

Profiles in Social Work

Episode 30 – Susan Blacker

Intro - Hi, I'm Charmaine Williams, Associate Professor and Associate Dean, Academic, for the University of Toronto, Factor-Inwentash Faculty of Social Work. Welcome to Profiles in Social Work. This podcast series is produced by our Faculty and Alumni Association. In 2014 the Factor-Inwentash Faculty of Social Work is celebrating 100 years of contributing to Social Work Practice and Education. You can find out more about us by visiting us online at www.socialwork.utoronto.ca We're glad you could join us today. The series Profiles in Social Work highlights how social workers are making a positive difference in our communities by presenting stories of how social work graduates are using their degrees. We hope you will enjoy this series. Especially if you are thinking about a career in social work or interested in hearing about what social workers do.

Profile – Susan Blacker

My name is Susan Blacker and I graduated from University of Toronto Factor-Inwentash Faculty of Social Work in 1995.

So I became interested in social work actually when I was in high school and I remember getting a report, it listed a range of different professions that they were suggesting might be appropriate for me to explore; and social work was listed and I remember thinking I don't know a whole lot about what social workers do but it would be interesting to explore it. So I did a little research and learned about a social worker who worked in a family practice setting and did counseling with individuals and families who were having a whole range of difficulties. The more that I sort of learned about the work that she was doing, the more I thought that sounded really kind of neat and so my beginning understanding of social work was the role of counselor. I particularly was interested in the role that a social worker might be playing working alongside others in a health care system.

I began to then explore what training would be required. That's when I understood that there was training both at the community college level if I was interested in social service work, but I was really gearing to go to university at that point so I began to begin to explore what the bachelors of social work programs might entail and once I

completed my bachelor's knew that I wanted to go on and do graduate studies in social work.

I was so impressed by the research that was happening, by the faculty, the breadth of the courses I was able to take. I came very interested in the area of health but I was really able to take other kinds of courses that really rounded out my knowledge and understanding. I remember really deepening my appreciation of evidence-based practice and understanding what research can tell us about how best to help individuals and families and groups; to guide us when you're sitting in a room with somebody who's looking to you for some help solving problems, improving the quality of their life, navigating systems that are complicated or just even understanding and articulating the problems that they're facing so that they can get to a point where they are able to overcome some of those obstacles. For me the Faculty of social work really taught me a lot about the connection between practice and research and back and forth.

The area that I've practiced in for the majority of my career has been specifically working with cancer patients and their families. And it's been really important to bring to that work some theoretical understanding of what the experience might be like for individuals who are facing a major life crisis, but also to understand where some of the specific interventions that we know from our social work knowledge base can be very, very helpful. So one example would be the whole concept of cognitive behavioral therapy and what would that mean as a social worker to be able to bring that is part of one's tool kit to the bedside or to a clinic to help a patient and their family. So one thing we often see with people who are living with cancer is a high incidence of people experiencing a lot of anxiety and it can be for some people quite debilitating. Very commonly for folks who are newly diagnosed with cancer there's a tremendous life change that needs to happen. So people worry about things like how am I going to get transportation to and from my appointments? How am I going to pay for my medications? How am I going to tell the people in my life? How am I going to tell my kids? How do I deal with the major questions I'm worrying about like am I going to die? Is this disease going to take my life or is it going to leave me unable to do the things that I really love and enjoy? And so as a social worker I can get involved very early in their journey, working with other members of the healthcare team, to really help them navigate some of those difficult questions, to find resources that are going to be helpful to them and to help them regain control in a situation that leaves them feeling quite out of control.

First and foremost the thing that we learned in social work is be a really excellent listener. And you have to have impeccable interview skills because often the work in the

hospital setting is quite fast paced, so you need to be able to ask the right questions in the right way to get the information that you need to then know what's going to be helpful for that individual and their family. Being a social worker I've learned those skills; that's what I gained from my social work training.

The golden rule in social work is to start where the client is. You have to really understand what are they seeing as the most significant issue or challenge that they're facing today, and that's often where you need to start. And so it might be somebody really worrying about the financial impact of their disease; so that might be where you start first as a social worker, is making sure they're connected with resources that are available to them; that they're able to navigate the complicated social services system that exists; that they've got the right resources that they're going to need to help them get through their treatment. And then the next priority they might identify is learning how to better manage the anxiety and worries that they're facing related to their treatment. And so that might be another visit with the social worker where you have some conversation with them about some strategies that might be helpful. It could be helping them understand how using some relaxation techniques for example, might help them. If they're describing worrying in the middle of the night about what's going to happen, so not fully understanding some aspect of their treatment, and working with other members of the team to make sure that that information gap is closed. Being an advocate; being a broker to help them understand where the system has resources available and how they apply for those or what the eligibility criteria are, what the application process looks like and making sure that they get connected to what they need.

