2016 NASW-MD Chapter Award Winners

W e are pleased to honor our 2016 award winners at a luncheon on Friday, March 18th at the Annual Conference. We had a wonderful turnout, which included a visit from US Congressman Elijah Cummings who accepted the Public Citizen of the Year award and gave a heartfelt and impromptu acceptance speech.

2016 Social Worker of the Year Award
GISELE FERRETTO, MSW, LCSW-C
Gisele Ferretto is a social worker of great integrity who embodies the micro-macro social work connection. She has 33 years of social work experience in both clinical and macro practice areas. Her areas of expertise include: policy and leadership development, field education, child welfare practice, professional ethics, confidentiality, and curriculum development. She graduated from the University of Maryland, School of Social Work in 1982, and has been working at the school for the past 18 years. Currently, she is the Manager for Field Education Training and Liaison Coordinator for the Office of Field Education. In addition, she supports the instruction of students in the Title IV-E Education for Public Child Welfare Program. Her work at the School of Social Work over the past 18 years included administrative positions in the Title IV-E Education for Public Child Welfare Program, Child Welfare Academy, and Social Work Community Outreach Service (SWCOS). Prior to the School of Social Work, she served as administrator at the Maryland Department of Human Resources for 11 years in the following programs: Child Protective Services, Office of Equal Opportunity, and Office of Staff Development and Training. Many key policy initiatives developed by Ms. Ferretto are still in effect and address the following topic areas: mental injury; fair hearing process; screening of child maltreatment; confidentiality; risk and safety assessment; child abuse and neglect prevention and services; family violence; and sexual harassment prevention.

She serves as an active board member of the Archdiocese of Baltimore’s Catholic Campaign for Human Development Foundation and NASW-MD Faculty and Student Committee. She has been a faithful and active member of NASW-MD, co-founding Student Advocacy Day nearly 20 years ago with then-director, Moya Atkinson. She remains active with this program. Thousands of social work students have benefited from her knowledge and explanation of the legislative process in Annapolis.

Gisele also provides consultation and training for private and public agencies on various topics and is a CAPT Qualified Administrator of the Myers-Briggs Type Indicator. An honor long overdue, we are thrilled to name Gisele Ferretto our 2016 Social Worker of the Year!

2016 Lifetime Achievement Award
SENATOR BARBARA A. MIKULSKI
She has inspired many to become professional social workers, and has shown others what it means to be a social work advocate. Senator Barbara Mikulski (D) from Maryland has decided to retire after 30 years in the U.S. Senate with her current

General Assembly Wrap Up

By Ann Ciekot
PUBLIC POLICY PARTNERS, LLC
The 2016 Maryland General Assembly ended with mixed results. Regarding the fiscal year 2017 budget, there was less discord than in recent years as the state’s economic picture is changing for the better. There are still concerns about a growing structural deficit that lawmakers will have to deal with in the coming years.

As for NASW Maryland’s priorities, a number of pieces of legislation fared well. The Children, Youth, and Families Committee brought forth an effort to expand access to higher education for young people in the state’s foster care system. Combining efforts with other advocates from the Coalition to Protect Maryland’s Children, Delegate Mary Washington introduced House Bill 400 - Higher Education - Tuition Waivers for Foster Care Recipients and Unaccompanied Homeless Youths - Modifications which passed, allowing young people in Maryland’s foster care program who were in out-of-state placements to be eligible for the waivers, to allow a young person who turned 18 while in an out-of-home placement to be eligible, and eliminate the financial aid filing deadline.

That committee also saw progress, but ultimately not final success on a bill it has supported for a number of years. Delegate Kathleen Dumais and Senator Jamie Raskin introduced House Bill 646/ Senate Bill 593 - Family Law - Child Conceived Without Consent - Termination of Parental Rights (Rape Survivor Family Protection Act) which would have allowed a parent, when a child was conceived as a result of rape, to terminate the parental rights of the rapist in an expedited manner. The progress is that the bill passed the House of Delegates for the first time. Unfortunately, the Senate Judicial Proceedings Committee made numerous negative amendments to the bill that ultimately killed it.

The Aging Committee focused its efforts on the budget and continues to be an active participant with the Maryland Senior Citizens Action Network, a coalition of organizations addressing policy issues affecting older adults. The budget for programs serving older adults remained essentially level for fiscal year 2017. There is growing attention to the need for both the Department of Aging and the Department of Health and Mental Hygiene to do more planning and preparation to meet the anticipated needs of the expanding population of older adults.

Regarding behavioral health issues, there was a great deal of activity on both addressing mental health and substance use disorders. NASW Maryland weighed in on legislation regarding behavioral health services in schools. Delegate Eric Luedtke and Senator Shirley Nathan-Pulliam introduced House Bill 713/Senate Bill 494 - State Department of Education - Community-P pted School Behavioral Health Services Programs - Reporting System and Report (School Behavioral Health Accountability Act) that passed. The bill will bring together state agencies, providers, and other stakeholders to develop outcome measures in
**PRESIDENT’S REPORT**

By Charles Howard, MSW, Ph.D.

+ First, let me thank Chris Garland for her valuable leadership, her passion, and commitment to the Maryland Chapter and our social work profession. I only hope I can demonstrate the same qualities as we move forward.

+ I have been in the field of social work for more than 35 years in many capacities, and consider myself to be a social work veteran. I first started with NASW as an MSW student representative on the National Board of Directors. I achieved practice experience as a case manager, and later on as a program developer in the field of Mental Health. I have taught courses and explored research topics in several institutions of higher education. I will bring all that to the role of chapter president of the board. My hope is for the Chapter to continue to do the essential work of advocacy for our underserved populations in the state of Maryland.

+ All social workers by now understand that we live in a time of great change—whether it’s providing more services with less dollars to abused individuals, having proper clinical expertise for people in need, or ensuring the services provided are of the highest quality. Change never stops in helping professions, and I ask for your help as we go forward as the ‘voice of the Maryland professional social worker’.

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**EXECUTIVE DIRECTOR’S REPORT**

By Daphne McClellan, Ph.D., MSW

+ I have always been a big picture person. One of the things I enjoy thinking about is our profession; what we do, those we serve, the social workers who are retiring, and those who are just starting out.

+ One of those big picture issues is licensing. I have been involved with licensing since 1980 when I was an MSW student intern with the Oklahoma Chapter of NASW. My field assignment was to get the social work licensing bill passed through the Oklahoma legislature (ask me about it sometime and I will show you Oklahoma license #6 hanging on my office wall). It was a unique challenge which set me on the road to macro advocacy work that I still enjoy today. Since I left Oklahoma in 1988, I have lived in three other states and I became keenly aware of the issues surrounding license portability (or lack thereof).

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**The Winds of Change: Passing of the Presidential Baton**

The 2016 annual conference was a great experience for me. The theme, Forging Solutions Out of Challenges, resonated in all the events at the conference. During those two days, I had an opportunity to meet many social workers who work in areas where they are truly making a difference. My thanks and gratitude goes out to the staff (Jenni and Daphne) and the volunteers who work behind the scenes-job well done! Special thanks go out to the Social Workers Unraveling Racism Committee, the Children, Youth, & Families Committee who planned the Thursday ‘Day of Intensives.’ The programs and presenters were excellent! Friday was also an inspiring day which began with the keynote speaker, Police Chief Jim Holler, and included the awards luncheon, and a variety of great workshops. The conference helped me realize once again why I am a social worker.

