



# MN Society For Clinical Social Work

*GENERATING EXCELLENCE IN CLINICAL SOCIAL WORK*

Fall 2010

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## President's Letter

Sarah Anderson

Hello MSCSW members, colleagues and friends!

Before we know it, we will be enjoying apple orchards, cool crisp air and the warm bright colors our Minnesota autumn promises each year.

Our society will begin the 2010/2011-year with our kick off board meeting on September 27th. The theme will include goals and hopes each of the board members has for the year for their committee and position they hold. The kick-off meeting is a board meeting with an agenda, and all members are welcome to attend. It is a great opportunity to see the MSCSW board in action and participate in the renewed energy and goal setting for the year to come.

Fall will bring more than MN elections - our Education Committee has again planned unique and stimulating clinical education events which include "The Enneagram in Clinical Practice" fall workshop as well as The Application of "Recent Developments in Neurobiology to Couples Therapy" clinical conversation. An Ethics CE is planned for October, as well as the continuation of clinical study groups. Program details will be mailed out; however our website will also list the details as well.

We are fortunate to have Harriet Kohen as our President-Elect, and she will be preparing to take over the Presidency next spring. I remember the reality of the turn from "elect" to "current" president myself, and found both confidence and excitement in the position because of the support of passionate and experienced members I had surrounding and supporting me. I have no doubt Harriet will benefit from the same and even more support I had.

In setting my own goals for the MSCSW year as your President, I am reminded of a poem I recently read by Jean E. Balestrery, LICSW, which I believe incubates my hopes for the upcoming year.

### *DISCOVERY*

*To dance in the discovery  
To marvel in the mystery  
To connect in the conversation  
To sing in the service  
To swim in the spirit  
To create in the collaboration  
Integrating the art with the science  
Social Work is living life in compassionate  
Action with the aim of social justice.  
I Care, Therefore, I Am.*

*~Jean E. Balestrery LICSW*

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## Featured Members

### A Change in Focus

#### Congratulations to Tamara Kaiser!

Tamara Kaiser was born and raised in Chevy Chase, Maryland, near Washington D.C. Her father was a labor union attorney, and her mother, a woman ahead of her time, a physician. She learned from her parents the value of service to others. A career

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in social work was the natural outcome of that lesson

She earned her MSW in 1972 from the University of Wisconsin, Madison, and then worked as a county social worker at Dane County Social Services until a move to Minneapolis in 1974.

In the Twin Cities, she joined a post-graduate internship at Family and Children's service, lead by Minna Shapiro., a wise and challenging mentor. This lead to a job at Minneapolis Jewish Family and Children's Services, where she worked for the next 13 years. At JFCS, she did clinical practice, supervision of student interns, and workshops on a variety of topics, including a series for sisters working on their relationships with one another and one on family of origin exploration, based on the Bowenian model of family theory. She also received training at the Johnson Institute and did presentations on chemical dependency as well as providing CD evaluations for JFCS clients.

While at the agency, she worked with Peg Thompson, who, as her off-site consultant, helped Tamara deepen her knowledge of the psychodynamic and family systems perspectives, both of which continue to be the primary theoretical bases for her clinical practice. Her work with Peg taught her the enormous power of the supervisory relationship.

In 1987, Tamara left JFCS to establish a private practice and pursue a PhD at the University of Minnesota in Family Social Science with a specialty in Marriage and Family Therapy. Upon graduation in 1992, Tamara joined the full time faculty at the St. Catherine University/University of St. Thomas School of Social Work, where she remained for 18 years, retiring from her tenured position this past spring.

In 1994, along with her colleague Angie Barretta-Herman, she created and then directed the SCU/UST School of Social Work Supervision Institute. In 1997 she expanded her PhD dissertation into a book, *Supervisory Relationships: Exploring the Human Element* (Brooks/Cole). In 2000 she, Angie and Carol Kuechler developed a training video, *Challenges in Cross Cultural Supervision*. Each year the Institute offers workshops for practitioners who are or want to be supervisors. She will continue in her

role as co-director with Carol of the Supervision Institute, as well as providing supervision, consultation and training for practitioners and supervisors in her private practice.

