

Director's Message

Evolution of a Clinician

Alcoholics Anonymous:
A Self-Psychological
Perspective

An Interview with Kirk
James, DSW'13, MSW

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The Clinician

The Clinical Doctor of Social Work Newsletter

The University of Pennsylvania School of Social Policy & Practice



DSW'14 Graduates - Jennifer Fulton, Christin Gregory, Charisse Marshall, Monica Smith & Darcella Sessomes

The Clinician is a Student and Alumni Run Newsletter | website: <http://www.sp2.upenn.edu/programs/dsw/clinician.html>

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Congratulations Jennifer Boyle and Pier Cicerelle
Recipients of the 2014 Dr. Ram Cnaan Award

The Clinician

The Clinical DSW Newsletter

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GRAPHIC DESIGN & LAYOUT

PAST EXECUTIVE EDITOR
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We would like to take this opportunity to thank everyone who has contributed to this edition of The Clinician. A very special thank you to Dr. Lina Hartocollis for her ongoing support and contributions to The Clinician.

DIRECTOR'S MESSAGE

LINA HARTOCOLLIS, MSS, PHD

We just completed a summative evaluation of the DSW program, based on a survey of our alumni and on data from program records. Although the evaluation was part of our ongoing continuous improvement efforts, several colleagues and I wrote-up the results in an article that will be published later this year in the *Journal of Teaching in Social Work*, in a special issue on doctoral education. We wrote the article so other programs that are considering a DSW could learn from our experience as the first of the new social work practice doctorates. Here's a snapshot of what we found.

The DSW program's retention rate is 91%, with 106 students having started the program since we opened our doors in 2007. As for completion rates, 71% of our students finished the degree in three years, and 86% completed by year five. This compares favorably to the approximately 67% of social work PhD students in this country who finish the degree by year 7 (Sowell, 2008).



The anonymous alumni survey, which had a healthy 82% response rate, asked program graduates whether the DSW had helped them in their practice, opened career doors, and prepared them for teaching jobs. It was very interesting (and gratifying) to hear what our graduates had to say.

Several remarked on the value of having the doctoral credential:

The credential and newfound area of expertise improved my professional satisfaction and status.

I get more respect from colleagues in other disciplines, such as psychiatrists, who will return my calls because I can say "Dr." in front of my name now.

I think having the credential has helped me gain confidence in collaborating with colleagues from other disciplines.

I didn't change jobs but I had additional job opportunities at my current place of work as a result of the DSW.

Others spoke of the power of the credential combined with the knowledge and expertise they had gained:

I have been transformed from a regular clinician to expert practitioner equipped with advanced knowledge and skill... I also call myself "Dr.," which earns recognition from colleagues and clients.

I think calling myself doctor has increased my credibility with some of my patients and having a doctorate from Penn has opened some doors for me. However, it is the substantive expertise that has made the most difference. I feel like a more knowledgeable, more effective, "smarter" therapist.

I attribute changes in my job to the credential (from an Ivy League University) and to the substantive knowledge I gained from my dissertation.

A number of respondents talked about how the DSW enhanced their career mobility:

How did the DSW help? One hundred percent! The position I'm now in required a doctoral degree to apply.

DIRECTOR'S MESSAGE
LINA HARTOCOLLIS, MSS, PHD
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Getting my new job was directly linked to the DSW degree and to networking with my peers and instructors.

I attribute my changed position to the DSW. The DSW provided increased flexibility to engage in self-employed private practice and do adjunct teaching on the side. Later that allowed me to have the experience to move toward the full-time teaching position that I now have.

A sizable number of our graduates (roughly 70%) are teaching in bachelors and masters programs—at Penn, Bryn Mawr, Stockton, Temple, CUNY, USC (CA), Pitt and Rutgers, to name a few. Most are combining practice with part-time teaching but some have taken full-time teaching positions.

Without a DSW I do not believe I could have gotten a tenure-track position.

At this time my job change is directly related to the DSW credential as I am working as an assistant professor.

I obtained a teaching and research position while enrolled in the program and I attribute this to the level of expertise I gained. I also obtained a tenure-track teaching position post-graduation and I attribute this to the credentials and the expertise I gained and to the reputation of the school.

