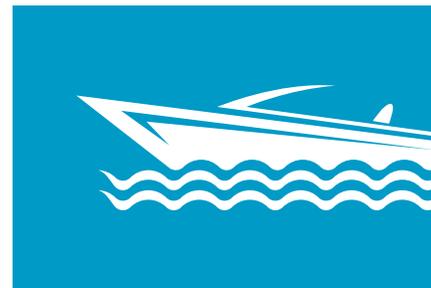
I am honored to have been elected President for a second term of office. According to our procedures, I will be President and President Elect next year, until my first term ends on December 31, 2018. My second term will begin on January 1, 2019 and last through December 31, 2021.

We have much to celebrate as we approach the end of the year. The ACE Foundation of NYSSCSW has grown, and now offers over 200 approved programs, providing opportunities to earn continuing education (CE) contact hour credits at reduced rates for our members.

In this issue of *The Clinician*, you will find reviews of last spring's 48th Annual Education Conference, a well-attended success. In the Headquarters report, you'll find details about the updates to the Society's website that make it more user friendly and helpful to our members. You can also get an overview of our

CONTINUED ON PAGE 4

SAVE THE DATE Saturday, March 24, 2018



NYSSCSW's 50th Anniversary Celebration Cruise

Please join us for a festive afternoon aboard the yacht *Atlantica*, departing from Chelsea Piers for a three-hour cruise around lower Manhattan. We will enjoy panoramic views, a delicious brunch, and the camaraderie of colleagues and friends.

More details coming soon.

The CLINICIAN

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2/3 Page	4 15/16" w x 10" h	\$325	\$295
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Display ads must be camera ready. Classified ads: \$1 /word; min. \$30 prepaid.

HAVE YOU SAVED ANY ITEMS FROM OUR EARLY YEARS?

We are collecting materials to help trace the Society's five decades of achievement as we celebrate the our 50th anniversary in 2018.

Do you have photos, documents, letters, audio/video recordings, newsletters, brochures, or anything else of historical interest in your files?

If so, we'd appreciate hearing from you.

Please contact Kristen Kuenzel at 800-288-4279 or info.nysscsw@gmail.com.

Thank You!

At the 2017 Annual Membership Meeting



Friend, Marsha Wineburgh, Helen Krackow and Martin Lowery



Barbara Lidsky, Greg MacColl and Helen Krackow



President Shannon Boyle and speaker
Debbie Hutchinson



Dennis Guttzman and Helen Hoffman



Friends

Photos: Orhan Akkurt

President's Message, CONTINUED FROM PAGE 3

legislative and membership recruitment efforts, and the work of our chapters and committees, in the issue.

Please take the time to read about the tremendous efforts of our Vendorship & Managed Care Committee featured here. Long-serving committee Chair Helen Hoffman has done yeoman's work in steering its progress and assisting members facing a myriad of challenges. She has tackled each issue with intelligence, serenity, grace and unlimited energy, making difficult situations a bit more manageable. On behalf of the Society and all of us who have benefited, I extend special thanks to Helen for leading the charge for so many years.

We are excited to look ahead to 2018, when we will celebrate the 50th Anniversary of the New York State Society for Clinical Social Work. We have accomplished so much over five decades to advance our

profession in New York State and support the thousands of social workers here. This is a tremendous feat.

Our celebratory year will be marked with special events, programs and remembrances of the many members and volunteers who have made our success possible. We hope you will join us. More information will be available in the coming months and throughout the year. As Society President, I look forward to our continued work together.

Sincerely,

Shannon Boyle, LCSW

The Advanced Clinical Education (ACE) Foundation of New York State Society for Clinical Social Work (NYSSCSW) continues to thrive, with over 205 programs approved, including some that have been repeated due to popular demand.

ACE is approved to provide continuing education (CE) contact hour credit for licensing to LMSWs, LCSWs, LPs, LMFTs and LMHCs within New York State. In addition, ACE covers the continuing education needs of LMSWs and LCSWs in every state in the country. Please be sure to visit our website for program updates.

49th Education Conference

Planning is underway for NYSSCSW's 49th Annual Education Conference, co-sponsored by the ACE Foundation. Scheduled to take place on Saturday, April 21, 2018 in New York City, the conference will address the needs of clinicians working with various populations through all the stages of development, and will examine the fears and joys of each rite of passage.

- Jack Novick, M.A., Ph.D., and Kerry Kelly Novick will present *Going to Big School—What Does This Mean?*
- Neil Altman, Ph.D. will present *The Evolution of Adolescence(ts): Challenges and Dilemmas, New and Old.*
- Elissa K. West, LCSW will present *Being in Time: The Problem of Hope in Older Adulthood, the Last Developmental Frontier.*

The topic and speaker for early-through-late mid-life will be announced. The brochure for this outstanding conference will be mailed by early January, posted on the ACE Foundation website, and highlighted in *The Clinician*.

Office Courses

If you have an interest in running an office course for CE contact hour credit for licensing, and you meet the requirement of special training in the field and teaching experience at a master level university of social work or a psychoanalytic institute, kindly send your proposal to me, Dr. Susan Klett, Director of Professional Development, ACE Foundation via email to suzanneklett@aol.com.

I look forward to your continued interest in our programs and would love to hear from you about any topics for courses that you feel would enhance your clinical practice and professional development. 

SAVE THE DATE

Saturday, April 21, 2018

The 49th Annual Education Conference

Co-sponsored by NYSSCSW and the ACE Foundation

The conference will address the needs of clinicians working with various populations through all the stages of development, and will examine the fears and joys of each rite of passage.

Continuing Education (CE) credits will be available.

Expected speakers:

Jack Novick, M.A., Ph.D. and Kerry Kelly Novick

Neil Altman, Ph.D.

Elissa K. West, LCSW

More information will be available soon.

Vendorship and Managed Care Committee

www.nysscsw.org/vendorship-and-managed-care-committee

By Helen T. Hoffman, MSW, LCSW, Chair

Challenges to Our Practice, CONTINUED FROM PAGE 1

Medicare is moving toward electronic record keeping but does not yet require it. However, it does require acceptance of Electronic Funds Transfers instead of paper checks, and a recent new requirement is that all claims be typed. Commercial insurance plans have also been “going green,” exerting increasing pressure to manage all authorizations and claims online or accept EFTs in payment. You have adapted to these changes well.

Beyond purely business issues, psychotherapists have been confronting ethical issues that arise with the use of social media, email, texting and video counseling.

“Your ability to adapt has been tested time after time, yet you have remained resilient. Clinical social workers have risen to each challenge and will continue to do so.”

The best solutions are still under debate.

Parity laws:

With the introduction of Timothy’s Law in 2007, you have learned which diagnoses (e.g., biologically-based) are most likely to be covered by insurance. As insurance companies began to rely on “medical necessity” to manage costs, fewer plans required OTRs. However, the telephone review became a tool commonly used by companies to limit sessions. Out-of-network providers have felt targeted by demands for interviews. You have learned how to prepare for them well and to justify your work with patients.

Coding changes: You have absorbed the changes that came with the new DSM-5, and learned to use new ICD-10 diagnostic codes on your claim forms. Confusingly, the changes in October 2014 came one year after changes in the procedural codes (CPT codes).

Massive data collection: In 2010, as a result of the Affordable Care Act, Medicare rolled out the highly frustrating Physicians Quality Reporting System (PQRS). It required Medicare providers to document the evaluation of specific conditions (e.g., tobacco use)

on each claim or else face penalties. You spent many hours learning how to comply. Although this program ended in 2017, social workers will have to deal with its successor, the Merit-Based Incentive Payment System, beginning in 2019.

