

## **Mini Mini Workshops**

### **Mini Workshop 1**

#### **Addressing Functional Impairments in ADHD: Assessment and Treatment of Organizational Deficits in Children With ADHD**

*Richard Gallagher, Ph.D., NYU Child Study Center & NYU School of Medicine*

*Lauren Knickerbocker, Ph.D., NYU Child Study Center & NYU School of Medicine*

*Moderate level of familiarity with the material*

Data indicate that over 50% of children with ADHD have impairing organization, time management, and planning deficits (OTMP) that reduce school performance, create major homework problems, and add to family conflict (Abikoff & Gallagher, 2009). Through extensive research, methods for evaluating and treating OTMP deficits in all subtypes of ADHD have been created (Abikoff & Gallagher). This Mini-Workshop will provide the capacity to conduct this work in clinical practice. In over a decade of work, Organizational Skills Training (OST; Gallagher, Abikoff, & Spira, in press) was created to address the practical gaps that children with ADHD demonstrate at home and at school. A large randomized clinical trial showed that children participating in OST had improvements in OTMP skills, academic performance and productivity, homework performance, level of family conflict, and attitudes towards school and teachers. Notably, the improvements in these areas lasted into the next school year (Abikoff et al., 2013).

Methods for systematically assessing OTMP skills through interviews and the use of nationally normed rating scales (Abikoff & Gallagher, 2009) will be presented. With demonstration tapes, review of session content, and discussion, participants will also learn to administer the 20-session OST for tracking assignments, managing materials, managing time, and improving planning. Finally, practitioners will learn how to implement the research protocol in a clinical setting. Presenters are the first author of the treatment manual, who has extensive experience in supervising the protocol (RG), and a postdoctoral fellow responsible for implementation efforts in one clinical setting (LK).

#### **You will learn:**

- What typical organization, time management, and planning deficits children with ADHD demonstrate and how they impact home and family functioning
- How to systematically evaluate organizational, time management, and planning deficits

- How to conduct a manualized treatment to improve organization, time management, and planning skills that is empirically tested and proven to have positive effects on family functioning and academic productivity and performance

### **Suggested Readings:**

Abikoff, H., & Gallagher, R. (2008). Assessment and remediation of organizational skills deficits in children with ADHD. In K. McBurnett & L. Pfiffner (Eds.), *Attention Deficit Hyperactivity Disorder: Concepts, controversies, new directions* (pp. 137-152). New York: Informa Healthcare.

Abikoff, H., & Gallagher, R. (2009). *COSS: The Children's Organizational Skills Scales Technical Manual*. North Tonawanda, NY: Multihealth Systems.

Abikoff, H., Gallagher, R., Wells, K.C., Murray, D.W., Huang, L., Lu, F., & Petkova, E. (2013). Remediating organizational functioning in children with ADHD: Immediate and long-term effects from a randomized controlled trial. *Journal of Consulting and Clinical Psychology*, *81*, 113-128. doi: 10.1037/a0029648

## **Mini Workshop 2**

### **Taking Anxiety Disorder Treatment to the Next Level: Using Exposure and Response Prevention for Maximum Effect**

*Patrick B. McGrath, Ph.D.*, Alexian Brothers Center for Anxiety and Obsessive Compulsive Disorders

#### *Basic level of familiarity with the material*

For the beginning therapist, anxious patients can be intimidating, as can the idea of exposing someone to the very thing that they fear. This Mini-Workshop will review the treatment of anxiety disorders through the lens of Exposure and Response Prevention (ERP). Instead of focusing on diagnosis of anxiety, this session will be a practical application of how to utilize ERP to treat anxiety disorders. Specific ERP techniques for panic, OCD, PTSD, social anxiety, school anxiety, and specific phobias will be reviewed, drawing on numerous case examples. Further, participants are encouraged to e-mail case questions to [Patrick.mcgrath@alexian.net](mailto:Patrick.mcgrath@alexian.net) prior to the talk so that those very cases can also be discussed during the presentation (a link to

case examples will be provided to participants after the meeting). Further, we will practice specific techniques (interoceptive exposures, imaginal exposures, mistake practice, etc.) during the presentation to get a specific feel for the best ways to actually apply ERP to your caseload.