One of the top goals I will address as president is to determine what we can do for our new social workers as they begin their careers in order for them to become an integral part of the profession.

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**Have License, Will Travel**

The purpose was to start a discussion regarding portability and reciprocity of social work licenses. I think I hear you clapping and cheering as I write this! There were a number of speakers, and the discussion was excellent. We talked about social workers who live close to state lines and practice in more than one state, about social workers who are engaged in tele therapy and are serving clients who may live far away but are receiving services electronically, and we discussed those who, like me, make moves from state to state during their career. We spent a good deal of time talking about the WIDELY variant licensing requirements among the 50 states (and Canada) and how this could work with such great differences. All in all, it was a robust discussion and there was not one person in the room who thought the subject was unimportant.

The issue was not solved in a few days, but the groundwork was laid for more work ahead. I look forward to being involved in further discussions and in finding the SOLUTIONS.

Please contact me at nasw.md@verizon.net if you have interest in this subject. Perhaps we could convene a discussion group so I am aware of the issues YOU think are important in this regard.

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Can Baltimore’s Public Housing Be Changed?

BY ZOE WOODBRIDGE, STUDENT UNIVERSITY OF MARYLAND BALTIMORE SCHOOL OF SOCIAL WORK

It’s the age old story of public housing: the needed repairs that go unfixed, the years-long waitlists, and now, the sexual harassment? In the same housing complex where Freddie Gray was murdered, there continues to be an underlying problem being swept under the rug. As of December 2015, twenty women came forward to accuse three maintenance workers of refusing to perform housing repairs unless the women had sexual intercourse with them (Bui, 2015). One woman alleged she was left without heat in her apartment because of her refusal to perform sexual favors (Wenger and Broadwater, 2015).

The women filed a lawsuit against the Housing Authority of Baltimore City and State’s Attorney Marilyn Mosby has opened a criminal investigation into the allegations of sexual harassment and lack of basic repairs for residents (Wenger and Broadwater, 2015). In the time it will take for charges to be pressed (or not) and sentences to be handed down (or not), vital repairs remain unfixed across the city. What is to be done?

Mobilizing Residents

Members of Maryland grassroots organization Communities United, while gathering information about hazardous living conditions in Baltimore’s Gilmore Homes public housing complex, were the ones to discover the sexual harassment scandal plaguing the same residents (Henderson, 2015). Communities United, which organizes low and moderate income residents, has shown it has the power and influence to raise $4 million to expand Maryland community schools and out-of-school time programs for this school year and mobilize support to expand voting rights to Maryland residents returning to their communities from prison (Communities United, 2015).

an effort to determine best practices with regard to school-based behavioral health services. There were several other bills looking at the behavioral health needs of children in schools, indicating a growing interest in increasing the quantity and quality of these services.

The School Social Workers Committee supported a bill that will require the Maryland State Department of Education to provide notification to schools and school systems about federal Title I funds available for expenses associated with community school coordinators and for the coordination of community resources associated with the implementation of a community school strategy in a public school. Delegate Mary Washington’s House Bill 1139 – Education - Community School Strategy - Required Notice and Support was originally intended to promote and provide funding for community school strategies, but was pared back do to the fiscal impact.

Several other practice committees monitored dozens of bills dealing with issues affecting military families, adolescent and young adult health, and NASW’s legislative committee, Social Workers Unraveling Racism, looked at bills regarding police practices, criminal justice, and investing in areas of poverty. NASW Maryland invites members to become active participants in practice committees and look at policy and programmatic changes that can have a positive impact on the profession of social work and the people you serve.
Data on Maryland’s Overuse of Solitary Confinement
And the Role of Social Work

By Moya Atkinson

Advocates for the elimination of solitary confinement, or its prolonged use, are concerned that more than 8 percent of the prison population in Maryland of over 22,000 persons is confined to administrative or disciplinary segregation (forms of solitary confinement), whereas, nationally, 4-5 percent of prisoners are in solitary confinement. Solitary confinement is the practice of confining a prisoner to his/her cell for approximately 22 hours or more per day, alone or with other prisoners, which limits contact with others. According to the U.N. Special Rapporteur on Torture, there should be an absolute prohibition on solitary confinement in excess of 15 days. In Maryland, the average length of stay in administrative segregation is 130 days; in disciplinary segregation it is 124 days. Prisoners with serious mental illness are segregated at double the rate of other prisoners (15.5%) and for almost twice as long as other inmates (on average 228 days in administrative segregation and 224 days in disciplinary segregation).

Legislation Calls for Greater Transparency in Maryland

Thanks to painstaking work by a number of groups and individuals over several years, including the ACLU-MD, Interfaith Action for Human Rights (IAHR), and the sponsors of HB 1180/SB 946, the Reporting Bill on Restrictive Housing passed the Maryland Legislature on April 4. It mandates that the Department of Public Safety and Correctional Services report to the public annually the number of inmates who have been placed in restrictive housing during the preceding year. In addition, the bill requires the Department to report the following:

- The total inmate population of each correctional facility;
- The number of inmates with serious mental illness who were placed in restrictive housing;
- The number of pregnant inmates placed in restrictive housing;
- The average and median lengths of stay in restrictive housing;
- The number of incidents of death, self-harm, and attempts at self-harm among inmates placed in restrictive housing;
- The number of inmates in restrictive housing released directly to the community.

Social Workers Join Advocacy Groups to Effect Change

Thanks go to the organizers and students who attended the NASW-MD Student Advocacy Day in Annapolis for making phone calls, sending emails and letting legislators know about the issue! Special thanks go to social worker, Mary Gamble, for providing the following testimony to the House Judiciary Committee:

Public Hearing on House Bill 1180
February 26, 2016
Submitted by: Mary Gamble, MSW, LGSW
In support of HB1180
My name is Mary Gamble and I am a licensed social worker. I have worked in a Maryland correctional facility where solitary confinement is used, a practice now commonly referred to as “restrictive housing.” In preparing for my testimony, I watched the testimony that was provided on a similar reporting bill last session. I was shocked to hear testimony stating that solitary confinement does not exist in the state of Maryland. That testimony is the essence of why HB1180 is so important.

The use of solitary confinement is often denied or greatly minimized by corrections officials. It is a practice frequently used to segregate those with mental illness who are in desperate need of treatment. During my time working in the correctional facility, countless individuals were held in solitary confinement for indefinite periods of time, with no plan for transition to general population or to the appropriate mental health unit. The staff responsible for the weekly review of segregated inmates were often ambivalent about the reasons for the segregation, had no real sense of urgency to remove someone from segregation, and rarely discussed a transition plan.

