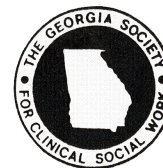


THE CLINICAL PAGE

FALL-WINTER 2018



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PRESIDENT'S MESSAGE



Greetings GSCSW Members,

Another GSCSW season has come and gone. I reflect over the past year as 2018 closes, and I am amazed by everything the Georgia Society for Clinical Social Workers has accomplished and by everything that is on the horizon.

There are some accomplishments that have become our standard offerings and are easily recognized. We continue to offer: exceptional continuing education (CE) events monthly; ethics workshops and consultations; support to members through mentorship groups and low-cost supervision; and LMSW salons and jobs panels. We presented our May 2018, Spring Symposium in conjunction with Kennesaw State University, and featured nationally recognized Dr. Becky Beaton, who presented: *The Ethics of Sex, Lies, and Telemental Health*. Each of these events were devel-

oped and hosted by various GSCSW Board and Committee Members who worked many hours to make these events happen.

Although not as readily apparent, there are other GSCSW achievements that are happening behind the scenes that are equally significant. One of our board members participated in *Mental Health Mondays* at the state capital to educate consumers and legislators about the role clinical social workers have in providing mental health services. Members of our LMSW Committee traveled to some of the local universities to speak to MSW students. Other board members have met with representatives from other community and professional organizations to establish positive working relationships. We continue to attend most meetings at the Georgia Composite Board of Professional Counselors, Social Workers, and Marriage and Family Therapists (located in Macon, Georgia) to stay abreast of issues that may impact clinical social workers throughout the state.

Our reputation as the “go-to” professional organization for social workers has been strengthening and has resulted in a remarkable increase in applications for continuing education approvals. The number of applications for CE approvals has increased more than ten-fold over the last year. With this being a license renewal year, there has been a rush this fall to obtain CE hours in record numbers. Additionally, our members have been taking advantage of viewing our recorded events for CE credit.

GSCSW's relationship with both the Licensed Professional Counselors Association of Georgia and the Georgia Association of Marriage and Family Therapy continue to strengthen as a result of newly-scheduled, quarterly joint meetings. The three organizations have committed to working together to elevate each of our respective professions and to developing a collaborative training on supervision issues that impact us all. This spirit of cooperation among the various mental health professions in Georgia is exciting and will benefit everyone involved.

There are a couple of things I am especially excited about that the GSCSW Board is working toward. The board is committed to expanding GSCSW's membership and impact beyond the bounds of the metro Atlanta area and to truly becoming the *GEORGIA* Society for Clinical Social Workers. We are committed to hosting a professional education event in southern Georgia, and we are planning a membership drive throughout Georgia so that we may more effectively represent all clinical social workers, not just those within and around I-285. It will be with careful consideration and decision-making from board members that we will balance this expansion with maintaining stability and quality programming to ensure the success of GSCSW for the years ahead.

In closing, I would like to thank all of the people who have contributed their time and talents to the efforts of GSCSW during the past season. Without the work of these individuals, none of the great accomplishments described here would have been

FROM THE EDITOR: VOLUNTEERING'S UNEXPECTED GIFTS



Did you know? The Georgia Society for Clinical Social Workers primarily exists due to the service of volunteers. Many of your friends and colleagues have donated hours, weeks, months, and even years of their time and/or expertise to ensure we have a community of people we can call “our clinical home”.

Have you ever wondered why people volunteer? At first glance, it might appear that volunteers “give” their time and energy —acts that take away from other aspects of their lives. This is only partially true. There is so much more to these experiences. **Volunteering has the potential to be transformative. Not just for those receiving our services, but for us, as well.** The contribution's size doesn't matter.

We are sending you an invitation to experience the unexpected gifts that come with volunteering for GSCSW.

Here is why. It is possible for you to:

Grow new friendships. We spend time with people who embrace similar, if not the same, life values. GSCSW has, by the nature of its organization, brought us all together. When we place the value of cultivating friendships higher on our priority list, we gain travelling companions who accompany us through life's journey.

Meet extraordinary people. Come with an open heart, with an open mind, and with the intent to be present in the moment. I have this wonderful map of Georgia in my head. It is not highlighted with restaurants or favorite stomping grounds, but sprinkled with the extraordinary people with whom we share this planetary space. Even within the realm of clinical social work, there is a rich diversity of experiences. We invite you to come, to share the richness of your life experiences, and to be that extraordinary person for someone else.

Discover and develop a deeper appreciation for the talents of others. It feels wonderful to be “wowed” by others. When we rub our working elbows with other clinical social workers, we begin to see how the parts (each individual's strengths) connect to the whole. The talents of others don't separate us, they connect us to something larger than ourselves. We benefit from feeling more deeply connected to others, because indeed we are.

Experience the synergic energy that comes with collaboration. Clinical social work collaboration is frequently a witness to percolating ideas, unstoppable proactivity, and positive emotions. It can be a powerful force when clinical social workers get together and harmonize on projects. I was fortunate to experience this with our board and committee members, and especially with Meredith de Saint-Albin, MA, LCSW, during our Professional Education Committee Co-Chairing, Fall 2016–Spring 2018. Meredith, thank you so very much for synergizing with me!

Evolve in wonderful ways. We grow when we step into new and uncomfortable situations. When we lean forward and breathe it in, we discover that we are courageous and talented in ways we could not have imagined. And when we lean forward and breathe it out, often we are sharing a better version of ourselves with others.

Receive healing. There is nothing quite like being around other clinical social workers. We are inundated with validation, which flows deeply. We are reminded of our connectedness. We are cherished for our world views. We are frequently on the receiving end of kindness and compassion.

Come join us in sharing these unexpected gifts...!

To our current President, Sherri Rawsthorn, LCSW, and from the warmest place in our hearts, we thank you so very much. For those of us who have had the pleasure of working beside her, we know that she is dedicated, competent, ethical, supportive, and quite fun! Additionally, we would like you to join us in welcoming our President-Elect, Rebecca Anne, MDiv, LCSW. Welcome, Becky!

The amount of time and energy that a President commits to GSCSW is enormous, much of it undocumented and behind the scenes. There are many occasions when our President has chosen leading GSCSW over spending time with family, personal friends, career obligations, and other interests. When you see Sherri and Becky, introduce yourself, and please thank them. It takes a special person to lead GSCSW in this capacity.

