

## **2024 AOSW Virtual Annual Conference**

### **Abstract Book**

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**Title: Oncology Social Work 101: Growing Your Professional Self and Your Programs**

**Date:** 5/20/2024

**Time (ET):** 10:00:00 AM - 2:20:00 PM

**Presentation Type:** Pre-Conference Workshop

**Speaker(s):** Catherine Credeur, LMSW, OSW-C, FAOSW; Carolyn Messner, DSW, BCD, FNAP, FAPOS, FAOSW, LCSW-R; Alison Sachs, MSW, LSW, OSW-C, FAOSW; Wendy Kimbley, MSSW, LCSW, OSW-C; Diana DiCesare, LMSW

**Abstract Summary:**

This skill building, four hour intensive workshop is an orientation to the field of psychosocial oncology and oncology social work career development. The target audience for this session are oncology social workers with three years or less in this niche field. Participants may be new graduates or practitioners shifting from another area of social work. The goals for this session are to provide a brief introduction to current trends and significant tasks in oncology social work, connect with oncology social workers in similar areas of practice for ongoing networking, and identify opportunities for self-care and career growth. Special attention will be given to working with underserved populations and the transference of prior experience and skills into oncology social work.

Concrete concerns for oncology social work practice including implications of payment models of care for psychosocial support and barriers to treatment, distress screening and safety planning, working with diverse populations, and collaborative problem solving with interdisciplinary teams will be discussed. Participants will form small group networking connections that can be sustained for ongoing post-conference resource sharing and collegial support.

**Learning Objectives:**

1. Recognize the history of oncology social work in diverse settings and anticipate potential career paths.
2. Identify the importance of use of self, self-care, and the development of a professional skill set, network, and mentorship in growth as oncology social worker and develop a personal plan for ongoing collegial connection and self care.
3. Interpret the influence of models of care and payment structures; specifically, patient-and-family-centered care and values-based care, on the practice of oncology social work.
4. Examine current research on issues of prime concern in oncology social work, including distress screening and suicide assessments with patients in the context of oncology treatment and advanced illness.
5. Formulate methods of intervention with diverse populations coping with cancer along the continuum of care.
6. Apply social work ethics and assessments to case examples and prepare a case presentation that speaks to the concerns and language used by interdisciplinary oncology care teams.

**Keywords:** Clinical Practice/Skill Building, Professional Issues

**Educational Level:** Beginning

**Course Designation:** Clinical (General)

**CE Credit:** 4.0

**BOSWC Domain:** 1, 2-6

**References:**

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- Hartung, T. J., Friedrich, M., Johansen, C., Wittchen, H.-U., Faller, H., Koch, U., ... Mehnert, A. (2017). The Hospital Anxiety and Depression Scale (HADS) and 9-item Patient Health Questionnaire (PHQ-9) as screening instruments for depression in patients with cancer. *Cancer*, 123(21), 4236–4243. doi: 10.1002/cncr.30846

**Title:** Hypnosis for Cancer Pain

**Date:** 5/20/2024

**Time (ET):** 10:00:00 AM - 6:00:00 PM

**Presentation Type:** Pre-Conference Workshop

**Speaker(s):** Guy H. Montgomery, PhD; Joseph P. Green, PhD; Julie B. Schnur, PhD

**Abstract Summary:**

Participants will delve into the profound realm of hypnosis as a tool for managing cancer pain. Guided by expert facilitators, attendees will learn the intricacies of incorporating the debunking formula components into their responses to patient inquiries, fostering trust and understanding. The webinar will address practical issues surrounding hypnosis delivery in the real world, equipping participants with the knowledge and strategies needed to overcome barriers and optimize patient outcomes.

**Learning Objectives:**

1. Understand how to incorporate the debunking formula components into an effective response to patient questions.
2. Demonstrate the ability to deliver a standardized hypnosis script in a relaxing, "hypnotic" manner.
3. Demonstrate the ability to develop at least three unique pain suggestions.

**Keywords:**

**Educational Level:** Advanced

**Course Designation:** Clinical (General)

**CE Credit:** n/a\*

**BOSWC Domain:** 1

*\* (CE credit for this pre-conference workshop will be provided by [hypnosis-for-cancer-pain.com](http://hypnosis-for-cancer-pain.com) of the Ichan School of Medicine at Mount Sinai)*

**References:**

**Title: Advancing Clinical and Leadership Skills with ESPEC: Educating Social Workers in Palliative and End-of-Life Care**

**Date:** 5/20/2024

**Time (ET):** 3:30:00 PM - 7:50:00 PM

**Presentation Type:** Pre-Conference Workshop

**Speaker(s):** Tara Schapmire, PhD, MSSW, OSW-C, FAOSW; Myra Glajchen, DSW, MSW, BSW, ACSW, APHSW-C; Shirley Otis-Green, MSW, MA, ACSW, LCSW, OSW-CE, FNAP, FAOSW; Sarah Conning, MSW, LCSW; Leora Lowenthal, LICSW, OSW-C, MPA, FAOSW ; Linda Mathew, DSW, MSW, LCSW-R

**Abstract Summary:**

Integrating the core principles of palliative care into oncology practice results in improved quality of life for seriously ill patients and their caregivers. Educating Social Workers in Palliative and End-of-Life Care (ESPEC) is an evidence-informed training program developed by social workers for social workers to improve competence in core palliative social work skills. This presentation will provide highlights from the larger ESPEC training with consideration for the context of oncology social work. Using the National Consensus Project Guidelines for Quality Palliative Care as a framework, presenters will review the domains of palliative care and demonstrate how palliative care principles can be integrated into best oncology social work clinical, teamwork, and professional development practices. Advanced clinical skills in the biopsychosocial-spiritual assessment, the family meeting, advance care planning, and interprofessional communication, advocacy, and leadership will be discussed, and innovative ESPEC Best Practice Guides will be shared. With the use of interactive exercises and action planning, participants will be challenged to consider where they have continued learning opportunities and how they may use palliative care training to enhance their practice, professional development, and leadership skills.

ESPEC seeks to enhance confidence and competence of participants to better prepare them for increased leadership roles within their healthcare teams through advocacy, cultural awareness, and promotion of an anti-racist, health equity lens for oncology social workers in any setting. While this is an abbreviated version offering ESPEC highlights, attendees will have opportunities for the full ESPEC training.

**Learning Objectives:**

1. Identify the eight domains of palliative care developed by the National Consensus Project Guidelines for Quality Palliative Care and use them as a framework for best oncology social work practice.
2. Identify knowledge and skills in palliative care to enhance clinical work with oncology patients, caregivers and colleagues using the ESPEC training program.
3. Identify strategies to use ESPEC training to increase leadership, advocacy and health equity as an oncology social worker.

**Keywords:** Clinical Practice/Skill Building, Pain, Palliative Care and End of Life

**Educational Level:** Advanced

**Course Designation:** Clinical (General)

**CE Credit:** 4.0

**BOSWC Domain:** 1, 2-6

**References:**

1. Glajchen, M., Berkman, C., Otis-Green, S., Stein, G. L., Sedgwick, T., Bern-Klug, M., Christ, G., Csikai, E., Downes, D., Gerbino, S., Head, B., Parker-Oliver, D., Waldrop, D., & Portenoy, R. K. (2018). Defining Core

Competencies for Generalist-Level Palliative Social Work. *Journal of pain and symptom management*, 56(6), 886–892. <https://doi.org/10.1016/j.jpainsymman.2018.09.002>.

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4. Schapmire, T. J., Bell, J., & Pfeifer, M. P. (2020). The Improved Health Outcomes Program (iHOP): A Unique Model to Promote Provider-Driven Research in a Medicaid Population. *International journal of environmental research and public health*, 17(14), 5079. <https://doi.org/10.3390/ijerph17145079>
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6. Schapmire, T. J., Head, B. A., Furman, C. D., Jones, C., Peters, B., Shaw, M. A., Woggon, F., Ziegler, C., & Pfeifer, M. P. (2021). The Interprofessional Education Exchange: The Impact of a Faculty Development Program in Interprofessional Palliative Oncology Education on Trainee Competencies, Skills, and Satisfaction. *Palliative medicine reports*, 2(1), 296–304. <https://doi.org/10.1089/pmr.2021.0045>

**Title: Opening Keynote: Hindsight, Hope, and Humor: Thriving as an Oncology Social Worker**

**Date:** 5/21/2024

**Time (ET):** 10:45:00 AM - 11:45:00 AM

**Presentation Type:** General Session

**Speaker(s):** Kathryn Smolinski, MSW, JD, FAOSW

**Abstract Summary:**

When we glance backwards into the past, it can help us to focus on the present and hope for the future. Thriving as an oncology social worker, not just “doing the work” but doing it with passion, joy, vision, and grace does not happen by chance. We have the gift of learning from each other and those we serve - our best teachers. Our openness to learn allows us to understand oncology social work’s impact in advocating for social justice, providing compassionate care, and leading others to improved health outcomes. We must be willing to adapt, challenge ourselves, and take care of ourselves.

Through lecture, metaphor, case examples and personal reflections, this presentation is designed to inspire by reminding us of the true gifts oncology social workers bring to all those lucky enough to work with us.

**Learning Objectives:**

1. Describe the value of self reflection and ability to adapt as key concepts in career longevity.
2. Identify at least three goals of medical-legal partnerships, and their ability to help social workers affect health outcomes.
3. Identify three ways that being part of AOSW can enhance career performance and the ability to laugh along the way.

**Keywords:** Advocacy, Leadership/Administration

**Educational Level:** Beginning

**Course Designation:** Clinical (General)

**CE Credit:** 1.0

**BOSWC Domain:** 2-6

**References:**

**Title:** Keeping a Seat at The Table: Harnessing Leadership to Highlight the Value of Oncology Social Work

**Date:** 5/21/2024

**Time (ET):** 12:00:00 PM - 1:00:00 PM

**Presentation Type:** Paper

**Speaker(s):** Kaelynn Eaton, MSW, LCSW, OSW-C

## Abstract Summary:

Social work has been at the forefront of addressing social determinants of health (SDOH) since the early 1900's. With SDOH coming into focus as an important aspect of health care, it is an ideal time for oncology social workers to highlight their leadership skills. This interactive presentation will focus on the influence oncology social work has had on addressing patient's SDOH and how this places them in positions of leadership within their teams and institutions. The participants will explore the barriers they face when taking on leadership roles as well as strategies that can be implemented to help pave the way for leadership opportunities. Participants will have a chance to engage in an open dialogue about oncology social work leadership within their institutions and ways in which social work can be recognized as leaders for the work we have already been doing and the work that still needs to be done.

## Learning Objectives:

1. Describe the influence oncology social work has on addressing SDOH.
2. Identify and discuss the difficulties oncology social workers face with attaining leadership in healthcare.
3. Recognize opportunities for leadership within their institutions.

