



2005 | Social Work Congress
A Coming Together of the Profession

2005 SOCIAL WORK CONGRESS – FINAL REPORT





2005 | Social Work Congress
A Coming Together of the Profession

2005 SOCIAL WORK CONGRESS – FINAL REPORT

EDITORS

Elizabeth J. Clark, PhD, ACSW, MPH
Toby Weismiller, ACSW
Tracy Whitaker, ACSW
Gail Woods Waller, MS
Joan Levy Zlotnik, PhD, ACSW
Becky Corbett, ACSW

©2006 National Association of Social Workers. All Rights Reserved.

BACKGROUND

In March, 2005, four national social work organizations convened a historic meeting; bringing together 400 prominent social work leaders to develop action imperatives to forge a unified direction for the profession of social work. As convening organizations, the National Association of Social Workers (NASW), the Association of Baccalaureate Social Work Program Directors, the Council on Social Work Education, and the National Association of Deans and Directors of Schools of Social Work recognized the importance of expanding the profession's contribution to address urgent social needs in the next decade. Additional Congress sponsors were the AARP, the Association of Oncology Social Work, the Group for the Advancement of Doctoral Education, the Institute for the Advancement of Social Work Research, the NASW Insurance Trust, the NASW Legal Defense Fund, The New York Academy of Medicine, and the Simmons College School of Social Work.

GOALS OF THE CONGRESS

The goals of the Congress were to advance the profession of social work; to develop a common agenda for the social work profession for the next decade; and to launch an action campaign to transform the social service landscape.

PREPARATION FOR THE CONGRESS

Preparation for the Congress spanned two years. One major component was identifying current social work leaders in all aspects of social work practice. Social work organizations were invited to nominate individuals for consideration. Final Congress participants were selected based on strength of nomination, geographic representation, ethnic and racial diversity, and practice experience.

To establish a context for the deliberations of the Congress, two special reports were prepared in advance of the meeting. The first was "*A Perspective on the Future of the Social Work Profession*" which was compiled from a written survey of the Congress invitees. The second report was composed of key early findings from the "National Study of Licensed Social Workers: Assuring the Sufficiency of a Frontline Workforce." While the final results of the workforce study are reported separately (see <http://workforce.socialworkers.org>), the early findings provided an overview of the current social work labor force including some of the trends that will have an impact on the future requirements of the profession.

The survey of Congress invitees (see Appendix A for demographic characteristics) asked social workers to identify the top opportunities and challenges faced by the social work profession now and in ten years (2015). The growing demand for social work services due to the aging of our society was the highest rated opportunity currently and in 2015. This was followed by a multicultural society calling for social values and training in cultural competence; findings from research to support the value of social work interventions; and increased acceptance of psychosocial aspects of healthcare. Globalization and technological advances were also perceived to be important opportunities.

Identified challenges for the profession clustered in topics related to social justice, the internal workings of the profession itself, and issues related to social work practice in the service delivery arena. The greatest challenges with regard to social justice were growing poverty and the continued stigmatization of high risk populations served by social workers. For social work practice, the greatest challenges were replacement of professional social work services by an untrained workforce; a lack of public understanding of the value of social work interventions; and low social work salaries and inadequate employment benefits.

CONGRESS VISION

The convening organizations, as well as the Congress co-sponsors, met in advance of the Congress to develop a “Vision Statement” to represent the desired state of professional social work in ten years (2015). The following vision was highlighted at the beginning of the Congress:

Social work expertise is highly valued for helping the global community protect and advance the well-being of all people, at every stage of life.

CONVENING THE CONGRESS

The Congress was held in Washington, DC on March 17 and 18, 2005. Over 400 social work leaders were in attendance. The opening keynote address, given by award-winning journalist and author Anna Quindlen, helped to set the context for the deliberations. Quindlen stressed the importance of linking social policy with social work practice, and told the participants that social work must find ways to make people understand what social work is and why it is important.

The Congress format allowed extensive opportunities for consideration, discussion, and debate around the four major areas of practice: Aging; Behavioral Health; Children and Families; and Health and Health Disparities. Within each of these areas, Congress participants addressed social work education, research, policy, and practice. Participants then identified actions that would help social work meet the challenges in each issue area. Candidate imperatives were identified for possible final selection for inclusion in the final action agenda.

In the concluding general session, Congress participants voted electronically for the top twelve imperatives that will guide the social work profession for the next decade. These imperatives are presented on page 4.

STRATEGY DEVELOPMENT TEAMS

Developing and selecting the *Social Work Imperatives* was only the beginning. Next came the articulation of the necessary action steps for achieving the *Imperatives*. In June, 2005, forty Congress participants were again invited to engage in a structured process to identify and prioritize general action steps needed to move forward with the *Imperatives*. The teams decided to initially cover only the first five years, and the recommendations were divided into actions to be taken during the two-year period spanning 2005-2007, and then 2008-2010. In addition, participants identified several overarching themes for each imperative that would be on-going.

When the basic action plan was completed, it was sent to the convening organizations for comment and input. After their comments were incorporated, the *Social Work Congress Imperatives Action Plan* was posted on the NASW website for further vetting.

The resulting Action Plan for 2005-2010 is included in Appendix B.





2005 | Social Work Congress

A Coming Together of the Profession

Social Work Imperatives for the Next Decade

- Assure excellence in aging knowledge, skills, and competencies at all levels of social work education, practice, and research.
- Participate in politics and policy where major decisions are being made about behavioral health.
- Assure a qualified social work labor force to serve children.
- Take the lead in advocating for quality universal healthcare.
- Elevate the public's awareness of the efficacy and cost-effectiveness of social work practice in healthcare.
- Address the impact of racism, other forms of oppression, social injustice, and other human rights violations through social work education and practice.
- Increase the value proposition of social work by raising standards and increasing academic rigor of social work education programs.
- Mobilize the social work profession to actively engage in politics, policy, and social action, emphasizing the strategic use of power.
- Continuously acknowledge, recognize, confront, and address pervasive racism within social work practice at the individual, agency, and institutional levels.
- Strengthen social work's ability to influence the corporate and political landscape at the federal, state, and local levels.
- Promote culturally competent social work interventions and research methodologies in the areas of social justice, well-being, and cost-benefit outcomes.
- Connect research and practice through partnerships among researchers, the field, and communities.