Finally, we were pleased and a bit surprised to hear how much students liked and valued the dissertation process!

The dissertation gave me more confidence in my writing and ability to conceptualize mental health issues.

I have learned how to do scholarly work, which it turns out I love to do.

Completing my dissertation opened doors by legitimizing me as an expert in the field. This has helped me network with the very experts who have influenced my studies.

I have used the knowledge gained in writing my dissertation in my clinical practice.

My dissertation research has impacted how I am seen in my field. I also have received many requests to do workshops, etc. It has definitely facilitated teaching opportunities.

Given our program goals of enhancing the professional status of social work practitioners by preparing doctoral level practitioner-scholars who generate and disseminate social work knowledge through teaching, scholarship and practice, I'd say we're doing quite well.

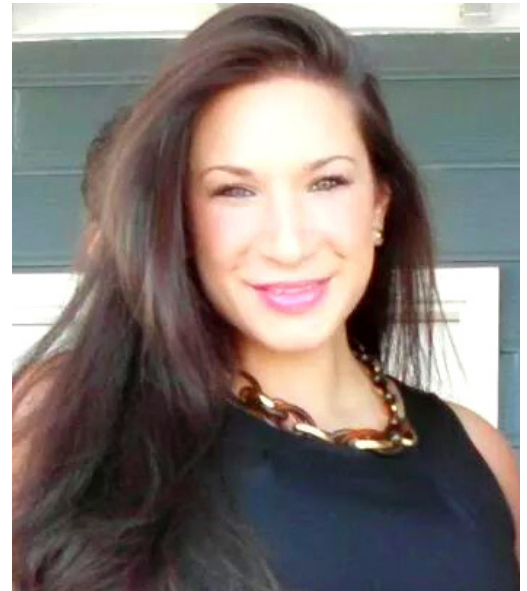
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EVOLUTION OF A CLINICIAN

Sophie Nadkarni, DSW Candidate, LCSW

As I reflect on my first year as a doctoral student at Penn, I feel that I am part of a larger process of cultivating a cohesive identity for the DSW degree. The field of social work, in general, has struggled to carve out its own place and unique identity. As the DSW degree is in its nascence, we have an opportunity to carve out our cultural identity and establish our academic cache. If my experience corresponds to that of my peers, I believe that the DSW degree is multidimensional, integrating advanced clinical practice skills, sophisticated research consumption abilities, and research experience. This degree is a synthesis of these skills, not an accumulation of them.



I entered this program as a clinical social worker. Intellectually, I valued the relevance of research, but in practice felt that it was out of touch with daily authentic applications of clinical work. I came into the program with personally constructed and culturally supported beliefs that distinguished clinicians from researchers. To my surprise - and confusion - from the moment I entered the program, I was addressed and regarded by my professors as a clinician and researcher. During my second week of class, my research professor looked directly at me and said, "So when you write your research proposal, you have to lay out your concepts and operationalize!" I wanted to respectfully reply that I was a psychodynamically oriented clinical social worker who preferred working with people over variables. But as the semester continued, I found variables to be quite interesting - especially when they related to the variables I wanted to operationalize in my future research (she got me).

Research methods course work required in-depth proposals. Days were devoted to breaking down concepts, such as the importance of a well-constructed consent form. I learned that every part of research informs clinical practice, and visa versa. Keeping up on evidence-based practice was no longer about reading the abstract and conclusion, hoping to understand the jargon in between. I began to read articles because they raised philosophical questions, pointed me towards relevant psychometrics that I could use in my own practice, and guided me towards interventions that worked. Certain articles concluded similarly to a favorite book, where questions were left unanswered. I found these articles engaging because I began to feel knowledgeable and savvy enough to take up where the researchers left off. I started thinking like a researcher.

Relating to myself as a budding researcher is a significant change in my personal and professional identity. Personally, it feels like a huge accomplishment - the kind I want to call home and tell my mother about. Professionally, I feel far more competent and on par with consumers of research in other disciplines - a win for clinical social workers. As I began relating to my peers as clinicians, consumers, and researchers, I started considering how our three dimensional identity would contribute to the advancement of social work. When listening to the research interests and methods proposed by my cohort, it became clear that research conducted by DSWs not only represents social work interests but also, and more importantly, will be carried out and designed in ways that reflect the day-to-day challenges of social work settings.