Falling reimbursement rates: Medicare’s allowed rate for 90804 went from \$76.62 in 2007 to \$69.62 in 2017 (\$68.51 with Sequestration). You have seen commercial insurance rates drop as well, sometimes after one company was absorbed by another (for example, Oxford by UBH and HIP by Emblem). You have made your choices, either staying on or dropping off some insurance panels. You have also learned to be tough with MultiPlan’s attempts at “repricing,” rejecting their offer of prompt payment for a discounted rate.

Higher deductibles: As insurance plans have created ever higher deductibles, the financial burden of therapy has shifted to the consumer. High deductibles often cause premature termination of treatment, and the issue requires a careful response from you. You have been educating your patients to expect to pay the full fee in the early part of the year, because insurance companies will deny payment until the deductible is met.

Over the last ten years, the Committee has been following these other important issues:

Workers Compensation: The NYSSCSW continues to lobby the New York State Legislature to allow LCSWs to become Workers Comp providers – a decades-long effort.

Performance Ratings: Insurance companies started rating clinicians, for example, based on compliance with the Optum Wellness Assessment or on coordination of care with PCPs.

Affordable Care Act: In 2010, Congress passed the ACA establishing healthcare exchanges. The New York State Healthcare Exchange gave relief to many formerly uninsured, but offered “skinny networks”. These were more limited than employer-covered plans but did include mental health.

Lawsuits: In 2009, the New York State Attorney General won a \$350 million class action suit against UnitedHealth Group. Using its Ingenix database of Usual and Customary fees, United had been

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Five MSW Students Win Scholarships



Photo: William Reade

(L–R) Rina Ben-Benyamin, Katie Cardwell, Tia Mancusco, Hannah Aubrey Nugent and Tex Gibson.

Five MSW students who attend graduate schools of social work in the New York metro-area were presented with scholarship awards on November 1 at the Sixth Annual Diana List Cullen Memorial First-Year MSW Student Writing Scholarship Awards Ceremony.

They are Rina Ben-Benyamin, Wurzweiler School of Social Work at Yeshiva University; Katie

Cardwell, Graduate School of Social Service at Fordham University; Tia Mancusco, Silver School of Social Work at New York University; Hannah Aubrey Nugent, Silverman School of Social Work at Hunter College and Tex Gibson, Master of Social Work Program at Lehman College.

Recognized for the quality of papers they had written, each of the students received a \$500 award

and a one-year membership in the NYSSCSW. They presented aspects of their papers at the awards ceremony, and engaged in lively discussions with the audience of deans and faculty, supervisors, Society board members, friends and family.

Richard Joelson, DSW, LCSW, the Chair of both the State and Met Chapter Membership Committees, introduced members of his team, and Chris Ann Farhood, LCSW, the Coordinator of the Scholarship, emceed the program. The students' papers had been reviewed by NYSSCSW President Shannon Boyle and members of the Met Chapter Board and Education Committee.

The goals of the scholarship program are to foster collaboration between NYSSCSW and the graduate schools, introduce graduate students to the Society, and support the students, who are the future of our profession. From the quality of the students' presentations, it was apparent that the future is in thoughtful, creative and capable hands. 

Challenges to Our Practice, CONTINUED FROM PAGE 6

underpaying patients and doctors for out-of-network services. Since then, United has used a benchmark based on Medicare rates to set fees, even as Medicare rates decreased.

In 2015, the State Attorney General announced a \$900,000 settlement with Beacon Health Options –formerly ValueOptions. ValueOptions had issued denials twice as often for behavioral health claims as they did for other medical or surgical claims, and four times as often as they did for addiction recovery services. The company was forced to dramatically reform its claims review process to settle allegations of widespread violations of mental health parity laws.

In 2013, a suit was brought by the New York State Psychiatric Association against United Behavioral Health, claiming that UBH has been relying on a specific system to determine limits on visits, and that

preauthorization requirements are in violation of parity laws. The suit is still ongoing.

Lobbying for Medicare Rate increase: Since 2015, NASW has been lobbying Congress to increase the reimbursement rate for clinical social workers from 75% to 85% of the Medicare physician rate. 

Ethics & Professional Standards

In addition to responding to members inquiries, the Committee continues to meet once a month to update the Society's Code of Ethics and explore the ethical issues relating to technotherapy. 

— *Martin Lowery, LCSW-R, Chair*

This year, we worked in collaboration with several state-level mental health professional groups on joint efforts, while protecting our scope of practice from the less well-trained Mental Health Practitioners. Yet, as the legislative session drew to a close this July, we had little to show for our all our efforts.

As we know from experience, however, vigilance and persistence are the keys to success in stopping or passing legislation. Our new lobbyists have seamlessly continued to represent our organization in an effective way.

Banning conversion therapy: Our lobbying on behalf of this legislation was a highpoint of interprofessional coordination. Ross McCabe, LCSW-R from Albany, represented NYSSCSW in an intense media campaign to pass protections for minors from sexual role brainwashing. Though it was unsuccessful, we plan to continue to work with key stakeholders next session. (See memo in support, A.3977/S.263, on our website).

Scope of practice protection: Our lobbyists successfully overcame the Governor's initiative, which appeared in his draft budget, to alter social work scopes of practice. We also successfully halted another attempt by the Licensed Mental Health Practitioners to mandate Medicaid and insurance reimbursement for their services. As you know, they do not meet the same direct clinical experience requirements that LMSWs must have to sit for the LCSW exam. (See memos in opposition, S.3981-A/A.1890-A and A.2163/S.3952, on our website.)

Workers' compensation coverage for LCSW mental health services: We continue to work directly with the Workers' Compensation Board. LCSWs were integral to the process of introducing a program bill in each house, and were among the professions included in the list of additions. However, last minute opposition ended the bill's advance. We will continue to work to achieve it in 2018.

Parity implementation: NYSSCSW worked in partnership with the New York State and New York City Chapters of NASW, the New York State Psychiatric Association, the New York State Psychological Association and Families Together in New York State to advance a bill, SB 1156 /AB 3694, that we developed. It was written in response to our analysis of the State Attorney General's suits against six insurers who failed to comply with the state's mental health parity bill, also known as Timothy's Law.

The purpose of the bill is to require insurers and health plans to submit certain data to the Department of Financial Services (DFS) and the Commissioner of Health to be used in measuring compliance with federal and state mental health and substance abuse parity laws. The data will be used by the DFS to prepare an annual Mental Health Parity report as part of the annual Consumer Guide. We made several amendments to the bill (introduced late in the session) and continued to work to mitigate last minute concerns until the final moments of session. The initiative will remain a priority in 2018.

The major components of the bill will capture data on:

- Articulation of Timothy's Law Compliance plan
- Rates of utilization for both mental health and substance abuse (such data groups will be separate)
- Number of concurrent authorization requests for mental health and substance abuse and the rate of denials
- Number of cases/denials that have gone into peer review
- List of services that require prior or concurrent review and the number of days/threshold that triggers such reviews
- List of covered medications for the treatment of substance abuse disorders
- Percentage of mental health and substance abuse disorder claims paid for in-network vs. Med/Surg
- Percentage of mental health and substance abuse claims paid for out-of-network vs. Med/Surg
- Medical necessity criteria
- Number of behavioral health advocates (as per AG settlements) available to policy holders
- Network adequacy
- Number of mental health providers who have left, or have been removed from a provider network.

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How Repealing the Affordable Care Act Cripples New York's Medicaid Program

By Marsha Wineburgh, DSW, LCSW-R, Legislative Committee Chair

The Republicans and the White House have made several attempts to repeal some or all the Affordable Care Act. The proposed changes in federal policies would impact all mental health services, particularly those provided by Medicaid.

Thanks to the Affordable Care Act, Medicaid coverage in New York has been extended to everyone below a threshold of 138% of the federal poverty limit. Medicaid is the single largest payer for behavioral health services, including mental health and substance abuse, and covers prescription drugs as well.