Adopted at Social Work Congress 2005, March 18, 2005

FUTURE PLANS

Establishing the *Social Work Congress Imperatives* and developing an action agenda are only a beginning. There will need to be ongoing monitoring to determine if the profession of social work is staying the course. There will also need to be periodic review to assess if the action plan as set forth this year remains current and definitive, or whether there is a need for revisions, deletions, or additional steps. A formal review by the convening social work groups should take place at the five-year juncture (2010).

With the publication of these *Social Work Congress Imperatives*, the convening social work organizations are making a commitment to the profession of social work. Together we have crafted a vision and charted a course for the future. The goal is to advance the profession so that social workers are well prepared to meet increasing societal challenges. We must speak with one voice when we address federal and state legislators, payers, providers, and program funders. We also need to work in unison if the vision crafted for the Congress is to be realized. Only then can we truly transform the social service landscape.

CONTRIBUTORS

Many individuals and organizations contributed significantly to the 2005 Social Work Congress. In addition to the Congress participants listed below, several deserve special recognition.

The co-convening organizations were fully participating partners. They provided guidance, support, and resources. Several of them signed on when plans were just forming. Without their belief in the concept of a Congress, we could not have gone forward.

A large group of NASW staff worked on Congress planning for almost two years. They were dedicated and conscientious and made the Congress look almost seamless. Also, the planning for the Congress spanned several different Boards of Directors, and their combined support was greatly appreciated.

Dr. Joan Levy Zlotnik, Director of the Institute for the Advancement of Social Work Research, conducted and analyzed the Congress participant survey. We are grateful for her assistance.

Also, Robert Mittman of Mittman Consulting is owed a debt of gratitude for his skillful facilitation and moderation of the Congress.

COMMENTS FROM PARTICIPANTS

“This was an invaluable opportunity to gather together some of the best minds in the profession to determine the future of social work.”

“For the first time in a long time, we brought the profession together to look not just at social issues, but at the profession itself.”

“Too many people in America don’t know what social workers do.”

“The next step is going to be very crucial in terms of how strategies are defined and how we work to accomplish the imperatives.”

APPENDICES



APPENDIX A

A PERSPECTIVE ON THE FUTURE OF THE SOCIAL WORK PROFESSION

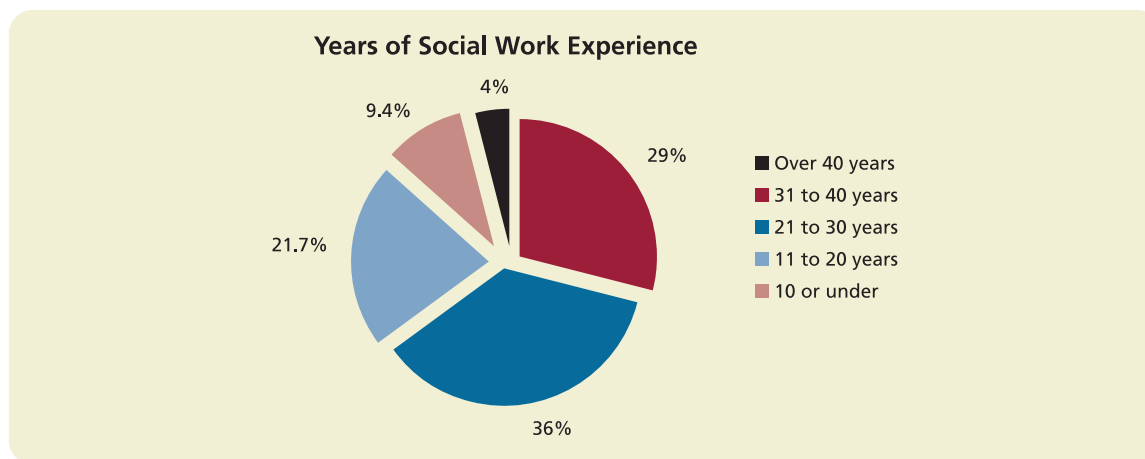
A survey was sent in November 2004, to 630 social work leaders who were invited to participate in the March 17-18, 2005 *Social Work Congress*. The purpose of the survey was to gather information about participants and their perspective on major issues affecting the social work profession today and in the future. A total of 329 persons completed the survey representing a 52 percent response rate.

DEMOGRAPHICS OF RESPONDENTS

The majority (66%) of the respondents held a Master of Social Work (MSW) degree. Fifteen percent had a doctoral degree, and 19% had a Bachelor of Social Work (BSW) degree.

The median age range for respondents was 45-54 years, and the median years of experience in social work was 21-30 years (see Table 1).

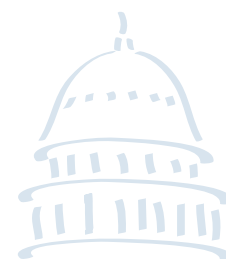
Table 1



Two-thirds of the respondents were women, and 70% were white. African-Americans represented 17% of the respondents, 5% were Latino, 4% were Asian-Pacific Islanders, 2% were Native American or Alaskan Native, and 3% represented other ethnicities.

AREAS OF INTEREST

Each respondent was asked to select from one of four general areas that most closely matched their interests and expertise. The highest ranked area of interest was Children and Families (34%), followed by Health and Health Disparities (26%), Behavioral Health (22%), and Aging (13%). An additional 5% of respondents did not feel that the general areas above captured their main interest area.



CHANGES IN SOCIAL WORK PRACTICE

The survey included a set of questions regarding how the practice of social work and service delivery systems had changed during the previous two years. Using a scale of -2 to +2, Table 2 illustrates the extent to which respondents perceived the practice of social work had changed. More than 60% of the respondents noted increases in caseload size, paperwork, coordination among community agencies, levels of outcome monitoring and oversight, waiting lists for services, and the severity of client problems. This was coupled with more than half of the respondents indicating that they perceived a decrease in job security, and a decrease in staffing levels for social workers. The most consistent response related to service delivery changes was that more than 50% perceived an increase in the eligibility requirements for clients to receive services (see Table 3).