One story that has stuck with me is that of a 19-year-old male who was held in solitary confinement in extreme isolation for 100 days. During his time in isolation, he went weeks at a time without clothing or a mattress due to disruptive behavior. He was not permitted to have personal property, personal visits, outdoor recreation, and was limited to a three time per week shower restriction, which was not always fulfilled. He received numerous infusions resulting in more lockdown time and loss of privileges. His infections were often for disruptive behavior and being unsanitary. On one occasion he drew pictures on the wall in his own feces; on another he refused to give up his breakfast tray. When I brought this case to the attention of the facility administration, the validity of my report was questioned. In other words, I was called a “liar.”

I have seen no evidence that the practice of solitary confinement provides a corrective experience. People do not improve in their mental health or behavior. Instead, they become suicidal, psychotic, paranoid, severely agitated, and engage in self-harming behaviors. They become a real danger to themselves and others. Imagine if an individual was released to the community in this condition? There are, however, evidenced-based practices that exist to effectively shape pro-social behavior and treat mental illness in the correctional environment.

Our correctional system is a closed one in which the public has very little knowledge into its inner workings. HB1180 is an important step in increasing transparency and ensuring that we are using evidenced-based and cost-effective practices in order to increase public safety. Thank you for your time.

Impact of Solitary Confinement on the Social Work Profession

Social workers are among professional health care providers, case managers and policy makers who work within the criminal justice system, and are likely to face dual loyalty conflicts. A study by Glowa-Kolish evaluating the New York City Jail system highlights this problem.

“The evaluation revealed significant concerns about the extent to which the mental health service is involved in assessments that are part of the punishment process of the security apparatus.” It concluded in part: “In assessing dual loyalty, we learned from patients and providers alike that participation in the punishment apparatus of the jail results in harm to the therapeutic alliance between us and our patients, ultimately damaging our capacity to deliver care. Of particular note, our assessment confirmed long-standing concerns that staff members’ work in solitary confinement settings revolves around responding to the stress these housing areas cause patients, and the efforts they make to avoid them.”

NASW’s Department Manager for Social Justice and Human Rights recently wrote a 12-page Brief under the NASW Blog, urging clinical social workers to advocate for an end to solitary confinement. While valuing the information it provides, SWASC Task Force members have consistently urged NASW to work with other advocacy organizations as an institution, to provide assurance of support for health care prison workers such as social workers who are at risk of being disciplined, harassed, and physically and psychologically hurt by attempting to do their job and by reporting abuse and neglect of prisoners in solitary. NASW’s International Policy on Human Rights provides such an assurance for social workers in international settings, but not yet for social workers in our own country.

As social workers, students and retirees, there is so much we can do to end solitary confinement:

- Learn more about solitary confinement, including ways to help prisoners in solitary confinement and their families and communities: www.solitarywatch.com.
- Learn more about our SWASC Task Force and ways to support us, including developing chapter/state liaisons within SWASC: www.socialworkers.org.
- Join the Chapter’s Legislative Committee to further the goals of ending the use of solitary confinement by states and local jurisdictions through the creation of alternatives.
- Request speakers and advisers, including prison social workers, formerly incarcerated people and other experts.
- Request a visit to a Corrections facility.
- Organize a conference to discuss the ethical dilemma of dual loyalties, etc.

We look forward to continuing our work with the NASW Maryland Chapter. Without the Chapter’s and members’ support, we wouldn’t have held our first work-shop in March. We are grateful to know Mary Gamble, or participated in the Student Advocacy Day in Annapolis in March of this year!

At a time when Pope Francis, President Obama, Supreme Court Justice Anthony Kennedy, and the United Nations are denouncing the practice of solitary confinement, the social work profession is well suited to be among the leaders in the health/mental health field in eliminating it, and offering humane alternatives.

Moya Atkinson is the Convener of Social Workers Against Solitary Confinement (SWASC) Task Force, Member and former E.D. of NASW-MD, and member of Interfaith Action for Human Rights (IAHR) moyaatk@yahoo.com

Endnotes
1. Secretary Moye’s letter to Senator Zirkin, chair of the Senate Judicial Proceedings Committee, as of August 31, 2014.
3. October 1, 2015 Response from the Maryland Department of Public Safety and Correctional Services (DPSCS).
4. October 1, 2015 Response from the Maryland DPSCS to request for data from Senator Zirkin’s office.
**Part III in a Five-Part Series** (Find Part II at nasw-md.org in the Winter 2016 edition of The Maryland Social Worker)

**Don’t Hide Behind Your Age, Start Connecting Through Social Media**

Many people still think of computers, the internet and especially social media as the domain of the Millennials. If you relate to this perspective, consider the staggering success 78-year-old George Takei has had with technology and social media.

With over nine million “likes” on Facebook and 1.76 million followers on Twitter, actor and activist George Takei is a social media sensation. Takei began embracing social media several years ago in an effort to build momentum for his Broadway show “Allegiance.” Up until that point, his primary online presence was a website and blog he maintained mostly for his Star Trek fans. Eventually once this septuagenarian got the hang of social media, he grew his following well beyond Trekkies. In addition to publicizing “Allegiance,” Takei has been able to raise awareness for LGBT rights and fundraising for Japan after the 2011 tsunami. His online posts also regularly provide light-hearted entertainment for his virtual audience.

While most older adults active on social media don’t aspire to transform their image and the trajectory of their careers as Takei did, he offers a powerful example of all that’s possible. Here are 5 steps on how to effectively incorporate social media and technology into your life:

1. **Learn about the hardware**. If you have never used a computer or smartphone, consider taking a class. Don’t be embarrassed if you’ve never used these devices—lots of older adults never needed or wanted to before now. Check out a beginner’s class at a senior center, community college or library.

2. **Set a goal**. Do you want to connect with old friends, find out if your high school boyfriend is still cute or bond with your grandchildren who are obsessed with “screens”? Do you want to find a second career or volunteer opportunity or just have an outlet for expressing your thoughts and opinions?

3. **Start small**. There are so many sites available these days: Facebook, LinkedIn, Twitter, Pinterest, Instagram... the list goes on. Let a trusted friend or family member know about your goals and ask them to recommend the site you should start with. For example, Instagram is great for simple photo sharing.

4. **Be cautious**. While social media offers countless wonderful opportunities for meeting your socialization and work goals, it can also create problems if you aren’t careful. For example, 81-year-old Claire has a Facebook account and recently posted a photograph of herself with her grandchildren at Disney World. Claire is “friends” on Facebook with her niece Julie. Having seen the photo of her aunt Claire, Julie mentioned it to her mother Marie who is Claire’s sister. Since Marie lives near the Orlando area and Claire hadn’t mentioned she was in town, Marie’s feelings were hurt.

5. A more dangerous example is when 68-year-old Ken made a comment on Twitter about how he was looking forward to leaving for a long weekend. Ken’s home was broken into while he was out of town and he believes it may be linked to that post. The pros about social media surely outweigh the cons but it is important to carefully consider who might see the information you share. Further it’s critical to think through how others might interpret or use the information that you share.