**Keywords:** Leadership/Administration, Professional Issues

**Educational Level:** Intermediate

**Course Designation:** Clinical (General)

**CE Credit:** 1.0

**BOSWC Domain:** 2-6

## References:

- Abrams, E. M., & Szeffler, S. J. (2020). COVID-19 and the impact of social determinants of health. *The Lancet Respiratory Medicine*, 8(7), 659-661. [https://doi.org/10.1016/S2213-2600\(20\)30234-4](https://doi.org/10.1016/S2213-2600(20)30234-4)
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synthesis of core leadership practices. *Journal of Social Work Practice*, 34(3), 263-279.  
<https://doi.org/10.1080/02650533.2019.1665002>

**Title: On Moral Resilience: Kintsugi-healing Brokenness with Gold**

**Date:** 5/21/2024

**Time (ET):** 12:00:00 PM - 1:00:00 PM

**Presentation Type:** Paper

**Speaker(s):** Susan Hedlund, MSW, LCSW, FAOSW

### **Abstract Summary:**

Kintsugi is the Japanese art of putting broken pottery pieces back together with lacquer that is dusted with gold, a metaphor for embracing our flaws and imperfections. Rather than hiding the flaws, they become beautiful. It is a reminder to stay optimistic when things fall apart and to celebrate our missteps in life. It teaches us about accepting fragility, building strength, and taking pride in the imperfect. There is grief, sadness, and a reexamination of identity and what we hold to be true. The "lacquer" that holds us together includes our sense of purpose, social connections and social networks, and healthy stress management.

Much attention has been paid in health care in recent times to the experience of distress in the workplace. Among the concepts are burnout, compassion fatigue, and moral distress, and if left unchecked, can lead to "moral injury". These challenges can make health care providers feel depleted and exhausted, and can lead to a sense of personal failure.

The intention of this presentation is to consider the impact of clinical work on oncology professionals, and to understand the concepts of moral distress, moral injury, and compassion fatigue. Additionally, understanding the "brokenness" of the current healthcare system and to consider innovative ideas to create change as a way of building "system resilience" in addition to resilience in the workforce will be presented. Social workers are uniquely positioned to lead many of the strategies for change and to address overall wellness in ourselves and our systems.

### **Learning Objectives:**

1. Define moral distress, compassion fatigue, moral injury, and moral resilience.
2. Examine structural issues in health care systems that lead to moral distress in the workforce as well as the systems themselves.
3. Identify creative solutions to build resilience and strategic change in health systems.

**Keywords:** Professional Issues, Self Care

**Educational Level:** Advanced

**Course Designation:** Clinical (General)

**CE Credit:** 1.0

**BOSWC Domain:** 2-6

### **References:**

1. Trzeciak, S. & Mazzairelli, A.; Compassionomics: The Revolutionary Scientific Evidence that Caring Makes a Difference; Florida, Studer Group, 2019
2. Rushton, C.H.; Moral Resilience: Transforming Moral Suffering in Healthcare; New York; Oxford; 2018
3. Shmerling, R.H.; Is Our Healthcare System Broken? ; Boston, MA.; Harvard Health Publishing, July 13, 2021;

4. Tilenius, S. ; 5 Things the US Government Can Do To Fix Our Broken Healthcare System; MedCity News; Nov. 23, 2021
5. Berwick, D.M & Williams, M. American HealthCare is Broke. Major Hospitals Need to Be Part of the Solution; Time Magazine;<https://time.com/6281957/american-health-care-is-broken-major-hospitals-solution/>

**Title: The Art of Treading Gently: Facilitating Advance Care Planning Conversations with Japanese American Patients and Families****Date:** 5/21/2024**Time (ET):** 12:00:00 PM - 1:00:00 PM**Presentation Type:** Paper**Speaker(s):** Sarah Low, RN, MSN, OCN, CMSRN; Ayaka Nakaji, MSW, LCSW, CCM**Abstract Summary:**

While Asian Americans are projected to be the fastest growing ethnic minority in the United States, a paucity of research exists for communities within this population, and even more so within individualized Asian American ethnic communities such as Japanese Americans. Understanding the diverse needs of Japanese Americans in advance care planning discussions has real life implications on quality of care received, costs, and psychosocial well-being of patients and families. A systematic review was conducted through EBSCOhost, Pubmed, Google Scholar with keywords "Japanese-American," "End-of-Life," "Advance Directive," "Hospice," "Advance Care Planning," and "Goals of Care," within the last 20 years. Several themes emerged in the literature such as an existing gap between the expressed EOL preferences of JA elders and the actual care received, the impact of acculturation on EOL preferences, desire for indirect communication, family's concern that engaging in ACP conversations would be unfilial, and the Western view of self-advocacy clashing with some Japanese values. Authors have considered recommendations for clinicians to consider in relation to these themes to better help clinicians care for JA at the EOL.

**Learning Objectives:**

1. Discuss the gaps between expressed end-of-life care preferences and the actual end-of-life care received for older Japanese Americans.
2. Explain the ways acculturation levels may affect Japanese American end-of-life preferences.
3. Describe three ways health care providers can provide culturally sensitive care to Japanese American patients during advance care planning discussions.

**Keywords:** Pain, Palliative Care and End of Life,**Educational Level:** Beginning**Course Designation:** Cultural Competency**CE Credit:** 1.0**BOSWC Domain:** 1, 2-6**References:**

Bell, C. L., Davis, J., Harrigan, R. C., Somogyi-Zalud, E., Tanabe, M. K., & Masaki, K. H. (2009). Factors associated with place of death for elderly Japanese-American men: the Honolulu Heart Program and Honolulu-Asia Aging Study. *Journal of the American Geriatrics Society*, 57(4), 714–718. <https://doi.org/10.1111/j.1532-5415.2008.02149.x>

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Cheng, S. Y., Lin, C. P., Chan, H. Y., Martina, D., Mori, M., Kim, S. H., & Ng, R. (2020). Advance care planning in Asian culture. *Japanese journal of clinical oncology*, 50(9), 976–989. <https://doi.org/10.1093/jjco/hyaa131>

Ekberg, S., Parry, R., Land, V., Ekberg, K., Pino, M., Antaki, C., Jenkins, L., & Whittaker, B. (2021). Communicating with patients and families about illness progression and end of life: a review of studies using direct observation of clinical practice. *BMC palliative care*, 20(1), 186. <https://doi.org/10.1186/s12904-021-00876-2>

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Mori, M., Kuwama, Y., Ashikaga, T., Parsons, H. A., & Miyashita, M. (2018). Acculturation and Perceptions of a Good Death Among Japanese Americans and Japanese Living in the U.S. *Journal of pain and symptom management*, 55(1), 31–38. <https://doi.org/10.1016/j.jpainsymman.2017.08.010>

Nakao-Hayashizaka K. C. (2022). End-of-Life Preparedness Among Japanese Americans: A Community Survey. *Journal of social work in end-of-life & palliative care*, 18(3), 216–234. <https://doi.org/10.1080/15524256.2022.2093312>

Ngo-Metzger, Q., Phillips, R. S., & McCarthy, E. P. (2008). Ethnic disparities in hospice use among Asian-American and Pacific Islander patients dying with cancer. *Journal of the American Geriatrics Society*, 56(1), 139–144. <https://doi.org/10.1111/j.1532-5415.2007.01510.x>

**Title: Treating Low Sexual Desire After a Cancer Diagnosis**

**Date:** 5/21/2024

**Time (ET):** 12:00:00 PM - 1:00:00 PM

**Presentation Type:** Paper

**Speaker(s):** Lauren Broschak, MSW, LCSW, OSW-C; Jennifer Bires, MSW, LCSW, OSW-C, CST

**Abstract Summary:**

Sexual health is an important aspect of overall quality of life, and sexual adjustment problems are among the most prevalent long-term complications of cancer and cancer treatments in adults. A range of 40 to 100% of people who have been diagnosed with cancer experience sexual dysfunction, and research shows that all types of oncology treatments have the potential of impacting sexual health. One of the factors that is most commonly reported to be affected by cancer treatments is sexual desire. Sexual desire is a complex and multifaceted experience, impacted by several factors such as body image, self-schema, relationship dynamics, physical well-being, physiological changes, mental health, etc. The psychosocial impacts of low sexual desire can include increased distress, diminished body image and self-esteem, decreased relational and sexual intimacy, and reduced quality of life. Despite sexual health, and specifically sexual desire, being commonly reported and greatly impacted by a cancer diagnosis and treatment, sexuality is not often or adequately discussed throughout the cancer treatment process or into survivorship. Oncology social workers' perspectives of person in environment theory, systems theory, and relational ecology along with psycho-oncology knowledge and experience are perfectly placed to support and treat low sexual desire after a cancer diagnosis.

In this presentation, we will review the complex nature of sexual desire, the impacts and implications of reduced sexual desire after a cancer diagnosis, and treatment modalities that oncology social workers can utilize when engaging with patients experiencing reduced sexual desire.

**Learning Objectives:**

1. List at least three contributing factors of sexual desire.
2. Describe at least three ways cancer and its treatments impact sexual desire.
3. Utilize at least two treatment modalities when working with patients experiencing low sexual desire.

**Keywords:** Clinical Practice/Skill Building, Survivorship

**Educational Level:** Intermediate

**Course Designation:** Clinical (General)

**CE Credit:** 1.0

**BOSWC Domain:** 1

**References:**

- Bluming, A. Z., & Tavris, C. A. (2022, April 20). Treatment of Low Sexual Desire in Female Cancer Survivors. *Journal of Clinical Oncology*, 40(12), 1388. <https://doi.org/10.1200/JCO.22.00067>
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Serrano, A. (2023, August 11). Overview of Sexual Dysfunction in Patients with Cancer. *Clinical and Translational Oncology*, 1-9. <https://doi.org/10.1007/s12094-023-03311-5>

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**Title: Interventions to Mitigate Financial Toxicity**

**Date:** 5/21/2024

**Time (ET):** 2:00:00 PM - 5:15:00 PM

**Presentation Type:** Clinical Practice Intensive

**Speaker(s):** Joanna Doran, Esq.

**Abstract Summary:**

Oncology social workers are called upon to educate patients and help them navigate insurance and employment issues throughout the continuum of care. At a minimum, patients are posing these questions to their social workers. These are topics not often covered in traditional social work educational programs. And, many social workers are required to learn "on the job." This training will improve the knowledge of both new and experienced social workers by providing key tips and best practices for navigating these systems.

This session will provide information and practical tools to aid patients in understanding insurance and employment options to mitigate the potential financial toxicity of a cancer diagnosis and improve quality of life. Topics covered will include understanding health insurance options and consumer protections related to private insurance, Medicaid, and Medicare; as well as tips for effectively navigating insurance coverage, denials, and appeals. This workshop will also explore the interaction between the FMLA, ADA, and different types of disability insurance, and cover wage-replacement options for caregivers.

Through exercises and case studies attendees will be able to help patients understand how to pick the most effective health insurance plan, identify accommodations, and explain the timing of SSDI and Medicare benefits. Oncology social workers who attend this training will walk away with key information to be uniquely positioned to provide this information to patients, not only potentially mitigating their financial burden, but improving their quality of life and their patient satisfaction.

**Learning Objectives:**

1. Outline factors to consider whenever choosing between health insurance options, to lower out-of-pocket costs and mitigate the potential financial burden of a cancer diagnosis.
2. Explain how the ADA, FMLA, and disability insurance can help patients manage work and cancer.
3. Summarize key issues in the interaction of disability benefits with health insurance coverage and employment laws.