**You will learn:**

- The basic theory behind ERP
- A simple way to present ERP to patients and to start to use ERP in daily sessions with patients
- Specific ERP techniques to use with all of the different anxiety disorders

**Recommended reading (optional):**

Abramowitz, J. S., Deacon, B. J., & Whiteside, S. P. (2011). *Exposure therapy for anxiety: Principles and practice*. New York: Guilford Press.

**Mini Workshop 3**

**Effectively Interacting With the Media**

Simon A. Rego, PsyD, ABPP, ACT, Montefiore Medical Center

*Basic level of familiarity with the material*



Despite creating an impressive number of evidence-based treatments that effectively and efficiently target a wide range of psychological disorders, the fact remains that knowledge about these treatments remains outside of the awareness (and as a result, access) of a significant proportion of the population. As such, dissemination of evidence-based treatments has now become a major focus

across all aspects of medicine – including psychology and mental health. One often underutilized method of dissemination by clinical psychologists is communicating with the media. One reason for this may be due to the fact that despite having years of rigorous training as scientists and practitioners, most psychologists do not receive any training on how to effectively interact with the media. Complicating matters is the fact that the media landscape has changed rapidly in the last 20 years, with print newspapers, radio, and, more recently, television all losing their centrality in the media landscape as an increasing number of people get their news from digital sources—including social media sites like Twitter and Facebook. This Mini-Workshop will focus on the keys to successful dissemination of scientific information to the media by reviewing the factors that can either facilitate or interfere with getting your message out to the public via all forms of media technologies—traditional and mass media, such as radio, television, film, video, newsprint, and magazines, as well as new and emerging technologies and applications, such as social media—before, during, and after the interview.

**You will learn:**

To understand the ethics and risks involved in working with the media

To determine how and when to do an interview

How to manage the interview process

**Mini Workshop 4**

**Signaling Matters: New Skills-Based Approaches for Enhancing Social Connectedness**

*Thomas. R. Lynch, Ph.D., University of Southampton*

*Basic level of familiarity with the material*

Since Darwin's (1872/1965) seminal book, *The Expression of the Emotions in Man and Animals*, a number of theorists and researchers have argued that emotions evolved to communicate. However, most treatment approaches have tended to overlook this observation as science became increasingly sophisticated in investigating a person's internal experience (e.g., cognition, physiology, attention, neurobiology). Research shows that disingenuous or inhibited emotional expression is often perceived by others as inauthentic or deceptive—resulting in social ostracism and increased experiences of depression/anxiety. Social isolation and ostracism have been repeatedly linked to severe and difficult-to-treat problems, such as suicidal behavior, personality disorder, anorexia nervosa, and refractory depression. Based on 18 years of research, two NIMH-funded randomized controlled trials (RCT) and an ongoing multicenter RCT in the U.K. (REFRAMED; funded by MRC), the aim of this Mini-Workshop is to introduce clinicians to several strategies that are part of a new treatment linking the *communicative functions of emotional expression* to the *formation of close social bonds*. Novel approaches designed to enhance social connectedness will be introduced—including skills designed to activate a neurologically based social-safety-engagement system, signal cooperation, encourage genuine self-disclosure, and break down overlearned expressive inhibitory barriers using slides, handouts, video clips, and role-plays.

## **Mini Workshop 5**

### **A Team Approach to Training and Clinical Care of Behavioral Problems in Primary Care**

Patricia Robinson, PhD, Community Health of Central Washington

Debra Gould, MD, MPH, Community Health of Central Washington

Kirk Strosahl, PhD, Community Health of Central Washington

#### *Basic level of familiarity with the material*

Increasingly, behavioral health providers are working as members of the Patient Centered Medical Home. In this context, they have opportunities to train primary care providers and residents in cognitive and behavioral therapies and to make adjustments to these therapies based upon feedback from their new medical colleagues. They also have opportunities to design and conduct research studies with an aim of better informing team-based implementation of

evidence-based treatments. Presenters of this Mini-Workshop will include two psychologists and a physician. After a brief introduction to clinical, educational, and research opportunities in primary care, participants will be introduced to a system for supporting patient development of a healthy mind and body. This approach includes case conceptualization and team-based interventions that enhance patient connections with important values, experience of present-moment awareness, flexible shifting of perspectives of self, acceptance of difficult cognitive and emotional experience, and ability to initiate and sustain meaningful behavior change. Additionally, this Mini-Workshop will suggest a clinical approach for behavioral health and primary care clinicians to use to enhance their resilience in this interesting and challenging practice setting.