Table 2

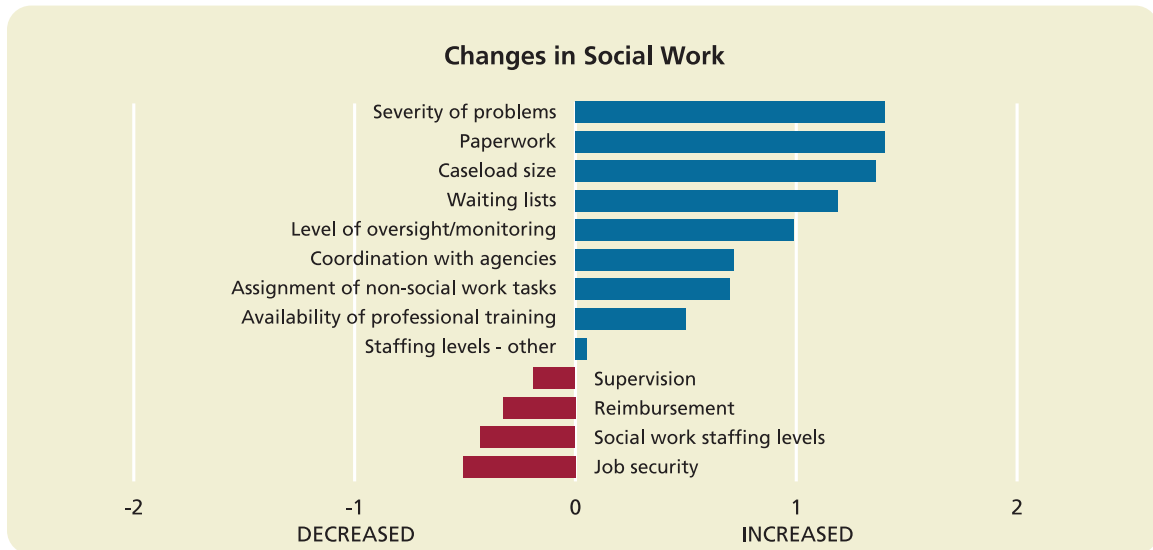
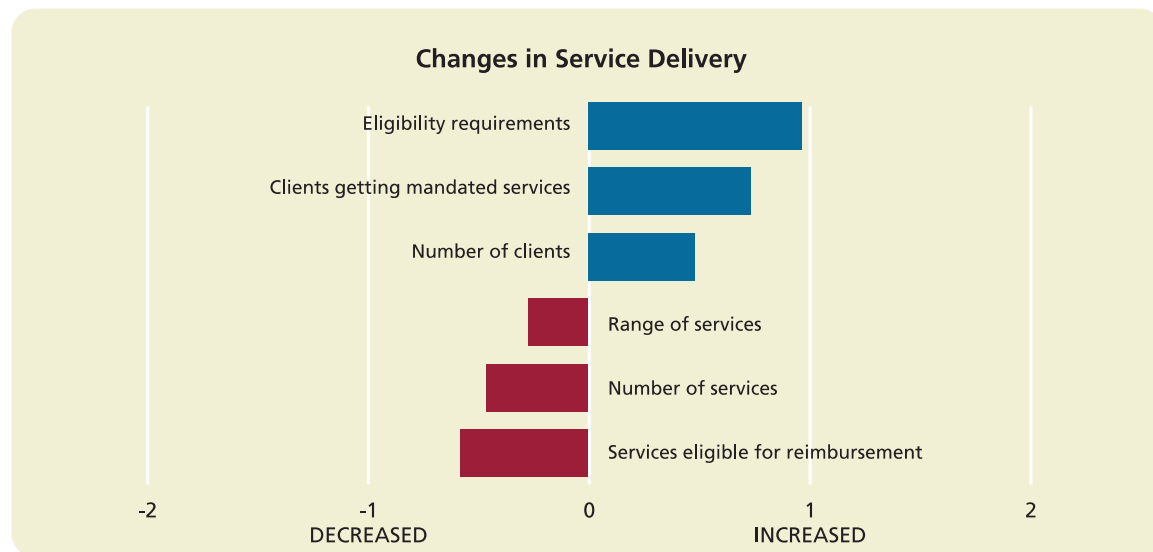


Table 3



WORK EXPERIENCE

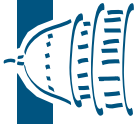
All respondents but six chose from the list provided to best describe their principal work role (see Table 4). The large percentages in agency administration, academic administration, and association management correspond to the techniques used for identifying social work leaders.

Table 4

Principal Work Role	
PRINCIPAL ROLE	% OF TOTAL
Agency or Program Administration/Management	28.3%
Academic Administration	17.6%
Teacher/Professor	14.9%
Association Management	12.5%
Clinical/Direct Practice/Supervision/Case Management	8.8%
Public Policy Analysis/Development	2.7%
Advocacy	2.4%
Consultation	2.4%
Professional Development	2.1%
Elected Official	1.5%
Philanthropy	1.5%
Researcher	1.5%
Community Organization	.9%
Trainer	.3%
Volunteer Coordinator	.3%
Fund Development	.3%
Other/No Response	1.8%

Over 70% of the respondents were employed in a social work position, and 61% indicated that they held a position that required a social work degree. Only 26% worked in a position that required a social work license. Reflecting a strong identification with the profession, 92% of the respondents indicated that they regularly identify themselves as a social worker.





STRATEGIES FOR ACHIEVING SOCIAL WORK CONGRESS IMPERATIVES ACTION PLAN 2005-2010

1. Assure excellence in aging knowledge, skills, and competencies at all levels of social work education, practice, and research.

Recommended 2005-2007

- 1A. Offer an online CE course on Practice Excellence in Aging
- 1B. Complete and launch a tiered credential in aging.
- 1C. Develop a leadership academy in aging to build a larger pool of leaders in education, research, practice and policy.
- 1D. Support a social policy center on aging.
- 1E. Secure foundation funding for stipends for gerontological field placements. 1J. Promote federal support for social work research in aging through coalitions and relationship building (i.e., Friends of NIDA, CDC, AHRQ).