**Keywords:** Financial Toxicity, Patient Navigation

**Educational Level:** Beginning

**Course Designation:** Clinical (General)

**CE Credit:** 3.0

**BOSWC Domain:** 1,2-6

**References:**

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**Title:** Intimate Partner Violence and Cancer

**Date:** 5/21/2024

**Time (ET):** 2:00:00 PM - 3:30:00 PM

**Presentation Type:** Learning Institute

**Speaker(s):** Debora Newton, DSW, LCSW-S, OSW-C

## Abstract Summary:

This didactic and interactive presentation will focus on understanding intimate partner violence (IPV), its complexities, and how it impacts patients with cancer. This presentation will be structured in three parts: 1) An introduction to intimate partner violence and how it can exacerbate prior issues and create other issues for patients with cancer, 2) Screening patients and assisting patients in developing a safety plan while considering ethical and cultural issues, and 3) Discussion of available resources to expand oncology social work knowledge about IPV and to incorporate IPV screening in oncology social work practice.

## Learning Objectives:

1. Discuss intimate partner violence, its complexities, and how it intersects with patients who have cancer.
2. Screen patients with cancer for intimate partner violence and how to assist with developing a safety planning while considering ethical and cultural issues.
3. Utilize available resources to expand their knowledge and incorporate intimate partner violence screening in their practice.

**Keywords:** Clinical Practice/Skill Building, Ethics

**Educational Level:** Intermediate

**Course Designation:** Ethics

**CE Credit:** 1.5

**BOSWC Domain:** 1, 2-6

## References:

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**Title: How Oncology Social Workers Can Implement New National Guidelines: Integrative Approaches to the Management of Anxiety and Depression Symptoms**

**Date:** 5/21/2024

**Time (ET):** 3:45:00 PM - 5:15:00 PM

**Presentation Type:** Learning Institute

**Speaker(s):** Erin Price, LICSW, OSW-C; Michelle Ferretti, LCSW, OSW-C

**Abstract Summary:**

An experience of cancer is not just a medical one. When compared to age-matched controls, people managing cancer have up to 1.3 times higher prevalence of mental disorders (Vehlig et al., 2022). In addition, many patients struggle with understandable distress, in alignment with navigating a life-threatening disease, that does not cross diagnostic thresholds for anxiety and depression (Vehlig et al., 2022).

Recently there were updates to the American Society of Clinical Oncology (ASCO) guidelines for managing anxiety and depression (Andersen et al., 2023), and the Society of Integrative Oncology (SIO) and ASCO published joint guidelines for integrative oncology care of anxiety and depression symptoms (Carlson et al. 2023). The ASCO updates suggest a stepped-care model based on symptom severity (Andersen et al., 2023) and endorse many gold-standard therapeutic modalities that social workers are trained to provide. The SIO/ASCO guidelines recommend evidence-based integrative modalities, highlighting mindfulness-based interventions. While only some of these recommended interventions are within the scope of direct social work practice, being able to make guideline-informed referrals is key.

This presentation will review both sets of guidelines and note their similarities and differences. Participants will discuss implementation and practice specific tools common to the interventions highlighted in the guidelines including Cognitive Behavioral Therapy, Behavioral Activation, Acceptance and Commitment Therapy, and Mindfulness. For guideline recommendations outside the scope of oncology social workers, there will be discussions on how to connect to providers in local communities to meet these needs.

**Learning Objectives:**

1. Demonstrate knowledge of the recommendations offered in the ASCO and SIO Guidelines for the treatment of anxiety and depression symptoms for those managing cancer.
2. Compare and contrast various interventions recommended in the ASCO and SIO Guidelines for the treatment of anxiety and depression symptoms in those managing cancer.
3. Apply simple evidence-based interventions recommended in the ASCO and SIO Guidelines with those experiencing anxiety and depression symptoms in those managing cancer.

**Keywords:** Clinical Practice/Skill Building, Professional Issues

**Educational Level:** Intermediate

**Course Designation:** Clinical (General)

**CE Credit:** 1.5

**BOSWC Domain:** 1

**References:**

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**Title: The Dual Role for Oncology Social Work Clinician-Researchers**

**Date:** 5/21/2024

**Time (ET):** 3:45:00 PM - 5:15:00 PM

**Presentation Type:** Learning Institute

**Speaker(s):** Catherine Wilsnack, MSW, LMSW; Farya Phillips, PhD, CCLS; Heather Van Diest, LCSW, MPH; Alyssa Aguirre, LCSW; Barbara Jones, MSW, PhD, FNAP

**Abstract Summary:**

Challenges and benefits associated with the dual role of clinician and researcher are discussed in the literature for nursing, medicine, and other health care professionals. These disciplines offer clinician-researchers a framework for managing implications of their dual role in practice. The social work profession lacks clear and consistent guidance on how to navigate practical and ethical dilemmas when practicing as a clinician-researcher. Our aim is to create dialogue around, and work through as a group, the unique opportunities specific to social work clinician-researchers in oncology. We will provide background on the topic and what is currently present in the literature today, which is scant as evidenced by the most recent citations. Additionally, we will present several case examples to discuss and strategize interventions for handling these situations as clinician-researchers.

**Learning Objectives:**

1. Identify and describe the dual role conflict for clinician-researchers in oncology practice and research settings.
2. Discuss of various direct practice strategies to use to manage the dual role conflict, both personally and professionally. Individuals will be able to reflect on how these strategies may have been relevant to past experiences while engaging in the dual role.
3. Describe various macro practice strategies to use to manage the dual role conflict and differentiate between micro and macro strategies.

**Keywords:** Professional Issues, Clinical Practice/Skill Building

**Educational Level:** Intermediate

**Course Designation:** Clinical (General)

**CE Credit:** 1.5

**BOSWC Domain:** 2-6

**References:**

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**Title: Exploring Arts-Based Approaches to Enhance Social Well-Being in Adolescents and Young Adults with Cancer: A Scoping Review**

**Date:** 5/21/2024

**Time (ET):** 5:30:00 PM - 6:30:00 PM

**Presentation Type:** Paper

**Speaker(s):** Zachary Gresham, MA, M.ED.

**Abstract Summary:**

This presentation will focus on sharing the results of a scoping review that was conducted to systematically identify how arts-based interventions influence the social well-being of AYAs with cancer. Cancer profoundly affects the social well-being of adolescents and young adults (AYAs), leading to social isolation, anxiety, depression, and other psychosocial concerns. However, arts-based interventions can provide a space for social interaction and connection, promote social cohesion, and increase resilience and self-esteem. This presentation will outline the inclusion criteria and search strategy that was utilized using the PRISMA-ScR framework, will include a review of the literature, and address the following research questions: 1) What theoretical frameworks inform arts interventions with AYAs? (2) What type of social well-being–related outcomes have they targeted? (3) In what contexts and venues are these approaches implemented, and among what populations? (4) Who are the professional figures delivering the interventions? and (5) What preliminary indications do we have about the efficacy of these intervention approaches?

**Learning Objectives:**

1. Discuss the existing literature on art-based interventions targeting social well-being among Adolescents and Young Adults (AYAs) with cancer.
2. Synthesize key findings from the scoping review to inform an evidence-based understanding of the relationship between art-based interventions and social well-being outcomes for AYAs.
3. Translate the insights gained from the scoping review into actionable knowledge, informing both clinical practice and future research endeavors aimed at optimizing the use of art-based interventions to enhance social well-being outcomes for AYAs with cancer.

**Keywords:** Adolescent and Young Adult, Interdisciplinary Care

**Educational Level:** Beginning

**Course Designation:** Clinical (General)

**CE Credit:** 1.0

**BOSWC Domain:** 1

**References:**

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<https://doi.org/10.1002/cncr.29866>

**Title:** Friends of the family: Oncology Social Workers as Champions of Family Care

**Date:** 5/21/2024

**Time (ET):** 5:30:00 PM - 6:30:00 PM

**Presentation Type:** Paper

**Speaker(s):** Iris Fineberg, PhD, MSW, ACSW, OSW-C, FNAP, FAOSW

### Abstract Summary:

High quality oncology care views both patients and their families as the unit of care. Family members in this context include those defined by the patient as family, including people related to the patient by biology, law and/or choice. Oncology social work recognizes the critical importance of family relationships, including the absence of family, when someone has cancer. Social workers bring particular expertise in family-oriented care to the interprofessional team and serve as important advocates for the family and the patient. In order to do so, social workers use a number of communication tools and strategies to support, facilitate and sometimes mediate patient, family, and health care provider interactions. One of these tools is the family conference, also called a family meeting.

Family conferences are a strong tool for oncology social workers to engage in assessment and intervention. However, family conference roles and leadership are not necessarily taught in general social work practice. This session will aim to provide participants with key information about the uses, benefits and processes of family conferences. Family conferences may have a number of functions and goals, both explicit and implicit, and they offer a wide range of benefits that can enhance patient and family care. These elements will be discussed and considered in association with conference processes, including core components of planning and facilitating conferences.

### Learning Objectives:

1. Explain the unique knowledge and skills that oncology social workers bring to family care in the oncology setting.
2. Identify the theoretical basis for family conference use and implementation.
3. Identify key components of family conference, including social work roles and leadership.

**Keywords:** Clinical Practice/Skill Building, Interdisciplinary Care

**Educational Level:** Beginning

**Course Designation:** Clinical (General)

**CE Credit:** 1.0

**BOSWC Domain:** 1

### References:

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**Title: The Benefits and Strains of Pet Ownership during Cancer Treatment: Experiences of Survivors and Practical Advice for Assessment and Intervention**

**Date:** 5/21/2024

**Time (ET):** 5:30:00 PM - 6:30:00 PM

**Presentation Type:** Paper

**Speaker(s):** Jen Currin-McCulloch, PhD, LMSW; Brian Morvant, Program Manager

**Abstract Summary:**

Research suggests that the emotional bond shared with a pet can be significant for those with declining physical health, yet little is known about cancer survivors' experiences with pet ownership. This study explored breast cancer survivors' pet-related experiences including the benefits, challenges, and unmet needs. Adults (ages 18 and older), diagnosed with stages 0-IV breast cancer and currently the primary owner of at least one dog or cat for at least 6 months were recruited through cancer treatment and support organizations, and breast cancer and pet social media outlets. Breast cancer survivors (n= 221) responded to a survey between July-November 2022. The online, anonymous, cross-sectional, survey included questions about participants' demographics; pet attachment; physical, emotional, and functional well-being; social support received from their pet; and 'pet parenting' concerns. Seven open-ended prompts explored the stressors and benefits they encountered in caring for a pet during treatment and survivorship, and advice for medical providers and cancer survivors. Descriptive statistics were calculated to describe participants' demographics. Multiple regression analyses were conducted to determine predictors of pet attachment, well-being, support from pet, and 'pet parenting' concerns. Researchers used thematic analysis method to analyze qualitative data, resulting in four key themes: my furry reason to keep fighting; seeking quality care resources; my pets are my family; and someone special is waiting for you. Findings from this study highlight opportunities for oncology social workers to enhance the wellbeing of survivors through supporting their invaluable relationships with their pets.