This essay does not address the unique ways the DSW program enhances clinical skills, though I hope that goes without saying. I am emphasizing and focusing on the integration of research into the clinical social work identity, as its effects have been completely unexpected.

I do not view these developing skillsets or identities as three intersecting circles but as a sphere. Now, in the last week of my first year, I notice that I am always thinking of clinical implications when considering research questions as I read an article. I do not switch between these different perspectives nor do I have to make a conscious effort to. I am simply in the process of thinking like a DSW candidate.

ALCOHOLICS ANONYMOUS: A SELF-PSYCHOLOGICAL PERSPECTIVE

Noah Kass, DSW Candidate, LCSW



Self-psychology, developed by Heinz Kohut, is a psychoanalytic theory that views psychopathology as being the result of unmet or disrupted developmental needs. Essential to understanding self-psychology is the concept of selfobjects. Selfobjects are persons or things physically existing outside the self, experienced as part of the self, and that function in service of the self (Kohut, 1984). Selfobjects fulfill mirroring, idealization, and twinship needs.

The mirroring need allows the infant to confirm her own specialness and establishes excitement for existence. The infant craves appreciation and responsiveness from the caregiver. In an optimal caregiving environment, she will feel comfortable displaying her grandiose self, highlighting her innate talents and potentialities (Banal, Mikulincer, & Shaver, 2005). Suppressing the child's unrealistic fantasies and ambition would diminish development of productive energy and self-confidence (Goldstein, 2010). If the caregiver responds adequately to the mirroring need, the child gradually accepts the loss of infantile grandiosity and begins formulation of realistic goals (Goldstein, 2010).

The idealization need allows the child to draw strength from a caregiver's power and calmness (Goldstein, 1995). Most noticeable between ages of four and six (Berzoff, Flanagan, & Hertz, 2007), this need focuses on the desire to be part of and protected by another (Lessem, 2005). Kohut suggested children go through an evolution from idealizing their parent to viewing them as individuals with imperfections (Lessem, 2005). Parallel to that process, the child evolves to recognize her own multi-dimensionality. If the idealization selfobject need is fulfilled, the individual can handle disappointment without impacting self-esteem (Goldstein, 2010). Having parents not attuned to this need or not worthy of idealization could result in narcissistic vulnerability, with the self being overly affected and distorted by the slightest discouragement or setback (Lessem, 2005).

The twinship need helps individuals feel less isolated in the world by matching them up with another person like them (Cushman, 1996). It becomes most relevant during the latency period (adolescence), a time when security in numbers is vital. Fulfillment of this need provides separation from the nuclear family, and formation of a consolidated sense of self (Kohut, 1984). The goal is development of a person's ability to form mutually gratifying relationships with others, and concepts of connection and belonging to the world (Kohut, 1984).

Although these three selfobject needs have specific ages where they appear most relevant, they are consistently evolving and seeking gratification throughout the life cycle. In addition, the extent to which these selfobject needs are satisfactorily internalized in childhood becomes a strong predictor of overall mental health in adulthood.

Heinz Kohut's self-psychological perspective supports participation in 12-step programs such as Alcoholics Anonymous (AA). Participation in AA often brings a sense of connectivity, safety, and support. Membership in this community can provide an opportunity for an addict to acquire a substitute selfobject, filling an unmet need from infancy and childhood (Graham & Glickauf-Hughes, 1992).

AA may serve as an "omnipotent transitional object" (Dodes, 1990), an integral ingredient in helping make the transition from ingesting self-soothing compensatory substances to sudden abstinence bearable. When AA members speak about their unwavering devotion to "working the program," they may be speaking less about AA principles and more about finding an object (AA) strong enough to compete with their drug of choice.

ALCOHOLICS ANONYMOUS: A SELF-PSYCHOLOGICAL PERSPECTIVE

BY NOAH KASS, DSW CANDIDATE, LCSW

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The theory of self-psychology emphasizes the need for others to help maintain self-esteem, control anxiety, and provide self-soothing functions (Goldstein, 1995). Long-term AA membership combined with significant immersion in the fellowship may partially fulfill the idealization, mirroring, and twinship needs not properly internalized in addicts during childhood. Since it is difficult to fully meet needs that were unmet in childhood, many recovering addicts feel an almost "addictive" relationship with AA. Perhaps the more one attends, the more the needs of the tripartite structure (idealization, mirroring, twinship) will be fulfilled. Veterans of AA suggest newcomers attend 30 meetings in 30 days, supporting this hypothesis.