—Don’t let social media replace “real” socializing. Social media can be a terrific way to augment to your work and social life. But be sure to still pick up the phone or send a card when a friend is going through a tough time. Continue to get together with your former colleagues for that annual lunch. Use social media to increase interaction with those you care about in the interim. During July 2015, Jenerations Health Education, Inc. was the proud co-sponsor of actor and social activist George Takei’s presentation to the National Speakers Association in Washington, D.C. This is the third article in a series of five on what older adults and their family members can learn from this very active and successful septuagenarian.

Geronotologist Jennifer L. Fitzpatrick, MSW, CSP is the founder of Jenerations Health Education, Inc., an Education Consultant for the Alzheimer’s Association and a gerontology instructor at Johns Hopkins University. You can find her at www.jenerationshealth.com or on twitter @fitzpatrickjen.

AWARD WINNERS

**2016 NASW-MD Chapter Award Winners**

**AWARD WINNERS from page 1**

Jenerations Health Education, Inc., an Education Consultant for the Alzheimer’s Association and a gerontology instructor at Johns Hopkins University. You can find her at www.jenerationshealth.com or on twitter @fitzpatrickjen.

**AWARD WINNERS Cont. on page 6**
TANYA SHARPE, PH.D., MSW
2016 Social Work Educator of the Year Award

Dr. Tanya Sharpe is the most senior African American female tenured faculty member at the University of Maryland School of Social Work. Dr. Sharpe’s leadership and guidance skills are sought out by students, faculty, staff, and school and campus administration. In the eight years she has been at the school of social work, she has been a visible and approachable leader in efforts to promote social justice and diversity. Dr. Sharpe has been the faculty advisor for the African American student group, facilitated pedagogical discussions on how to address micro-aggressions in the classroom, and served as a founding member of the Diversity and Anti-Oppression Committee, and delivered countless presentations, including NASW-MD’s 2015 Macro Conference, and panel discussions on race and the importance of cultural responsiveness. The sum effect of her efforts has been the development of a more inclusive space for all faculty, students, and staff at the school. She was presented the 2016 Outstanding UMB Faculty Award as a part of the university’s celebrations of Martin Luther King, Jr and Black History Month.

Tiffany Newton is an MSW Student at UMB School of Social Work specializing in both macro and clinical practice with a focus on community action and social policy. She currently serves as the president of the LGBTQ+ Student Union and is a founding member of the Macro Student Union. Ms. Newton is a recipient of the Lois Blum Feinblatt Scholarship, has maintained a 4.06 GPA, and is a skilled administrator, organizer, and communicator. She earned her BA from Humboldt State University with a double major in Journalism and Women’s Studies and a minor in Multicultural Queer Studies. During her undergraduate years she was an elected college representative of the MSA and won the Excellence in Community Service Award for her work with the Humboldt County Gender Project and the Emma Center. After graduation, she worked in university advancement and MBA admissions at Sacramento State before being hired as the Admissions and Student Engagement Coordinator for the MSW program at California State University, Northridge. While at UMB, Ms. Newton has demonstrated excellence in her field placements and coursework, and she is passionate about the social work profession. Her first year placement was with the UMB School of Law, where she provided supportive counseling, case management, and drop-in services to clients who were receiving legal support through the clinical law program and JustAdvice®. This year, she works as a technical associate with Catholic Relief Services (CRS) where her efforts have focused on researching and drafting guidance and policy on protecting vulnerable children and adults with a focus on human trafficking and slavery. While at CRS, she also coordinated a unit retreat to design a strategy and action plan focused on cross-sector integration. Tiffany is actively engaged in her local community and coordinated UMB’s Team Build where students, faculty, and staff joined Habitat for Humanity of the Chesapeake for a day of building and learning in Pigtown. She has also conducted an evaluation of the afterschool program for high school students at Paul’s Place, researched and suggested community safety and cohesion initiatives for the Mount Clare Community Association, and participated in community clean-up days with the Wilkins Avenue Mennonite Church.

Congratulations, Tiffany! We look forward to learning about your next endeavor, and are thrilled to name you as 2016 MSW Student of the Year!
2016 BSW Student of the Year Award STEPHANIE JOHNSON

Stephanie is a BSW student at Bowie State University, and is an exceptional student with a very strong intellectual capacity, and an excellent commitment to her educational goals. She exhibits great abilities as a team worker and leader, working on tasks with peers and faculty in a goal directed manner. She has distinguished herself academically by maintaining a high academic standard of excellence, and is an outstanding leader. Her overall GPA is 3.6 with a 4.0 average in the core social work courses. She has held a myriad of public service roles and leadership positions on campus which honed her skills in organizing, planning, leadership, and commitment to volunteerism. She is president of the social work club, where she has increased membership and enhanced the operating budget. She led the club’s efforts in implementing a Breast Cancer Awareness Walk, planned a Mother’s Day brunch for a Domestic Violence Shelter, collected supplies for veterans residing in a shelter, and distributed Thanksgiving baskets in the community. She assists in campus fundraising opportunities in collaboration with the university’s Student Government Association. She is a member of Social Work Department’s Community Advisory Board, a member Phi Alpha Honor Society, the Golden Key Honor Society, and a member of the Campus Lighthouse Ministries.

Stephanie possesses a high level of integrity, shows initiative, is reliable, and dependable; all important traits for social workers to possess, and we are thrilled to name her as the 2016 BSW Student of the Year!

2016 Public Citizen of the Year Award CONGRESSMAN ELIJAH E. CUMMINGS

Congressman Elijah E. Cummings was born and raised in Baltimore, Maryland, where he still resides. He obtained his Bachelor’s Degree in Political Science from Howard University, served as Student Government President, participated Phi Beta Kappa, and then graduated from the University of Maryland School of Law. Congresswoman Cummings has received 11 honorary doctoral degrees from Universities throughout the nation. Although he is not a social worker, Congressman Cummings has dedicated his life of service to uplifting and empowering the people he is sworn to represent. He began his career of public service in the Maryland House of Delegates, where he served for 14 years and became the first African American in Maryland history to be named Speaker Pro Temp. Since 1996, Congressman Cummings has proudly represented Maryland’s 7th Congressional District in the U.S. House of Representatives.

He often says that our children are the living messages we will never see. In that vein, he is committed to ensuring that our next generation has access to quality healthcare and education, clean air and water, and a strong economy defined by fiscal responsibility. He has consistently been an advocate for the rights of those facing foreclosure, and holds regular Foreclosure Prevention Seminars for people who are at risk of being foreclosed upon.

Congressman Cummings serves on numerous boards and commissions. He is spearheading an effort to strengthen the Maritime curriculum at the Maritime Industries Academy (MIA) in Baltimore, serving as Chairman of the MIA Board and Chairman of the MIA Foundation Board. He also serves on the U.S. Naval Academy Board of Visitors, the Morgan State University Board of Regents, the University of Maryland Law School Board of Advisors, the SEED School of Maryland, and the Baltimore Area Council of the Boy Scouts of America Board of Directors. He is an honorary Board member of KIPP Baltimore Schools and the Baltimore School for the Arts. He is also the 2014-2015 holder of the Gwenoldyn S. and Colbert I. King Endowed Chair in Public Policy Lecture Series at Howard University. He is an active member of New Psalmist Baptist Church and is married to Dr. Maya Rockeymoore Cummings.

