A Message from the Field Office

Happy New Year and welcome to the Spring 2015 semester! We are excited for our students to get back in the field. For some students it will be the beginning of their field experience and for others this marks their final semester as interns. Either way, we couldn’t have gotten to this point without our field instructors and faculty preparing students for the field of social work.

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***SAVE THE DATE***

BSW Field Fair Main Campus
When: January 30th; 9-11:30am
Where: Warwick Center
(Parking will be provided for field instructors)

BSW Field Fair Onslow Campus
When: February 9th; 3-5pm
Where: Senior Services Building

MSW Learning Contract Workshop
When: February 2nd, 9:00-11:00am
Where: Main Campus, McNeill Hall Room 1051
(Parking Vouchers will be provided for field instructors)

**Free Ethics CEU’s**
“When in Doubt, Be Human. The Ethics of the Therapeutic Relationship”
When: March 18th, 8:30am-12:45pm
Where: Main Campus, McNeill Hall Room 1051

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News from the Field

Chrysalis Center – Offering a Couples Enrichment Workshop (Part I Feb. 14th & Part II March 14th)

Carousel Center – The Center is now an accredited CAC!

Rape Crisis Center of Coastal Horizons Center, Inc.– Volunteer Training begins Feb. 4th 6-8pm

If your agency has any updates or news to share in our Newsletter, please email duganl@uncw.edu.
**Trending in the Field: Working with Juvenile Sex Offenders**

An interview with Field Instructor Ricky Garmon, LCSW, JSOCP (pictured on left) about his work with juvenile sex offenders. Mr. Garmon is the Director of Children’s Services at A Helping Hand in Wilmington.

**How did you gain interest in this field of social work and what type of interventions do you currently practice with this population?**

While completing my undergraduate, I began working in a psychiatric hospital that had a specialized treatment unit for adolescent sexual offenders. This was my first experience working with the population. Throughout the years, I have worked with juvenile sexual offenders in a variety of capacities from care management to group and individual therapy. I currently offer treatment for juvenile sexual offenders through my practice at A Helping Hand of Wilmington. The treatment modalities incorporate tenets from Cognitive Behavioral Therapy, Trauma-Focused Cognitive Behavioral Therapy, and Motivational Interviewing utilizing the evidence-based Pathways treatment model.

**What type of training do you receive for working with juvenile Sex offenders?**

I received my Juvenile Sexual Offender Counselor Certification Program (JSOCCP) certificate from the Kent School of Social Work at the University of Louisville.

**How do you deal with the stigma associated with this population and how they viewed in the community?**

I attempt to counteract the negative and inaccurate stigmas attached to this population by providing education clarifying the misconceptions that are ingrained into society by the mass media. The overwhelming majority of adolescents who commit sexual offenses are survivors of trauma and abuse. Without intervention, the cycle of abuse continues. Not to sound cliché, but knowledge is power and treatment is essential.

**What is the need for professionals in this field here in Wilmington area?**

I would encourage professionals to familiarize themselves with current treatment modalities and services available within the community.

*For more information on treatment for Juvenile Sexual Offenders you can contact Ricky Garmon at A Healing Hand of Wilmington at 910-796-6868.*
“It’s been really awesome being able to see how art touches people in different ways. Sometimes it allows expression that is too painful to first put into words.”

~Regan Springs, BSW '15

Spotlight: BSW Student Regan Springs

In this issue, the spotlight is on Regan Springs. Ms. Springs is currently a BSW senior and is doing her field work at Chrysalis Center. She is currently involved in Directed Independent Study where she has developed the Art Expression Group and is taking it out to local agencies providing art therapy.

How did you get interested in social work? When I first came into college I wanted to go into art therapy after I graduated, so I was originally majoring in Art and Psychology. I took child abuse and neglect the summer before my sophomore year, and realized that I wanted to change my major to Social Work. I am now a double major in Social Work and Art with a minor in Psychology.