**You will learn:**

1. To describe one clinical, one educational, and one research opportunity in primary care
2. To apply a case conceptualization tool to assist with development of a team-based intervention
3. Behavioral interventions for clinicians to use to enhance their resilience in providing primary care services

**Mini Workshop 6**

**Writing Productivity and the Academic Peer-Review Process: A Workshop for Graduate Students, Early-Career Professionals, and Academic Advisors**

*Andres De Los Reyes, Ph.D., University of Maryland at College Park*

*Basic level of familiarity with the material*



Trainees and early-career professionals rarely receive formal training in principles and practices of academic writing. Thus, it is not surprising that within formalized instructional settings (e.g., doctoral program curricula), rarely discussed among trainees, early-career professionals, and their academic advisors is the key issue of how to develop and implement strategies for productive academic writing. Fortunately, evidence-based strategies exist for improving academic writing productivity that can be of use to trainees, early-career professionals, and academic advisors (e.g., Boice, 1990). This Mini-Workshop will focus on evidence-based principles and practices geared toward increasing academic writing productivity, with an emphasis on writing manuscripts intended for submission to and publication in peer-reviewed journal outlets. First, barriers to productive academic writing will be identified and discussed, along with evidence-based strategies for overcoming these barriers to writing productively. Second, attendees will be provided with concrete tools for implementing evidence-based writing productivity strategies in their daily lives, with the key goal of maintenance of these strategies for long-term use. Third, attendees will receive a primer on the academic peer-review process, as well as learn strategies for attaining successful peer-review and publication outcomes within this process. This Mini-Workshop is structured to include both lecture-based and interactional (e.g., group deliberation and discussion) material, as well as illustrative examples of key components (e.g., keeping writing productivity record logs and databases).

**You will learn:**

1. Barriers to productive academic writing and evidence-based strategies for overcoming these barriers
2. Implementing productive writing strategies for long-term use and effectiveness
3. Background information on the academic peer-review process and strategies for success within this process

### **Recommended readings:**

Boice, R. (1990). *Professors as writers: A self-help guide to productive writing*. Stillwater, OK: New Forums Press.

Marsh, H.W., Jayasinghe, U.W., & Bond, N.W. (2008). Improving the peer-review process for grant applications: Reliability, validity, bias, and generalizability. *American Psychologist*, *63*, 160-168. doi: 10.1037/0003-066X.63.3.160

Silvia, P.R. (2007). *How to write a lot*. Washington, DC: American Psychological Association.

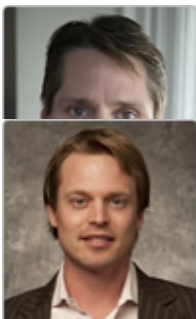
### **Mini Workshop 7**

#### **Running Into Well-Being: Exercise for Mood and Anxiety Disorders**

*Michael W. Otto, Ph.D.*, Boston University

*Jasper A. J. Smits, Ph.D.*, Southern Methodist University

*Basic level of familiarity with the material*



In this Mini-Workshop, we discuss an intervention with strong biological



effects, a broad spectrum of efficacy, and targeted effects that rival that obtained by either CBT or pharmacotherapy. Yet, its application to date has been seriously hindered by relative inattention to the motivational, cognitive, and contextual determinates of its successful application. In other words, this Mini-Workshop attends to the powerful role that clinicians can play in enhancing treatment outcome and promoting general health by applying exercise interventions for mood. The outcome evidence for exercise as a stand-alone intervention and in combination with CBT will be reviewed, with attention to the range of benefits that may explain its mechanism of action. In addition, this session is devoted to review of strategies for helping patients understand and overcome motivational issues—the perils of good intentions and the pitfalls that derail exercise attempts. Emphasis is placed on strategies to help patients get to exercise and how to make it feel good. As such, this Mini-Workshop is as much a study of motivational strategies for clinicians as it is of exercise promotion.