As of June 2016, the state's Medicaid program has more than six million enrollees, with another 100,000 eligible to enroll, comprising one out of four residents. These are people who qualify for health care coverage because of low income. They often deal with additional issues of insufficient housing, relationship problems, and difficulty accessing and using available services effectively.

Medicaid coverage includes elderly, blind and disabled persons as well as non-elderly adults, low-income parents and 1,783,000 children, representing 37% of the Medicaid population. Often, they have dual diagnoses, combining mental illness with addictions and chronic health problems, in the context of serious daily living complications.

Repealing the ACA would seriously narrow the state's Medicaid programs, and could include restrictions on eligibility and serious limits on federal funding. This could force New York's expanded Medicaid program to eliminate coverage for millions of low income beneficiaries and/or force the state to cover its expanded Medicaid rolls entirely with state funds.

What Medicaid reforms have the Republicans been proposing?

Currently, Medicaid is considered an entitlement program. The federal government reimburses the states for a set percentage of the total spending on health care costs for Medicaid beneficiaries. This guarantees a fixed and predictable match of federal funds, and allows each state great flexibility to serve the unique needs of its Medicaid population. It also allows states to respond to emerging public health crises, such as the opioid epidemic.

Plans to reform Medicaid include ending the federal government's guarantee of funding expenses in favor of capping the amount of funds that each state receives for its Medicaid spending. This new system of "block grants" or "per capita structures" could be reduced every year by Congress, forcing the states to make up the deficits or restrict services to the most vulnerable people who need mental health and substance abuse treatments.

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Legislative News, CONTINUED FROM PAGE 8

LLC bills: We continued our multi-year campaign with the Title VIII Coalition on an omnibus bill, A. 1943-People Stokes /S. 4125 LaValle, which would allow licensed social workers to form a corporate practice with other licensed professionals who are not expressly prohibited by law to do so. This is a long-term initiative that must overcome many hurdles related to business corporation laws and the legislature's lack of appetite to act on such bills.

We also worked to advance a stand-alone bill, A. 4432-Pretlow,

that seeks to allow LCSWs to form a corporate practice with psychiatrists and psychologists. The bill was reintroduced into the Assembly earlier this year, and we recently identified a Senate sponsor in Senator Richard Funke, who introduced the bill, S. 5175. We will continue to work toward advancement of these bills in 2018.

OTHER ISSUES

Duty to warn: We are gathering material to evaluate duty to warn legislation to protect private

practitioners from law suits should they find it ethically necessary to report a patient who is a danger to himself or others.

Single payer bill: This bill passed the Assembly again, but was never addressed by the Senate committees.

Licensing of military personnel: Regulations to expedite licensing for military service personnel and their spouses has been created. A 50% reduction for the licensing application fee and a temporary practice permit have been arranged. 

Two New Diplomates Honored

By **Richard B. Joelson, DSW, LCSW**

The Diplomate is a special membership status conferred upon NYSSCSW members who have been recognized for their distinguished contributions to the field of clinical social work. These might include teaching, publishing, research and innovation in clinical social work education or service.

In addition, and importantly, their leadership activities in the Society must be considered outstanding. Whether serving as state board or state committee members, they must have demonstrated effectiveness, initiative, responsibility and dedication in carrying out their duties. On the chapter level, they must have contributed to the growth of their chapter and given of themselves in a variety of other ways. This year we honor two new Diplomates of the Society:

Lisa Miller, LCSW-R has been a tireless contributor to the Society in many ways and for many years. After earning her master's degree, Lisa became the Recording Secretary for the Met Chapter and performed her duties continuously for nine years. In 2006, she became Co-chair of the Met Chapter Listserv Committee. Later that year, she became Co-chair of the State Listserv Committee, serving until 2015, when TMS began to take over listserv responsibilities.

Lisa has continued to coordinate the posting of chapter and state offerings on the Met Chapter Listserv. She also helps members design effective announcements for maximum impact. Lisa shows no signs of tiring, and we are fortunate to benefit from her contributions.

Janice Gross, LCSW has been the President of the Staten Island Chapter since 2011. Earlier, from 2005 to 2011, she served as the chapter's Membership Chair and, from 2009 to 2011, as its Treasurer. In addition, for several years she has organized the Staten Island Chapter Annual Education Conference.

Janice has extensive training as a couples therapist, and teaches at several schools of social work. She also has presented courses through the ACE Foundation, and has held workshops at several chapters. Her presentations include, "Engaging and Understanding Couples," and "Extra-Marital Affairs: Understanding Effective Ways to Navigate Difficulties." Janice has made substantial contributions to our Society. 📍

NEW MEMBERS OF NYSSCSW*

CHAPTER / NAME

MET	Acosta, Melody J.
MET	Bahan, Kathleen
MET	Ben-Yehuda, Raphael, LCSW
ROC	Birnbaum, Deborah S.
MET	Bloom, Jamie, LCSW
MET	Brinkley, Katherine
MET	Buquicchio, Jennifer S.
MET	Burstein, June, MSW, LCSW-R
ROC	Calhoun, Diana F.
MET	Caputo, Lorraine E.
MID	Cea, Rachael, MSW
MET	Cheung, Michael W.
MID	Cirnitski, Carolyn, LCSW
SUF	Clague, Barb, MSW, LCSW-R
ROC	Davis, Lindsay D.
QUE	Dibenedetto, Marie, LCSW-R, MSW
MID	Diego Santacruz, Jose, LMSW
ROC	Devivo, Nicole
WES	Drohan Forbes, Deirdre
MET	Dyckman, Yaffa, MSW, LCSW
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MET	Ferguson, David
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NAS	Hushion, Kathleen, LCSW-R
NAS	Jewett, Orval A.
MET	Kinn, Gail, LCSW
MET	La Joie, Myra, MSW, Ph.D., LCSW-R

CHAPTER / NAME

MET	Laviera, Jessina, LCSW, LCSW
MET	Lippin, Mary
MET	Malloy, Emily C., JD, LMSW
NAS	Mankowitz, Rachel
MET	Margulies, Marian
NAS	May, Elizabeth R.
MET	McDavid, Rachel, MA, LMFT
NAS	Mcguire, Barbara A.
MET	Modi, Shweta
NAS	Morse, Kathleen D.
WES	O'Connell, Clelia C.
MET	Orito, Mary A.
MET	Penn, Emily, LCSW
MET	Peresman, Zoey, MSW
MET	Pettenato, Jocelyn R.
NAS	Raymond, Christina
ROC	Reiser, Vanessa, LMSW
MET	Ripley, Amanda K.
MET	Rosenberg, Ann, LCSW-R
MET	Ross, Julie, MSW, Ph.D., LCSW-R
QUE	Sabino, Claudia E., LCSW
MET	Schneider, Leah
MET	Shanahan, Kate E.
WES	Showalter, Linda, MSW, LCSW-R
MET	Shuzman, Beth
WES	Stern, Rebeca A.
MET	Stevens, Candise
MET	Stitt, Grant, LCSW-R
MET	Szymczak, Patrycja
MET	Toppa, Saima Y.
NAS	Toone, Eileen, MSW, LCSW-R
NAS	Torrisi, Rosara
ROC	Walters, Colleen
MET	Wendell, Zachary
NAS	Zaretsky, Lisa R.

CHAPTER KEY: MET—Metropolitan, MID—Mid-Hudson, NAS—Nassau County, QUE—Queens County, ROC—Rockland County, SI—Staten Island, SUF—Suffolk County, WES—Westchester County.

*These new members joined between March 1 and October 31, 2017.

Membership Committee

By Richard B. Joelson, DSW, LCSW, Membership Chair, State and Met Chapter Committees

Career Day for Students and New Professionals

The State and the Metropolitan Chapter Membership Committees are planning an event, Student and New Professionals Career Day, for January 20, 2018. It is designed to provide graduate social work students and new professionals with opportunities to learn more about the various fields of practice.

