

Press Release

Contact:

Robert Booth, executive director
abe@abecsw.org

National Center for Clinical Social Work Is Formed

(Feb. 28, 2007, Salem, MA—) The ***Center for Clinical Social Work, Inc.***, a 501c(3) not-for-profit membership organization, as been founded to represent the nation’s 200,000 clinical social workers, who constitute the largest mental-health profession in the United States, according to Joyce Cunningham, MSW, BCD, of Hollidaysburg, PA, president of the board of directors.

The Center is intended to be a unifying force amid the diversity and dynamism of the profession. “We founded the Center to serve the profession as its national organization,” stated Cunningham. “The Center is for all clinical social workers, in any phase of professional development, in any practice setting, under any job title. Its sole focus is clinical social work, uncoupled from other forms of social work.” The Center’s education, advocacy, and other activities are conducted by a full-time staff with offices in Salem, MA, Washington, DC, and Sonoma, CA.

The Center’s 16-person board of directors consists of direct-practice clinical social workers, administrators, organization executives, academics, and lobbyists, from all regions of the country. It is advised by its affiliate organizations, the California Clinical Social Work Society, the Louisiana Clinical Social Work Association, the New York State Clinical Social Work Society, and the Ohio River Valley Clinical Social Work Society. Any organization or institution that supports the Center’s mission may become a member or affiliate of its National Leadership Council.

The Center has four operating units, whose purposes are as follows.

1. Credentialing, board-certification, standard-setting
2. Advocating for practitioners and clients
3. Addressing issues in education, research, and training
4. Collaborating with other organizations

The Center promotes clinical social work as a profession that is clearly defined in terms of rights, standards, and competencies. “The Center arose from our concern about professional standards,” said Cunningham. “For years, our credentialing board, the American Board of Examiners in Clinical Social Work (ABE), set standards and published position statements, but found there was inadequate commitment to clinical curricula in the graduate schools, to clinical supervision within the agencies, to uniformity in the state laws by which clinicians are licensed. We felt that those areas needed to be addressed, and that other organizations were pursuing a different agenda. We conducted market research that confirmed our suspicions. Many clinical social workers are losing their professional identity and are hungry for a strong national organization—one that can set standards, represent their interests, and raise the standing of the profession. We could not do that through ABE alone, although ABE remains a critical element of the Center.”

The Center’s standards-driven programs include the development of national models in critical areas of clinical social work: state laws, curricula for graduate schools, practice specialties, professional development, healthcare delivery, and federal policies, laws, and funding. “A profession should not

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have to continuously defend or explain itself, case by case, state by state,” said Cunningham. “Our ABE unit has done that for years—intervening in court cases, with insurance companies, and with state and federal regulators. It is usually about the same issue: Do clinical social workers have the right to do what they are educated and trained to do? To us, the answer is clear, but it needs to be clear to everyone: the profession must exist at the national level, with a uniform set of standards and clear recognition of what clinical social workers do. Psychologists do not have this problem, and neither should we. Clinical social workers’ professional standing should not be subject to local interpretation, or to confusion with other forms of social work, or to large variations from state to state. Right now, there is a lot of confusion about the profession of clinical social work. Our first job is to make clinical social work and its value and importance understood to all major constituencies.”

To begin raising the profession’s level of recognition, the Center has developed a set of position statements, to be backed by advocacy. The Center’s new ***National Bill of Rights for Clinical Social Workers*** identifies the rights of clinical social workers in all practice settings and throughout the professional life-cycle, from graduate student to advanced practitioner. “The Bill of Rights is both a statement of principles and an offer to the members of the profession to ask themselves whether they and their clients are being treated with the respect they deserve—and to join us and work with us if they are not,” said Cunningham. The Center has also recently published the *Description of Clinical Social Work*, a statement on *The Advanced Clinical Social Worker*, and a brief *Definition of Clinical Social Work*.

The Center’s ABE unit has published detailed position statements. *Professional Development and Practice Competencies* describes the characteristics of preparation and practice for entry-level, intermediate, and advanced levels of clinical social work practice. *Clinical Social Work Standards for Delivery of Care and Guidelines for the Three-party Model of Clinical Social Work Services* sets standards for the delivery of competent care and describes the rights and responsibilities of all parties involved in the provision of care. The Center has published *The Practice of Psychoanalysis: A Specialty of Clinical Social Work* and ABE offers a specialty credential in the Clinical Social Work Practice of Psychoanalysis. The Center’s *Clinical Supervision* position statement has been endorsed by the national healthcare policy-maker The Annapolis Coalition, and will soon be complemented by a national credential in the Specialty Practice of Clinical Supervision by Clinical Social Workers. In the very near future, the Center will publish its position statement on *Clinical Social Work Practice with Children and their Families* and offer a national specialty credential in that area of practice. At the same time, it continues to offer the national advanced generalist certification, the Board Certified Diplomate in Clinical Social Work (BCD).

“The Center is a much-needed alternative to the fragmentation and confusion that have prevailed in our profession,” stated Cunningham. “Other organizations have not been successful in addressing these issues. Clinical social workers and their clients deserve an effective national organization, which really will serve as the voice of the profession, guardian of its values, and champion of its rights. That’s our mission. We’ve commissioned the market research. We have filed the court briefs and done the interventions. We have set the standards and drafted the position statements. We have a program. We have presented to the Child Welfare League of America, the Institute of Medicine, the Blue Cross Blue Shield Association, the federal Office of Personnel Management—no one else has done this solely for clinical social work. We have created the credentials that attest to professionalism, and we are developing the national models that need to be implemented. We are not waiting for others to approve of what we are doing—we have a national agenda, and we are moving forward with it, and pushing into every area in which clinical social work has been ignored, hijacked, maligned, or misunderstood. We believe that if we do this effectively, clinical social workers will support us.”