AA attempts to fulfill the addict's mirroring need through admiration and validation (Levin, 2001). Designated time periods (30 days, 90 days, 180 days, 365 days, etc.) are constructed to acknowledge members have achieved significant abstinence from their drug or addictive behavior of choice. At these times, members explicitly reflect and voice recognition of the individual's growth during the recovery process; a coin may be given representing the amount of sober days; and the individual may be given new membership responsibilities. The celebrated member is recognized, validated, and admired by peers.

In AA, the addict is given the time to freely share thoughts, feelings, and experiences without interruption. This promotes, rather than represses, a natural grandiosity often unacknowledged by the individual's primary caregiver. It is a relief from the repression of emotions that often occur during active addiction.

The mirroring self is seen as the addict begins to recognize like-minded individuals inside the various AA rooms. Often she is surprised by the lack of judgment from fellow addicts. This experience may have a transformational impact. They have located others in the world who have shared experiences, and with that comes a unique sense of acceptance and familiarity (Robinson, 1997). These like-minded individuals help lessen the shame associated with previous addictive behaviors.

Peers begin to see how voicing their own experiences can help each other. They become sponsors to newcomers, helping guide them through the AA traditions and principles. This continues an everlasting mirroring process, allowing the sponsor to continue having her own thoughts, feelings, and experiences, recognized and reflected back to her by the sponsee.

Alcoholics Anonymous attempts to fulfill the idealization need by providing an organization to admire and identify with. It serves as a re-parenting mechanism substituting for the original idealized parental imago (Robinson, 1997). In the program's principles and procedures, members recognize organization and productivity. In its focus on simplicity and consistency, members recognize calmness and rationality. These features were usually not seen in the addict's relationship with her primary caregiver.

The hopefully productive sponsor/sponsee relationship makes vivid the often-problematic relationship of the caregiver/child. It is the hope that the sponsor, through example, can provide the addict with what the caregiver could not: the ability to be simultaneously productive and free from destructive anxiety. The prescriptive nature of AA, including working the steps, attending meetings regularly, getting a sponsor, and abstaining from drugs/alcohol, is reminiscent of a parental figure giving practical and compassionate advice to a child. The focus on a higher power, sponsor, group members, and the entire collective could help mirror selfobject functions previously attempted by the isolated individual (Dodes, 1990).

The power of the fellowship is recognized as existing beyond any individual room, extending across states and countries. Individuals are given a common language to communicate with a diverse population whose similarities bind them together. The addict feels less isolated in this world, the exact opposite of what she may have felt when in the cycle of active addiction.

ALCOHOLICS ANONYMOUS: A SELF-PSYCHOLOGICAL PERSPECTIVE

BY NOAH KASS, DSW CANDIDATE, LCSW

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Cynthia Closs

Congratulations Cynthia Closs, DSW'10, LCSW Recipient of the 2014 Excellence in Teaching Award for Part-Time Faculty University of Pennsylvania, School of Social Policy & Practice

This is the second consecutive year that Dr. Closs has received the Excellence in Teaching Award for Part-Time Faculty at SP2. In addition to teaching and non-profit work, Dr. Closs is the Coordinator for the Sexual Assault Counseling and Education Unit at Temple University's Tuttleman Counseling Center. She also maintains a private practice in Center City, Philadelphia. Dr. Closs has taught courses on mental health diagnostics, human behavior and the social environment and anxiety and depression. She has given a number of lectures and presentations on best clinical practices when working with folks of trans* experience. For the past 16 years, she has worked with the queer, trans* and HIV communities. Dr. Closs is specifically interested in relational and trauma theory and practice and her clinical work focuses on persons living with HIV disease, trauma, addiction, and young adults who identify as queer and of trans* experience.