Thank you so very much to our GSCSW Board Members, our Administrator (Trisha Clymore has been “the glue” between our historical and present-day happenings), our GSCSW Committee Members, the individuals who have contributed to this Clinical Page, and those who have volunteered to present for our GSCSW workshops and salons.

We hope you enjoy this edition of GSCSW's Clinical Page. We are excited to introduce and reconnect you to some of the extraordinary

PRESIDENT'S MESSAGE

Continued from page 2

possible or continue to be possible. So... Thank you to our departing board members: Jean Rowe, LCSW, OSW-C, CJT; Robin Kirkpatrick, MPH, LCSW; Emily Giattina, LCSW; Katy Miles, LCSW; Coby Bryan, LCSW; Meredith de Saint-Albin, MA, LCSW; and Liza Gellerstedt, LCSW. I would like to extend continued appreciation and thanks to our returning board members: Jacey Yunker, LCSW, ACTP; Griffin Smith, LMSW; Kristen Smith, LMSW; Dana Lipton, LCSW; Allison Sweenie, LCSW; Becky Anne, MDiv, LCSW; Carla Bauer, LCSW; and Barbara Lewison, LCSW. Further, I would like to express special thanks to Stephanie Barnhart, LCSW, for approving CE applications and to Trisha Clymore for being such a phenomenal administrator. This year we welcome into service our new board members: Michelle Nelson, LCSW, BCD; Autumn Collier, LCSW; Mary Ablett, LCSW; Diane Sitkowski, LCSW; and Brenda Romanchik, ACSW, LCSW, CTP.

As always, please do not hesitate to contact me if you have any questions, want to become more involved, or have ideas to further improve GSCSW. I am looking forward to seeing everyone at upcoming events.

It is with great honor that I continue to serve.

Sherri Rawsthorn, LCSW

President, Georgia Society for Clinical Social Work

FROM THE EDITOR: VOLUNTEERING'S UNEXPECTED GIFTS

Continued from page 3

people who compose our membership. The Clinical Page has strong bones —since Spring of 2006. It was a pleasure to review prior editions. We are grateful to our previous editors and excited to extend many of their traditions. We thank these individuals for their previous service: Elizabeth Figueroa, LMSW; Meghan Harbin, LCSW, RYT; Laurie Adilman, LCSW, CTT, MAC; Karen Tantillo, LCSW; Fred Crimi, LCSW; Alyce Wellons, LCSW; and Metta Johnson, LCSW.

A toast to all! *"May we continue to grow as clinicians. May we always be connected. May we also have a bit of fun along the way!"*

Be Warm of Heart and Happy in Spirit!

Jacey J. Yunker, LCSW, ACTP

Clinical Page Editor

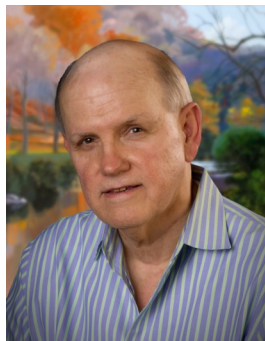
clinicalpage@gscsw.org

LETTERS TO THE EDITOR

"Let's be in conversation about the articles we publish!" —Former editor, Elizabeth Figueroa, LMSW

If you have any feedback, questions, follow-up commentary, or additional notes from a previous edition's article, feel free to email Jacey Yunker, LCSW, ACTP, at clinicalpage@gscsw.org. Consider having your letter be a future submission.

How to Create a Life of Health and Happiness



People seeking therapy often suffer from dissatisfaction, stress, or difficulty in getting what they want. Many experience frustration, anger, anxiety, fear, depression, sadness, or hurt. They seek changes in their lives to become healthier and happier. To help these individuals achieve their goals, I encourage them to take responsibility—to determine what they want and create what they can. It is my belief that you do not get the life you want—you get the life you create.

What Makes a Healthy, Happy Life?

Determining what makes a healthy, happy life is not an easy task. Many ideals promoted by your family, the media, peer groups, and the culture can lead you into suffering, misunderstanding, and destructive behavior. The therapeutic journey can help you learn new paradigms about health and the choice points that create these paradigms. A good starting point is to increase your awareness of your feelings, body sensations, and thoughts. Stay curious as you change and the world changes. When you deepen the connection with yourself, you develop internal wisdom to find your truths.

As you strengthen your inner connections, you can practice engaging the world in a competent manner. You can assess your current internal capacities and external support to implement strategies that take you closer to the life you want. Every action you take is an opportunity to learn about yourself and the world. As long as your focus is on learning, you can strengthen your understanding of what you really want and expand your capacity to achieve it.

How to Make Optimal Choices

As you pursue a happy, healthy life, you'll be constantly challenged by choice points. Success depends on a keen understanding of your realities and making choices in harmony with those realities. From the sea of universal wisdom, I have assembled five essential rules to support you in creating a life of health. The rules are:

1. Show up
2. Be present
3. Seek and speak the truth with wisdom and compassion
4. Make your best effort with balance
5. Let go of the illusion of control

Get to Know the Rules

These five essential rules help you develop a more accurate and useful understanding of your realities. They also guide you towards value orientations and skill sets that make you more effective in achieving your goals.

1. Show Up

Showing up doesn't mean just being physically present. It means you engage the world with purpose. You know your goals, contexts, and roles. You are punctual, prepared, and ready to work for what you want.

As a responsible adult, you are required to show up for a variety of contexts—perhaps as a parent, spouse, sibling, or employee. Each

Continued on next page

How to Create a Life of Health and Happiness

context may have multiple roles and goals. For example, the tasks you perform as an employee and the results of your efforts (e.g., sales goals, return on investment, or number of clients served).

In any context, when you truly show up, you must be physically and psychologically ready to engage in your role. You should be clear headed, enthusiastic, and focused on the goal at hand.

2. Be Present

Being present means having a consistent and mindful awareness of what is going on inside and out.

On the inside, being present means having a consistent and mindful awareness of your thoughts, feelings, and body sensations. This awareness can strengthen your intuition and wisdom. On the outside, being present means accurately observing the people and events around you. This awareness can help you identify opportunities and threats.