Congressman Cummings has served as a dedicated advocate for Marylanders for many years, and we are honored to present him with the 2016 Public Citizen of the Year Award!

Social Work & the Peace Corps: A Marriage Made in a Foreign Country

By Larry Bucher

I guess you could call them flashbacks. They are memories of a time not long ago to which sounds, smells, textures, images, and affects remain attached. They are good memories, but they are now tinged with a measurable sense of loss. I’ve left a lot of my ‘family’ behind. It is said that the Peace Corps is the toughest job you’ll ever learn to love. Nine months removed from site, and I still taste the grief borne of that separation. While I am blessed to have lived the experience, holding this grief is part of the obligation I didn’t anticipate when I signed up, but I wouldn’t have it any other way. Given such a cost, one might ask how I had gotten there in the first place. I’m not really sure, other than to suggest I became part of some plan the grand universal design had in store for me.

My two-day journey from Baltimore to Philadelphia to Johannesburg to Gaborone (Botswana) began on September 11, 2012. It was one of 35 Bots 13(1) mandat ed to assist in the government in mitigating its again-burgeoning HIV-infection rate a decade after 70% of its population had died of AIDS-related complications, and its again-burgeoning HIV-infection rate an decade after 70% of its population had died of AIDS-related complications, and I quickly discovered that conversations about sexual behavior there flowed just as HIV-infected persons were addressed remaining, age-appropriate, gender- and relationship-sensitive curricula with 5 and 6 years-olds; continued with specific sex-

The professional task felt daunting; it was fueled by an awareness of being ‘out of my league’ as a single, white, heterosexual male, reared in a God-fearing, small town, conservat ive family environment where sex and anything relating to sex were not discussed. Here I was going into a sub-Saharan, African country where everything sexual was at the core of its very existence. The lay of the land was reflected through personal signposts which the words fear, alone, and lost were written in big, bold, black letters. Not even ‘bonding’ with 34 other Americans (most who were young, white, single, and fresh out of college) could amass my concerns because each of them were dealing with their own professional and personal concerns. Somehow, efforts to stay balanced were largely supported over time by those Batswana I befriended. As my hosts they were all-welcoming and all helpful. They were students, teachers, government workers, grandparents, grandmothers, bus drivers, small business entrepreneurs, and parishioners (along with herds of cattle, goats, and a few chickens), and my memories of them remain tinged with a measurable sense of loss. I’ve left a lot of my ‘family’ behind.

For volunteers, the Peace Corps cites three goals: (1) helping people of interesting countries to meet their development needs; (2) helping people of interesting countries understand Americans; and (3) helping Americans better understand other people. In working, I engage that third goal. In remembering certain experiences, I engage parts of the other goals.

When I left my new home in Mabutsane the morning after I settled in, I walked out the front door having no idea where I was going. Headed my way on a cattle trodden path was a lean, tall, young man whose head and dreadlocks were covered by a green-yellow-red wool cap. “Jamais can,” I wondered? “Contain your pro jections,” was the response I heard in my head. After introducing ourselves and exchanging pleasantries (he spoke English, which is the official language of Botswana) he said, “You know, Mr. Larry, I think I’ve been circumcision.”

Caught up in that moment where two strangers size each other up, I’m sure I seemed stunned but tried to respond to his declaration tactfully, thinking: “Bucher, welcome home. You’re now a Peace Corps Volunteer. What’s ya gonna do with that information?” That meeting with Rta DiPetso was the first of many during my time in Gaborone; his acknowledgement reflected a trust which, over time, came to symbolize our loving, brotherly relationship. It also conveyed how openly sexually-explicit concerns were addressed in this culture.

With Rta DiPetso’s support over time, my Peace Corps work came into focus. I quickly discovered that conversations about sexual behavior there flowed just as easily as conversations about weather. They began with government-sanc tioned, age-appropriate, gender- and relationship-sensitive curricula with 5 and 6 year olds; continued with specific sexuality-related studies (HIV/AIDS transmission/infestation rates, biology, anatomy, reproduction, sensation seeking, and gender differences) for secondary students; and advanced into values clarification studies for high school students. I wondered how I could engage this new educational landscape.

An answer came six months into my service one day in June 2013, when he and I walked out of a workshop led by three Department of Education administrators. A plastic model of a black, erect, uncircumcised penis was passed around at the end of the presentation allowing...
Keynote speaker Jim Holler and Chris Garland

The new Maryland chapter banner hangs in downtown Baltimore.

Congressman Elijah E. Cummings

Award winners, left to right: Chapter President Chris Garland, Executive Director Daphne McClellan, Tiffany Newton, Linda Resto (for Stephanie Johnson), Henriette Taylor, Congressman Elijah E. Cummings, Gisele Ferretto, Denise Nooe (for Senator Barbara Mikulski), Tanya Sharpe, and Chapter President-Elect Charles Howard

Henriette Taylor and Chris Garland

Barbara Mikulski’s Lifetime Achievement Award: a mosaic created by long-time Chapter member Roslyn Zinner

Daphne McClellan and Gisele Ferretto

Board members Charles Howard, Chris Garland, and Terry Morris

Tanya Sharpe (left) and friends

Volunteers and attendees at registration

Tiffany Newton and Daphne McClellan
STUDENT ADVOCACY DAY
Supervisory Leaders in Aging Course Great Success

May 3 was the graduation of the first Supervisory Leaders in Aging class, a 30-hour course sponsored by the Hartford Foundation/NASW Foundation and held at the Chapter office. There were 10 presenters who specialize in gerontological competencies. The program received rave reviews from the participants, citing excellent presentations and relevance for their professional work. New supervisors reported being better prepared for their role and seasoned supervisors were reju-
ivated. Applications are now being accepted for the Spring 2017 class. To apply online, go to www.socialworkers.org/sla or contact Daphne McClellan at nasw-md@verizon.net.

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■ PEACE CORPS from page 7

attendees an opportunity to examine the ‘latest model’ for condom demonstra-
tions. I turned to Rra DiPetso and said, “Fine. Good. Useful! But where’s the vagina?” “Where, indeed?” he re-
plied. It was then that I began a four month long arts and crafts project where I constructed a 4’ by 2’ model of a penis and vagina as an educational resource that could also be used as a puppet. They were made from re-cycled wire, dis-
carded newspapers, spray paint, panty hose, cardboard, and paste; and with the support and guidance from both the art teacher and the design/technolo-
y teacher. I also constructed colored condoms from plastic fruit bags (oranges and apples are imported into Botswana in such bags from the Republic of South Africa) and an ‘HIV virus cape’ from a torn brown bedsread I sprayed with splatches of black, brown, and red paint. I would enter classrooms with these re-
sources hoping to offer students hands-
on experiences, role-playing opportuni-
ties, and discussions about gender roles and relationships.