ALUMNI UPDATE

An Interview with Kirk James, DSW'13, MSW

BY MARYANN A. GRONCKI, DSW'10, LCSW



KIRK JAMES
SP2 DSW GRADUATE (2013)

Your dissertation, “The Invisible Epidemic: Educating Social Work Students towards Holistic Practice in a Period of Mass Incarceration” (2013) introduced a two-semester MSW curriculum which infused social work education with issues relating to mass incarceration and its various intersections with social work practice. Could you tell us about the two-semester MSW curriculum?

I developed the two-semester curriculum based primarily on my personal and professional experiences as a social worker. In an era where more people are incarcerated than any other point in the history of the United States, I have always been saddened by social workers’ anemic response to the issue. The curriculum posits that the intersection of social work practice and issues (i.e., housing, mental health, education) of mass incarceration are inextricably linked; thus it is imperative that social work students have a more holistic understanding of the problem to provide

holistic service and advocacy in line with our organizing value of social justice.

The first semester of the curriculum provides a historical and contemporary analysis of the problem. The second semester examines challenges to clinical practice with people impacted by the criminal justice system, as well as clinical theories that have proved to have empirical validity and cultural competency in treatment settings.

Could you tell us about the Goldring Reentry Initiative and your role in it?

Dr. Ram Cnaan and I created the Goldring Reentry Initiative (GRI). Ram had begun to do some work around mass incarceration and was astonished that such a huge social justice issue was not being addressed in the social work community. He was also shocked that so many people went back to prison after release (ranging from 40 to 70% in 3 years).

Dr. Cnaan hypothesized that social work students working in the prisons with men and women both 3 months pre and post release could lower their likelihood of recidivism.

We secured funding through SP2 board of trustee member Gary Goldring. The first year we worked with almost 100 people being released from Philadelphia prisons with varying degrees of success. Students and prison administrators both love the GRI. Like any new program, it will grow and evolve as we learn about what works and what doesn’t. This initiative is an important social work response to what I believe is the greatest social justice issue of our generation.

Could you tell us about the Fortune Society and your role in it?

I began working at the Fortune Society on March 7th as the senior director of policy. This may be a bit puzzling since I just finished a clinical doctorate, yet I believe that my clinical background makes me ideal for this work. The Fortune Society is a large direct service agency that serves almost four thousand people impacted by the criminal justice system each year. We also utilize our clients’ narratives and experiences to inform policy and advocacy. Issues of trauma and its impact on behavior (via

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By MaryAnn A. Groncki, DSW'10, LCSW
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neuroscience research) have been largely overlooked in the conceptualization and implementation of policy. I aim to bring about a more clinical understanding of behavior deemed criminal, and to utilize that information in our advocacy and policy work.

How did your education influence your thinking about this program?

I was able to take a more holistic look at behavior, especially the utilization of neuroscience research to better understand the impact of trauma (pervasive amongst CJ populations) on the brain and its connection to behavior.

What experiences as a Clinical Doctor of Social Work student and candidate at UPenn have been the most valuable for you?

I have had so many valuable experiences, but without a doubt my DSW cohort. They are an amazing group of human beings who pushed and supported each other's professional and personal growth. It was an experience that I will always cherish.

Additional Information About Dr. Kirk James:

Dr. Kirk Anthony James | Senior Director, David Rothenberg Center For Public Policy | The Fortune Society | 29-76 Northern Boulevard | Long Island City, NY 11101 | Phone: 347.510.3617 | Fax: 212.633.6845 | Website: www.fortunesociety.org



MARYANN A. GRONCKI
SP2 DSW GRADUATE (2010)

The Clinician, published twice yearly, provides UPenn DSW students and alumni an opportunity to highlight their work, research, and thinking as it relates to direct practice and leadership in the social work profession. We encourage submission of articles that encompass social work values, are innovative and creative, and represent a wide range of clinical paradigms and techniques. We also encourage submission of essays and reflections that are relevant to clinical practice and leadership in social work.

To view previous issues of The Clinician click on the following link -

<http://www.sp2.upenn.edu/programs/dsw/clinician.html>

Click on any of the hyperlinks in this issue of The Clinician to be taken directly to the site.