It's such a rewarding job. When people come in and they're feeling completely overwhelmed in their experience and you can point them in the right direction, you can do some tangible things that are going to make a difference to how they're feeling about what they're going through. It's very gratifying. It's also nice when you get to work with somebody over time to see what happens for them, to see the resilience of the human spirit. I am in awe of that all the time when I've worked directly with patients and families.

For me one of the greatest rewards of this work has been the lessons patients have taught me. Working with people who are living with cancer or who come to receive palliative care, you learn to appreciate every day. You learn not to sweat the small stuff. You learn the importance of relationships, of saying the "thank you"s and "I love you". And so I've learned some pretty powerful lessons as a young person and have carried those through my career. And I learned those early on, life lessons that sometimes it

takes people to the end of their life to realize. So I'm really grateful for patients shining the light on the importance of that.

When I teach students and they say "wow you work in oncology or you work in palliative care, how do you do that? Isn't it sad or don't you find it depressing?" I talk a lot to them about the importance of self-care. And it is very important to find balance in your career and your home life, to know when you need to recharge your batteries, to stay connected to your professional opportunities for growth and development, to always update and refresh your plan around what's going to keep you energized and interested in this work. My path has been moving from providing care at the bedside and in the clinic to doing teaching, to getting involved in some research and now I'm in the role of an administrative person who's looking at developing the best system of care possible for patients moving through a hospital. Mentors are really important. We don't talk a lot about that in social work but it's very important to have somebody that you can look to for helping you seek out some of those opportunities, who will be invested in helping you think about where you could grow, when you maybe should be thinking about some change, where you can go to learn more to really challenge yourself. I'm a big believer that your education as a social worker doesn't stop the day that you leave with the diploma in hand.

in terms of my day-to-day work I use my social work systems knowledge every day in terms of thinking about how the health care system supports patients and families in their journey and that's not just the medical care that they may need to access but it's how that experience helps them in achieving wellness regardless of where they may be. And so I've had the opportunity to create some new roles in the organization that I work with that really focus on ensuring that not only are they getting the medical care that they might need but they're also getting the psychosocial care that they're going to need. It's very important that patients have support along that journey and that they have individuals who are highly skilled at delivering that kind of care as part of their team.

Because I spent so much time working in clinics and with teams at the bedside, I really bring a deep understanding of what the experience for any individual patient or family might be coming into the health care system. And so now working in an administrative capacity, I'm able to take that understanding and see where there are opportunities to make improvement in our system. I work very closely with teams around trying to make sure that if we've seen an increasing demand for example on a particular service or resource that exists, that we're being very thoughtful about what is that going to look like from the patient's perspective. I work with teams to ask the question are we providing

the best care possible and where are there opportunities to do even better? And what would it take to get to the highest possible standard of care? So I often get to have input in terms of resource allocations, and when we've seen particular challenges that our clients are facing I can give input around 'maybe we could offer some psycho-educational sessions' so that our individual social workers aren't having the same conversation with twenty people in a week about the same thing, but there would be actually greater benefit to being able to offer that as a group where patients actually could learn from each other's experience as well as having access to the experts or the folks who may be able to help them navigate the system. Not being in the day-to-day busy work of managing a caseload has allowed me to support teams to make some decisions about how they might even do some things differently or partner with a nurse in the clinic or the dietitian to do things differently that's going to meet a larger group of patients needs instead of always doing things in one on one basis. I've worked very closely with my nursing colleagues on a project that's helped us proactively identify when patients are having difficulties from both the physical symptom perspective but also in terms of some of their emotional well-being. I've worked on a project that's been implemented in a large outpatient clinic that has patients now each visit having the opportunity to let us know how they're doing and to be able to proactively say here are some areas where I need your help.

The work that I've done around developing inter-professional education is one area that I'm really proud of. It's exciting to be able to help teach individuals who are entering a profession how to be the best collaborator possible. Where people have come to the table, they've come to consensus around what a problem is that we're trying to solve, and have come up with solutions that everybody felt at the end of the day were the best wants to proceed with, those are the projects I'm most proud of; not things that I've necessarily individually contributed but where I maybe have played a facilitator role and brought a team together and at the end of the day they've created something that's really meaningful for them as a team and equally meaningful and helpful to clients and their families.

Often when students come and meet with me and they say "gee, I'm thinking about doing my Master's" I'll say take a look online, see what the requirement is for job postings in areas that you're interested in. This is an important degree to have. The skills and the perspective that I have as a social worker have really benefited me and given me a lot more opportunities than I realized probably even existed at the time when I filled in my application and sent it in hoping and crossing my fingers I'd get accepted to the MSW program. So think that through carefully.



FACTOR-INWENTASH
FACULTY OF SOCIAL WORK

Outro - This is Charmaine Williams from the University of Toronto Factor-Inwentash Faculty of Social Work. Thank you for listening to our podcast. In 2014 our school is celebrating 100 years of social work research, teaching and community service. For more information about the faculty and our programs we invite you to visit our website at www.socialwork.utoronto.ca