It comes as a direct response to our current student representatives, who have expressed their eagerness to learn more about practice settings as they contemplate future fieldwork assignments and employment possibilities. We are asking seasoned Society members representing different fields of practice to serve on that day as resources for new professionals and students. Stay tuned for more on this event.

First-Year MSW Student Writing Contest

The annual Diana List Cullen Memorial First Year MSW Student Writing Contest reception was held on November 1. The five student award winners are from metropolitan-area schools of social work. Each received a \$500 scholarship for the second year of graduate school and a free one-year membership in the Society. They presented summaries of their winning papers to the audience at the event, including Society members, deans and faculty from participating schools, as well as family and friends. [See photo and article on page 7.]

This annual contest and reception has proven to be an excellent opportunity to strengthen our relationship with the schools of social work, an increasingly important source of new members, as well as to help students appreciate the value of an affiliation with the Society.

Membership Renewal in Full Swing

By now, you should have received membership renewal information. You'll note that it has been streamlined and the process is more efficient. We hope you will renew before the end of 2017 so you can enjoy another excellent year of membership in our Society.

Consistent Membership Growth

Most chapters have enjoyed an influx of new members from all practice settings—academic, agency, private practice—and with an age and ethnic diversity

that is quite gratifying. It seems that more and more social workers are finding our organization an excellent professional community where they can reap many benefits.

The credit for our membership growth is shared by every chapter with active efforts to recruit and retain new members, and insure that the membership experience is a good one. I believe that much of our recruitment and retention success can be traced to the personal interest we show each new member. This includes welcome packets and letters from the State and chapter, invitations to member receptions, the Society Partners program, and outreach e-mails and phone calls. We want each recruit to feel welcomed and valued, and to find a place in this growing organization with so much to offer. ☐

Headquarters Update

This summer was a busy one at the Society's headquarters. We updated the membership data base and enhanced our website to make finding information, registering for events, and paying dues faster and easier. Here are some of the improvements you'll see:

- The Find-a-Therapist feature is more user friendly for potential clients, providing extra information, such as the distance to the therapist's office.
- Chapters can now offer online registration for their programs, and members will find the forms easier to use, as your basic information will be filled in automatically.
- Members will receive dues renewal invoices via email this year. The invoice will be linked to your online NYSSCSW profile, so you will not need to log in to find it.
- The Events Calendar is easier to navigate. Each chapter has its own separate tab, so you can go directly to your local listings.

Please visit www.nysscsw.org to see all the website improvements and to **check your profile** and make any necessary changes or updates. We would be glad to help you if needed. We wish you a very happy and healthy holiday season.

Kristin

Kristin Kuenzel, Account Executive for NYSSCSW
Total Management Solutions (TMS)
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Chapter Reports

METROPOLITAN CHAPTER

PRESIDENT KAREN KAUFMAN, PH.D., LCSW; VICE PRESIDENT AMY MYERS PH.D., LCSW

The Metropolitan Chapter continues to grow and has had a very active year offering workshops, presentations, and opportunities for networking, discussion, and intellectual exchanges. April was a particularly busy month, with presentations offered by the Group Therapy Committee, the Committee on Aging Issues, the Trauma Studies and Treatment Committee, and the Committee on Psychoanalysis. The diversity of programming caters to various styles of learning and discussion, from speaker presentations to movie nights and book discussions.

In October, the Education Committee offered a presentation on Women and Addiction with Betsy Robin Spiegel, LCSW. Robert Weiss, LCSW, CSAT-S presented for the Committee on Substance Use Disorders and Behavioral Addictions on Sex Addiction 101: Understanding the Assessment, Diagnosis and Treatment of Hypersexuality and Problem Sexual Behavior Disorders. On November 1, the Membership Committee will be sponsoring its annual Student Scholarship Awards Ceremony and, on November 3, its bi-annual Member Reception.

The Chapter has student representation from all the local schools of social work, including Hunter, Fordham, Lehman, New York University, and Yeshiva. The students serve as liaisons between the Society and their academic programs. Their participation on the Membership Committee is essential to encouraging other students and new professionals to participate in the Society, and is instrumental in informing future programming geared towards the needs of this population. It is exciting to see new graduates and young professionals attending events and seeking greater involvement in our vibrant clinical community.

As always, please visit the NYSSCSW website for a complete list of Met Chapter committee events, workshops, meetings, and brunches. We encourage you to get involved in the leadership of your chapter and pursue an interest by joining one of our committees. We look forward to seeing you at future events.

Met Chapter Committee on Psychoanalysis by Helen Hinckley Krackow, LCSW, BCD

For several years, the Met Chapter Committee on Psychoanalysis has presented films to help deepen our understanding of human relationships. Additionally, the Committee has sponsored prominent speakers addressing a myriad of attachment issues.

In April 2017, the Committee, headed by Barbara Lidsky, LCSW and Janice Michaelson, LCSW, with able assistance from Don Appel, LMSW, presented "The Matchmaker," a film set in post-World War II Israel. It is a comic-drama depicting the damage of the Holocaust on the attachment issues of its survivors and succeeding generations of Israelis. Directed by Avi Nesher, the film was the official selection of the Toronto International Film Festival in 2010.

The plot centers on Yankele, a Holocaust survivor living in Haifa in 1968, who is a matchmaker by trade. Ironically, he cannot seem to make his own match with his vivacious love interest, Clara.

Yankele hires a 16-year-old boy, Arik, to shadow his clients to learn their vulnerabilities. The information will help him convince the prospective grooms of the suitability of the women he finds for them to marry. Arik is a naturally curious boy who likes to study adults to learn all he can about life. He comes to idealize Yankele and begins to shadow him, and discovers that Yankele is running an illegal gambling operation, assisted by the seductive Clara. Arik has a crisis of conscience, and decides to report the illegal activity to the police, who raid the gambling den. Yankele and Clara flee just in time.

Later, Arik's father tells the naïve boy that everyone in the community already knew about the gambling operation. The people who run it are just using the survival skills they developed during the horrors of the Holocaust in their lives today. Beyond that, Arik learns that Yankele's "bad boy" qualities make him attractive to Clara. Then he develops an attraction of his own to a young woman he does not approve of, but who nevertheless intrigues him.

The movie reveals many other complex relationships and, following the screening, a lively discussion was held about the impact of war on the development of relationships.

Another presentation earlier in year was given by Inna Rozentsvit, MD, Ph.D., titled "Understanding the Parent-Child Bond through the Lens of Neurobiology." On November 14, "Imago Relationship Therapy: The Paradigm Shift in Couples Work," will be presented by Dr. Herb Tannenbaum. The Committee plans many more exciting programs on various aspects of relationships. Please check the listserv for future events.

MID-HUDSON CHAPTER

PRESIDENT ROSEMARY COHEN, LCSW

The Mid-Hudson Chapter comprises a five-county area in the Mid-Hudson Valley: Dutchess, Putnam, Ulster, Sullivan and Orange. We are pleased to provide four annual CE-approved workshops to mental health clinicians at the Mental Health America of Dutchess County (MHADC) conference room in Poughkeepsie.

On September 16, the CE-approved workshop, Traumatic Narcissism: Relational Systems of Subjugation, was presented by Daniel Shaw, LCSW. Matt Fried, Ph.D. returns on November 4 to present his program, Healing Attachment Wounds via the Therapeutic Relationship: An Introduction to Accelerated Experiential Dynamic Psychotherapy (AEDP).

The number of pre-registered clinicians for our workshops has reached near capacity in the MHADC conference room. MHADC offers programs to the entire community, including support groups and social, housing, and shelter services, individualized support, workshops, and educational programs. Its Beacon office offers the New York State Office of Mental Health PROS program, a recovery-oriented program for individuals with severe and persistent mental illness.