Try not to obsess about the past or worry about the future. Keep a clear focus on the task at hand, and reduce potential distractions, such as electronics or objects of your addictions. You must be present wholeheartedly and vector your energies to the context, role, and goal at hand.

3. Seek and Speak the Truth with Wisdom and Compassion

Life is always changing. Seeking the truth is a lifetime endeavor. Apply more curiosity and less judgement. Be open to the possibility that your view may not be the only legitimate view nor the optimal view. The more curious, committed, and courageous you are in seeking the truth, the more truth you will find.

Mindfully Seek the Truth Inside Yourself

With mindful awareness, you become informed of your feelings, body sensations, and thought patterns.

You start to see how you create unnecessary suffering and identify opportunities to create peace and contentment. The stronger the connection to yourself, the easier it is to connect with others.

When you deny your feelings, wants, and truths, you often create pain for yourself and others. Learn to welcome the truth with wisdom and compassion, and to be anchored solidly in your own reality. From that reality, you can more easily make choices to create the health and happiness you want.

Mindfully Seek the Truth Outside Yourself

As you encounter the world, your judgements, interpretations, and opinions can obscure and distort what is real. Through reality testing, mindfulness, and education, you can see other people more clearly and identify your best choices. Learning to see and discriminate more clearly reduces unnecessary suffering.

Mindfully Speak the Truth with Wisdom and Compassion

To speak skillfully, you must understand your role, goal, and context. Stay attuned to the needs of those you address and use

How to Create a Life of Health and Happiness

appropriate tone and word choice to be truly heard. Communicate with others with compassion (empathy and a wish to help), clarity, and preciseness. Avoid attitude, judgement, or distortions. People will understand you and respond likewise. This creates a relationship that optimizes cooperation, solutions, and life-giving experiences.

4. Make Your Best Effort with Balance

You have physical and mental limitations —everyone does —and you're constantly challenged to make choices that impact your health and happiness. You choose where to spend your time, when to invest in relationships, and how to use your wisdom. When you say yes to some things, you are saying no to others.

Pursuing unrealistic perfection in one aspect of your life can harm other parts of your life. Instead pursue a goal of excellence: Determine the optimal use of your resources to produce the optimal outcome for the full range of your goals. This requires a perspective of balance with a broad view. It means not sacrificing one context for another. It means knowing when enough is enough.

5. Let Go of the Illusion of Control

Much of life is beyond your control. You really only have control over where you place your attention and how you focus on it. No matter how well you plan and execute, these things are true:

- Life is always changing.
- No one can predict the future accurately all of the time.
- Difficult life events will occur.

Accepting this reality can be painful but freeing. After you make your best effort with balance, you can remain open, curious, and flexible. You can accept what is and respond effectively when there is an opportunity for influence.

Use These Rules to Reduce Suffering

There is a simple way you can use these rules to reduce suffering. When you find yourself in pain or distress, ask the essential questions:

1. Am I showing up effectively?
2. Am I being present?
3. Am I diligently seeking the truth and speaking it with the most wisdom and compassion I can muster?
4. Am I making my best effort with balance?
5. Am I indulging in the illusion of control?

If you ask these questions with curiosity and compassion, you will create personal inquiries that reduce your suffering, anxiety, pain, and fear. You will also move closer to the beautiful life you envision. By Randy Oven, LCSW

These five essential rules were developed by Randy Oven, LCSW. He created them based on his study with many expert therapists and renowned spiritual teachers. Randy Oven provides psychotherapy to individuals and couples near I 85 and North Druid Hills Road where Brookhaven meets Atlanta. He uses the five rules described in this article to support his clients in taking responsibility to create the lives they want, as they address their anxiety, depression, post-traumatic stress and other issues. His focus is to enable his clients to discover and integrate, at a pace that works for them, as much of their truth as possible. To learn more about Randy Oven's therapeutic approaches, visit www.randyoven.com or contact Randy at 404.633.8819. For permission to print and use this, please see Randy Oven.

My Challenge of Working with Holocaust Survivors



Originally, the decision to work with Jewish Holocaust survivors came from my personal experience growing up in Germany after WW II. The Holocaust was the singular, most formative historic event of my childhood. It left an indelible mark on my personal identity. When I grew up, I saw destruction and trauma everywhere: my hometown was in shambles; and the adults around me were fearful, physically disabled, hungry, and suspicious. It was not a good childhood by any means —no matter how loving one's parents were.

So, when I was approached in the 1990's by the German Consulate in New York to work as a Confidential Restitution Re-examiner, I first turned it down. It seemed too overwhelming to work with people who had been at the vortex of annihilation, and I was afraid, that I would not be able to keep my "cool" as I might become overwhelmed by my own traumas. After mulling it over for quite some time, in particular with my analyst, I decided to take on this huge responsibility. I worked in that position for five years, and I am still treating survivors in my private practice to this day.

My first and biggest challenge was to stay "real" in the face of hearing about disaster. As much as the experiences at the Camps were similar (Auschwitz or other Death-Camps) each person had a unique story of being torn away from their home, their family, their belief-systems. I was the examiner (and later on, the therapist), but it was an illusion to be able to keep my composure. I had to meet with each person as a human being, and while listening compassionately, I had to openly, in words, admit that I could only be humble in facing the survivor in front of me. That meant, I could never say: "I can relate!" Not even say: "Oh, how horrible!", because the details of torture and destruction sometimes felt too intense to banalize them with words.

At times, I had a hard time not reacting too openly to all the information about loss, torture, and death. Initially, I often reacted with my body: I often felt like throwing up. I really learned how to deep-breathe in those days. I cried. Often. With the victims. I was silent. Often. And I hugged. And then I went home to process my own inner reactive chaos with my analyst.

The biggest challenge when working with trauma and violence survivors, is to learn how to process your own reactions without overloading your personal resource-system. When you choose this specific line of work, you need a therapeutic village to help you keep perspective. It will challenge your professional competence, your world-view, and your spirituality —because you will get to feel the survivor's profound helplessness and rage.