**Learning Objectives:**

1. Recognize how pets serve as emotional buffers and/or stressors for people diagnosed with breast cancer, and how their ability to meet their pet's needs affects their well-being.
2. Identify tools for assessing cancer survivors' pet care needs, pet parenting guilt, and local and national resources available to support the creation of pet caregiving teams or rehoming plans.
3. Practice how to open dialogues with cancer survivors that validate their pet parenting experiences of guilt, and anxiety and foster self-efficacy in advocating for their pet caregiving needs with their oncology and veterinary teams.

**Keywords:** Specialized Needs, Survivorship

**Educational Level:** Beginning

**Course Designation:** Clinical (General)

**CE Credit:** 1.0

**BOSWC Domain:** 1

**References:**

Abdo, J., Ortman, H., Rodriguez, N., Tillman, R., Riordan, E. O., & Seydel, A. (2023). Quality of life issues following breast cancer treatment. *Surgical Clinics of North America*, 103(1), 155–167.  
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**Title: The Importance of Gathering Data: How We Tripled our Oncology Social Work Team in Ten Years**

**Date:** 5/21/2024

**Time (ET):** 5:30:00 PM - 6:30:00 PM

**Presentation Type:** Paper

**Speaker(s):** Caryn Stewart, MSW, LICSW

## **Abstract Summary:**

One of the many challenges oncology social workers confront is in convincing administrators of the need for additional staff to better support patient needs and decrease staff burnout. Collecting data about the patient population seen and interventions done by oncology social workers can help to demonstrate the value of the role and the need for additional staff, particularly for non-revenue generating social work teams. Unfortunately, tools needed to collect social work data may be inaccessible due to the cost of software development or purchases exceeding social work budgets, or due to minimal or unavailable support for building these tools within already established software, such as the medical record system. This presentation will focus on two tools created and used by one oncology social work team over 10+ years to successfully grow their team from 6 to 23 staff. These tools were made to be financially accessible to social work teams and include a simple spreadsheet anyone could start using today, as well as open-source software designed for and donated to our team. We will share lessons learned along the way, including the benefits and limitations of each tool, trends we've found in our data over time, and how we used the data to leverage administrative and physician support to meet our hiring goals, and to retain staffing ratios in times of economic uncertainty. Finally, we will discuss future directions and considerations.

## **Learning Objectives:**

1. Name three important reasons for gathering data on patient populations and interventions done by oncology social workers.
2. Identify formal and informal tools for data gathering.
3. Evaluate the effectiveness of social work data collection tools.

**Keywords:** Leadership/Administration, Clinical Practice/Skill Building

**Educational Level:** Intermediate

**Course Designation:** Clinical (General)

**CE Credit:** 1.0

**BOSWC Domain:** 2-6

## **References:**

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**Title: Explorations of Online and Virtual Interventions in Oncology Social Work: Lessons Learned and Considerations for the Future**

**Date:** 5/22/2024

**Time (ET):** 10:00:00 AM - 11:00:00 AM

**Presentation Type:** Panel Symposium

**Speaker(s):** Alexandra Gubin, MSW, LCSW, OSW-C; Jill Mitchell, PhD, LCSW, OSW-C; Cate O'Reilly, MSW; Michelle Ferretti, LCSW, OSW-C; Victoria Puzo, LCSW

**Abstract Summary:**

The landscape of healthcare and the medium in which it is delivered continues to evolve towards digital health solutions, especially since the pandemic. A need exists for innovation in delivering mental health care to address longstanding issues of access and equity among historically underserved populations. Growing opportunities exist for social workers to be involved in and help lead the development and delivery of new digital oncology mental health solutions. This panel comprised of oncology social workers from various practice settings -- CancerCare, Cancer Support Community, Inova Life with Cancer, OncoHealth, and Rocky Mountain Cancer Centers -- will share experiences and insights with regards to the transition towards telehealth-based clinical practices and the integration of virtual models of care. The primary goal of this panel is to launch a more formal conversation about the adaptation and use of online or virtual modalities to provide psychosocial care to people living with cancer. All participants are encouraged to further the discussion in the newly created Virtual Health SIG.

**Learning Objectives:**

1. Describe various individual and group models of virtual-based supportive care that have shown to be meaningful to people living with cancer.
2. Explore ethical implications for clinical practice, for example, learning how to navigate cross-state licensure and different legal implications for telehealth practice.
3. Identify challenges and benefits of leveraging technology to provide quality care to people living with cancer, especially for vulnerable populations.

**Keywords:** Clinical Practice/Skill Building, Specialized Needs

**Educational Level:** Intermediate

**Course Designation:** Clinical (General)

**CE Credit:** 1.0

**BOSWC Domain:** 2-6

**References:**

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**Title: Pathway to Culturally Adapted Cancer Care: Clinical Work and Program Development with Latinx and Chinese Immigrant Patients**

**Date:** 5/22/2024

**Time (ET):** 10:00:00 AM - 11:00:00 AM

**Presentation Type:** Panel Symposium

**Speaker(s):** Grace Downs-Liguori, LCSW; Mi (Emma) Zhou, LCSW; Maria Amado Cordova, MSW Candidate; Hing Lin (Helen) Sit, LCSW

**Abstract Summary:**

This panel presentation will focus on the challenges/barriers and opportunities in the delivery of culturally responsive cancer care for patients in the Chinese and Latinx immigrant New York City community. Panelists are social workers and an intern from the Mount Sinai Cancer Support Service Team and VNS Health Chinatown Neighborhood Naturally Occurring Retirement Community. Disparities in cancer diagnosis, treatment, and outcomes drawn from the literature will be presented by the panel to provide a framing as to why culturally responsive treatment is crucial to improve the engagement and outcomes of these growing groups. The first two speakers will focus on Latinx cultural values and the role they play in engagement in relation to advanced care planning, and palliative and hospice care. Case examples will be provided to demonstrate how Latinx cultural values can be used in a strength-based approach to facilitate engagement. The third and fourth panelists will discuss clinical work with Chinese immigrant cancer patients and the development and facilitation of culturally-tailored Chinese immigrant cancer patients supportive services. The panelists will also discuss the collaboration between a cancer center and a community-based organization on outreach in the Chinese immigrant community. By the end of the presentation, the audience will learn important cultural values for both populations and the role they play in engagement in healthcare and decision-making, barriers in engaging these groups in ACP and psychosocial support as well as best practices on how to provide culturally responsive care to these groups.

**Learning Objectives:**

1. Identify 3 strategies from Latino and Chinese social workers to facilitate engagement with these communities.
2. Identify micro and macro strategies to collaborate with community based agencies to provide quality psychosocial services.
3. Identify at least 3 barriers for Latino and Chinese immigrant patients to access psychosocial support services.

**Keywords:** Clinical Practice/Skill Building, Special Populations

**Educational Level:** Beginning

**Course Designation:** Cultural Competency

**CE Credit:** 1.0

**BOSWC Domain:** 1, 2-6

**References:**

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**Title: A Collaborative Approach: Developing and Implementing a Trauma-Informed Care Training Program for Healthcare Providers**

**Date:** 5/22/2024

**Time (ET):** 11:15:00 AM - 12:15:00 PM

**Presentation Type:** Paper

**Speaker(s):** Christina Bach, MBE, MSW, LCSW,OSW-C; Courtney Misher, MPH, BS, R.T.(T)

**Abstract Summary:**

It is estimated 70% of Americans have experienced a traumatic event in their lifetime (National Council for Behavioral Health, 2023). Recent research shows that the number of Americans who have experienced trauma and may develop associated PTSD, anxiety and depression will increase, due to the COVID-19 pandemic being identified as a traumatic stressor event (Kira, et.al., 2021). When coupled with the trauma of a cancer diagnosis, a trauma history puts cancer patients at higher risk for substance use, mental health crisis, non-adherence to cancer care and poorer outcomes. (Davidson, et. al., 2023). This presentation will highlight the novel collaboration of an Oncology Social Worker (OSW) and a Radiation Therapist (RT) who partnered together to develop an innovative TIC training program for healthcare providers at our center. During this session, the process of needs assessment, program design, development and implementation of TIC training will be highlighted. Participants will gain knowledge about how to develop similar programs at their own centers as well as increase their abilities to identify stakeholders, gain administrative buy-in, and contribute to the adoption of a TIC culture at their own centers. Next steps for implementation of further training focusing on vicarious/secondary trauma and compassion fatigue for providers and interdisciplinary simulated patient training will also be addressed. Participants will gain knowledge to take back to their own settings in hopes they will become champions of trauma-informed cancer care systems.

**Learning Objectives:**

1. Identify the key components of trauma-informed care and their application to cancer care settings.
2. Summarize opportunities for leadership, program development, and evidence-based research/training for oncology social workers that focuses on trauma-informed transformative practices.
3. Demonstrate a knowledge of the importance of interdisciplinary collaboration in designing and implementing training for cancer care professionals.

**Keywords:** Education, Leadership/Administration

**Educational Level:** Intermediate

**Course Designation:** Clinical (General)

**CE Credit:** 1.0

**BOSWC Domain:** 2-6

**References:**

Barry, C., & Gundacker, C. (2023). ACE: "What Happened to You" Screening for Adverse Childhood Experiences or Trauma-Informed Care. *Primary Care: Clinics in Office Practice*, 50(1), 71-82.

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Winfrey, O., & Perry, B. (2021). *What happened to you?: Conversations on trauma, resilience, and healing*. Boxtree.

**Title: Meet Them Where They Are: Best Practices in Virtual Oncology Social Work**

**Date:** 5/22/2024

**Time (ET):** 11:15:00 AM - 12:15:00 PM

**Presentation Type:** Paper

**Speaker(s):** Kristin Scheeler, MSSW, CAPSW, OSW-C; Mari Montesano, LCSW, OSW-C

### **Abstract Summary:**

This paper presentation will summarize existing literature on the emerging field of virtual social work practice, including best practices when working remotely with clients, ethical considerations with remote work, and efforts being made to improve virtual practice, leaving attendees with strategies for connecting to clients via telehealth. Participants will have an opportunity to discuss case studies after learning best practice recommendations outlined in the professional literature.

Virtual social work practice is relatively new, spanning just over twenty years (McCarty & Clancy, 2002). Not only do social workers bear a responsibility to keep up with continually changing technology when they are working in remote environments (Reamer, 2013; NASW, 2017), but they also need to consider issues of confidentiality, the best mode of service provision for clients, back-up plans for malfunctioning technology, and various additional skills to competently practice virtual social work (Baca & Kirk, 2023; Fipps, et al., 2022). A key benefit of virtual social work for clients is access to social work care for nearly anyone, including people in rural or urban areas, those with disabilities that make transportation difficult or uncomfortable, those experiencing financial toxicity such that transportation is unaffordable, or those who would prefer a less invasive visit compared to a home or clinic visit (Levine, 2022; Fipps, et al., 2022; Cook & Zscholmer, 2020; NASW, 2017). Social workers also benefit from virtual employment because they are able to work where they are more comfortable, thus reducing stress, commuting costs, and allowing for better work-life balance (Baca & Kirk, 2023).