NASSAU CHAPTER

PRESIDENT JOSEPH REIHER, LCSW-R, BCD

We are happy to report that the Chapter is continuing to do well. Since our last report, we gained ten new members, and we continue to work with other chapters and organizations. We continue to be well represented on the State Board: President Joseph Reiher, LCSW-R, BCD is a member of the ACE Foundation and Legislative committees; Patricia Traynor, LCSW-R, CLC continues as a Member-at-Large, and Susan Kahn, LCSW, BCD serves on the Vendorship committee.

Nassau/Suffolk NewsNotes continues to thrive thanks to the efforts of Prue Emery, LCSW, Clinical Editor and Susan Kahn, Editor, along with Administrative Assistant Bunny Chapman. I am happy to note that a new issue of this unique newsletter is in the works.

The Chapter Board includes Ellie Perlman, LCSW, DCSW, BCD who, in addition to her role as Treasurer, is Co-Chair of the Program Committee. Patricia Traynor serves as the other Co-Chair, in addition to her role as Membership Chair. Deborah Singer, LCSW continues as Recording Secretary, Norman Perkins, LCSW, as Chair of the Committee on Aging, Francine Futterman, LMSW, as Member-at-Large, and Judith Schaer, LCSW, as Mentorship/Networking Chair. Her first networking event was our successful “Spring Fling.” We also have a new student representative from Molloy College, Jovhan Egalite. My sincere thanks to all the Board members who work so hard for our Chapter.

Our first “Let’s Talk” series, headed by Judith Schaer, well attended, and more are being planned. We also held a 3-CEU program in March with Bernie Glintz, LCSW, presenting “Working with the Adopted Client.” And “Spring Fling,” a gala event organized by Judith Schaer, was held at the Metropolitan Bistro in Sea Cliff. Some 35 members and guests enjoyed the beautiful surroundings, a sumptuous buffet, and entertainment by keyboardist Michael DeMeo. The highlight was a presentation of plaques to honorees Prue Emery and Susan Kahn for their work on *Nassau/Suffolk NewsNotes*. We also announced that the Chapter, in cooperation with the Molloy School of Social Work, has established a scholarship in honor of Sheila Peck, LCSW. The winner will be announced in next spring.

Several new programs are being planned, so watch for the announcements on the listserv. Board meetings are open to all members and you are always welcome, as we would like your ideas and input.

At the Nassau Chapter's 2017 Spring Fling:
(l. to r.) Society President Shannon Boyle, Patricia Traynor, Francine Futterman, Honorees Susan Kahn and Prue Emery, the editors of *Nassau/Suffolk NewsNotes*, Chapter President Joseph Reiher, Lorraine Fitzgerald, Eleanor Perlman, and Judith Schaer.





Queens Chapter Board Members at the spring Author's Brunch in Rockaway: (l. to r.) Bianca Kattan, LCSW, Lynne O'Donnell, LCSW, Fran Lombardi, LCSW, Carol D'Andrea, LCSW, Rebecca Gruiã, LMSW, and Lisa Laudante, LCSW, Ph.D.

QUEENS CHAPTER

PRESIDENT LYNNE O'DONNELL, LCSW-R, ACSW

We have planned several seminars and parties through the end of the year. Listings can be found on the website and on Facebook.

We finished the spring season of events with an Author's Brunch in Rockaway featuring Richard Joelson, DSW, LCSW presenting ideas and insights from his award-winning book, *HELP ME!* It's a must read for all members, with wonderful vignettes you will want to share with your clients. The audience was inspired by the talk and delighted with the brunch that followed.

We began this year with a forum on How to Grow Your Private Practice, which included seasoned private practitioners as well as new and long-term chapter members. Again, the feedback was excellent as attendees found their specific concerns addressed.

In October, our planned program was changed due to a "hiccup" at the last minute. Fortunately, Roberta Omin, LCSW of the Westchester Chapter volunteered to present her program, *When the Therapist Becomes the Medical Patient* and Susan Klett, Psy.D., Director of Professional Development for the ACE Foundation, worked with us to get the program quickly approved for additional credits. It was an example of the benefits of belonging to a Society that works long and hard to support its members and the profession.

I'd also like to remind you of the benefit we enjoy in having the use of the beautiful conference room of the Queens Hospital Center for such events.

Our final seminar in 2017 will be *Celebrating the Wounded Healer* on December 3. It will be followed by a Holiday Celebration. Check the website for details. We do hope you will join us for both.

The 2018 line up of events will include seminars in February, April and May and our annual Brunch in June. We encourage you to attend our board meetings and state offerings

as well. In addition, we would truly appreciate your feedback and will be sending you another survey soon. It will be easy and quick to fill out, and the information you provide will help us better address our member's needs.

Remember to check our website for updates. We hope to see you all soon!

ROCKLAND CHAPTER

PRESIDENT ORSOLYA D. CLIFFORD, LCSW-R

The Rockland Chapter is pleased to offer an exceptional educational lineup for the 2017-2018 academic year. We have a great mix of CEU programs and free, non-CEU programs for our members.

We kicked off the year with a lively, interactive 5-hour workshop led by Liz Carl, LCSW, titled, *Your Client Has a Body Too*, and a discussion of *Core Energetics*. Coming up in 2017 are several book and clinical case discussions including, on October 22, *The Wounded Healer* by Sharon Farber, Ph.D. and, on November 19, Richard Joelson, DSW, LCSW will discuss his book *Help Me!*

On April 8, 2018, Sandra Indig, LCSW, ATR-BC, along with Dr. Ina Rozentsvit, will present Indig's book, *Talking Colors: Seeing Words/Hearing Images* on April 8. We have also scheduled a presentation on January 14 by our local family shelter on working with victims of domestic violence and sex trafficking, and a Film and Lunch event on February 11.

We always welcome new members and look forward to kicking off a student mentorship group in spring 2018.

STATEN ISLAND CHAPTER

PRESIDENT JANICE GROSS, LCSW

The Staten Island Chapter is pleased to report a growing membership. We are currently mixing our meetings, holding a Friday evening program with light dinner and Sunday morning program with brunch, hosted by the members. We are an experienced group of LCSWs with both agency and private practice experience across a variety of specialties. We offer mentorship opportunities with Dennis Guttsman, LCSW, Committee Chair. At CEU events, we welcome social workers and other mental health professionals at all levels.

Upcoming programs include Dinner and Meet the Author at La Fontana restaurant, featuring Sari Cooper, LCSW, an ASECT certified sex therapist. She will present *Sexual Assessment of Couples in Therapy*. On March 24, 2018, we are hosting Brian Quinn, Ph.D., on *Depressed, Borderline or BiPolar?* for 6 CEUs at Staten Island University Hospital. For more information on chapter events please contact Janice Gross, LCSW at jgross1013@aol.com. ☑

Hillel Bodek | 1953–2017

By Marsha Wineburgh and Helen Hinckley Krackow, Past Presidents of NYSSCSW

Hillel Bodek made innumerable contributions to the formal organization of the clinical social work profession and the New York State Society for Clinical Social Work. It is our pleasure to honor the memory of our long-time friend and colleague, who passed away on March 25, 2017.

Hillel was born in 1953 in Providence, Rhode Island to Reuben and Charlotte Bodek. When he was seven, his family, which included his sister Robin, moved to Cedarhurst, Long Island. He met and married his beloved Seok Hoon late in life and they settled in Brooklyn Heights.

Hillel graduated summa cum laude with a B.A. from Queens College (CUNY) in 1974. After earning his MSW at Adelphi University in 1979, he completed postgraduate training in multidisciplinary health care, which included clinical social work and palliative care.

In clinical practice, Hillel provided psychological testing as well as psychotherapy. He treated a wide variety of patients, including those with chronic physical and terminal illnesses, developmental disabilities, mental illness and neuropsychological impairments.