I also think it is very important to be trained in conducting interviews with trauma survivors. There is an art of "being-with" when someone hurts —because it is easy to re-traumatize the survivors by insensitively insisting they re-tell their "story" when they are not ready or able to contain their emotions in words. As therapists, we tend to use our transference and/or our own experiences to "relate" to our clients' stories —but you cannot do that with a Jewish Holocaust survivor, unless you are a survivor yourself. So, you need to admit: "I cannot fully fathom what you went through, but I want to hear your story, so that it will never happen to you or anyone else again." Sometimes compassionate silence is the best one can offer.

Overall, I am very grateful that fate gave me the chance to witness. I took it as a moral imperative for our profession, that we need to absorb the love, as well as the hate of this world, and give it back as understanding and compassion.

By Yudit Jung, Ph.D., LCSW

Dr. Yudit Jung is a Board-Certified Psychoanalyst. She is presently an Associate Professor in the Department of Psychiatry at Emory, and also a Training- and Supervising-Analyst at the Emory University Psychoanalytic Institute (EUPI). Yudit has lived and worked in many different countries and work-settings, and she has maintained a private practice since 1984. The focus of her work is to help her patients cope with political, social, and family violence. She considers compassion the most healing element of any psychotherapy. You can find Dr. Yudit Jung at 1924 Clairmont Rd. Ste. 210, Decatur, GA, 30033 yudit.jung@gmail.com

How to Survive a Hurricane

midnight under the waterfall
leafy branches of the sheltering trees
become sharp spears hurled
by fierce hunters
my antelope blood freezes

in bed I am alone, no one to cling to
fear wraps my body like fishnet
shallow breaths are all I get
there is nothing, nothing I can do
weather is weather
my mind is a flashing red light
danger is danger
panic rattles at the window panes

and then that still small voice
I tell myself inside myself
to open my heart to the storm
to life, this life, to all of life
with the three middle fingers of each hand
I press soft and firm, left and right
of my breastbone
pressing and pulling open
that sunken place in me
I tell myself inside myself
open your heart to the storm
I sigh and then the breath
is rolling in and out of my lungs again
the breath is breathing me

far off in the deep of the night
a train whistle sounds a blue note
moments pass, further still
a pale reprise

the wind and rain carry on
like young lovers never stopping
through to dawn
then one falls slack and the other silent
in the still of the morning
one bird sings and then another
sweet reprieve
the tempest is undone

open your heart to the storm
to life, this life to all of life
listen to the still small voice
let the breath breathe you
open your heart to the storm

By Franklin Abbott, LCSW
July 2005



Franklin Abbott, LCSW, has been in private practice for almost forty years. He is also a writer, a musician, and a community organizer. His blog is www.tenminutemuse.com.

TRAVEL: A THERAPIST'S PORTAL INTO PERSONAL AWAKENING AND CLINICAL EXPANSION



Initially, we travel to escape, but ultimately, travel allows us to re-enter our lives. We travel to widen the lens of our worldview—to gain an embodied experience of how time has impacted the way of life for those outside of the neighborhood in which we live. Time is a curious thing. Moment-to-moment, it is passing; but yet, our hurried lives keep us in constricted mind states outside of the present moment. **Personally, travel gets me out of the microcosm of my life—clearing blocked channels clouding my heart and getting beneath the film of stress where compassion flows freely.** As I check all of my certainties about life at the plane door, what I am sure about is that I'll return from my journey with a deeper sense of belonging to the world we share.

As a clinical social worker, I utilize travel as a practice of personal expansion and as a practice to help my clients deepen their journey of awakening. When I take my seat in the therapy chair, I check-in with myself asking, "How vast is my view

of the world and existence at this moment?" As therapists, this self-inquiry helps us open into the spaciousness we need to sit with clients experiencing suffering. There's a direct correlation between our world view and the heart's ability to *BE* in a state of compassion as we help our clients navigate their healing processes. In addition to my one-on-one clinical work, I guide international mindfulness retreats domestically and in Asia where clients often come to immerse themselves in the alchemical work of mindfulness, meditation, and ancient Eastern healing far beyond the comfortable familiarity of day-to-day living.

MOVE INTO STILLNESS

Travel has allowed me to cultivate a more intimate relationship with stillness. Let's face it, jet lag, peculiar foods, extreme weather, and no electricity aren't all glitz and glamour. Travel spins us around and turns us upside-down. We face authentic hardships when we trek through the world, thrusting us out of our complacencies. This is all an opportunity to return to our breath, honoring all that's arising in our minds and bodies. **When the world is whirling around us, we're forced to find some stable ground—where our center of stillness lives.** As one of my teachers, Amy Weintraub of LifeForce Yoga, says beautifully, "Continue to ride those waves of breath, home to who you are inside."

The motion and commotion of the universe is an invitation to come back home to the wisdom of our inner grounding. Confronted with a stressful travel moment? Flight delayed? Lost luggage? Choose to cultivate a 4-6 breath count (4 seconds in, 6 seconds out) to activate your parasympathetic nervous system (rest and relaxation system). Come home to your center, the fertile ground of your wholeness.

This very stillness is translated into our clinical work as we remain non-reactive and in a state of compassionate observation. The inner stillness we cultivate while traveling consciously will serve us in the therapy room and beyond. It's an awakened inner knowing of how humans survive *and* thrive that we acquire through mindful travel that serves our clients. We can begin to simultaneously hold space for their suffering while shine a light on their dark path, helping our clients find their way step-by-step.

RE-ENTRY

Close your eyes and imagine sea spray on your face, a symphony of tropical bird songs and the perfume of orange and hibiscus wafting into your nostrils (all sans iPhone pinging!). Sounds amazing, right? As a self-described urban escapist, my spirit thrives on these sense experiences while traveling. **Immersion in sights, sounds, and smells foreign to daily life instantly transports me into the present moment.** Our senses serve as portals into presence—a way of being in the world with an embodied sense of curiosity and awe. When we relax into a state of openness, receiving the gifts of our environment, we re-enter our lives. And through eyes of awareness, we begin to realize we're a part of a larger body of energy—that Sea of Infinite Spirit.

Whether you've traveled across town to your local park or across the world on an exotic vacation, be still and invite your senses to be curious. Breathe deeply and take in the magnificent sights, sounds, and smells around you. With gentleness, observe waves of emotion and body sensations that enter your plane of consciousness. You are alive! Perhaps, you create a mantra of gratitude in this moment. Mine? "I bow to this brand new moment before me and I am grateful."