Were such efforts useful? Given Rra DiPetso’s background in community or-
ganization and street theatre work, his respect among school-aged students, his facility with Setswana, combined with my playful attitude and conceptu-
al framework in regard to the different ways people learn, our efforts resulted in the use of the puppets in classrooms, teacher workshops, agency presenta-
tions, and community HIV/AIDS-re-
lated fairs. The students were hungry for support in examining concerns about human sexuality beyond the dry, oft-
repeated, value-loaded conceptualiza-
tions found in books. They began ask-
ing for Rra Bonna (penis), Mma Bosadi (vagina), and Mogare (virus) to come to their classrooms. Adults in the Memsec-
tor agency won a ‘Best Venue’ trophy at a community arts festival; the health clinic sup-
ported efforts to talk with girls about menstruation; the puppets were used in a four-day-long HIV/AIDS-related camp for kids in the Southern District; and the resources were presented to the country’s Education Administration for consideration regarding their use as ed-
ucational adjuncts in the country’s fight against HIV-AIDS. As I reflect upon my experiences now, few words can ade-
quately describe the enthusiasm, laugh-
ter, delight, smiles, information-sharing, and the effective communications which accompanied discussions with these re-
sources, and the support given me by school community officials willing to accept them as teaching tools.

My experiences within the larger vil-
lage were quite different. In the be-
inning of my Peace Corps experience, several important questions arose for me: 1. How will I represent Western culture? 2. Why does there’s so much about it I don’t identify with? 2. How conscious of my personal/collective projections will I be? and 3. What will I do with the mate-
rial projected upon me by the Batswa-
a? These are important questions to ask for anyone who enters into a differ-
cent culture. Six months passed while I pondered those questions, during which time I just threw myself into Mahutsane village culture. I took daily walks, said, “Dumelo” (Hello) to everyone while distributing “downer” (hard candies) indiscriminately to people I met. I at-
tended community weddings and funer-
als where I helped “bonna le mosadi-
mogolo” (women and grandmothers) in the “kitsi” (kitchen) prepare food, wash and dry dishes, serve guests heap-
ing plates of “seswaa” (beef), beets, po-
tatoes, samp (a corn-based “pudding”), and cabbage. I sat with elders and ate bloodmeats, danced with 80-year-old grandmothers and grandfathers, and at-
tended church services (even though re-
ligious expression seemed uniform and stereotyped). In a culture where roles remain profoundly defined by time-
honored gender-specific behaviors, I de-
cided to let go and get involved (even if it meant seeming like a fool and being the object of others’ laughter). I tried to speak Setswana whenever I could, which put everyone — kids, adults, and elders — into the role of teacher. This helped me and pleased them. Rather than hid-
ing behind my comfortable, scripted, cultural identity, it seemed more impor-
tant that the Batswana witness my west-
ern ‘flexibility.’ In retrospect, I have no regrets. I believe we find ourselves only by getting lost.

As an MSW graduate student years ago, my instructor said that within two years all of us would become admin-
istrators. I resisted that prediction by moving into clinical work. This choice proved most helpful to me as a volunteer because I had access to an array of clini-
cal orientations (family systems, group dynamics, gestalt- affect-regulation, and trauma-oriented work) I used with both individuals and groups. I also used community organization skills given the Peace Corps mandate to make projects sustainable for locals when we were no longer on site.

Administrative work remained an in-
tegral part of my effort. While it did not involve paper shuffling or making policy decisions (which was left to the Batswana) an administrative skillset was still required in order to reach goals such as securing an orthopedic shoe for a physically-challenged girl or procur-
ing funds for a new washing machine at the primary school’s hostel for children. In the end, sacrifices accompanying such efforts required time, patience, under-
standing, and honoring the way culture ‘works’ were all necessary and symbol-
ized for the Batswana a willingness to work within the system.

My social work background stood the test of time and served me well during those 30 months, and I would definitely re-consider to another Corps experience someday in the future. It has been tough to let go of the toughest job I have loved.

Ke a leboga, thata (Thank you very much!) Larry Bucher welcomes your feedback at 410- 469-9647 or at larrybucher46@gmail.com
SPRING EDITION | 2016

The Maryland Social Worker

NASW-MD Sponsored Continuing Education

SOUTHERN MD
Calvert, Charles, and St. Mary’s Counties

#2058 Ethical Considerations for Healthcare Professionals
Date: Friday, June 3, 2016; 9:00 a.m. – 4:45 p.m.
Location: Restore Health Rehabilitation Center
4615 Einstein Place
White Plains, MD 20695-1061
Presenter: Corey Beauford, MSW, LICSW
Founder and President, Inspired Consulting Group, Riverdale
Synopsis: Working in a health care environment can be quite fulfilling. However, working in health care settings also expose workers to a myriad of ethical challenges and dilemmas. Issues related to privacy and confidentiality, duty to warn, and self-determination are topics that social workers, nurses, physicians, and other health care providers grapple with on a daily basis. This interactive training will provide health care professionals with the knowledge that is necessary to avoid and resolve ethical quandaries that can exist with patients and co-workers.
Learning Objectives: Upon completion of this course participants will:
1. Understand factors that contribute ethical violations for health care professionals;
2. Be able to interpret and apply standards of the NASW Code of Ethics to practice;
3. Understand how countertransference and a dysfunctional work environment can contribute to ethical conflicts; and
4. Understand relevant legal standards that apply to health care settings.
CE: 6 Cat I
Cost: $90 for members; $130 for non-members
Please note: This workshop qualifies for the Maryland Board of Social Work Examiners 3-hour ethics requirement for licensure renewal.

WESTERN MD
Garrett, Allegany, Washington, and Frederick Counties

We welcome your suggestions for future continuing ed coursework in Western Maryland

SUBURBAN MD
Montgomery and Prince George’s Counties

#2041 HIV treatment and Prevention: Ethical Practice Across the Lifespan
Date: Sunday, May 22, 2016; 1:45 p.m. – 5:00 p.m.
Location: The Professional and Community Education Center at Holy Cross Hospital – Auditorium A&C
1500 Forest Glen Road
Silver Spring, MD 20910
Please note: Holy Cross Hospital charges parking fees on weekends. Be prepared to pay $5–$6.
Presenter: Lauren Van Suytman, Ph.D., Psychotherapist in Private Practice and Associate Professor, Morgan State University School of Social Work
Synopsis: This course employs shared decision making to achieve ethical practice with lesbian, gay, bisexual, and transgender (LGBT) individuals across the life span. The training defines ethical practice, in accordance with NASW’s Code of Ethics, as services designed to respect individuals, ensure confidentiality, increase access to supportive services, and client inclusion in decision-making. The training utilizes a three-step model of shared decision making - introducing choices, describing/exploring options, and making a decision. The course relies on developing a deeper awareness of LGBT identities, families, health, and mental health challenges across the lifespan. The presenter employs these intersecting elements of client biographies to raise awareness that ethical decision-making and processes of deliberation should be influenced by exploring and respecting “what matters most” to clients as individuals and members of diverse communities.
Learning Objectives: After attending this workshop participants will be able to:
1. Establish expectations for social work practices and services with LGBT youth;
2. Ensure that social work practice with LGBT youth is guided by the NASW Code of Ethics;
3. Provide a basis for advocating for LGBT youth’s rights to be treated with respect and dignity; have their confidentiality protected, have access to supportive services, and have appropriate inclusion in decision-making; and
4. Encourage social workers providing services to LGBT youth to participate in the development and refinement of public policy at the local, state, and federal levels to support client success.
CE: 3 Cat I
Cost: $45 for members; $65 for non-members
Please note: This workshop qualifies for the Maryland Board of Social Work Examiners’ 3-hour ethics requirement for licensure renewal.