### **Learning Objectives:**

1. Incorporate ethical considerations when working with clients in a remote/virtual oncology social work setting.
2. Demonstrate appropriate strategies to assess, document, and support in a virtual environment utilizing psychosocial skills and social work competencies.
3. Verbalize 2-3 ways virtual social work benefits clients and workers; verbalize 2-3 cautions social workers should consider when providing virtual psychosocial services.

**Keywords:** Clinical Practice/Skill Building, Ethics

**Educational Level:** Beginning

**Course Designation:** Clinical (General)

**CE Credit:** 1.0

**BOSWC Domain:** 1

### **References:**

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**Title: When Everything Fails: An Ode to Employees with End Stage Cancer - Harnessing a Workplace Model with Ethical Compassion**

**Date:** 5/22/2024

**Time (ET):** 11:15:00 AM - 12:15:00 PM

**Presentation Type:** Paper

**Speaker(s):** Carolyn Messner, DSW, BCD, FNAP, FAPOS, FAOSW, LCSW-R

**Abstract Summary:**

This presentation highlights institutional support and ethical training of oncology colleagues to provide guidance with compassion to co-workers diagnosed with end stage cancer, developing a transformative workplace model of support. What happens when a devastating cancer diagnosis impacts one of our own? When a number of co-workers developed aggressive cancers that led to end-of-life care; the workplace built an ethical approach to meet the needs of all impacted, including the ill employees, their caregivers and the shared grief of the staff. Confidentiality & ethical practice was strictly maintained for employees who wished their illness to be confidential. As soon as the family notified the workplace of their co-workers' death, the workplace gave staff the opportunity, if they wished, to attend their colleagues' funeral or memorial service. Employees, who provided permission to inform their co-workers about their need for end-of-life care, there was an outpouring from staff to share their collective experience. Key staff met with Human Resources Personnel to develop an ethical transformative response to their co-worker's dying. This committee developed creative strategies to share their feelings and admiration for their dying co-worker including: Memory Note Box, Photo Album, paired visits, oncology social work counseling, technical assistance and outreach to family and partners.

These strategies will be explicated with the goal of providing attendees a replication model. The efficacy of this Transformative Paradigm will be described, with diverse case vignettes, lessons learned, ethical & replication handouts and selected bibliography.

**Learning Objectives:**

1. Describe an ethical transformative model of workplace support for colleagues at end of life.
2. Explicate the creative strategies to share their feelings and admiration for their dying co-worker.
3. Replicate this Transformative Ethical Model of Workplace Support for colleagues in their workplace who are dying.

**Keywords:** Professional Issues, Ethics

**Educational Level:** Intermediate

**Course Designation:** Clinical (General)

**CE Credit:** 1.0

**BOSWC Domain:** 1, 2-6

**References:**

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Siembida, E. & Salsman, J. "Quality of Life" Switzerland in Psychological Aspects of Cancer (Springer, 2022) pp. 411-434

Carr, B. "Bringing It All Together" Switzerland in Psychological Aspects of Cancer (Springer, 2022) pp. 447-460

**Title: ACS Quality of Life Award & Lecture**

**Date:** 5/22/2024

**Time (ET):** 12:35:00 PM - 1:45:00 PM

**Presentation Type:** Lunchtime Lecture

**Speaker(s):** Tara Shapmire, PhD, MSSW, OSW-C, FAOSW

**Abstract Summary:**

As we celebrate the 40th anniversary of the Association of Oncology Social Work (AOSW), it is imperative to articulate the essential role of oncology social work in the landscape of cancer care. This AOSW/American Cancer Society Quality of Life Lecture delves into the profound impact that we (AOSW and its members) have had on individuals grappling with the complexities of cancer and its treatment.

Over the past 40 years, AOSW has been at the forefront of networking, advocacy, education, and research, shaping the standards of practice and elevating the role of oncology social workers. A critical component of the lecture is an examination of our evolution and accomplishments over the last 15 years since the last AOSW history manuscript was published. From pioneering innovative programs to advocating for policy changes, AOSW has continuously adapted to meet the evolving needs of our members, and ultimately cancer patients and their families. By harnessing the collective expertise of our members and fostering partnerships across organizations, we have been instrumental in driving advancements in psychosocial oncology and promoting a patient-centered approach to cancer care.

AOSW and its members—oncology social workers—are one and the same. Through the lens of AOSW's mission—networking, advocacy, education, research—we will highlight the indispensable role of oncology social work in the fabric of cancer care and reflect on our own CORE practice: Competencies, Opportunities, Roles and Expertise as they relate to our shared mission to advance excellence in the psychosocial care of persons with cancer, their families, and caregivers.

**Learning Objectives:**

1. Explore the historical evolution of AOSW over the past 15 years, including its impact on shaping the standards of practice and elevating the role and visibility of oncology social workers in cancer care.
2. Review the key contributions of AOSW and its members to improving the quality of life for individuals affected by cancer.
3. Reflect on your own role as an oncology social worker within the broader context of AOSW's mission and values, identifying opportunities for personal and professional growth, and reaffirming your commitment to advancing excellence in the psychosocial care of persons with cancer, their families, and caregivers.

**Keywords:**

**Educational Level:** Beginning

**Course Designation:** Clinical (General)

**CE Credit:** 1.0

**BOSWC Domain:** 2-6

**References:**

**Title: Cancer Care Costs How Much?! A Guide for Oncology Social Workers to Mitigate Financial Toxicity**

**Date:** 5/22/2024

**Time (ET):** 2:15:00 PM - 3:15:00 PM

**Presentation Type:** Paper

**Speaker(s):** Azra Camacho, LCSW, OSW-C; Lisa Burr, LCSW

**Abstract Summary:**

The purpose of this presentation is to explore the role of oncology social workers in mitigating financial distress among cancer patients. Financial distress is the subjective psychological experience of financial concerns which can include anxiety, depression, fatigue, and reduced quality of life. Our presentation will discuss several theoretical perspectives or models of financial burden for cancer populations including Maslow's Hierarchy of Needs (Chi, 2019), the Liberation Health Model (Martinez, 2014), and other models, such as the Financial Hardship Framework (Jones et al., 2020). We will explore the disconnect between available and needed financial assistance services. We will highlight what patients with cancer want to know in terms of the cost of their treatments. We will demonstrate how to improve skills in discussing finances with patients and how to connect to appropriate resources at local (food banks), state (Medicaid), and federal (social security disability/Medicare) levels. We will engage audience with cases from our own clinics to demonstrate how successful reduction of financial burden is possible. We will discuss the psychological and physical effects on patients of coping with financial distress after concrete resources have been provided. Strategies to reduce financial toxicity include micro (provider), mezzo (clinic/hospital), and macro (insurance and government agencies) interventions. Oncology social workers advocating for policy changes will have the broadest impact despite taking years to implement. By the end of this presentation, participants will be equipped to assess for financial toxicity and provide interventions to mitigate hardship.

**Learning Objectives:**

1. Define the difference between financial toxicity and financial distress within the cancer population.
2. Identify at least three strategies to mitigate financial distress for patients with cancer.
3. Discuss the theoretical frameworks guiding clinician's social work practice in addressing financial toxicity.

**Keywords:** Financial Toxicity, Clinical Practice/Skill Building

**Educational Level:** Beginning

**Course Designation:** Clinical (General)

**CE Credit:** 1.0

**BOSWC Domain:** 1, 2-6

**References:**

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**Title: Navigating the Heavy Intersection of World Events and Cancer Care: Retraumatization, Compounded Vulnerability and the Essential Roles of Oncology Social Workers****Date:** 5/22/2024**Time (ET):** 2:15:00 PM - 3:15:00 PM**Presentation Type:** Paper**Speaker(s):** Iris Fineberg, PhD, MSW, ACSW, OSW-C, FNAP, FAOSW**Abstract Summary:**

Significant and painful world events such as war, terrorism, and natural disasters are not new but have had prominent and consistent presence in recent years. People with cancer, their families, and health care providers have had to navigate cancer care within a setting of globally intense emotion, conflict and complexity. What is already a life-altering context of having cancer and having to deal with the decisions and implications of the illness is further layered by people carrying the weight of fear, worry, despair, anger, grief and helplessness that accompanies global and national events out of their control. Oncology social workers have significant knowledge, understanding and skills to work directly with this difficult reality in which patients, families and health care providers, including social workers, have to function. Oncology social workers are likely to witness, acknowledge and intervene as people struggle and persevere under tense and sensitive conditions. We often offer ourselves as accompanying co-bearers of the emotional weight and existential pain they experience, as well as partners in finding positive, inspiring and strengthening aspects to their experience. In this session, we will use an interactive approach to discuss the role of oncology social work as intersections of past and present life experiences take form for patients and families. The session will explore how we navigate our roles amidst potentially different world views while keeping to social work values as they apply to our clients and ourselves.

**Learning Objectives:**

1. Identify methods for inviting patients and families to share past experiences impacting current coping.
2. Identify strategies for assisting patients to manage the weight of global conflict while having cancer.
3. Identify strategies to apply social work skills and values to navigating sensitive global topics while supporting patients, families and colleagues in oncology.

**Keywords:** Clinical Practice/Skill Building, Interdisciplinary Care**Educational Level:** Intermediate**Course Designation:** Clinical (General)**CE Credit:** 1.0**BOSWC Domain:** 1**References:**

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**Title: Patients, Partners & Providers Working Together Against Brain Cancer: Development and Initial Implementation of an Innovative Interdisciplinary Supportive Care Program**

**Date:** 5/22/2024

**Time (ET):** 2:15:00 PM - 3:15:00 PM

**Presentation Type:** Paper

**Speaker(s):** Nicole Peeke, LCSW, ACHP-SW, OSW-C; Claudia Cuevas, LCSW

**Abstract Summary:**

Summary: For patients living with a high-grade primary brain tumor and their intimate partners, it is not uncommon for their lives to be disrupted. The combination of a poor prognosis, rapid decline in functionality, financial toxicity and change of roles cause undue stress in a dyad. The medical team members providing treatment often internalize the stress experienced by their patients, resulting in a high degree of burnout. This presentation will illustrate the development and pilot implementation of the Patients, Partners, and Providers Working Together Against Brain Cancer: A Strengths-based Couples Program (PPPWT), which addresses patient, partner and provider needs through the trajectory of care, delivering a comprehensive approach including counseling, tailored services and clinical support for patients and partners as a standard of care. Preliminary feasibility and satisfaction outcomes will also be discussed.

**Learning Objectives:**

1. Articulate the unique needs of couples and providers affected by high grade primary brain cancers.
2. Explain how the Patients, Partners, and Providers Working Together Against Brain Cancer: A Strengths-based Couples program addresses biopsychosocial distress and other disease specific needs in this unique cancer population.
3. Describe ways to apply the PPPWT model to their own setting to better care for brain cancer patients and their partners, including adapting to cultural needs of their geographic area.