In the past 18 years, Tamara has taught a graduate course on supervision numerous times, has given numerous presentations and workshops, both nationally and locally and has published in this area. Most recently she and Carol provided 30 hours of training in supervision for social workers at the Mayo Clinic in Rochester.

Tamara has also taught courses related to clinical practice on a regular basis: methods of clinical social work, clinical practice with couples and families and psychopathology. Believing that her teaching must inform and be informed by her own clinical experience, she has always maintained her private practice, working with clients in therapy and providing supervision and consultation. She was invited by W.W. Norton to write her second book, *A User's Guide to Therapy: What to Expect and How You Can Benefit*, published in 2009. The book is written for clients, but is also in use as a textbook.

Tamara is committed to exploring cross-cultural practice, conducting research on cross-cultural supervisory relationships and consulting with agencies. On sabbatical in 2000-2001, she did an in-depth ethnographic study of the Twin Cities Hmong community, conducting interviews with over 40 people, attending community events, and spending three weeks in Thailand visiting Hmong villages and a refugee camp.

Last spring the School of Social Work, as part of a collaboration of schools and community agencies spearheaded by Minneapolis Family and Children's Services, won a grant from DHS geared towards enhancing effective treatment for immigrants, refugees and other minority clients. Tamara wrote a proposal on behalf of the Supervision Institute and, along with MSCSW member Shadee Hardy, will provide training and consultation for supervisors in cross-cultural supervision as part of the grant.

An active member of MSCSW since the late 70's, Tamara has served on the board for many years, in the roles of president, president elect, past president,

secretary, co-chair of the ethics, leadership, NASW/MSCSW professional standards and education committees, representative to the BOSW advisory committee and facilitator of a mentorship group. She was awarded the status of Fellow in 2005. In the past few years she has actively participated in the social work community's efforts to set the standards that were included in the new law, effective next summer.

Having left full time teaching, Tamara is excited about the opportunity to expand both her private therapy practice, working with individuals, couples and families and her work in supervision and consultation for practitioners and supervisors. She feels that, while she loves teaching and will continue to do so as an adjunct instructor at the school, direct practice in both therapy and supervision is really closest to her heart—her calling.

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## Sue Johnston

### Career Change or rather, Enhancement: The Refugee Practices Project

Two years ago, I went to work, part-time, for a refugee resettlement agency, Refugee Services, Minnesota Council of Churches. Combining my cross-cultural experience as a Peace Corps volunteer, community organizing skills and clinical interests in treating psychological trauma, it was a perfect position for me. My assignment: to increase the capacity of the Minneapolis/St. Paul community to meet the mental health needs of newly arriving refugees. This is the story of how a part-time job has changed my clinical work and my personal world. I write this article in the hopes that I can engage my clinical colleagues in this transforming work—read on.

The project began with the organization of The Refugee Healing Resources Group. This group, consisting of members of the refugee communities, resettlement caseworkers and mental health professionals came together to explore the psychological, emotional, and spiritual healing needs of new refugees. We met monthly to identify what we termed “healing resources” in the community, meaning any program, person, practice or place that led to psy-

chological, emotional and spiritual healing. We sought to learn from each other about cultural perspectives on mental health and to connect interpersonally in order to facilitate referrals to these resources. During the first year of meetings, discussion topics included: identifying cultural idioms of distress, understanding traditional healing practices from several refugee cultures, exploring the role of religion in mental health treatment, identifying family dynamics and parenting struggles faced by refugee families and learning about culturally-appropriate modalities for treating depression, anxiety and post-traumatic stress. Through this group, I have learned to use other interventions besides talking therapy and medications. I have learned new expressions for human pain: “a hole in my heart” “It’s come to my neck” (referring to the body memory of stress and trauma), “thinking too much” “wind in the brain” “wandering spirits”. I have looked at my own mental health culture through the eyes of others and seen its limitations and strengths. I now have colleagues who are Somali, Iraqi, and Karen from Burma/Thailand, Bhutanese, Ethiopian, Congolese and Eritrean. For better and for worse, I am reading the newspaper with more familiarity and connection to the countries discussed. I am eating more interesting foods, and shopping at more interesting places.