### **You will learn**

1. The efficacy of exercise for treating mood and anxiety disorders
2. Common barriers to exercise enjoyment
3. Motivational strategies for enhancing the initiation and maintenance of regular exercise

### **Recommended Readings**

Asmundson, G. J., Fetzner, M. G., Deboer, L. B., Powers, M. B., Otto, M. W., & Smits, J. A. (in press). Let's get physical: A contemporary review of the anxiolytic effects of exercise for anxiety and its disorders. *Depression and Anxiety*, PubMed PMID: 23300122.

Otto, M. W., & Smits, J. A. J. (2011). *Exercise for mood and anxiety: Proven strategies for overcoming depression and enhancing well being*. New York: Oxford University Press.

Stathopoulou, G., Powers, M. B., Berry, A. C., Smits, J. A. J., & Otto, M. W. (2006). Exercise interventions for mental health: A quantitative and qualitative review. *Clinical Psychology: Science and Practice*, 13, 179-193.

**See also:** <http://www.psychologytoday.com/blog/exercise-and-mood>

## **Mini Workshop 8**

### **Psychopharmacology for Mental Health Providers: Mood, Medication, and Genetics**

*Sharon M. Freeman Clevenger, Indiana Center for Cognitive Behavior Therapy*

*Moderate level of familiarity with the material*

Understanding psychotropic medications is becoming increasingly more important for all health-care practitioners. Due to limitations in time and training, many prescribers of psychotropic medications are limited to as little as 15 minutes to diagnose a mental health disorder and select these medications. As a result, mental health practitioners who do not prescribe often face the daunting task of evaluating medication choice, effectiveness, side effects, and educational needs of their clients taking psychotropic medication. All health-care providers who deal with depression, anxiety, psychosis, and other mental health problems have concerns about prescribers' selection for the presenting mental health disorder, dosing issues, interaction issues with other medications and/or foods, as well as differentiating between side effects and expected effects of these medications. In addition, many psychiatric prescribers are now using genetic testing to drive prescribing choices, which adds many additional pieces to the educational discussions with clients.

It is increasingly important that all mental health-care providers become knowledgeable about appropriate use of psychotropic medications, the mechanisms of drug action, genetic testing results and implications, and recognition of specific side effects. With this knowledge, mental health treatment can be optimized for clients. The intent of this Mini-Workshop is to expand your knowledge pertaining to the safe and effective selection, application, and management of psychotropic medications.

#### **You will learn:**

- To define the brain chemistry of psychiatric disorders and how these are affected by medication
- To understand the most common types of genetic variants that result in biological problems taking certain categories of medications
- To understand the categories of psychiatric medications used, when their use is indicated, and the side effects of various medications—as well as how to assist your clients in managing these effects
- To assess the effectiveness of medications and offer recommendations to the prescriber for dosage changes, or termination of medication

#### **Recommended readings:**

Sadock , B. (2007). *Kaplan and Sadock's synopsis of psychiatry: Behavioral sciences/clinical psychiatry* (10th ed.). Philadelphia: Lippincott, Williams and Wilkins.

Stahl, S. (2011). *Essential psychopharmacology*. Cambridge: Cambridge University Press.

Stahl, S., (2011). *The prescribers guide*. Cambridge: Cambridge University Press.