Gratitude for living beyond life's perpetual busyness is a natural result of the travel I embark on for myself and those individuals that join me on retreat abroad. It's as if the journey has awakened us to living from that radiant heart-centric place. My clients often comment on my quality of loving presence I embody, after I return home from a trip.

TRAVEL: A THERAPIST'S PORTAL INTO PERSONAL AWAKENING AND CLINICAL EXPANSION

SHEDDING SEPARATENESS

Initially, bizarre foods, foreign smells, and different cultural customs force us out of our comfort zones. But take a closer look and you'll see the search for self and meaning in life are common threads in the multicultural fabric of the world. So, through the unknown, we begin to gain a deeper knowing of the qualities of human existence —and ourselves. **In talking to locals in my maternal homeland of Vietnam, their depth of spirit lives on through dedication to ancient customs, culinary traditions, and fierce love of family. It's through these moment-to-moment interactions where my heart opens to the infinite connective tissue of love —bonding humanity throughout time. I begin to realize the illusion of our separateness.** When we break through this illusion, the potential hierarchy and barrier our clients feel in the therapy room melts away. A natural reverence and honor for human life shines through our energy field.

Travel is the voyage of awakening our dormant enthusiasm, imagination, and inner world. Abroad, we shed all familiarities for a heightened sense of awareness, presence, and curiosity. For me, travel is like the idyllic love affair. In this love story, you become lost in one another, and without words, your shared language becomes the sense of connective energy between beings. But, most of all, this love transcends space and time.

As Buddha taught, impermanence is an undeniable fact of life. So, don't wait —pack your bags and begin the great journey inward. **This journey of awakening your presence through travel is one of the greatest gifts you can give yourself and those beautiful beings that you serve.**

By Lena Franklin, LCSW
October 2018

Lena Franklin, LCSW, was raised in a hybrid Buddhist/Christian household, where she was introduced to meditation as a young child. Today, this mindfulness foundation has grown into a deep passion to guide others on a journey towards inner peace, emotional balance, and a felt sense of wholeness. Lena's holistic healing work is grounded in Buddhist Psychology, Mindfulness Meditation, LifeForce Yoga, Insight Yoga, and psychodynamic foundations. You can find out about her practice, wellness trips, retreats, and continuing education offerings at: www.lenafranklin.com.



Supporting Transgender and Non-Binary Clients



As a gender therapist, I have worked with hundreds of transgender and non-binary clients. When working with clients who are transgender or non-binary, it is important to be as supportive as possible. Remember that your clients are in charge of their own identity and their own bodies. If a client is questioning their identity, **I believe it is a process of self-discovery that may have been going on for many years**, before they decided to seek the help of a therapist.

Clients who are transgender and non-binary can experience *gender dysphoria*, which can be uncomfortable, and at times may lead them to difficulty with self-care, depression, and anxiety. Clients may have a hard time coming out to others for fear that people will not believe their gender identity, or fear that they will be discriminated against. **These individuals are facing oppression and higher rates of suicide attempts, and there is much to be done in the therapy room, aside from exploring their gender.**

Although the World Professional Association for Transgender Health's (WPATH's) Standards of Care (SOC) version 7 has been in effect for many years, **many clinicians do not realize that real-life experience in their affirmed gender is no longer required for beginning gender-affirming hormone treatment.** Clients should be respected in their choices to begin gender-affirmation treatment, such as hormones or surgery.

Recently, **The World Health Organization (WHO) has announced that *gender dysphoria* will no longer be classified as a mental illness in the ICD 12.** This has been considered a positive change in the field of transgender mental-health care, although there are still some questions about how this change will affect health insurance coverage in the future.

You can read more information about this in the Standards of Care version 7 on the World Professional Association for Transgender Health website: www.wpath.org. WPATH often offers trainings across the country in transgender-affirming, mental-health care.

By Katie Leikam, LCSW, LISW-CP, BC-TMH

Katie Leikam, LCSW, LISW-CP, BC-TMH, is a LGBTQ-affirming therapist working in Decatur, GA. Katie is the owner of True You Southeast, where she specializes in working with gender identity, anxiety, and relationship stress. She is a speaker at national transgender-health conferences. Katie is in the process of earning her WPATH Global Education Initiative (GEI) certification. You can find her at www.katieleikam.com

Risks, Protective Factors, and Treatment for Children Exposed to War and Trauma



More than one billion children under eighteen years of age live in countries affected by armed conflict (UNICEF 2009) and are at especially high mental-health risk. The traumatic nature of armed conflict can also result in debilitating psychosocial effects on children as they enter adulthood. Immigration has been changing societies across the world. **Families fleeing war-plagued countries often include traumatized children.** As social workers, we may encounter these families as clients in our schools, offices, hospitals, and clinics. Here is some information about the risks, protective factors, and treatment for these children.

THE RISKS

Common forms of war-related trauma can include: physical injury, direct exposure to combat, an elevated risk for malnutrition, infectious diseases, forced displacement, parental death, kidnapping, and sexual violence. In addition to this, children are at higher risk for violence, sexual abuse, and physical abuse within their own families. Predictors of maltreatment by family members during and following armed conflict include: 1) a father's PTSD symptoms, 2) his rate of alcohol use, 3) a mother's exposure to her own violence, and 4) her exposure to her family's violence. **War trauma can significantly differ from other traumas, because it often involves prolonged, chronic, and multiple traumatic events.**

Such repeated and prolonged traumatization can have severe detrimental effects on a child's brain development. Mental-health symptoms among war-exposed youth include these signs and symptoms: posttraumatic stress, anxiety, depression, somatization, conduct problems, externalizing problems, sleep problems, and disturbed play. Psychosocial challenges specific to war-related trauma often emerge as these children enter adulthood. War trauma can negatively impact a young person's access to employment, positive relationships, and educational opportunities. Additionally, adolescents with war-related depression may be at higher risk for substance abuse and sexually risky behaviors.