How did you get involved in the project and what has been the most interesting part of your experience thus far? I have always been fascinated with the idea of using art in therapy. I love the way art allows self-expression and helps release emotions. Last year, I was talking to Angie Vandenberg about possibly doing a DIS on art therapy because I wanted to explore the combination/relationship of my two majors. Angie kind of left it to me to figure out what the DIS was going to look like, and the more I thought about it the more I wanted to be a part of the community and team up with different agencies within the community. I started by reading lot of books on art activities used within the realm of therapy and how different art groups are lead. The next step I took was compiling a list of agencies that I was semi-familiar with or I knew other students who were interning there. It’s been a little difficult scheduling the actual group sessions, but I have already completed one and done various art activities with my group at Chrysalis. I also have another group scheduled for February 20th. I’ve thought about doing one with students in the department to teach them an activity or two that they could do with their clients.

What has been the feedback from the agencies/clients you have visited? My first group was received very well. The group was small and we did an exercise on transformation and change. The activity started off with having the group decorate a large piece of paper with paint, watercolor, crayons, and other supplies. I explained that we were going to be cutting our pictures into small pieces then rearranging them in a new way on a different piece of paper. I asked how people felt about change while we were cutting the pieces up. Are you comfortable or uncomfortable with change? How do you deal with change? What is it like cutting up a piece that we had just spent time on creating? How is it similar to change that you experience in your own life? It was really amazing to see how the client connected with the activity and shared different stories in her past and how she has changed since, but that it had been a difficult journey. At one point she teared up explaining that she hated change. At the end after all the pieces were cut up and glued back together, we talked about how it felt seeing the pieces that originally made the first one put into a new order, “Just because it’s different, doesn’t mean it’s any less beautiful. It’s just not the same as it was before the change occurred.”
Hello and welcome to my little corner of the supervision world! In this issue of Chris’s Corner, I will talk about “Deviled Eggs and Supervision”:

When I was young, for an hour each summer I would find myself in a hot, cigarette smoke-filled car being driven reluctantly by my parents to our family reunion. Held in mid-July under some woefully inadequate shade of a humid Kentucky park, amid the myriad of family members I didn’t know, the one constant, the one thing I could count on was the centerpiece of the party, the buffet.

A 10-yard spread of picnic tables placed end-to-end and filled with food in pale-colored Tupperware lovingly protected by sheets of plastic and aluminum. The annual coup de grace of this culinary delight was my grandmother’s deviled eggs.

Her deviled eggs, I was told proudly each year, were made from a recipe passed down from generation to generation, originating from what I as a kid came to imagine being the family cave where my ancestors hid from dinosaurs.

Now the real problem for me was this: I hated deviled eggs!

No matter how good the recipe, no matter where it came from, or how many times it was made, or how well she followed the recipe, or how much they helped me run from dinosaurs, I didn’t like them.

In clinical practice we can experience the same situation, minus the Tupperware, of course. We are trained as clinicians to use models of practice. Models of practice are like recipes passed down from the ancestors. It is easy for us to fall into the trap of assuming that if we do the recipe exactly as told that we are thusly to be deemed good counselors.

I invite you this month to consider whether therapeutic mastery should be measured by how well a student or clinician follows a model of practice (the recipe) or if it could be measured in other ways? Perhaps one of those ways could be whether each individual client likes what is occurring in sessions and is in fact improving?

There will be times when the recipe matches the client and positive outcomes may result, but the measure of success is still with the client not the recipe. In clinical practice perhaps it should not be assumed that the client will like the recipe? Perhaps we could consider not giving the recipe precedence over client taste? My grandma made great deviled-eggs from an important family recipe, but, to me, no matter how hard I tried, they were horrible.

Placing client preferences ahead of recipes means that as supervisors our attention could be focused on helping supervisees become flexible and open to receiving feedback from clients about their individual practices and the recipes/models they are using. From this perspective, therapeutic success, and whether one is a good counselor, is a measurement in collaboration with each individual client rather than how well one can replicate a recipe in session.