**Keywords:** Interdisciplinary Care, Disease Type (ovarian, lung, GYN, etc)

**Educational Level:** Intermediate

**Course Designation:** Clinical (General)

**CE Credit:** 1.0

**BOSWC Domain:** 1, 2-6

**References:**

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**Title: Psychosocial Effects of Pediatric Brain Cancer: How Social Workers Help Alleviate the Toll on Patients and Families**

**Date:** 5/22/2024

**Time (ET):** 2:15:00 PM - 3:15:00 PM

**Presentation Type:** Paper

**Speaker(s):** Paige Falcon, LCSW; Hayle Lopez; Nicole Kirsner

**Abstract Summary:**

This presentation will discuss pediatric brain cancer diagnoses, treatment effects and prognosis. It will dive into the psychosocial barriers to care amongst patients and families including implications of socioeconomic status, intellectual development and behavior patterns and changes, and caregiver coping. The presenters will share how pediatric social worker's unique supporting role alleviates some of the above stressors that pediatric brain cancer patients and families navigate. Presenters will discuss the importance of working with families from the social work standpoint of person in environment and family system approach. The presenters will discuss strength based, solution-focused interventions with this population including individual counseling and support groups.

**Learning Objectives:**

1. Recognize the relevance of pediatric brain diagnoses and the effects of the diagnoses and treatment on patients and families and the barriers brain cancer pediatric patients and caregivers face.
2. Identify how social workers play a pivotal role in supporting patients and families of pediatric brain diagnoses and understand the importance of strength based and solution-focused interventions with this population including individual counseling and support groups.
3. Discuss areas of maladaptive functioning in family systems of pediatric brain tumor patients and how Social Workers can support.

**Keywords:** Adolescent and Young Adult, Education

**Educational Level:** Beginning

**Course Designation:** Clinical (General)

**CE Credit:** 1.0

**BOSWC Domain:** 1

**References:**

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**Title: How Can You “Meet Me Where I Am,” When You Don’t Know Where I’m From?: Psychosocial Oncology Disparities in American Indian Tribal Communities**

**Date:** 5/22/2024

**Time (ET):** 3:30:00 PM - 4:30:00 PM

**Presentation Type:** Paper

**Speaker(s):** Sheila Hammer, MSW, LCSW

**Abstract Summary:**

This presentation will review history, oncology disparities, psychosocial service disparities, and SDOH related to American Indian (AI) patients. Attendees will leave understanding how to take the first step in creating culturally adapted approaches for improved, culturally responsive psychosocial oncology services.

There is scant research on the psychosocial impact of cancer on the various tribal communities (Smith, 2019). This presentation will guide attendees in the practical application of forming relationships and getting to know their specific tribal partners more deeply so we can begin to acknowledge and understand each tribe as its own unique population and culture.

To conduct adequate assessments, we need to understand the impact of oppression and historical and present structural racism on the resulting SDOH within the AI population and approach our AI patients through a strengths-based lens (Roh et al., 2021).

By working collaboratively with tribes we push against standard colonial norms, give voice and choice back to our AI patients, and create more culturally informed, adapted, and responsive psychosocial supportive care services (National Association of Social Workers, 2021).

With grounded theory guiding us, our understanding and appreciation of and for local tribes deepens, understanding of key SDOH broadens, and our assessments drastically improve. The equation is simple: better assessments lead to better care which improves health outcomes. By offering culturally adapted psychosocial oncology services we, as OSWs, decrease the health inequities of our AI patients (Garvey et al., 2020; Hodge et al., 2021; Costas-Muniz et al., 2015; Smith, 2019).

**Learning Objectives:**

1. Identify which American Indian and/or Alaska Native tribes are near their treatment facilities.
2. Describe and assess for social determinants of health (SDOH) that commonly impact American Indian communities and fuel health disparities.
3. Utilize a ground theory approach to create and/or adapt psychosocial services for American Indian patients and caregivers.

**Keywords:** Special Populations, Clinical Practice/Skill Building

**Educational Level:** Intermediate

**Course Designation:** Cultural Competency

**CE Credit:** 1.0

**BOSWC Domain:** 1, 2-6

**References:**

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**Title: Lasting Impacts of COVID-19: Understanding the Pandemic's Role in Identifying Barriers to Care and Altering Patient Outcomes**

**Date:** 5/22/2024

**Time (ET):** 3:30:00 PM - 4:30:00 PM

**Presentation Type:** Paper

**Speaker(s):** Marissa Fors, MSW, LCSW, OSW-C, C-ASWCM, CCM

**Abstract Summary:**

The impacts of COVID-19 go beyond delays in treatments and shutdowns of the early days of the pandemic. These interruptions increased advanced cancer diagnoses, especially in vulnerable communities. The pandemic disproportionately affected medically underserved populations, while highlighting and accentuating the fact these inequalities exist. There will be unfortunate consequences and poorer outcomes that we are already seeing today. People with advanced cancers suffer from decreased mental health and ongoing fears. In order to address and correct these errors, social workers must address the health disparities and social determinants of health that have existed and continue to persist. This presentation will demonstrate the impact of COVID-19 on the past, present, and future of health care. Participants will be able to identify social determinants of health, and understand how to apply assessment skills to better support the communities they serve. Participants will learn to re-engage communities and to influence future policies with the goal of enhancing growth in cancer care delivery.

**Learning Objectives:**

1. Discuss the impacts COVID-19 has on cancer patients from past, present, and future perspectives, and be able to name at least three ways the virus has changed cancer care.
2. Identify at least three disparities faced by patients with cancer and three intervention strategies to improve access to appropriate care and improve outcomes.
3. Develop better understanding of how to apply evaluation skills to assess their practice, engage with patients, and influence the future of care delivery.

**Keywords:** Clinical Practice/Skill Building, Education

**Educational Level:** Beginning

**Course Designation:** Clinical (General)

**CE Credit:** 1.0

**BOSWC Domain:** 1, 2-6

**References:**

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**Title:** The Emotional Impact of Working with Adolescents and Young Adults on Oncology Social Workers

**Date:** 5/22/2024

**Time (ET):** 3:30:00 PM - 4:30:00 PM

**Presentation Type:** Paper

**Speaker(s):** Lauren Broschak, MSW, LCSW, OSW-C; Julia Leavitt, MSW, LCSW, OSW-C

### Abstract Summary:

Adolescents and Young Adults (AYAs), ages 15-39, who are diagnosed with cancer experience a myriad of life changes associated with life milestones. The shifting and changing of major milestones in unanticipated and unwanted ways through diagnosis, treatment, survivorship, and end-of-life can be mentally, emotionally, physically, and spiritually challenging. Additionally, common emotional experiences for AYAs from diagnosis and beyond can include isolation, overwhelm, anxiety, sadness, depression, grief, and confusion. Although working with AYAs can be incredibly rewarding, it can also impact providers' personal well-being and may lead to compassion fatigue or even burnout. Healthcare providers, including social workers, may experience grief, a sense of injustice and tragedy, and compassion fatigue when working with AYAs, especially those that have an uncertain, poor, or terminal prognosis. Providers can also experience emotional heaviness due to frequently holding and witnessing intense emotional experiences that AYAs endure and express. As oncology social workers, we are uniquely vulnerable to the expansive variation of personal, emotional impacts, such as compassion fatigue, when caring for AYAs with cancer. We are also uniquely positioned to support our colleagues in their experiences of working with AYAs.

In this session, we will review the milestone and emotional impacts that a cancer diagnosis and treatment have on AYAs, the emotional implications of working with AYAs for providers, the healing impact of self-care for providers, and interventions to best support oncology social workers' and the healthcare teams' well-being when working with AYAs.

### Learning Objectives:

1. Describe the unique challenges felt by AYA patients and list the potential threats these create in impacting the emotional well-being of the clinician.
2. Describe the value of provider self-care when working with the AYA patient population in efforts to preserve their role as a clinician and normalize the transference/countertransference that is present for many clinicians when working with the AYA population.
3. Implement interventions to support provider well-being and reduce stress experienced when working with the AYA population, furthering the empowerment and leadership skills of the clinician that they can model to other disciplines to improve outcomes for all team members working with this population.

**Keywords:** Adolescent and Young Adult, Self Care

**Educational Level:** Beginning

**Course Designation:** Clinical (General)

**CE Credit:** 1.0

**BOSWC Domain:** 1, 2-6

### References:

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**Title: To Not be Missing Forever....Engaging the Essential Ethical, Clinical and Practical Aspects of Reuniting Patients and Families**

**Date:** 5/22/2024

**Time (ET):** 3:30:00 PM - 4:30:00 PM

**Presentation Type:** Paper

**Speaker(s):** Terry Altilio, LCSW, APHSW-C; Eugene Choi, MD

**Abstract Summary:**

This presentation focuses on the team's responsibility to oncology patients who are lost to, or in fractured relationships with family and those who are medically unable to participate in decision making, and seem to be without surrogates. The pandemic and its behemoth demands on clinicians highlighted many who died without diligent searches for family or surrogates, leaving families to believe those persons are still "missing" or "lost" when they are in fact dead. This may mirror the harms created by historical separations, chosen or imposed, by political and economic forces such as slavery, removal of Indigenous children, and immigration policy. Reuniting the "missing" with their families or communities has implications beyond decision making given the genetic risks for patients and potentially for family members. This raises the ethical and legal relationship of patient confidentiality and duty to warn and heightens the importance of engaging patients in the therapeutic work of exploring potential healing, disruption, benefits and/or harms of searching for and potential outreach to family. Beyond family learning the whereabouts of a missing family member, in the oncology setting patients without additional supports may not have access to life-extending or life-saving treatments – a clinical reality that may need to be explicitly shared with patients. Social workers, in collaboration with physician and nursing colleagues, have the skills and relationships to ground this clinical work, provide psychoeducation and anticipatory guidance in decision making that engages legal and ethical variables, may foster healing and/or disruption and influence legacy.

**Learning Objectives:**

1. Analyze the ethical, legal and clinical variables that relate to "unrepresented" and unresponsive patients who come to the attention of all disciplines in order to enhance recognition of the shared responsibility to weigh benefits and harms of a "search" for family.
2. Link the reality of fractured families to the vast numbers of forced separations consequent to slavery, colonization and immigration policies to frame this work as an ethical and clinical effort toward restoration and healing, providing an example of a search document which might be used to ground the work of a diligent search to locate family.
3. Consider specific aspects of oncology care such as genetic risk and limiting options for treatment impacted by fractured relationships with family.

**Keywords:** Advocacy, Clinical Practice/Skill Building

**Educational Level:** Intermediate

**Course Designation:** Ethics

**CE Credit:** 1.0

**BOSWC Domain:** 1

**References:**

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**Title: "Show Me the Money!" Using a Motivational Interviewing Framework to Normalize Conversations About Financial Toxicity**

**Date:** 5/23/2024

**Time (ET):** 10:00:00 AM - 11:30:00 AM

**Presentation Type:** Learning Institute

**Speaker(s):** Christina Bach, MBE, MSW, LCSW, OSW-C, FAOSW; Aimee Hoch, MSW, LSW, OSW-C

**Abstract Summary:**

Financial toxicity (FT) is of paramount interest in oncology care in the US. It is estimated that nearly 50% of cancer survivors experience FT (Smith, et.al., 2022). Financial toxicity is also associated with poorer outcomes (Yabroff, et. al., 2022). OSW financial navigation is an emerging practice. Because of our unique training, we are able to establish relationship and trust with clients which is necessary when addressing often taboo or challenging subjects. We conduct comprehensive assessment and ongoing navigation services that are more than a “quick fix”/band-aid solution to a problem that is more chronic across the cancer experience. Motivation interviewing (MI) dates back to the 1980s (Miller, 2023). MI provides an evidence-based theoretical clinical practice framework and structure for framing conversations in challenging subject areas. MI focuses on change and growth through strengthening motivation and commitment to change. It honors individual autonomy and ability to advocate for themselves to influence life experiences. The financial navigator provides affirmation, reflection, and enthusiasm for the client's ability to change their situations.