Ongoing 2005-2010

- 1K. Expand field experience in aging and expand continuing education to build competency.
- 1L. Require CEUs in aging for licensure renewal.
- 1M. Delineate differentiation in skill levels of MSW/BSW graduates.
- 1N. Continue infusion of gerontology into social work curriculum.

2. Participate in politics and policy where major decisions are being made about behavioral health.

Recommended 2005-2007

- 2A. Reach out to social workers that are in policy-making positions to advance a social work agenda.
- 2B. Convene state meetings of behavioral health social workers to develop strategies to influence policy.
- 2C. Collaborate with mental health consumer groups to advance policy positions.

Recommended 2008-2010

- 2D. Target policy-making bodies for inclusion of social work members.
- 2E. Educate and activate social workers to expand involvement in behavioral health policy making.
- 2F. Enhance training for social work expert witnessing in behavioral health.
- 2H. Increase coordination with state legislators to bring about state policy change.
- 2I. Team with federal social workers to promote support for social work research about effectiveness of social work services in behavioral healthcare.

Ongoing 2005-2010

- 2J. Market/promote social work positions and expertise in both behavioral health policy and practice.
- 2K. Build local coalitions of stakeholders to influence policy.
- 2L. Stimulate and produce social work research to help policy setting in behavioral health.



STRATEGIES FOR ACHIEVING SOCIAL WORK CONGRESS IMPERATIVES ACTION PLAN 2005-2010

3. Assure a qualified social work labor force to serve children.

Recommended 2005-2007

- 3A. Advocate for loan forgiveness and other financial incentives to social workers serving vulnerable children.
- 3B. Advocate for public policy that will establish national standards in child welfare.
- 3C. Implement a plan to increase internal support/rewards for social workers in child welfare agencies.
- 3D. Partner with NASW Workforce Center to raise skill and pay levels for social workers in child welfare.

Recommended 2008-2010

- 3E. Train child-serving agency directors and staff to work effectively with media on advocacy for children.
- 3F. Expand evidence-based practices to support the importance of social work professionals in child-serving programs.
- 3G. Integrate evidence-based child and family practice competencies in social work education.
- 3H. Develop a synthesis of research that demonstrates the value of social work in child welfare.
- 3I. Identify and encourage best practices/models in collaboration with universities and state agencies such as Child Protective Services.

Ongoing 2005-2010

- 3J. Educate the public, media, and elected leaders about the value of social workers in providing services to children and families.
- 3K. Develop ongoing collaborative advocacy strategies to support social work careers to serve children and families.
- 3L. Enhance social work education to teach competent social workers to meet the needs of vulnerable children and families.
- 3M. Express support and advocate on behalf of Title IV-E, Child Welfare Training.

4. Take the lead in advocating for quality universal healthcare.

Recommended 2005-2007

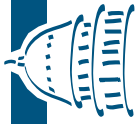
- 4A. Sponsor universal healthcare month.
- 4B. Conduct analysis to define and articulate a definition of universal healthcare in relation to life course needs and diversity.
- 4C. Create tools for educational purposes that focus on the social perspectives of quality healthcare.

Recommended 2008-2010

- 4D. Target one aspect of quality healthcare, (e.g., end-of-life care) and develop a national social work advocacy campaign in partnership with other relevant organizations.
- 4E. Identify staff resources to develop policy proposals and advance those proposals in policy-making bodies.
- 4F. Organize and mobilize the social work profession to actively pursue universal healthcare.

Ongoing 2005-2010

- 4G. Build and strengthen existing coalition partnerships to advance policy perspectives.
- 4H. Develop partnerships to shape emerging healthcare ethics.
- 4I. Partner with physicians, other healthcare professionals, and businesses that offer healthcare to advocate for universal healthcare.



STRATEGIES FOR ACHIEVING SOCIAL WORK CONGRESS IMPERATIVES ACTION PLAN 2005-2010

5. Elevate the public's awareness of the efficacy and cost-effectiveness of social work practice in healthcare.

Recommended 2005-2007

- 5A. Conduct research on social workers' role in healthcare.
- 5B. Secure CPT code for social workers to do supportive counseling.
- 5C. Identify best practices and evidence based practice in social work in various healthcare settings such as Veteran's Administration Social Work Services.

Recommended 2008-2010

- 5D. Develop and implement a media campaign to educate public about social workers' role in healthcare.
 - 5E. Collaborate with allied professions in advocacy efforts to improve healthcare.
 - 5F. Begin continuing education programs on bioinformatics and telecounseling.
- Ongoing 2005-2010**
- 5G. Educate MDs and CEOs regarding the importance of social work in healthcare institutions and in community care.
 - 5H. Develop business models and tools for social workers to use in delineating cost effectiveness of their services.
 - 5I. Encourage production of social work research that will influence healthcare policy.

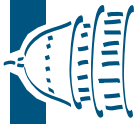
6. Address the impact of racism, other forms of oppression, social injustice, and other human rights violations through social work education and practice.

Recommended 2005-2007

- 6A. Define current state of knowledge and knowledge development in areas of racism and oppression in social work.
- 6B. Design and implement a plan to recruit and retain more persons of color to the social work profession and to leadership positions within the profession.
- 6C. Educate social work students to address issues of oppression in relation to race, class, gender, and other diversities.
- 6D. Seek opportunities (scholarships and loan forgiveness) to expand and retain pool of social work students of color.

Recommended 2008-2010

- 6E. Promote application of effective multisystem models of intervention utilizing social work expertise with individuals, families, groups, organizations and communities.
 - 6F. Respond, collectively as a profession, to issues related to racism, oppression, and social injustice.
 - 6G. Develop a Social Work Center for Diversity and Social and Economic Justice.
- Ongoing 2005-2010**
- 6H. Develop social work curricula that addresses new populations and international issues (e.g. human rights).
 - 6I. Promote anti-oppressive practice and social justice in social work education and continuing education.
 - 6J. Provide fellowships and other financial support for under-represented groups seeking doctorates to teach in social work programs.



STRATEGIES FOR ACHIEVING SOCIAL WORK CONGRESS IMPERATIVES ACTION PLAN 2005-2010

7. Strengthen social work's ability to influence the corporate and political landscape at the federal, state, and local levels.