As an expert witness for the state and federal court systems, he advocated for the needs of the criminally mentally ill, including those incarcerated on Rikers Island and in Bellevue Hospital's Forensic Unit. His case management and legal evaluations were legendary—long and thorough, with strong recommendations.

Hillel served the Society in many capacities for several decades: as President (2004–2005), and as Chair of many committees: Ethics and Professional Standards (1983), Forensic Clinical Social Work (1983), Palliative and End-of-Life Care (2001) and Continuing Professional Education (2002).

A seminal thinker, Hillel developed and taught comprehensive training programs in palliative care, emphasizing the needs and rights of the terminally ill for care by a diversity of health professionals, including social workers, nurses and chaplains.

He also developed extensive clinical courses on death and dying, and forensics, with reviews of federal and state mental health laws and examples of forensic reports on patients in the criminal-psychiatry unit of Bellevue Hospital.

What was it like to spend time with Hillel? He was articulate, brilliant, charming, generous, hardworking, intense, loyal and incorruptible. Also, stubborn, exasperating and

hardly ever wrong. When he was President, our meetings were four-to-five hours long. If you had any questions after his carefully elucidated report to the Board, he would not become frustrated. Instead, he would just start over from the beginning, adding even more details to educate you further. This accounted for our long meetings, but we usually left thoroughly informed.

Hillel was a major contributor to key legislation, both on the state and national levels, regarding licensing, insurance reimbursement and confidentiality.

He developed our version of the New York State laws for insurance reimbursement and licensing, with the most comprehensive scope of practice for clinical social work in the country. He also developed our original worker's compensation bill; we continue to work toward its passage.

His frequent testimony before the New York State Supreme Court eventually led to a court decision that the LCSW scope of practice was equivalent to that of clinical psychology in the state. In addition, he took on the schools of social work for shaving class time to less than the federal requirements for academic credits (50 minutes per credit plus 2 hours of prep/week/credit).

He also was a contributor to the amicus brief in *Jaffee v. Redmond* (1996), the United States Supreme Court case in which the Court created a psychotherapist-patient privilege in the Federal Rules of Evidence.

Hillel was recognized as a Distinguished Practitioner in Social Work by the National Academies of Practice (NAP) and he co-chaired the social work division of NAP. He was honored as a Fellow of the New York Academy of Medicine, and designated as a Diplomate of the NYSSCSW.

Always accessible to our members, Hillel provided knowledgeable answers to their questions and thoughtful guidance for dilemmas they faced. You could reach him almost any time of the day or night to ask about ethics, forensics, subpoenas, testifying, referrals for neurological and psychological evaluations, wills, medications—just about anything. Did he sleep more than three hours a night? It's hard to say.

Hillel earned the respect and friendship of people from many walks of life. An exceptional, irreplaceable human being, he was a true friend and tireless advocate for the confused and disenfranchised. As his wife Hoon noted, "Hillel's strong sense of justice and passion for the less fortunate touched many lives. He gave of himself without expectation of anything in return." He is greatly missed. ■

Rediscovering the Art of Relationships

From Self Protection to Relational Protectiveness: The Modification of Defensive Structures

Presentation by Dr. Richard Geist; Reviewed by Susan A. Klett

Dr. Richard Geist's presentation underscored the significance of empathic attunement to our patients' defensive structures, known "as a means of self-protection" rather than "as a means of resistance." He brilliantly demonstrated his use of self as an understanding and protective other within the analytic dyad to facilitate the softening of his patients' defenses and to promote healing and growth.

A faculty member of Harvard Medical School for 35 years and founding member, faculty and supervising analyst of both MAPP and MIP, Dr. Geist provided a rich and stimulating learning experience on "redis-

“Dr. Geist demonstrated his use of self as an understanding and protective other within the analytic dyad to facilitate the softening of his patient's defenses and to promote healing and growth.”

covering the art of relationships" between the analytic pair. He illuminated and expanded upon Kohut's patient centered, developmental theory of treatment throughout his presentation. He invited us into four compelling sessions, wherein he illustrated various ways his unique, unwavering, experience-near, protective attitude embodied his conscious and unconscious participation in his patient's subjective emotional life.

With Stacy, Terry, Jamie and Jason, Dr. Geist traced the development of deep structures that each patient had constructed for self-protection and psychic

survival. While emphasizing the patient's courage in embarking upon the therapeutic process, he drew a parallel to the therapist's courage in opening to the unknown, making room for the patient to take up residence in his emotional world, and by allowing space for what may emerge between them.

In the following two clinical examples, Dr. Geist highlighted a protective attitude and described how relational protectiveness is actualized when dealing with individual and characterological defenses:

- Stacy, a young anorexic patient came into his office the day after her parents called the police to bring her home after she ran ten miles, barefoot in shorts, during one of Boston's severe blizzards. Dr. Geist's exquisite receptivity to her bodily and facial expressions which displayed a sense of pleasure at her accomplishment mixed with palpable anxiety in anticipation of his reaction informed his response:

"Stacy," he asked, "how did you find the courage to run ten miles in the frost and in 22 inches of snow?" Her face lit up as if she had won the marathon!

Three years later, she disclosed to him that this was the precise moment she knew that she could trust him. Dr. Geist shared with us that Stacy had healed and recovered, and today she is married with a family and doing well.

- Jason was referred to Dr. Geist by his girlfriend, a psychology graduate student, after he read one of her papers on dissociation and recognized himself. When Jason asked Dr. Geist in a third consecutive session to summarize his treatment, Dr. Geist realized that by summarizing where they were in treatment, he initially failed to understand that he was rekindling an early

CONTINUED ON PAGE 18

TRUE LOVE WAYS: Psychoanalysis and Mindfulness

Presentation by Polly Young-Eisendrath, Ph.D.; Reviewed by Louise DeCosta, Ph.D., LCSW

To begin with, a confession: I am a big fan of Polly Young-Eisendrath and have been for some time. To me, she is an intriguing woman, an idiosyncratic original in our field. Within the psychoanalytic community she is known as the Buddhist Jungian analyst living, writing and practicing in rural Vermont (me imagining hers as a monk-like existence of meditation, tilling the soil, interspersed with professional sorties).

My first encounter with the lady herself was as pleasurable as my fantasies had been. There was Polly, on stage at The Rubin Museum in New York with Pulitzer Prize-winning playwright John Patrick Shanley, author of *Doubt*, engaging in a playful verbal pas-de-deu. They came together as strangers. Shanley was invited to select an image from C. G. Jung's *Red Book* that held personal resonance and Polly was to draw out his associative thoughts and feelings. What fun those two had, while we the audience delighted in these two extraordinary creatives happily playing in their verbal sandbox.

My second encounter with Polly was when she led a day-long seminar at The C. G. Jung Foundation with a small group of 21 participants. Polly encouraged us to engage with her and with one another in a serious intellectual romp, and it became evident to us all—

Polly loves to play!

Her NYSSCSW presentation (4/22/2017) was extensive, informational and comprehensive. We missed a shorter, more playful version, but were rewarded with an extensive discussion of her original model of short-term Dialogue Couples Therapy, and her thoughtful reflections on personal love: what it *is* and what it *is not*. For Polly, people are bound together in all sorts of ways that are *not* love: attachment bonds, desire, passion, security needs, power struggles, physical or financial or emotional dependence. She states, “there is nothing inherently wrong with being connected in these ways, but they will not produce the benefits of true love.” The practice of “true love” depends on a mutual, reciprocal, equalitarian relationship that becomes both mysterious and familiar throughout time. Love requires a spacious perspective in which both individuals have an intention to know themselves and the other. It is a journey, a pilgrimage, in a way analogous to a spiritual quest.

Ultimately, for me the special gift of Polly Young-Eisendrath is her skillful, exquisite blend of Buddhist sensibility with depth psychology that she uniquely brings to the question of meaningful relationships. 