In this session, attendees will learn how financial toxicity impacts clients' understanding of the practical, emotional, and behavioral domains of financial distress and hardship in cancer care. A roadmap for OSW financial navigation will be presented and will highlight the unique characteristics and skills of OSWs in the financial toxicity assessment and intervention space. The application of motivational interviewing and how it can be applied to working with complex cases focused on FT will then be introduced.

**Learning Objectives:**

1. Demonstrate a knowledge of the impact of financial toxicity on cancer patients and the roles of oncology social work financial navigation.
2. Identify key components of motivational interviewing and how they can be applied to understanding the experience of financial toxicity and identifying a patient-centered plan for change.
3. Implement a motivational interviewing framework for financial toxicity cases in their clinical practice.

**Keywords:** Financial Toxicity, Patient Navigation

**Educational Level:** Intermediate

**Course Designation:** Clinical (General)

**CE Credit:** 1.5

**BOSWC Domain:** 1

**References:**

Breckenridge, L. A., Burns, D., & Nye, C. (2022). The use of motivational interviewing to overcome COVID-19 vaccine hesitancy in primary care settings. *Public Health Nursing*, 39(3), 618-623.

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Yabroff, K. R., Han, X., Song, W., Zhao, J., Nogueira, L., Pollack, C. E., ... & Zheng, Z. (2022). Association of medical financial hardship and mortality among cancer survivors in the United States. *JNCI: Journal of the National Cancer Institute*, 114(6), 863-870.

**Title:** Harnessing Spirituality in Practice: Moving Toward Whole Person Care for our Patients and Ourselves

**Date:** 5/23/2024

**Time (ET):** 10:00:00 AM - 11:30:00 AM

**Presentation Type:** Learning Institute

**Speaker(s):** Sandra Blackburn, LMSW, ACSW, FAOSW, OSW-C; Debra Mattison, LMSW, ACSW, FAOSW, OSW-C

### Abstract Summary:

Many social workers express positive attitudes regarding the integration of spirituality into their practice, yet far fewer consistently include spirituality assessment in practice. Professional and personal implicit bias can foster preferential valuing of empirical evidence and rational observable facts in health care delivery while overlooking wisdom, knowledge and other 'ways of seeing' available when one embraces a strengths-based perspective which recognizes (and genuinely believes in) the human capacity to transform, grow and find a sense of 'well-being' even in the midst of miserable experiences, through cancer and even in death.

When spirituality is explored with patients, social workers primarily focus on how patients may use spirituality as a resource with little examination of the importance of the spirituality of the practitioner and potential impact on client engagement, interventions and relationship with the client. Beyond client interactions, spirituality is an important factor in how oncology social workers cultivate hope and resilience in our practice and our lives that is beyond the factual and rational mind, and self-reflection about our own capacity and opportunities for self-transformation, growth and meaning through our work.

We'll invite participants to engage in a meaningful experiential activity of a self-reflective spiritual history. Skills and techniques from this guided history-taking process have dual benefits for the individual participants as well as use as a powerful clinical tool with individual patients and in support groups. The presentation will combine didactic, experiential and discussion techniques to maximize skill building and application.

### Learning Objectives:

1. Articulate the clinical relevance of integration of spirituality in strengths-based, whole-person biopsychosocial spiritual care in oncology social work practice.
2. Evaluate the balanced use of empirical, rational and spiritual data in clinical assessment.
3. Recognize and articulate increased awareness of one's own spirituality and its impact and relevance to clinical social work practice in responding to diverse clients and human suffering.

**Keywords:** Clinical Practice/Skill Building, Specialized Needs

**Educational Level:** Intermediate

**Course Designation:** Clinical (General)

**CE Credit:** 1.5

**BOSWC Domain:** 1

### References:

Almaraz, D., Saiz, J., Moreno Martín, F., Sánchez-Iglesias, I., Molina, A. J., & Goldsby, T. L. (2022). What aspects of religion and spirituality affect the physical health of cancer patients? A systematic review. *Healthcare*, 10(8), 47.

Balboni TA, VanderWeele TJ, Doan-Soares SD, et al. (2022). Spirituality in Serious Illness and Health. *JAMA*, 328(2):184–197. doi:10.1001/jama.2022.11086

Cannon, A.J., Dokucu, M.E. & Loberiza, F.R. (2022). Interplay between spirituality and religiosity on the physical and mental well-being of cancer survivors. *Supportive Care in Cancer*, 30, 1407–1417.  
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**Title:** An Introduction to the Intersection of Intellectual and Developmental Disability (I/DD) and Oncology Care

**Date:** 5/23/2024

**Time (ET):** 12:00:00 PM - 1:00:00 PM

**Presentation Type:** Paper

**Speaker(s):** Melissa Levin, MSW, LICSW

### Abstract Summary:

Cancer patients who have intellectual and developmental disabilities (I/DD) face disparities throughout the cancer care continuum. As compared to patients without I/DD, patients with I/DD are diagnosed with cancer at later stages, experience delays in their care, and are given fewer treatment options. Oncology social workers possess a clinical skill set that is well-suited to create pathways for disability competent care in medical settings. Social workers can harness their macro-level skills to address systemic inequities while also using their direct clinical skills to support patients. This session seeks to raise consciousness and preparedness among oncology social workers about patients with cancer and I/DD. The session will begin with an overview of I/DD in general and the unique needs and barriers to care experienced by oncology patients with I/DD. Clinical considerations regarding patient communication, sensory preferences and triggers, and therapeutic modifications, will be explored through a combination of teaching and audience participation. The session will provide participants with the opportunity to apply the socio-ecological framework to I/DD and cancer as a method of structuring comprehensive, patient-centered disability competent care.

### Learning Objectives:

1. Recognize psychosocial and environmental factors leading to disparities in care experienced by patients with cancer who have I/DD.
2. Utilize the socio-ecological framework to approach common clinical situations with oncology patients who have I/DD.
3. Develop potential environmental and procedural accommodations to support the experience of patients with I/DD within their oncology settings.

**Keywords:** Clinical Practice/Skill Building, Special Populations

**Educational Level:** Beginning

**Course Designation:** Clinical (General)

**CE Credit:** 1.0

**BOSWC Domain:** 1, 2-6

### References:

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**Title: Comprehensive Care in Oncology: The Role of Palliative Services and Interprofessional Collaboration**

**Date:** 5/23/2024

**Time (ET):** 12:00:00 PM - 1:00:00 PM

**Presentation Type:** Paper

**Speaker(s):** Brittany Hahn, MSW, LCSW, OSW-C

### Abstract Summary:

Palliative care's integration with hematology oncology is a critical and evolving area of research. This review emphasizes interprofessional team-based care and the key role of oncology social workers in addressing psychosocial needs. Oncology social workers provide high-frequency interventions, including advocacy, community resources, and mental health counseling, throughout the continuum of care. They are uniquely equipped to facilitate effective teamwork and resource utilization. The unique characteristics of hematology oncology practice impact palliative care delivery and referral patterns. Interprofessional practice and early palliative care integration have positive economic effects, staff retention, and patient satisfaction. This research underscores the need for a structural shift in integrating palliative care within hematology oncology, favoring an integrative approach over a consultation-based one.

### Learning Objectives:

1. Recognize the advantages and challenges associated with interprofessional team-based care.
2. Evaluate the pivotal leadership responsibilities of social workers in interprofessional oncology care teams, emphasizing their contribution to enhancing patient support, mental health, and overall well-being.
3. Compare and contrast different models of palliative care integration in hematology-oncology practice and their respective implications for patient well-being and healthcare resource utilization.

**Keywords:** Interdisciplinary Care, Pain, Palliative Care and End of Life

**Educational Level:** Beginning

**Course Designation:** Clinical (General)

**CE Credit:** 1.0

**BOSWC Domain:** 1

### References:

- Blacker, S., Head, B. A., Jones, B. L., Remke, S. S., & Supiano, K. (2016). Advancing hospice and palliative care social work leadership in interprofessional education and practice. *Journal of Social Work in End-of-Life & Palliative Care*, 12(4), 316–330. <https://doi-org.saintleo.idm.oclc.org/10.1080/15524256.2016.1247771>
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<https://doi.org/10.1136/bmjspcare-2020-002386>

**Title: Into the Woods: Exploring the Benefits of Wilderness Therapy for People Diagnosed with Cancer**

**Date:** 5/23/2024

**Time (ET):** 12:00:00 PM - 1:00:00 PM

**Presentation Type:** Paper

**Speaker(s):** Melisa Celikoyar, LCSW

### **Abstract Summary:**

Wilderness therapy can be an innovative design and program development that can support patients in their recovery from a cancer diagnosis. In this poster presentation, participants will understand the benefits of wilderness therapy, incorporating the principles of humoral theory of the four elements of nature to best support physical and mental health outcomes for patients. The goal of this presentation is to increase awareness of wilderness therapy by educating participants on the benefits, increasing access, eliminating barriers, and expanding in development.

There are many benefits to wilderness therapy including social involvement, building in self-esteem, self-confidence, and self-efficacy, and increasing physical activity. Patients are provided tools that can assist in exposure to activities in a safe setting that is nonjudgmental. These skills can be applied by improving patient's ability to communicate with health care providers to advocate for healthcare needs. This can help in strengthening resilience and help patients find their potential to overcome both physical and emotional challenges.

Wilderness Therapy shows promising growth to supporting individuals diagnosed with cancer. Health care professionals should explore the benefits of wilderness therapy as a treatment model for patients with cancer and look for opportunities to increase in program development and referrals to wilderness therapy resources. It is important to find programs and settings that are specific for individuals with cancer and have qualified licensed professionals. Wilderness therapy is an innovative design approach to addressing the physical, emotional, and social needs of individuals diagnosed with cancer.

### **Learning Objectives:**

1. Define wilderness therapy and identify at least three benefits of access to this modality.
2. Identify outcomes with wilderness therapy in cancer patients and be able to evaluate current programs and discuss how to implement in current and future settings.
3. Identify at least two barriers to access to wilderness therapy and assess skills to overcome and address them.