Recommended 2005-2007

- 7A. Increase involvement and participation of social workers on state and local policy/planning boards and committees.
- 7B. Organize an action network among all social work constituencies, especially women's groups and people of color, to communicate about issues and take action.

Recommended 2008-2010

- 7C. Create more social work field placements in corporate and political settings.
- 7D. Seek partnerships with business to promote business and community friendly policies.

Ongoing 2005-2010

- 7E. Recruit and support social workers to run for elective office at the federal, state, and local levels.
- 7F. Increase social workers' understanding and involvement in the political process through training and mobilization activities.
- 7G. Build relationships with the business sector and other influential allies to achieve political goals.
- 7H. Involve corporate and political leaders in local communities in social work educational programs and program development.

8. Increase the value proposition of social work by raising standards and increasing academic rigor of social work education programs.

Recommended 2005-2007

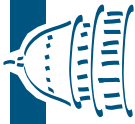
- 8A. Advance the public education campaign through funding and implementation.
- 8B. Establish standards for evaluating rigor of social work education programs, identifying outcomes and incorporating findings into curriculum.
- 8C. Advocate for the protection of social work practice and the social work role in service delivery by seeking to improve salaries and educational benefits such as student loan forgiveness.

Recommended 2008-2010

- 8D. Increase academic rigor of social work education programs.
- 8E. Achieve uniform licensing (at all practice levels) across all states/jurisdictions
- 8F. Foster stronger community-university partnerships.
- 8G. Promote development of evidence-based/qualitative practice social work literature.

Ongoing 2005-2010

- 8H. Promote promising career ladders available to social workers in order to attract high-level students.
- 8I. Increase the prominence of social work programs within the academy.
- 8J. Create a screening process (i.e., national exam) for entrance into social work programs.
- 8K. Promote rigor in pedagogy.
- 8L. Support efforts of social work educators to move into positions of leadership in colleges and universities.



STRATEGIES FOR ACHIEVING SOCIAL WORK CONGRESS IMPERATIVES ACTION PLAN 2005-2010

9. Mobilize the social work profession to actively engage in politics, policy, and social action, emphasizing the strategic use of power.

Recommended 2005-2007

- 9A. Analyze current advocacy strategies and tactics to assess effectiveness.
- 9B. Consolidate electronic advocacy and issue education resources.
- 9C. Conduct training programs and institutes to link client advocacy to policy advocacy.

Recommended 2008-2010

- 9D. Develop CEUs and other post-degree training on political practice.
- 9E. Create an academy to train social workers for elective/appointed office.
- 9F. Implement new approaches to policy advocacy.
- 9G. Incorporate activities such as “Student Day at the Legislature” and other political action strategies into undergraduate social work curricula.

Ongoing 2005-2010

- 9H. Revise social policy curricula to be more advocacy and action oriented.
- 9I. Develop a more focused social work agenda for advocacy.
- 9J. Work in partnership to implement a “Social Work Reinvestment Initiative.”

10. Continuously acknowledge, recognize, confront, and address pervasive racism within social work practice at the individual, agency, and institutional levels.

Recommended 2005-2007

- 10A. Educate social workers about recognizing systemic institutional racism and oppression and its intersection with class.
- 10B. Establish a forum to foster open dialogue about racism within the profession.
- 10C. Advance anti-racist, diversity advocates in all sectors of the profession.

Recommended 2008-2010

- 10D. Develop tools to heighten self-awareness of behaviors that contribute to racism.
- 10E. Articulate more clearly the content of culturally competent practice.
- 10F. Promote social work efforts to create policies to address institutional racism and oppression.

Ongoing 2005-2010

- 10G. Develop and implement an anti-racist awareness campaign for agencies and other community institutions.
- 10H. Advance improved models/interventions for oppressed groups and populations.
- 10I. Promote anti-oppressive practice and social justice in social work education.



STRATEGIES FOR ACHIEVING SOCIAL WORK CONGRESS IMPERATIVES ACTION PLAN 2005-2010

11. Promote culturally competent social work interventions and research methodologies in the areas of social justice, well-being, and cost-benefit outcomes.

Recommended 2005-2007

- 11A. Conduct research on the role of race and class in health and human wellness.
- 11B. Expand in-service training for employers and practitioners in cultural competence.
- 11C. Educate social workers about social justice and recognizing and combating racism and oppression.

Ongoing 2005-2010

- 11G. Assure quality continuing education based upon research of the needs of specific populations.
- 11H. Develop measures and methods to evaluate culturally competent practice across all sectors—education, policy, research and practice.

Recommended 2008-2010

- 11D. Promote the development of research and curricula to support and assure culturally competent practices throughout the profession.
- 11E. Infuse an international human rights framework into social work education at all levels.
- 11F. Promote organizational cultural competency in social work educational programs

12. Connect research and practice through partnerships among researchers, the field, and communities.

Recommended 2005-2007

- 12A. Create more mechanisms for communicating and disseminating practice wisdom.
- 12B. Promote student interest in research through field placements and research partnerships.
- 12C. Define evidence-based practice in social work.

Ongoing 2005-2010

- 12G. Improve coordination of the education, practice, research, and policy structures within the social work profession.
- 12H. Increase funding support for social work research, translation and dissemination of best practices.
- 12I. Promote and reward faculty/community research relationships.
- 12J. Foster and reward evidence-based practice and policy.

Recommended 2008-2010

- 12D. Establish a national conference hosted by major social work associations for practitioners, researchers, educators, and policy sectors within social work.
- 12E. Utilize qualitative and quantitative research methodologies to tap potential partners in the community.
- 12F. Establish undergraduate research initiatives to foster increased emphasis on research as an important component of social work practice.