Photo: Shannon Boyle

At the Spring 2017 Annual Education Conference, (l. to r.) Susan A. Klett, Psy.D., ACE Foundation Director of Professional Development, with presenters Richard A. Geist, Ed.D., Polly Young-Eisendrath, Ph.D., and Nancy McWilliams, Ph.D., ABPP. The presentations of Drs. Geist and Young-Eisendrath are reviewed in this issue. Dr. McWilliam's presentation will be reviewed in the next issue.

Louise DeCosta, Ph.D., LCSW is a practicing psychoanalyst currently affiliated with the Postgraduate Psychoanalytic Institute and a member of the C. G. Jung Foundation for Analytical Psychology. For the past five years, she has been the Creative Director for three dramatic readings: *The Freud/Jung Letters*, *The Freud/Ferenczi Letters*, and *The Women: Our Psychoanalytic Mothers*, presented on over 30 occasions in the USA and internationally.

This season has already brought us a rich harvest of wonderful opportunities to nourish our souls, spirits and minds. On October 1, we met at the Museum of Modern Art to see *Frank Lloyd Wright @150* and explore his creative working process. This much-celebrated American architectural giant and “author” of the Guggenheim led us toward an understanding of how architecture, as he understood it, could connect with many of our clinical goals.

The exhibit made clear that his philosophic outlook embraced not only the goal of creating and providing shelter, but also sought to integrate man, both inside and outside from his personal environment, to his surroundings, and ultimately to his community—even connecting communities. We had planned to follow this experience with a visit to see the sculpture on Governor’s Island, but lunching together provided us with an opportunity to revisit our tour and plan for more visits.

Upcoming Museum Visits (Dates TBA)

- MoMA: Selected Works of Painting and Sculpture, 1880–1940
- MoMA: Louise Bourgeois, *An Unfolding Portrait*
- Metropolitan Museum of Art: David Hockney and Michelangelo.

Defensive Structures, CONTINUED FROM PAGE 16

selfobject. He then asked Jason how he may be failing him? Dr. Geist’s astute empathic sensibility captured the meaning of a protective stance. Rather than experience Jason’s question as controlling or to return Jason’s question by questioning “why he was asking,” Dr. Geist allowed Jason to guide and shape the treatment. When Jason felt understood and protected, Dr. Geist learned from Jason, how he needed another to organize him when he became fragmented, in a way his depressed mother, who committed suicide, failed him. Following her suicide Jason turned to books, there was no hope for another human-being to fulfill this need until it was restored with Dr. Geist.

Through a panel discussion and audience participation, Dr. Geist further elaborated on the clinical

Committee Presentations (CEUs Offered)

- Nov. 1 & 2: Inna Rozentsvit, *The Neurobiology of Problem Gambling/Gambling Addiction*; at The Problem Gambling Training Partnership, 1040 Grand Concourse, Bronx, Lower Gallery. Contact: NASW NYS Chapter, info@naswnys.org or 518-463-4741.
- Nov. 9 to 11: The International Forum for Psychoanalytic Education’s (IFPE) 28th Annual Interdisciplinary Conference, Fort Lauderdale, FL, www.ifpe.org/2017-conference
NOTE: Several committee members will present at the IFPE conference on the topic of Time: Inna Rozentsvit, Victoria Grinman, Susan Kavalier-Adler, Ann Rose Simon and Sandra Indig.
- April 8, 2018: Rockland Chapter, *Beholder’s Share through the Lens of Neuroscience, Art and Psychoanalysis*. 

Sandra Indig, LCSW-R/LP, ATR-BC, State Committee Chair, psych4arts@hotmail.com

Inna Rozentsvit, M.D., Ph. D, MBA, MSciEd, NeuroPsychoEducation Chair

phenomenon of the therapeutic couple’s struggle for a connective bond to secure the treatment process and the significance of working respectfully with defenses to facilitate development and healthy growth. 

Susan A. Klett, Psy.D, LCSW-R is director of professional development of the ACE Foundation of NYSSCSW; faculty and supervisor of the Training Institute for Mental Health couple program, and faculty of TIMH’s individual psychoanalytic training program; past president of the Postgraduate Psychoanalytic Society; former faculty of the Postgraduate Center for Mental Health; faculty of the Institute of Postgraduate Psychoanalytic Society; former co-director, faculty, supervising and training analyst of Washington Square Institute; and, author of *Analysis of The Incest Trauma: Retrieval, Recovery, Renewal*, with Dr. Arnold W. Rachmann (Karnac, 2015).

The Healing Power of Laughter in the Treatment of Eating Disorders

By Mary Anne Cohen, LCSW

The inner world of the binge eater, bulimic and anorexic is filled with anxiety about numbers: calories, size, scales, diet portions and weight. Therapy for emotional eating can require hard work, grit and determination as patients explore the psychological roots of their eating disorders and work to make changes through behavioral and cognitive strategies. At times, medication may also be needed.

But sometimes humor can be the best medicine. Humor can act as an antidote to the perfectionism, rigidity, and depression so often experienced by emotional eaters. It can provide a more optimistic perspective as well as temporary relief, reprieve and release from our problems. The therapist and client laughing together in the therapy session offers a shared moment of affection and bonding, a playful connection and a sense of partnership. The ability to laugh at ourselves and our quirks helps patients learn to play and emotional fluency flourishes. Where there is humor, there is hope.

Amber, struggling with severe bulimia, had long expressed a fascination with vampires. We discussed how she identified with the insatiability of the vampire and how, when she binged, her “fangs” came out. In one of her sessions, Amber described the latest vampire romance novel she was reading. Caught up in the story, I asked Amber, “So what finally happened to this vampire couple?”

A mischievous smile crossed her face and Amber replied, “They lived *capillary* ever after!” We laughed uproariously. Amber had added a most playful note to a very tough struggle. This moment of shared laughter declared, “We’re in this together, we are a team and we’ll get through this bulimia together!”

Tyler was describing the impact of his father’s death on his developing anorexia. “And how did your Dad die?” I asked.

Tyler answered with a rueful half smile, “My father was an alcoholic. He died of *neurosis* of the liver!” In the midst of a sorrowful time, Tyler had found a shred of playfulness that lightened his grief and brought us together on our journey.

Molly, a binge eater, poked fun at herself sheepishly, “The most stable men in my life have always been Ben and Jerry!” I responded that one of my best girlfriends used to be Sara Lee. We joined together with an affectionate, laughing connection.

“You’re the same old boring therapist always trying to psychoanalyze me,” complained Laura, not wanting

to speak further about a topic I was encouraging her to discuss. Knowing Laura for a long time, I replied, “And you’re the same old boring, resistant patient, always trying to make me feel like a pain-in-the-neck shrink.” We both laughed, letting off steam at how we were annoying each other, clearing the air and then going back to work.

Laughter is a form of “non-food nurturance,” a way of soothing oneself rather than bingeing, starving or throwing up. Norman Cousins declared, “Laughter is inner jogging.” Charlie Chaplin once said, “To truly laugh, you must be able to take your pain and play with it.”

“There is a great value in humor because it can to

At the height of laughter, the universe is flung into a kaleidoscope of new possibilities.

—Jean Houston, Ph.D.

some degree positively alter our emotional states when we are faced with cruel reality. Humor is the emotionally healthy way of

dealing with the problems and dilemmas of life, as opposed to unhealthy ways such as drug addiction and depression. The ability to use humor easily is a wonderful psychological aid. Laughter is an appropriate way for the therapist to express his own humanity to the patient.”¹

All the formal therapy techniques in the world are not sufficient to help someone relinquish the pain and the eating disorder. But when the person experiences the therapist as an emotional companion on the journey toward healing, then the process becomes vivid and alive. The root of the word “companion” derives from Latin and means “to break bread together” (com = with, pan = bread). To break bread is an act of sharing, of togetherness, of comfort, of being present in the moment—the recipe for a wonderful therapy!