#2047 Trans and Cis-Gender Youth in the Sex Industry
Date: Friday, June 3, 2016; 9:30 a.m. – 12:45 p.m.
Location: Holy Cross Hospital-Germantown Campus
19801 Observation Drive-Conference Rooms 1101-1102
Germantown, MD 20876
Presenter: Laurens Van Suytman, Ph.D., Psychotherapist in Private Practice and Associate Professor, Morgan State University School of Social Work
Synopsis: This workshop is designed for health workers and other advocates committed to meeting the evolving needs of transgender and cisgender youth in the sex industry, build respect for diversity and cultural differences, and improve accountability through measurement, reporting, and ongoing improvement. We will discuss the potential size, specific issues/challenges of the population, and appropriate models of practice and intervention. The presenter will explore approaches aimed at constructively managing conflicts in both the community/environment and creating and sustaining a healthy environment with the population and its allies. It is intended to promote inquiry among participants.
Learning Objectives: After attending this workshop participants will be able to:
1. Identify and discuss how the dynamics (cultural, social justice, economic, etc.) of the social environment impact the client system;
2. Ensure that social work practice with LGBT citizens is guided by the NASW Code of Ethics;
3. Establish expectations for social work practices and services with LGBT citizens; and
4. Provide a basis for advocating for LGBT youth’s rights to be treated with respect and dignity; have their confidentiality protected, have access to supportive services, and have appropriate inclusion in decision-making.
CE: 3 Cat I
Cost: $45 for members; $65 for non-members
Please note: This workshop qualifies for the Maryland Board of Social Work Examiners’ 3-hour ethics requirement for licensure renewal.

#2057 Save Time & Postage Expenses
NASW-MD offers secure, online registration for continuing education courses. Go to www.nasw-md.org and click on the Continuing Education button for more information.
Presenter: Mike Beauford, MSW, LICSW, Founder and President, Inspired Consulting Group, Silver Spring, MD 20910

Synopsis: Faith Communities within the United States have been challenged over the last two decades with how to deal with HIV/AIDS. Many religious leaders and communities have turned their heads away while others have embraced in love. Religious-based initiatives are pivotal to the success of Social Workers who work with clients who are living with HIV. Ethical standards related to conflicts of interest, privacy and confidentiality, competence, informed consent, and access to records will be discussed. This interactive training will make use of case study reviews and group exercises as well as discussion questions.

Learning Objectives: Upon completion of this workshop, attendees will be able to:
1. Help identify ASWB testing strengths and weaknesses;
2. Help prioritize study time;
3. Learn best practices for passing the social work licensing exam; and
4. Learn effective ways to reduce test anxiety.

CE: 5.5 Category I
Cost: $45 for members; $25 for non-members

Please note: This workshop qualifies for the 3-hour HIV/AIDS requirement for the DC Board of Social Work.

**#2040**

**Social Work Exam Prep**

Date: Thursday, June 9, 2016; 9:30 a.m. – 4:00 p.m.

Location: National Museum of Women in the Arts

Presenter: Jennifer Fitzpatrick, LCSW-C, Founder, Jenerations Health Education, Inc.

Synopsis: In this workshop, the presenter will discuss common workplace ethical dilemmas that social workers face when working with clients who are living with HIV. Ethical standards related to conflicts of interest, privacy and confidentiality, competence, informed consent, and access to records will be discussed. This interactive training will make use of case study reviews and group exercises as well as discussion questions.

Learning Objectives: Upon completion of this workshop, attendees will be able to:
1. Help identify ASWB testing strengths and weaknesses;
2. Help prioritize study time;
3. Learn best practices for passing the social work licensing exam; and
4. Learn effective ways to reduce test anxiety.

CE: 5.5 Category I
Cost: $45 for members; $25 for non-members

Please note: This workshop qualifies for the 3-hour HIV/AIDS requirement for the DC Board of Social Work.
Synopsis: Mental health professionals face a significant challenge related to the changes in delivery of mental health services that accompany conversion to use of the DSM-5, which was released in May 2013. This seminar provides mental health practitioners information needed in implementation of the DSM-5 in a range of practice settings. Dr. Munson participated in the clinical trials for the DSM-5, and he will present what practitioners need to know and do as they transition to the new diagnostic system. Dr. Munson will review changes in how diagnoses are recorded and changes in the organization and content of specific disorders. His presentation covers major and minor changes in the DSM-5’s 20 categories of disorders including explanation of new disorders, and revision of DSM-IV-TR disorders retained in the DSM-5. There will be an explanation of the new “case diagnostic formulation” for recording diagnostic information that is part of the DSM-5. This methodology replaces the DSM-IV multi-axial recording system. Apparent and subtle ethical issues in performing diagnosis generally and specifically applicable to the DSM-5 will be covered with special emphasis on clinical significance and clinical judgment. Dr. Munson will explain conversion to DSM-5 through use of updated visuals from his book, The Mental Health Diagnostic Desk Reference. There will be a Q & A session.

Learning Objectives: Participants in this workshop will:
1. Acquire understanding of the history leading to the changes in the DSM-5;
2. Become familiar with the changes in the definition of mental illness;
3. Learn the changes in how diagnoses are recorded including a non-axial recording method devised by Dr. Munson that is compliant with the DSM recording system;
4. Become acquainted with DSM-5 “other” and “unspecified” diagnoses and the reorganized severity measure;
5. Become familiar with changes in subtypes in DSM-5;
6. Become acquainted with new criteria for the most used and most severe disorders. (Neurodevelopmental, schizophrenia, bipolar, depressive, anxiety, trauma, dissociative, substance, and personality disorders); There will be a brief review of the other DSM-5 categories;
7. Learn ethical use of DSM-5 regarding clinical significance and clinical judgment as well as other diagnostic issues;
8. Develop knowledge of DSM-5 case recording through review of sample diagnostic formulations; and

EL: 6 Cat I

Cost:
$90 for members; $130 for non-members

Please note: Three of the 6 hours of this workshop qualifies for the Maryland Board of Social Work Examiners’ 3-hour ethics requirement for licensure renewal.

#2046

Spirituality as a Resource for Mental Health

Date:
Friday, June 17, 2016; 9:30 a.m. – 4:45 p.m.

Lunch on your own from 12:30-1:15 p.m.

Location:
NASW-MD Chapter Office
750 Executive Drive Suite 100
Baltimore, MD 21228

Presenter:
Catherine D. Nugent, LCPC, TEP, Private Practice; Adjunct Professor, Johns Hopkins, University

Synopsis:
Over the past few decades, researchers in diverse fields have begun to study the contribution spirituality can make to mental health. In this workshop, we will identify ways that spirituality can be a resource for mental health and wellness, as well as how spiritual beliefs can sometimes function as a barrier to mental health. Participants will have the opportunity to explore their personal understanding of spirituality and learn how this can be a resource in their work and their lives. The workshop will be highly interactive and experiential and will involve psychodramatic role-play to deepen our understanding of the material presented.