APPENDIX C

LIST OF PARTICIPANTS

- Ann A. Abbott, PhD, LCSW
 Paul Abels, PhD, MSW
 James P. Adams, PhD, MSW
 Virginia H. Adolph, MSW, LCSW
 John E. Aikens, BSW
 James H. Akin, MSW, ACSW
 Josephine A.V. Allen, PhD, ACSW
 Paula Allen-Meaers, PhD, MSW
 Jeane W. Anastas, PhD, MSW
 Stephen C. Anderson, PhD, ACSW, LISW
 Charles W. Anderson, MSW, MBA
 Sylvia Rodriguez Andrew, PhD, JD
 Dawn Hall Apgar, PhD, LSW, ACSW
 Margot Aronson, MSW, LICSW
 Rebecca S. Ashery, DSW, ACSW, DCSW
 Christina Austin-Valere, MSW
 Freddie L. Avant, MSW
 Gary Bailey, MSW, ACSW
 Karen Baker, MSW
 Julia Baldwin
 Laurie Barnard, ACSW, LCSW, PIP
 Lawanna R. Barron, ACSW, LCSW
 Frank R. Baskind, PhD, MSW
 Nancy Bateman, LCSW-C
 Mark G. Battle, LCSW, CSWM, ACSW
 R. Larry Beckett, MSW
 Kiersten Beigel, MSW
 Tricia Bent-Goodley, PhD, MSW
 Marla L. Berg-Weger, PhD, ACSW
 Mercedes Bern-Klug, PhD, MSW
 Phyllis N. Black, DSW, ACSW, LSW
 James A. Blackburn, PhD, MSSW
 Allison Blake, PhD, MSW, ACSW
 Joel Blau, DSW
 Diane Blum, MSW
 Lt. Colonel Paul Bollwahn, ACSW, CSWM
 L. Worth Bolton, CCAS, ACSW
 Carol Bonner, MSW, MBA
 Renata A. Bordallo, MSW
 Kathy Boyd, ACSW, CMSW
 Carol M. Boyd, EdD, ACSW,
 C-ASWCM, LCSW
 Janet Bradley, MSS, MLSP
 Katharine H. Briar-Lawson, PhD, MSW
 Ramona Brinson, PhD, ACSW
 Sheryl Brisset-Chapman, EdD,
 EdM, ACSW
 Timothy Brown, MSW
 Bruce D. Buchanan, DCSW, BCD,
 ACSW, LISW
 Karen Bullock, PhD, MSSW
 Linda Burch, MSW, LCSW
 Taylor Burns, LCSW
 Janet Burton, DSW, LICSW
 N. Yolanda Burwell, PhD, MSW
 Lola M. Butler, PhD, ACSW
 Renee J. Cardone, MSW, ACSW
 Leila Carlson, ACSW, LISW
 Iris Carlton-LaNey, PhD, MA
 A. Elizabeth Cauble, PhD, MSW
 KimberlyB. Causey-Gomez, MSW, CSW
 Jay J. Cayner, ACSW, LISW
 Hank Cecil, MSW, LCSW
 Rick Chamiec-Case, MSW
 Yvonne M. Chase, MSW, ACSW
 Grace H. Christ, DSW, MA
 Nancy Cincotta, MSW
 Elizabeth (Betsy) Clark, PhD, ACSW, MPH
 W. Mark Clark, MSW, ACSW
 James J. Clark, PhD, MSW
 Juliette Clifton, MSW, LGSW
 Rebecca A. Cline, MSW, LISW
 Bonnie Primus Cohen, MS
 Ira C. Colby, DSW
 Mirean F. Coleman, LICSW
 Yvette Colon, MSW, ACSW, BCD
 Barbara A. Conniff, LSW, ACSW
 Becky S. Corbett, ACSW
 Cynthia J. Corbin, MSW, QCSW, LCSW
 Elvira Craig de Silva, DSW, ACSW
 Kerri Criswell, MSW
 Michael S. Cronin, ACSW, PhD Candidate
 Anita Curry-Jackson, PhD, MSSA
 Paul D'Agostino, ACSW, LCSW
 Renee Daniel, CSW
 Kay W. Davidson, DSW, MSW
 Eural Davis, MSW, ACSW
 Kristin Day, LCSW
 Enrico (Rick) DeGironimo, ACSW, LCSW
 Dave Dempsey, MSW, ACSW
 Marcia DeSonier, DCSW, LCSW,
 ACSW, QCSW
 Leticia Diaz, MS
 Paul Dovyak, MSW, ACSW, BCD
 Julia A. Dunaway, LCSW, BCD,
 ACSW, LCDC
 Suzanne Dworak-Peck, ACSW, LCSW
 Sophia Dziegielewski, PhD, LCSW
 Linda Edmondson, MSW, ACSW, LCSW
 Richard L. Edwards, PhD, MA
 Phyllis J. Edwards, MSW
 Laurie Emmer, MSW, LCSW
 Suzanne England, PhD, ACSW, MBA
 Barry Erdman, DCSW, ACSW, LCSW
 Patricia Breiilh Fennell, MSW, ACSW
 Iris Cohen Fineberg, PhD, MSW, ACSW
 Randy A. Fisher, LCSW
 Michael J. Fitzpatrick, MSW
 Marion Jan Fontanella, LCSW
 Martha G. Forbes, ACSW, MPA
 Susan R. Fort, MSSW
 Mary Jane Fox, MSW, LCSW
 E. Aracelis Francis, DSW, MSW, ACSW
 Fran K. Franklin, PhD, MSW, LCSW
 Karen L. Franklin, CMSW
 Bruce D. Friedman, PhD, ACSW,
 CSWM, LCSW
 Terrie Fritz, MSW, LCSW
 Sherry Frohman, LMSW
 T. Paul Furukawa, PhD, DCSW,
 LMSW, ACSW
 Colleen Galambos, DSW, ACSW, LCSW
 Kelly S. Ganges, MSW
 Lorrie Greenhouse Gardella, JD,
 MSW, ACSW
 Gary Gardia, PhD, MED, LCSW
 Diana R. Garland, PhD, ACSW,
 DCSW, LMSW-AP
 Sheldon R. Gelman, PhD, ACSW, MSL
 Scott Miyake Geron, PhD, MSW
 Brian Giddens, LICSW, ACSW
 Michael Gilman, LICSW, ACSW
 Leon Ginsberg, PhD, ACSW
 Robyn L. Golden, MA, LCSW,
 ACSW, DCSW
 Stephen Gorin, PhD, MSW
 Mary Pender Green, LCSW, ACSW
 Rick Greene, MSW
 Greta E. Greer, MSW, LCSW
 Thea Griffin, LMSW
 Michael Guerriere, MSW
 Julie Guevara, PhD, MSW
 Jan L. Hagen, PhD, ACSW
 Susan W. Haikalis, LCSW, ACSW,
 DCSW, QCSW
 Mary Hall, PhD, ACSW, LICSW
 Dorothy Stucky Halley, LMSW
 Vicki Hansen, LMSW-AP, ACSW
 Linda Krogh Harootyan, MSW
 Bernice Catherine Harper, PhD,
 MSC, ACSW
 Jesse Harris, DSW, ACSW, LCSW-C
 Dorothy V. Harris, ACSW, QCSW, DCSW
 Richard Harris, LICSW
 David Harvey, MSW
 Warren Hathaway, LICSW
 Wilburn Hayden Jr., PhD, ACSW,
 CMSW, CSWM
 Susan Hedlund, MSW, LCSW
 Diane Hermanson, JD, MSW
 Marc D. Herstand, MSW, CISW
 Suzanne Heurtin-Roberts, PhD, MSW
 Sam Hickman, ACSW
 Joyce A. Higashi, DCSW, LICSW
 Theresa Hilton, ACSW, LCSW, LMHP
 Stacie Hiramoto, MSW
 Dawn Hobdy, MSW, LICSW
 Kay S. Hoffman, PhD, MSW, ACSW
 Tom Hogan, MSW, ACSW
 Martha Kendall Holmes, LCSW,
 ACSW, MSW
 Gerald R. Huber, MSW, ACSW, MPH
 Edgar S. Huffman, ACSW
 Josephine Hughes, LCSW
 Grafton H. Hull, Jr., EdD, MSW, ACSW
 Nancy A. Humphreys, DSW, ACSW
 Marvin R. (Reg) Hutchinson, MSW, LISW
 Brenda Hyleman, LISW-CP&AP, ACSW,
 DCSW, QCSW
 Barbara J. Inderlin, LICSW, MSW
 Alan Ingram, JD, MSW
 Catherine Ivy, LCSW