Fortified with curiosity, empathy, resilience and humor, patients can continue their journey to declare peace with emotional eating. Our patients learn to sink their teeth into *life*, not into the relationship with food. 🍷

1. Louis Birner, Ph.D. “Humor and the Joke in Psychoanalysis,” in Herb Strean, ed., *The Use of Humor in Psychotherapy* (Jason Aronson, 1994), 84, 87.

Mary Anne Cohen, LCSW is Director of The New York Center for Eating Disorders and author of *French Toast for Breakfast: Declaring Peace with Emotional Eating*, and *Lasagna for Lunch: Declaring Peace with Emotional Eating*. www.EmotionalEating.Org.

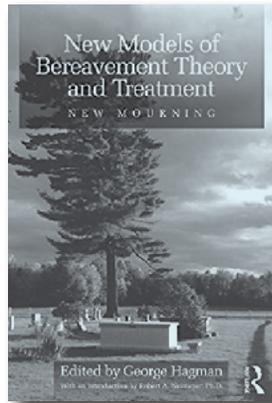
Reviewed by Debra Kuppersmith, LCSW

I remember sobbing the first time I read *How Is Mourning Possible* by Martha Wolfenstein. I was a new mother at the time and, having lost my own mother at age 14, I became very emotional while reading Dr. Wolfenstein's description of a grieving ten-year-old named Walter. Walter's mother had died of cancer and his grandmother took over his care. I wondered why Walter's story was so much more poignant for me than the case, presented in the same paper, of a motherless teenage girl whom I logically should have identified with. But upon rereading Dr. Wolfenstein's paper to write this review, and absorbing the intellec-

“I was enthralled and encouraged by [the book's] integration of culture, family systems, and religion into a framework for achieving a healthy acceptance of loss in a clinical setting.”

tually intriguing ideas presented in George Hagman's elegantly edited book on mourning, I realize that Walter's story struck a chord because it reconnected me with a long-suppressed sorrow for my own grandmother and recognition of a mutual bereavement held together by my lost mother and her lost daughter.

So it is that *New Models of Bereavement Theory and Treatment: New Mourning* enables



the reader to see that our response to the death of a loved one encompasses much more than resolution of the libidinal loss and decathecting the person to whom we were attached. Mourning is complicated and exponential because it creates “new” relationships with those around us. As Hagman states, the bereaved person's experience is shaped by individual, familial, situational, and social factors. There are expectations, both conscious and unconscious, of the surviving parent, relatives, friends, extended family, and community. There is a restructuring of fantasies about the future. These experiences have no predictable psychic structure: they are interpersonal and intersubjective, can involve a range of affects from sadness to joy, and perhaps most compelling—to those who have had a fixed view of the mourner's psychic response to loss—rather than giving up the dead, many people, through mourning, strengthen the relationship with the deceased.

Part of what makes this book accessible is that it presents ideas from a social work perspective: it has a bio/psycho/social lens. Although Freud's seminal 1917 paper, “Mourning and Melancholia,” and its emphasis on the need to decathect the lost object, informs

New Models of Bereavement Theory and Treatment: New Mourning

Edited by George Hagman

(Routledge 2016)

the work of Hagman and his colleagues, they draw upon many other interpersonal and intrapsychic experiences to formulate paths through the process of mourning. For example, Hagman contends that, beyond decathecting the lost object and object tie, a mourner can achieve a permanent internal restructuring of the lost relationship—what he calls “recathexis”—that can lead to a life-affirming restoration of the self within a familial, social and environmental context.

To say that it was a joy to read a book about mourning may seem incongruous, but I was enthralled and encouraged by its integration of culture, family systems, and religion into a framework for achieving healthy acceptance of loss in a clinical setting. The book begins with an introduction by Dr. Robert A. Neimeyer, a researcher and clinical practitioner, outlining contemporary grief theory, including practical ways of processing grief, such as journaling, which can facilitate “reconnecting to the life narrative of the deceased loved one.” There are then 12 papers by prominent analytic writers, researchers and clinicians in the field of bereavement, including six by the editor himself, all published within the last 25 years. They include Joyce

CONTINUED NEXT PAGE

Slochower, who writes about the efficacy of religious rituals in her paper, “The Holding Function of Shiva” and Otto Kernberg, who writes, in “Some Observations About the Mourning Process,” about the ongoing and even permanent structural changes that result from mourning.

The book relies heavily on self-psychology and the self/object milieu and, particularly in “Object Loss and Self Object Loss” by Estelle and Morton Shane, and “The Role of the Other in Mourning” by Hagman, emphasizes the importance of the idealizing self/object transference. The latter paper addresses concepts such as aborted mourning due to the isolation of affect in families, and the importance of a responsive and affectively attuned environment in enabling repressed affect to emerge.

All the articles in this collection are well organized and easy to read. Hagman’s own articles begin with an outline of the topics to be addressed, which he then explicates by means of case studies presented with empathy and insight. Most of the other articles

similarly benefit from a synthesis of theoretical premises and case histories that bring the theories to life. In their thoughtful delineation and exploration of the concepts of bereavement, grief and mourning, the articles in this collection offer clinicians both an aid to navigating the complex literature of loss and, perhaps more importantly, an understanding that mourning is not just as an ordeal through which all of us must pass, but a process that can ultimately lead to psychological growth. 

George Hagman, LCSW is a clinical social worker and psychoanalyst in private practice in New York and Stamford, Connecticut. He is the author of *The Artist’s Mind: Psychoanalytic Perspectives on Art*, *Modern Artists and Modern Art*, and *Creative Analysis: Art, Creativity and Clinical Process*, as well as the editor of *New Models of Bereavement Theory and Treatment: New Mourning*.

Debra Koppersmith, LCSW is a psychoanalyst, clinical social worker and educator. She is the co-editor of the AAPCSW monograph, on the editorial board of *The Psychoanalytic Review*, and a training and supervising psychoanalyst at NPAP. She has a private practice in New York City and Dobbs Ferry.

Affordable Care Act, CONTINUED FROM PAGE 9

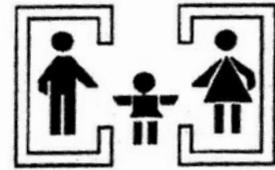
We do not know if certain important provisions of the ACA would remain after it was repealed, including:

- The provision that young people can be covered by their parents’ insurance until age 26. Under the ACA, mental health treatment has increased by 5.3 % among people ages 18 to 25, and mental health uninsured visits have decreased by 12.4%, while private insurance visits have increased 12.9%.
- The provision that insurance plans cannot charge more or deny coverage for pre-existing conditions.

Despite their failure to date, Republicans remain committed to the repeal of the ACA. This means we need to stay alert and continue to oppose destructive changes in Medicaid federal funding for the most vulnerable populations. 

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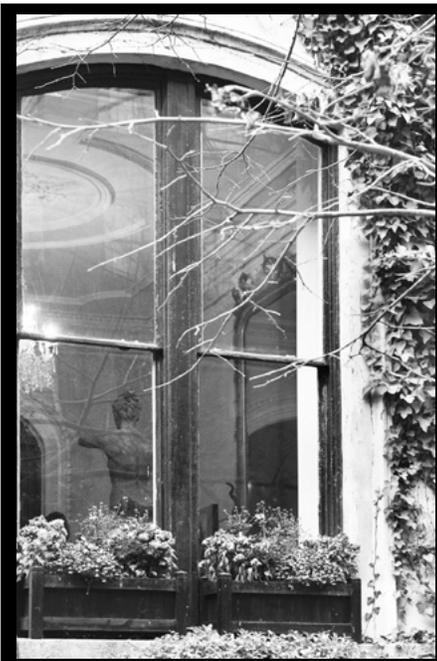
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