Learning Objectives: Upon completion of this course, participants will be able to:
1. Discuss current research findings regarding the effects of spirituality on mental health problems, including potential positive and negative effects;
2. Clarify their spiritual beliefs and values, identify major influences on their spiritual development, and explore potential counter-transference issues related to clients’ spirituality; and
3. Identify ways that spiritual beliefs and practices can provide support and strength in the lives of their clients and their own.

EL: 6 Cat I

Cost:
$90 for members; $130 for non-members

#2107

Myers-Briggs Type Indicator: A Tool for Administrators and Supervisors to Recognize and Maximize Diversity in the Workplace

Date:
Thursday, June 30, 2016 AND Friday, July 1, 2016; 9:30 a.m. – 4:45 p.m.
Both Days

Please note: This is a two day workshop, and you must attend BOTH days.

Lunch on your own each day from 12:30-1:15 p.m.

Location:
NASW-MD Chapter Office
750 Executive Drive Suite 100
Baltimore, MD 21228

Presenter:
Giselle Ferretto, MSW, LCSW-C, Clinical Instructor, University of Maryland School of Social Work

Synopsis:
This two day workshop will focus on the use of the Myers Briggs Type Indicator as a tool for supervision, leadership development, and team building. It will also include the scoring of the Keirsey Instrument for participants. Content covered will include: Overview of the Myers-Briggs Type Indicator and its relationship to the accomplishment of administrative tasks and teamwork. Will include discussion of effective communication skills, running productive and effective meetings, resolving conflicts, managing various tasks using this model of identifying and celebrating differences. Creative activities and handouts will be developed and delivered during the presentation of content that will enhance learning by providing opportunities for participants to develop skills and strategies to use the material presented.

Learning Objectives: Upon completion of this course, participants will:
1. Explore the role of the supervisor after review of Kadushin’s major functions of supervision;
2. Identify potential benefits of identifying personality preferences of those they supervise;
3. Self-reflect on the dynamics presented when providing supervision for different psychological types;
4. Apply the knowledge of psychological type to understand and identify challenges in supervision; and
5. Identify strategies and develop action plans for those they supervise to enhance performance.

Please note: After completing all 12 hours of this workshop, both the Supervision certification hours and the BSW’s 2 hour ethics requirement will be met.

Please note: A workbook will be available for purchase at this workshop. Please bring an additional $15 (cash or check) to purchase a copy.

EL: 12 Cat I

Cost:
$180 for members; $260 for non-members
Mindfulness for Children

Children are growing up in times when everything is moving at a fast pace; so much to do and many distractions. Attention deficit seems to be the byproduct of modern times, and this is impacting the academic and the social skills of our children in addition to adding stress to their lives. Teachers and parents are struggling to help children stay focused and present. Is there a simple solution to this modern challenge?

Sometimes the best solution to new problems can be old ways of doing things. Mindfulness meditation is a 5000 year old Eastern practice and it has been in practice in this country for many years. Mindfulness is the cultivation of attention and awareness. Research in medicine and neuroscience are showing that mindfulness practice is a life skill that can have a profound effect on helping children (and people of all ages), in all aspects of their lives. Meditation is simple yet difficult because it requires discipline. Mindfulness can be a unique tool to help people slow down and be present.

Mindfulness is about being versus doing. Mindfulness is increasingly recognized as a great educational and parenting tool. It helps develop attention, emotional, and bodily awareness, and it contributes to positive interpersonal skills. The regular practice of mindfulness can help children feel safe in their inner world when their outer world is falling apart. They can learn to trust that no matter what is happening outside them they can control what is happening inside them. This in turn allows them to build trust from within and build an inner world they can trust when the outer world is difficult to trust. Mindfulness is an innate capacity we humans have and when we begin mindfulness practice at an early age it becomes a natural part of who we are.

Mindfulness teaches children to appreciate more and judge less. It cultivates kindness for themselves and others. When children are young they are open minded and curious, but as they grow older they become more fearful, less curious, and more judgmental. By the time children become teenagers they feel more insecure and they don’t feel good enough. By planting seeds of appreciation through mindfulness in young children minds and hearts they will grow up feeling more confident, more loved and more accepted.

Mindfulness can improve the lives of kids of all ages in significant ways. Some of the benefits are: increased ability to manage their emotions, positive social skills, improved memory and attention span, increased self-esteem, decreased test anxiety, and better quality of relationships.

One of my favorite simple mindfulness meditations that Thich Nhat Hanh, a Vietnamese Buddhist monk, teaches is “I breathe in love” with your in breath and “I breathe out peace” with your out breath. Hold your attention on your breath for 5 minutes. You may want to use a timer because when we focus our attention only on our breath we feel that 1 minute is 5 minutes. In my counseling practice, it amazes me the ease with which children ages 4 years old to teens embrace mindfulness in a variety of ways; through meditation, art, movement, listening, observing, and many other activities.

Veronica Correa, LCSW-C, is a licensed clinical social worker and life coach. To learn more about her work visit: www.thepersonalwellnesscenter.com or call 410-742-6016.
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SPRING EDITION | 2016

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Barbara Roth
Jennifer Sabater
Heather Sandell

NASW-MD CALENDAR MAY-JULY 2016

All meetings scheduled for the Chapter office unless otherwise noted

MAY
Tuesday, 3rd
4:30 p.m.
Supervisory Leaders in Aging, Graduation

Friday, 6th
10:00 a.m.
Private Practice Committee
11:30 a.m.
Private Practice Peer Consultation

Tuesday, 10th
6:00 p.m.
Executive Committee

Monday, 16th
6:00 p.m.
Forensic Committee (Conference Call)

Wednesday, 18th
4:30 p.m.
Social Work in Schools (SWIS)

Tuesday, 24th
6:00 p.m.
Legislative Committee

Thursday, 26th
6:00 p.m.
Macro Committee

Monday, 30th
OFFICE CLOSED Memorial Day

JUNE
Friday, 3rd
10:00 a.m.
Private Practice Committee
11:30 a.m.
Private Practice Peer Consultation

Monday, 6th
6:00 p.m.
Forensic Committee

Tuesday, 7th
5:00 p.m.
Committee on Aging

Wednesday, 9th
6:00 p.m.
Behavioral Health Committee

Wednesday, 13th
6:00 p.m.
Legislative Committee

Monday, 14th
6:00 p.m.
Military SW Committee

Wednesday, 15th
6:00 p.m.
Annual Meeting (place TBA)

Friday, 17th
1:00 p.m.
Chapter Ethics Committee (CEC)
ALL DAY
National NASW Conference in D.C.

JULY
Friday, 1st
10:00 a.m.
Private Practice Committee
11:30 a.m.
Private Practice Peer Consultation

Monday, 4th
OFFICE CLOSED Independence Day

Tuesday, 5th
5:00 p.m.
Committee on Aging

Tuesday, 12th
6:00 p.m.
Forensic Committee (Conference Call)

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