Carla Jarvis, LSW, BSW
 Robin Jenkins, ACSW, DCSW
 Greg V. Jensen, ACSW, LISW
 Karen Jick, MSSW, LCSW, LMFT
 Mary Beth Johnson, MSW
 Chelsa Jones, LCSW
 Lauren Jones, MSW, LCSW
 Barbara Jones, PhD, MSW
 Norma (Cindy) Jones, DSW, LCSW, BCD
 Polly A. Jones, LCSW, CPHQ
 Major John Jordan, ACSW, CSWM
 Mildred Carter Joyner, MSW, LCSW, BCD
 Walter X. Kalman, MSW, LSW
 Stephen Karp, MSW
 Stuart Kaufer, LMSW, ACSW
 Charles J. Kehoe, ACSW, LCSW
 James Keresztury, MSW, MBA
 Shireen Khan
 Shanti K. Khinduka, PhD, MSW
 Mary Jo Kinzie, MSW
 Ruth Knee, ACSW
 Wynne Sandra Korr, PhD, BA
 M. Katherine Kraft, PhD, MSW
 Betty J. Kramer, PhD, MSSW
 Paul A. Kurzman, PhD, ACSW
 Avis LaGrange, MSW, LCSW, OSW-C
 Dorothy J. Landon, MSW
 Esther Jones Langston, PhD, LCSW, ACSW
 Grace H. Lebow, ACSW, LCSW-C
 Leslie Leighninger, DSW, MSW
 Joel M. Levy, DSW, MSW, MA
 Steve Lewis, PhD, MSW
 Luisa Lopez, MSW
 Philip Lucas, ACSW, LICSW
 Randy Magen, PhD, ACSW
 Maryann Mahaffey, MSW, ACSW
 Robin S. Mama, DSW
 Jill Manske, ACSW, LISW
 Peter Maramaldi, PhD, CSW, MPH
 Carol P. Marcusen, LCSW
 Elizabeth Marrero, MSW
 Jeanne C. Marsh, PhD, MSW
 Jason Mask, LCSW
 Marisa Matsudaira, LGSW
 Ruth W. Mayden, MSS, LSW
 Lakitia Mayo, BSW
 Denis McCarville, MSW
 Sharon McDonald, PhD, MSW
 Cathy McDougall, MSW
 Dorothy Roberts McEwen, MSW, LCSW
 Laura McKibbin, MSW
 Joan McMillin, ACSW, CSW
 Anna McPatter, PhD, LCSW
 Michael P. Melendez, LICSW
 Judy Mendenhall, MSW, LISW
 Susan Mewborn, MSW, LICSW
 Kym Meyer, MBA
 Mizanur R. Miah, PhD, MSW, MPH, MA
 Kenneth I. Millar, PhD, MSW
 John F. Mistrangelo, ACSW, LCSW-C
 Terry Mizrahi, PhD, MSW
 Mary Jo Monahan, LCSW, ACSW, DCSW
 Cynthia Moniz, PhD, MSW
 Linda S. Moore, PhD, ACSW
 Carmen L. Morano, PhD, MSW
 Kristine Moreno, LMSW
 Sherri Morgan, JD, MSW, LCSW-C
 David Morissette, DSW
 Colleen Murphy, LCSW, MSW
 Andrea Murray, MSW
 Rebecca S. Myers, MSW, LSW
 R. Ann Myers, MSW, ACSW
 Tymesia Nabors, MSW
 John Nasuti, DSW
 Ruth Needham, LISW, ACSW
 Lirio K. Negroni-Rodriguez, PhD, MSW
 Mary Elizabeth Nelson, MSW
 Sharon Neuwald, DPH, MHHS, BSW
 Mark Nichols, MBA
 Ann Nichols-Casebolt, PhD, MSW
 Dorothy Northrop, MSW, ACSW
 Patricia O'Donnell, DSW, LICSW,
 ACSW, DCSW
 Julianne Oktay, PhD, MSW
 Ligia M. Ortiz, MA
 Shirley Otis-Green, MSW, ACSW, LCSW
 Lavern Oxendine, MSW
 Deborah K. Padgett, PhD, MPH, MA
 Trinie Pangelinan, RSM, ACSW
 Pamela Hawkins Patton, ACSW,
 C-ASWCM,
 Wilma Peebles-Wilkins, PhD, ACSW
 Judith R. Peres, LCSW-C
 Steven E. Perkel, DSW, LCSW, ACSW
 Kim-Anne Perkins, LCSW
 Laura A. Phillips, BSW
 Dean Pierce, PhD, MSW
 Jeanne Harber Porter, MSW, LCSW, ACSW
 Tamitha R. Price, ACSW, LBSW, BSBA
 Wanda Wahnee Priddy, PhD, ACSW
 Jean K. Quam, PhD, LICSW
 Catharine J. Ralph, MSW, LCSW, PPSC
 Ginny Raymond, PhD, MSW, ACSW
 Susan M. Razbadouski, ACSW
 Jerry Reed, MSW
 Thomas A. Regulus, PhD, MSW, AM
 Debbie Reinberg, MBA
 Sally Rice, LCSW, DCSW, ACSW
 Lena C. Richardson, MSW, ACWS
 Estelle J. Richardson, LICSW, ACSW, CPM
 Jack M. Richman, PhD, MSW
 John Rife, PhD, MSW, CMSW
 Debra A. Riggs, BA
 Antonio Rodriguez, ACSW
 Mary E. Rogge, PhD
 Sunny Harris Rome, JD, MSW
 Lynn Rosenthal, BSW
 Joel L. Rubin, MSW
 Robin Russel, JD, PhD
 Andrew Safyer, PhD, MSW
 Patricia Welch Saleeby, MSSA
 Ruth Sanchez-Way, PhD, ACSW
 Janice Sandefur, ACSW, LCSW
 Adelle Sanders, DPA, MSW
 Darrin Sato, MSW, LSW, QCSW
 Robert Schachter, DSW, ACSW
 Anna Scheyett, MS, MPhil, LCSW,
 C-ASWCM
 Catheryne Schmitz, PhD, ACSW
 Joe M. Schriver, PhD, LCSW
 Marlene Schulz, MSW, CSW-PIP
 Jack R. Sellers, DSW, LCSW
 Barbara W. Shank, PhD, LICSW
 Malinda Shelor-Rogers, ACSW, LCSW
 Paula M. Sheridan, PhD, LCSW
 Debbie A. Shimizu, LSW, ACSW
 Alphonse Shropshire, MSW, LCSW-BACS
 Catherine Simonson, LICSW
 Debbie D. Simpler, ACSW, LCSW
 Sarah Sisco, MPH, MSSW
 Lacey Sloan, PhD, MSSW
 Alicia Smalley, MSW
 Barbara E. Solt, PhD, LICSW, ACSW
 Karen M. Sowers, PhD, ACSW
 Catherine Stakeman, DSW, MSW
 Carol Stambaugh, MSW, LSCSW
 Sandra H. Starks, EdD, LCSW, ACSW
 Jacqueline Steingold, CSW, ACSW
 Elaine Stepp, MSW, LSW
 Derrick Stevenson, PhD, MA, MSW, LCSW
 Andrea Stewart, DSW, MSW
 Robert P. Stewart, MSW, ACSW
 Dorothy Stratton, MSW, ACSW, LISW
 Barbara Strother, LICSW, ACSW
 Diana R. Stroud, LCSW, ACSW, DCSW
 Cynthia Stuen, PhD, DSW, ACSW
 Maria Sunukjian, CSW-R, ACSW
 Mary Ann Suppes, MSW, ACSW
 Jeanette C. Takamura, PhD, MSW
 Phillip Randall Tate, MSW, LCSW
 Joanne Cruz Tenery, MSSW, LMSW
 William J. TenHoor
 Maxine A. Thome, PhD, ACSW, MPH
 Evelyn P. Tomaszewski, MSW, ACSW
 Carol J. Trust, LICSW
 Natalie Graves Tucker, MSW
 Tim Tunner, PhD, MSW
 Charlene Turner, MSW, ACSW
 Howard M. Turney, PhD
 Sophie Tworkowski, LCSW, MPH
 Gretchel Hathaway Tyson, PhD
 Donna M. Ulteig, ACSW, DCSW
 Marijo Upshaw, BSW
 Vered Uziel, MSW, MPA
 Deborah P. Valentine, PhD, MSSW
 Dorothy J. Van Soest, DSW, MSW
 Major Richard E. Vander Weele, ACSW
 Peter B. Vaughan, PhD, MSW, ACSW
 Ann Bradford Vaughn, MSW
 Francine J. Vecchiolla, PhD, MSW
 Nicole Vennell, MSW
 Patricia J. Volland, MBA, ACSW
 Cheryl E. Waites, EdD, MSW
 Deborah Waldrop, PhD, ACSW
 Willie (Bo) Walker, LCSW, DCSW, ACSW
 Karyn Walsh, ACSW, LCSW
 Katherine Walsh, PhD, MSW
 Julia M. Watkins, PhD, MSW
 Raymie Wayne, JD, MSW