The Healing Resources Group will continue to meet in the upcoming academic year. It is open to any clinician interested in attending. Members of the group representing the refugee communities have requested training in identifying and explaining mental health symptoms to their communities. This will be the focus of the group meetings this fall. If you are interested in participating, contact Sue Johnston at [sue.johnston@mnchurches.org](mailto:sue.johnston@mnchurches.org).

Starting this fall, Refugee Services will turn to expanding the network of mental health professionals available to accept referrals. A clinician referral pool is being established to assist refugee resettlement caseworkers and mutual assistance agencies (MAAs) find treatment professionals. (In the first eight months of resettlement all refugees are provided with health insurance through UCare, Medica, HealthPartners, Metropolitan Health Plan, BlueCross

and Medical Assistance, so remuneration for services is available to those clinicians contracted with the above insurance providers.) Refugee clients needing treatment typically struggle with psychological trauma, depression, and anxiety and family stress/conflict. Clinicians in the referral pool may also be asked to provide occasional, brief telephone consultation and referral recommendations to case-workers/MAA staff. Applications to this referral pool are now being accepted. If you are interested in joining please contact Sue Johnston at the above email address or via phone: 612-230-3213.

Most importantly a series of five trainings on working with refugee clients is being offered throughout fall 2010 and Winter/Spring 2011. The trainings will provide education and support to those willing to work with refugee clients. It will also meet requirements for continuing education in working across cultures and ethics. Training topics include: The Mental Health Needs of Local Refugee Communities; Refugee Cross-cultural Mental Health Assessments; Working with Interpreters; Evidence-Based Practices for Working with Refugees; Cross-cultural Ethics and Evaluation. Any clinician who is willing to participate in the referral pool can receive rebates for the cost of participating in these trainings. Up to 32 hours of CEU training is available. For specifics on dates, location and registration go to <http://www.mnchurches.org/refugee/healing/> and click on the box that says Refugee Healing Practices. Behavioral Healthcare Providers and the BlueCross Foundation are supporting this training, in part.

Developing competency in working with refugee referrals is, as I have described above personally and professionally rewarding. It is also a good, future oriented business move. Refugees will continue to resettle in Minnesota and will continue to need help healing from their refugee experiences. This is an expanding market. The Refugee Healing Resources Project offers a pathway to cross-cultural training that goes beyond just cognitive education and provides experiential learning. The project also offers the opportunity to meet the needs of an underserved population. Please join me in this life changing, professionally enhancing project and earn some free CEUs as well! I can be contacted at

[Sue.johnston@mnchurches.org](mailto:Sue.johnston@mnchurches.org) or 612-230-3213 for more information.

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## MSCSW Mission Statement:

The Minnesota Society for Clinical Social Work advances the practice of clinical social work through professional development, endorsing ethical practice standards and through legislative and community advocacy on behalf of our clients.

### Organizational Values:

- Commitment to the dignity, well-being and self-determination of the individual
- Commitment to professional practice characterized by competence and integrity
- Commitment to a society, which offers opportunities to all members in a just and non-discriminatory manner.

### Organizational Goals:

- Disseminate research and educate professional social workers in best practices
  - Uphold and promote ethical and responsible standards in social work
  - Advocate optimum mental health services and ethical practice for all stakeholders (constituents, citizens) through legislative endeavors.
  - Collaborate with educational and public organizations to promote clinical social work practice.
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*“Men who are governed by reason ... desire for themselves nothing which they do not also desire for the rest of mankind, and consequently are just, faithful and honorable in their conduct.”*

*Baruch Spinoza (1632-1677)*