PROTECTIVE FACTORS

Protective factors that improve children's mental-health prognosis and behavioral responses to war-related trauma include: **religious or spiritual coping, access to education, social support, and secure peer attachments (a major protective factor).** Additionally, adolescents have shown improved psychosocial outcomes when their **parents supported their school work and spent time with them** outside of school.

TREATMENT RECOMMENDATIONS

Findings support **the importance of early detection** and treatment of children exposed to war trauma. Behavioral-health care professionals can improve their services for those children exposed to armed conflict by educating themselves about the unique challenges faced by families and resulting psychiatric problems. In post-conflict settings, Trauma-Focused CBT has shown promise in reducing depressive and post-traumatic stress symptomology. Professionals occupying countries during armed conflict may provide community members with self-guided trauma material such as *Self Help Plus 2*. **Cultural sensitivity is very important.** Providing helpful material in the community's primary language is an example of this.

It may also be beneficial to educate families about age-appropriate responses to conflict when interacting with children and about the risk of psychosocial challenges when their children begin entering adulthood. **Building professional relationships with organizations**, such as the *International Rescue Committee* and the *U.S. Committee for Refugees and Immigrants*, can help behavioral-health care professionals effectively connect families with agencies that further enhance positive psychosocial outcomes.

RESOURCES

Medical University of South Carolina TF-CBT Training Opportunities: <https://academicdepartments.musc.edu/projectbest/tfcbt/Webcourse%20brochure%20Ben%208-30-11.pdf>

International Rescue Committee: <https://www.rescue.org>

U.S. Committee for Refugees and Immigrants: <http://refugees.org/>

By Alexandra Pajak, LCSW, MS

Alexandra Pajak, LCSW, MS, is the owner of Brookhaven Therapy, LLC. Her focus includes: Dialectical Behavior Therapy, mental-health care in correctional settings, and social justice. She lives in Atlanta with her husband and son. You can find Alexandra at: www.brookhaventherapy.com.

Chewy Bits: What We Love About Being A Clinical Social Worker

I am grateful for: 1) the opportunity I've had to live in a much larger, more meaningful and richer world than so many folks have; 2) the continuing challenges and opportunities to grow personally and professionally due to relationships with colleagues and clients; and 3) a sense I can contribute and am useful. —Merrilee Stewart, LCSW

Whenever I meet other clinical social workers, I feel an instant connection. I love being part of a tribe of people who deeply care about helping people. Also, I think we tend to be pretty brave and we know how to get things done! —Stephanie Cook, LCSW

Of the many, many things I love about being a clinical social worker...I would have to say my favorite is our rich, talented, diverse, and generous community! —Alyce E. Wellons, LCSW

It is a privilege to bear witness to people's experiences and provide validation and support along their journey. —Kate Zera Kray, LCSW

Being a clinical social worker has enriched my life by giving me three valued things: 1) a group of good people for friends, 2) knowledgeable and generous colleagues to whom I can turn in support of my work, and 3) meaning in my life when someone else's life is made easier with my help. Anyone who is given these three things has the makings for a very good life indeed. —Polly Hart, LCSW

Getting to know so many fascinating people and their stories. I also love traveling along with them on their journeys through life. —Neitcha Thomsen, LMSW

The vast number of environments I can work in. The variety of experiences I had to take part in to become a clinical social worker. The community available to support and educate clinical social workers in Georgia. —Diane Sitowski, LCSW

One of the most rewarding parts of being a clinical social worker is watching the transformation that people go through as they get stronger and healthier in their recovery, their relationships, and their lives. It is an honor to play a part in that process. It is also very rewarding to assist families in becoming closer and more cohesive. —Ephrat L. Lipton, ACSW, LCSW, BCD, CEDS

I love that sharing moment when a client experiences a powerful insight that finally clicks for them. I also love it when the therapeutic relationship becomes so solid that we can laugh about life together. I am deeply grateful for all of you (GSCSW) –'my people'. —Jacey J. Yunker, LCSW, ACTP

Committee Happenings

LEGISLATIVE COMMITTEE

The GSCSW Legislative Committee has been collaborating with the Mental Health Public Policy (MHPP) Coalition. This collaboration includes several major mental-health organizations in Georgia, including the National Alliance on Mental Illness (NAMI Georgia), Mental Health America of Georgia, and the American Foundation for Suicide Prevention Georgia. **Barbara Lewison, LCSW**, has been attending meetings over the past year and participating in regular legislative conference calls since this past summer. Goals of the MHPP group include **working toward several legislative initiatives related to mental-health treatment and the mental-health profession during the upcoming legislative session, which starts on January 14, 2019.**

This year, we welcome a **new committee member, Eliza Segell, LMSW**. Eliza Segell is a recent transplant to Atlanta from the Pacific Northwest where she completed her MSW at the University of Washington. She is currently a resident therapist at Care and Counseling Center of Georgia and a Clinical Research Coordinator in the Emory University School of Nursing. Eliza is passionate about increasing access to mental-health services in Georgia. She has joined the GSCSW Legislative Committee in hopes of learning more about the political avenues for state-level change.

Thank you to all who came to the **GSCSW Annual Legislative Town Hall on October 11, 2018**. We are especially grateful for our three dynamic speakers —House Representative Bee Nguyen, House Representative Kim Schofield, and Insurance Commissioner Candidate, Janice Laws. We would like to extend a special thanks to Julie Justus, LMSW, and Eliza Segell, LMSW, our GSCSW Legislative Committee Members who volunteered at the event. We are also very grateful to Dawn Collinge, LPC, and Joseph White of Skyland Trail, who assisted us in making this event possible.

Bee Nguyen (D), State Representative for Georgia House District 89 (Atlanta), discussed her active roles in the community, including founding Athena's Warehouse, a nonprofit organization dedicated to educating and empowering teen girls in underserved areas. While volunteering at the very diverse Cross Keys High School in Brookhaven over the past 10 years, she reviewed in-school suspensions and policies, and has seen their graduation rates rise from 42% to over 70%. Despite being located in Brookhaven, Cross Keys High School has no resident students of Brookhaven, but rather comprises a mixture of underserved families in the areas of Buford Highway and North Druid Hills. Rep Nguyen noted that although \$176 million was provided for education, teachers *still* did not get raises, and that there continues to be a fight for fully-funded education.