**Keywords:** Clinical Practice/Skill Building, Education

**Educational Level:** Beginning

**Course Designation:** Clinical (General)

**CE Credit:** 1.0

**BOSWC Domain:** 1

### **References:**

Jimenez, M. P., DeVille, N. V., Elliott, E. G., Schiff, J. E., Wilt, G. E., Hart, J. E., & James, P. (2021). Associations between Nature Exposure and Health: A Review of the Evidence. *International journal of environmental research and public health*, 18(9), 4790. <https://doi.org/10.3390/ijerph18094790>

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**Title:** Oncology Social Work Supervision: Building Cohesion through Expressive Arts

**Date:** 5/23/2024

**Time (ET):** 12:00:00 PM - 1:00:00 PM

**Presentation Type:** Paper

**Speaker(s):** Billie J. Baldwin, MSW, LCSW-C, Board-Approved Supervisor

### **Abstract Summary:**

Since COVID-19, the healthcare environment has become increasingly stressful, resulting in record levels of job dissatisfaction, and some of the first healthcare provider strikes in the U.S. Social work supervision provides a platform to practice and teach self-awareness and insight with our supervisees. The use of creative approaches in supervision provide a way to promote and develop both intellectual and emotional learning.

Social Workers have an opportunity to create our own cohesive teams, however small, by selecting and supporting each other and a carefully curated cohort of others. Cohesion, stability, and good communication are insulators against burn out. Using mindfulness, supportive supervision techniques, and person-centered, intermodal exercises create an environment of self-awareness and self-compassion. Doing these activities as a team promotes cohesion, psychological safety, and trust.

This presentation will discuss practical clinical supervision strategies and theory for social workers supervising social workers, social work students, and other allied health professionals. Drawing on person-centered and expressive art theories and mindfulness, we will discuss specific activities, approaches, and goals for individual and group supervision from a trauma-informed practice perspective.

### **Learning Objectives:**

1. Recognize the opportunity for use of expressive arts in clinical supervision.
2. Distinguish between traditional and intermodal expressive arts.
3. Examine ways to incorporate person-centered expressive arts into group and individual clinical supervision.

**Keywords:** Clinical Practice/Skill Building, Leadership/Administration

**Educational Level:** Intermediate

**Course Designation:** Clinical (General)

**CE Credit:** 1.0

**BOSWC Domain:** 2-6

### **References:**

Atkins, S. (2014). The courage to meet the other: Personal presence in the helping relationship. In Eberhart, H. and Atkins, S. (Eds). Presence and Process in Expressive Arts Work: At the Edge of Wonder. (pp 59-84). London: Jessica Kingsley Publishers.

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**Title:** Patient Navigation Reimbursement and Sustainability

**Date:** 5/23/2024

**Time (ET):** 12:00:00 AM - 12:00:00 AM

**Presentation Type:**

**Speaker(s):** Elizabeth Franklin, PhD, MSW; Bibiana Bishop, LSW, Anabella Aspiras, MPA, BN

**Abstract Summary:**

To help provide oncology social workers with up-to-date information regarding the sustainability of patient navigation through CMS, AMA, and private payer reimbursement, this session will provide an overview of the current state of navigation including a call to Action from the White House Cancer Moonshot, details on how to access navigation codes, and a real-world case study on social work implementation of the codes. This 1- hour event, with accompanying continuing education credits, will achieve the following goals:

- Enable attendees gain better understanding of the status of Oncology Patient Navigation reimbursement and sustainability
- Provide information on how Oncology Social Work navigators can utilize the codes
- Share real life application of the Oncology Navigation Standards of Professional Practice and the CMS and AMA codes
- Encourage oncology social work leadership in patient navigation
- Discuss the promotion and future state of Oncology Patient Navigation

**Learning Objectives:**

1. Discuss the Oncology Patient Navigation reimbursement codes and understand the current state of sustainability.
2. Highlight how social work navigators can utilize the codes.
3. Encourage oncology social work leadership in patient navigation.
4. Discuss the promotion and future state of Oncology Patient Navigation.

**Keywords:** Patient Navigation,

**Educational Level:** Intermediate

**Course Designation:** Clinical (General)

**CE Credit:** 1.0

**BOSWC Domain:** 2-6

**References:**

**Title: Contextualizing distress screening and response in a multicultural environment: Triangulating psycho-social support, navigation, and programmatic interventions**

**Date:** 5/23/2024

**Time (ET):** 2:00:00 PM - 3:00:00 PM

**Presentation Type:** Panel Symposium

**Speaker(s):** Vipasha Agnihotri Gupta, LCSW, OSW-C; Margaret Faulds, MSN, RN, CNL; Robert David, MA;

**Abstract Summary:**

Boston Medical Center (BMC) is the largest safety net hospital in New England addressing the needs of a highly multilingual and multicultural patient population. Annually, we engage with more than 50 languages, extending holistic support by triangulating navigation, support programs and psycho-social support. In this presentation we will share how we made the distress tool more functional with the Epic changes and followed-through with diagnosis specific navigation, Psycho-social support, and programmatic interventions. Unique and distinct roles of navigators, social workers and support groups and programs would be shared as well as how they intersect each other extending holistic care.

Specifically in this panel symposium the participants will a) learn how navigation; support programs and psychosocial support triangulate to address the needs in a multicultural and multilingual context b) gain a better understanding of how inpatient-outpatient oncology social work complement each in improving distress screening rates c) learn about epic and distress tool modifications that led to significant improvement in distress screening rates.

**Learning Objectives:**

1. Explain how navigation, support programs and psychosocial support triangulate to address the needs in a multicultural and multilingual context.
2. Describe Epic changes and distress tool modifications that led to significant improvement in distress screening rates.
3. Discuss how inpatient-outpatient oncology social work complement each in improving distress screening rates.

**Keywords:** Distress/CoC, Clinical Practice/Skill Building

**Educational Level:** Intermediate

**Course Designation:** Clinical (General)

**CE Credit:** 1.0

**BOSWC Domain:** 1, 2-6

**References:**

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**Title: Fostering Future Leaders: Enhancing Oncology Social Work Student Placements**

**Date:** 5/23/2024

**Time (ET):** 2:00:00 PM - 3:00:00 PM

**Presentation Type:** Panel Symposium

**Speaker(s):** Lori A. Schwartz, LCSW-R, OSW-C; Alison Snow, PhD, LCSW-R, OSW-C; Mi Zhou, LCSW, OSW-C; Liza Lundgren, LMSW

**Abstract Summary:**

Social work practicum instructors need to be in tune with both the schools and the student's expectations, while simultaneously teaching the necessary tools that prepare them for working in health care settings. Post pandemic, it has become more challenging to fill social work positions in health care settings, making robust training programs even more crucial. This panel presentation will be facilitated by four oncology social workers at an urban, large, academic medical center that has numerous satellite locations. It will focus on the elements of the MSW training program that we have developed. It will show the depth and breadth of learning. Some key discussions will center around our collaboration with community partners, opportunities to attend local conferences, facilitation of support groups and programming, and an emphasis on leadership development including publishing and presenting during their practicum year. Furthermore, the presentation will demonstrate expansion of the student practicum to be culturally congruent with the patient population that we serve. This program has benefited our supportive services program by creating an internal pathway to hiring well-trained, knowledgeable social workers. It is through the pedagogy of our seasoned social workers, with an emphasis on leadership skills, and what they bring to the education process, that we will be able to sustain the growth of future OSW's.

**Learning Objectives:**

1. Develop and implement an MSW training program in oncology social work.
2. Implement strategies for professional development and obtaining mastery through participation in field/practicum education.
3. Identify three ways to incorporate leadership opportunities into the field/practicum process.

**Keywords:** Leadership/Administration, Education

**Educational Level:** Intermediate

**Course Designation:** Clinical (General)

**CE Credit:** 1.0

**BOSWC Domain:** 2-6

**References:**

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**Title: National Guideline Development: Elevating the Voice of Oncology Social Work**

**Date:** 5/23/2024

**Time (ET):** 2:00:00 PM - 3:00:00 PM

**Presentation Type:** Panel Symposium

**Speaker(s):** Michelle Ferretti, LCSW, OSW-C; Erin Price, LICSW, OSW-C; Julia Rowland, PhD; Sage Bolte, PhD, LCSW, CST, FAOSW

### **Abstract Summary:**

Professional social workers are the nation's largest group of mental health service providers. In fact, there are more clinically trained social workers than psychiatrists, psychologists, and psychiatric nurses combined (NASW, 2023). This presentation will explore recently released guidelines by American Society of Clinical Oncology (ASCO) and the Society of Integrative Oncology (SIO) as a model to discuss the process of developing national guidelines for psychosocial oncology care, the role of social workers in the development of these guidelines, and the potential challenges and risks if social workers are not included.

Guidelines can be a strong tool for advocacy of oncology social work and rationale for increased services for the patients we serve because they influence what services are prioritized and reimbursed (Somerfield, Hagerty & Desch, 2006). The professional and theoretical background of social workers, a holistic view of the person in their environment, is unique in the medical interdisciplinary team. Social workers are key to ensuring that guidelines related to psychosocial care and quality of life outcomes consider aspects like access and social drivers of health.

Sage Bolte, PhD, LCSW, CST, FAOSW and Julia Rowland, Ph.D, panelists from recent ASCO and ASCO/SIO guidelines will share about the process of guideline development and the value of the voice of psychosocial providers. This interactive presentation will provide attendees the opportunity to explore how to elevate the voice of social work in oncology care and therefore increase the financial and logistical support for our work.

### **Learning Objectives:**

1. Explain the purpose and process of developing national guidelines for emotional and physical side-effect management within the context of cancer.
2. Evaluate the role of social workers and their value in the development of national guidelines for emotional and physical side-effect management within the context of cancer.
3. Identify at least two ways to elevate the voice of social work in oncology care, therefore increase the financial and logistical support for our work.

**Keywords:** Clinical Practice/Skill Building, Advocacy

**Educational Level:** Intermediate

**Course Designation:** Clinical (General)

**CE Credit:** 1.0

**BOSWC Domain:** 2-6

### **References:**

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**Title: Closing Keynote: Lessons From My Mothers: Writing Our Own Story**

**Date:** 5/23/2024

**Time (ET):** 3:15:00 PM - 4:30:00 PM

**Presentation Type:** General Session

**Speaker(s):** Ayaka Nakaji, MSW, LCSW, CCM; Michael Grignon, LMSW, CCM, MBA

**Abstract Summary:**

This presentation explores how historical context and built environment impact our health and disparities in cancer incidence, access to care and treatment outcomes in marginalized communities with a particular focus on racism and trauma, and how oncology social workers can improve assessment and service provision based on this knowledge. The presentation will describe ways in which AOSW members can utilize the organization to foster connections for professional growth and enrichment, drawing from personal experience. The presentation will utilize didactic lecture, personal storytelling, visual content as well as participatory activities with the audience.

**Learning Objectives:**

1. Describe pathways in which racism, socio-economic position and historical trauma impact prevalence and incidence of cancer and treatment outcomes in marginalized communities and how this context may manifest in individual patient cases.
2. Describe at least three ways to improve bio-psycho-social-spiritual assessment and intervention utilizing the lens of health equity and cultural humility.
3. Describe at least two ways to utilize AOSW membership for professional enrichment and growth through community building, mentorship and coaching.

**Keywords:** Special Populations

**Educational Level:** Beginning

**Course Designation:** Cultural Competency

**CE Credit:** 1.25

**BOSWC Domain:** 1, 2-6

**References:**