Rita A. Webb, PHD, MSW, DCSW
Sherri Weisenfluh, LCSW
Toby Weismiller, MSW, ACSW
Carmen D. Weisner, LCSW, ACSW
Joan O. Weiss, ACSW, LICSW
Joan C. Weiss, MSW, LCSW-C
Sky Westerlund, LMSW
Darrell P. Wheeler, PhD, MPH, ACSW
Camille Wheeler, ACSW, LCSW
Tracy Whitaker, MSW, ACSW

Howard A. White, EdD, ACSW,
QCSW, DCSW
Barbara W. White, PhD, ACSW
Deborah M. Whitley, PhD, MPH
Melvin Wilson, LCSW-C, MBA
Marcie Wilson, MA
James L. Wolk, DSW, MSW, MPA
Janlee Wong, MSW
Debby Wood, MSW, ACSW
L. Annette Woodruff, LCSW

Lisa Yagoda, LICSW, ACSW
Leina Yamamoto, BSW
Laurie Young, PhD
Elise S.Y. Young, MSW, ACSW
James R. Zabora, ScD, MSW
Dina L. Zarella, MSS, MLSP
Brad Zebrack, PhD, MSW, MPH
Joan Levy Zlotnik, PhD, ACSW



2005 | **Social Work Congress**
A Coming Together of the Profession

www.socialworkers.org/Congress