Since 2015, Rep Nguyen has been active in the Georgia Women's Policy Institute and has been extremely influential in pursuing justice for the backlogged rape kits. Rep Nguyen has also been working on a refundable Georgia Work Credit, gun safety legislation, mental-health record retention (re: gun safety), protective orders, criminal justice reform, solitary confinement reform, child marriage laws, and deportation reform. As the first Asian American in the Georgia legislature, Rep Nguyen noted several opportunities for conversations and dialogues when encountering biases, questions, and comments about her race and ethnicity.

GSCSW was grateful to **Kim Schofield (D), State Representative for Georgia House District 60** (Atlanta), for agreeing to speak in place of Nan Orrock (D), Georgia State Senator District 36 (Atlanta), who was unable to attend at the last moment. Rep Schofield provided our membership with a very inspiring account and discussion about her personal perseverance prior to becoming a legislator. After being diagnosed with lupus about 10 years ago, Rep Schofield lost her job and health insurance within three months. As a result, she began a support group, gave a talk, and began raising issues around lupus. Rep Schofield decided to raise awareness at the Georgia State Capitol. She was so persistent in meeting with Senators and Representatives, that they finally introduced the first bill for the Georgia Council on Lupus Education and Awareness in 2014. Having become increasingly recognized, Rep Schofield received an offer to work in the Division of Rheumatology at Emory University, where she currently does lupus research.

Rep Schofield was sworn into office on December 15, 2017, after being asked to run by Nan Orrock. Rep Schofield participates in the Georgia Women's Policy Institute, and she has started a class at South Atlanta High School to educate students about our government. Rep Schofield stated that she is now participating in the working group for Health and Mental Health and aligning with top legislators regarding health care insurance. She is also working toward mental-health treatment funding, access to Telemedicine, and the cessation of human trafficking. (She noted that the upcoming Super Bowl brings specific problems regarding human and sex trafficking.)

Janice Laws, Insurance Commissioner Candidate, has a history of working for two decades in auto, home, life, and financial planning insurance. Ms. Laws explained that we do not have state laws in place for mental health parity, and one of her goals is to implement this. Ms. Laws also discussed how she wants insurance companies to have accountability and guidelines in place. Georgia does not have enough health insurance options with only two insurance companies in the Marketplace-based insurance program. Ms. Laws shared how other states have implemented creative plans such as state-based insurance.

Rep Nguyen and Rep Schofield encouraged us to work on relationship-building with legislators —especially with the Health and Human Services (HHS) Committee Chairs, Sharon Cooper (R), State Representative for Georgia House District 43 (Marietta), and **Renee Underman (R), Georgia State Senator District 45** (Sandy Springs). They encouraged us to make it personal by talking with them about the issues we care about, as well as advocating for what we want to see changed. Rep Nguyen noted that meetings with legislatures can be

Committee Happenings

LEGISLATIVE COMMITTEE REPORT—CONTINUED

easily scheduled in the *off* session. The best way to contact legislators *during* session (which begins on January 14) is to “call legislators at the ropes,” by filling out a slip of paper and preparing a brief statement/request when they approach. Other preferred methods for contacting legislators are by personal emails (which are welcomed over form emails) and by phone calls (which are “awesome”). You can find the legislators working in the HHS committees by going to the Georgia General Assembly website links for the Senate and House of Representatives:

<http://www.senate.ga.gov/Committees/en-US/Committee.aspx?Committee=76&Session=25>

<http://www.house.ga.gov/Committees/en-US/committee.aspx?Committee=115&Session=25>

The GSCSW Legislative Committee continues to search for an affordable lobbyist; therefore, we welcome anyone who is interested in learning and participating on our committee. Thank you for your interest in the legislative issues affecting our clients and our profession.

Yours in Advocacy,

Barbara Lewison, LCSW, Committee Chair legislative@gscsw.org

Legislative Committee Members:

Julie Justus, LMSW

Eliza Segell, LMSW

Donna Parrish, PhD, MSW

LMSW COMMITTEE

The LMSW Committee is off to a wonderful start this year! We had a successful LMSW salon titled, *An Introduction to Gottman Method for Couples Counseling*, at the Atlanta Center for Wellness on October 18, 2018. The presenting speakers were Stephanie Cook, LCSW, a former LMSW Committee Chair, and Alyce Wellons, LCSW, a former GSCSW President. We are in the process of planning a spring salon and welcome any topic ideas. Also, we are excited to join other GSCSW Committee Chairs in student outreach with MSW programs at Kennesaw State University, Georgia State University, and Clark Atlanta University in the spring of 2019.

This year's LMSW Committee Chair is Kristin Smith, LMSW. She works at Emory University where she completes intake assessments for a psychiatry laboratory that studies the relationship between depression and inflammation. She received her MSW from Florida State University and became licensed in Georgia in 2015.

We thank Katy Miles, LCSW, for her service as LMSW Committee Co-Chair, during the 2016-2018 seasons. Thank you, Katy!

The LMSW Committee is eager to have members join. As a committee member you can help plan the salon events which usually consist of seasoned clinicians in a panel discussion. You can also speak to MSW students about the benefits of joining GSCSW when trying to complete the licensure process at social work programs in the metro Atlanta area. **Becoming a committee member is not only a valuable way to network, but it can also improve your communication, leadership, organizational, and creative skills.** If you are interested in becoming a committee member, please email Kristin at lmsw@gscsw.org.

Kristin Smith, LMSW
Committee Chair

SOCIAL MEDIA AND PUBLIC RELATIONS

Hello Dear Friends and Colleagues! Social Media and Public Relations is in need of some TLC. This committee is currently open and in need of volunteers. We welcome any amount of time and expertise you would be able to contribute. You can contact Sherri Rawsthorn, LCSW, for questions about this committee: president@gscsw.org

Committee Happenings

ETHICS COMMITTEE

Have you ever encountered a situation in your practice that gave rise to ethical concerns and left you struggling in doubt? Social workers periodically encounter such complex situations in the course of our work and across the career span. Sometimes we are faced with situations where two or more ethical principles are in conflict, and whatever decision we make, something will be compromised: an obvious example, confidentiality vs. duty to protect or warn. Other times, we just don't know what to do in a given situation that feels wrong or pushes our clinical boundaries.