DSW STUDENT AND ALUMNI NEWS

Jane Abrams, DSW'10, LCSW, co-authored the article "Teaching Trauma Theory and Practice in MSW Programs: A Clinically Focused, Case-Based Method", published in the Clinical Social Work Journal. She has been accepted into the Psychoanalytic and Psychodynamic Teachers' Academy of the American Psychoanalytic Association for 2014. Along with five other teachers selected for the Academy - social workers, psychologists and psychiatrists - she attended sessions with master teachers at the annual meeting of APsaA in January and will receive one-on-one

DSW STUDENT AND ALUMNI NEWS

mentoring with a master teacher throughout 2014. She continues as a part-time lecturer at SP2, teaching two courses: Social Work Practice and Trauma, and Psychodynamic Theory for Clinical Social Work. She served as mentor this academic year for three DSW students in the current cohort. Dr. Abrams maintains her private psychotherapy practice in Center City, Philadelphia, specializing in treating adults and couples and providing clinical supervision.

Pier Cicerelle, DSW Candidate (ABD), LSW, will be teaching a new class at West Chester University beginning this summer. The class, for which she created the curriculum and syllabus, is "Special Topic: Social Work in Health Care".

Michael Crocker, DSW'13, LCSW, MA, is an adjunct professor at The Touro College Graduate School of Social Work. He will present "Sexuality, Attachment and Trauma: Helping Clients with Sexual Compulsivity Find Their Way Back to Healthy Attachment" at the NASW Addictions Conference on June 11th, 2014. This presentation is based on his dissertation, which researched the relationship between Hypersexual Behavior and Attachment Styles. The presentation will provide an overview of the results of this research as well as the treatment approach of his group practice: The Sexuality, Attachment and Trauma Project.

JaNeen Cross, DSW Candidate, LSW, ACSW, MBA, presented the workshop "When NICU Children Aren't Safe at Home" at the National Association of Perinatal Social Workers (NAPSW) Conference in San Antonio, Texas this past May. She also received a Penn Medicine's CARES community outreach grant to support the efforts of the NICU Parent Peer Support group. Janeen helped to develop and currently manages this group.

Deborah O'Neill, DSW'12, LCSW, created a sexual trauma treatment outreach and prevention team (STTOP) at the University of Pennsylvania Counseling and Psychological Services (CAPS). The mission of this team is to provide confidential care, support, and advocacy for students who have experienced sexual trauma during their academic career. It is based on Dr. O'Neill's dissertation research, which focused on college campus non-stranger rape. She also co-facilitates a yearly support/empowerment group for victims/survivors of sexual assault at the Women's Center, a campus community partner.

Vance Patrick, DSW Candidate, MSW, presented "Human Trafficking and LGBTQI Youth" at the 30th National Symposium on Child Abuse in Huntsville, Alabama this past March. Vance presented in his role as the LGBTQI Coordinator for the New Jersey Department of Children and Families - Office of Adolescent Services. Co-participants included the Polaris Project and the U.S. Department of Homeland Security Immigration and Customs Enforcement.

Naomi Pollock, DSW'13, LCSW, was recently promoted to Project Director at the SW Philadelphia office of Child Guidance Resource Centers. In this family-based unit, she supervises teams working with children with ASD and co-occurring severe psychiatric issues. In addition, Dr. Pollock was an adjunct professor at SP2 this past spring, and will teach this summer at Bryn Mawr Graduate School of Social Work and Social Research.

Lois Robbins, DSW'14, MSW, presented on Social Work in Cuba to the Children's Hospital of Pennsylvania (CHOP) Social Work Department.

Darcella Anita Patterson Sessomes, DSW'14, LCSW, was recently promoted to Assistant Commissioner of the Division of Program and Community Services for the New Jersey Department of Corrections. In her new role, she manages the following prison systems: social work, education, religious services, victims' services, residential community reentry programs (RCRP), intensive supervision program (ISP), and county services. Dr. Sessomes is also a part time lecturer for Rutgers University School of Social Work, where she teaches course work on Diversity and Oppression. In addition, she serves as the teaching assistant for Criminal Justice Issues: Implications for Social Work course at the University of Pennsylvania.

Anderson Sungmin Yoon, DSW'10, LCSW-R, CASAC, RPT-S, was recently promoted to Project Director at the Child Center of New York Asian Outreach Clinic. He will present "Exploring the Role of Social Support on Intergenerational Transmission of Child Maltreatment" at the 2014 Interdisciplinary Social Sciences Conference in British Columbia this June.