These can be lonely and/or disturbing places to be, but you don't have to sit there alone. Consultation can be a key element of ethical decision-making, for new and seasoned social workers alike. Your Ethics Committee continues to welcome and research ethical inquiries from GSCSW members: submit your questions to ethics@gscsw.org and we'll explore the relevant ethical, regulatory, and legal guidelines and implications to formulate an opinion. The committee strives to turn these around as fast as possible, trying to deliver consensus feedback within a week, knowing that when faced with an ethical dilemma, timing feels urgent.

As these members of the Ethics Committee rotate off, we thank them for their service: Maria McAllister, LCSW, Michelle Nelson, LCSW, and Shayla Snipes, LCSW. Continuing on the committee are Carla Bauer, LCSW, Carol Finkelstein, LCSW, Phyllis Rosen, LCSW, and Corinne Warrener, LMSW. **We invite others who are interested in the exploration of ethical dilemmas and challenging questions to consider joining us. It is an enriching experience.**

The committee has addressed a variety of interesting inquiries in many areas, including: boundaries and dual relationships, confidentiality when working with children and teens, challenging agency practices, working within our competencies, client determination, and more. As we bring our diversity of experience to these complex explorations, we are always reminded what a gray area it is to navigate —and how important it is to consult with others, both to expand our perspectives and to gain support.

The committee also hosts periodic CE events that provide opportunities for social workers to come together and explore ethical dilemmas through small and large group discussion, and to learn new ways of thinking about these challenging situations. Stay tuned for a Spring 2019 event.

Carla Bauer, LCSW, Ethics Committee Chair

MEMBERSHIP

We are pleased to share our current GSCSW membership count at approximately 333 individuals. One of our goals is to increase membership enlistment. If you know of anyone who might be interested in joining GSCSW, send them our way!

Our Membership Committee attends most GSCSW events —we are the friendly faces signing you in and ensuring you have beverages to drink and food to eat. We also seek new membership enlistment at events.

We are currently formulating a plan to connect and collaborate with professional social work organizations in Savannah, Georgia, in hopes of broadening GSCSW's statewide partnerships.

Membership Committee welcomes new committee members! Feel free to contact us should you want to learn more or wish to join our committee.

Griffin Smith, LMSW

Membership Chair, membership@gscsw.org

Membership Committee Members:

Christi Humphrey, MSW

LOW COST SUPERVISION

We thank you so very much, Mary Ablett, LCSW, for offering affordable supervision to our clinical social workers! You can find Mary Ablett, LCSW, at supervision@gscsw.org

Committee Happenings

MENTORSHIP

The Mentorship Committee continues to serve GSCSW members seeking guidance in their career and in the field of social work. The Mentorship meetings are held on the first Thursday of the month at 5:45pm before the GSCSW CE events, and usually at Hillside Hospital in the Monroe Building. Whether you are a recent MSW graduate or a LCSW looking to branch into a different area of social work, we welcome you to come be amongst your social work peers! During the Mentorship meetings, one can expect to be: connected with peers; informed about potential employers and the different areas of employment in the field of social work; and learn about licensure requirements per the Georgia Composite Board of Professional Counselors, Social Workers, and Marriage and Family Therapists (without subjective interpretation). The meetings are led by seasoned LCSW's looking to help and grow social work professionals.

Additionally, the Mentorship Committee hosts a jobs panel in the spring. This year's jobs panel was a great success and featured LCSW's in varying fields of practice. Some of the areas of practice included were hospital, private practice, and managed care/insurance settings. The panelists discussed their roles and job duties, and they shared their career journeys. We look forward to our jobs panel in the spring of every year.

Do you have questions? We'd love to hear from you!

Autumn Collier, LCSW, and Danna Lipton, LCSW,
Mentorship Committee Co-Chairs
mentor@gscsw.org

PROFESSIONAL EDUCATION

Professional Education Committee has kicked off a fantastic fall 2018 with two dynamic and engaging workshops –*Brené Brown's, The Daring Way™: Facing Vulnerability and Shame and Crisis Prevention, Intervention and Support (Operation Resilient: Inspiring Recovery Before, During & After a Crisis)*. We thank Skyland Trail and Hillside Hospital for sharing their spaces with us!

A huge thank you to exiting co-chairs, Jacey Yunker, LCSW, ACTP, and Meredith de Saint-Albin, MA, LCSW, for their contributions to the Professional Education Committee, Fall 2016–Spring 2018. The new 2018–2019 season is already under way with a great line-up of engaging and talented Thursday night speakers. Jacey took on the extra task (and did an exceptionally fine job) of creating our Professional Education Committee Manual. This “how to” manual has paved the way for a smooth transition as **Diane Sitkowski, LCSW, and Brenda Romanchik, LCSW, ACSW, CTS, take the co-chairing reigns for the Professional Education Committee this season.**

The committee had a successful first meeting in October where discussion involved planning the Diane Davis Lecture, the March Panel, our Spring Symposium, and believe it or not, the 2019-2020 season! Diane and Brenda are so thankful for their active committee members and look forward to the next committee meeting in late November/December.

GSCSW is excited to have Marco Posadas, MSW, RSW, FIPA, who will present the *Unconscious Biases: the craft of managing prejudice in the transference and countertransference dynamics*. He will be joining us from Canada, where he is the Chief Clinical Officer of The House of Purpose, a Psychoanalyst, and an adjunct faculty and social work doctorate candidate with Smith College in Massachusetts. The Diane Davis Lecture will take place on December 7, 2018.

The Professional Education Committee is always interested in hearing what GSCSW members would like to see for speakers and workshops. Please contact the committee at professionaled@gscsw.org if you would like to join the committee or if you have any suggestions for speakers and topics. **The committee is never too big and there are never too many ideas!**

Diane Sitkowski, LCSW, and Brenda Romanchik, LCSW, ACSW, CTS
Professional Education Committee Co-Chairs
professionaled@gscsw.org

Professional Education Committee Members:

Natasha Vayner, LMSW

Michelle Pintado, LMSW, CADC-II, CSSW

Hannah Sievers, LCSW

Katie Leikam, LCSW

Christi Humphrey, LCSW

Sharman Colosetti, PhD, LCSW