## **Mini Workshop 9**

### **Introduction to Mindfulness-Based Cognitive Therapy for Children (MBCT-C)**

*Randy J. Semple, Ph.D.*, University of Southern California

#### *Basic level of familiarity with the material*

This is an introductory workshop for clinicians who treat children suffering from debilitating worries and anxiety. Mindfulness-Based Cognitive Therapy for Children (MBCT-C) is an innovative program designed to help children manage anxiety and stress with care and compassion. Based on the MBCT program for adults, MBCT-C combines the practice and clinical application of mindfulness meditation with the tools of cognitive therapy in a format that is child-friendly and engaging. Background will be provided about the theoretical foundations of MBCT-C, its research support, and the developmental adaptations necessary when implementing a mindfulness-based treatment approach with children. The 12-session MBCT-C program will be described in detail with opportunities of hand-on practice of a number of activities. MBCT-C emphasizes the importance of the clinician's own meditation practice. Clinicians will learn ways to use the self-knowledge gained from his or her own practice to help children develop new ways of relating to the mind states that are characteristic of anxiety disorders. We will explore through discussion, role-plays, and experiential activities, different ways that mindful awareness activities are taught to children.

#### **You will learn:**

1. The origin, rationale, and aims of MBCT-C
2. To articulate the main interventions used in MBCT-C
3. To recognize the developmental adaptations needed to conduct mindfulness-based interventions with children
4. The importance of one's own meditation practice in facilitating the social-emotional resiliency of children

#### **Recommended readings:**

Semple, R. J., & Lee, J. (2011). *Mindfulness-based cognitive therapy for anxious children: A manual for treating childhood anxiety*. Oakland, CA: New Harbinger Publications.

Segal, Z. V., Williams, J. M. G., & Teasdale, J. D. (2013). *Mindfulness-based cognitive therapy for depression* (2nd ed.). New York: Guilford

## Mini Workshop 10

### Cultural Competence in CBT: A Process, Skills-Based Model

*Steven Lopez, PhD*, University of Southern California

*Gabriela Nagy*, University of Wisconsin-Milwaukee

*Maria Santos*, University of Wisconsin-Milwaukee

*Jonathan Kanter, PhD*, University of Wisconsin-Milwaukee

*Basic level of familiarity with the material*



There is a growing need for mental health professionals to provide evidence-based practices in a culturally competent manner. This Mini-Workshop provides an introductory training in a cultural competence model for mental

health professionals using cognitive-behavioral treatments (CBT). The training follows an active learning format, which includes strategies such as modeling, behavioral rehearsal, and feedback on several core cultural competence strategies. This Mini-Workshop is based on the research collaboration between

Drs. Steven Lopez, Linda Garro, and Alex Kopelowicz; developers of the Shifting Cultural Lenses model of cultural competence; and Dr. Jonathan

Kanter, developer of a modular, active-learning approach to training behavioral

activation. The presenters will provide an overview of the model for a general audience of

cognitive behavioral therapists. The model itself encompasses a process of tailoring treatment to the client's local social world rather than necessitating learning specific cultural content based on race or ethnicity, and the process itself is operationalized into discrete skills that are easy to learn. Training will incorporate a discussion of the definition of culture, why culture matters in providing mental health care, outline key principles of culture, and then train core cultural competence skills using role-plays and interactive exercises.

## **Mini Workshop 11**

### **How to Integrate Spirituality Into Cognitive Behavioral Therapy: A Brief Intervention**

*David H. Rosmarin, PhD, McLean Hospital/Harvard Medical School*

*Basic level of familiarity with the material*



Spirituality is “very important” to some 56% of Americans (Pew Forum, 2007), particularly during times of distress. However, many practitioners of CBT are reticent to address this domain in treatment due to a lack of training and widespread perception that spirituality is at odds with the core principles of behaviorism. This serves as a barrier to the dissemination of evidence-based treatments as many patients desire spiritually integrated care. Furthermore, the current state of affairs fails to appreciate that spiritual practice might constitute the most widely utilized set of emotion-regulation strategies worldwide.

This Mini-Workshop will present a brief clinical intervention to integrate spirituality into CBT. Attendees will learn (a) how to effectively assess whether patients are interested in spiritually integrated treatment, (b) how to assess for both adaptive and maladaptive psychological functions of spiritual belief/practice in patients' lives, and (c) how to facilitate the inclusion of spiritual activity into treatment where appropriate. Attendees will see a mock demonstration of

the intervention and receive detailed handouts to aid implementation in diverse clinical settings. Case examples will be utilized where appropriate to illustrate key points.

**You will learn:**

- How to assess for patients' interest in spiritually integrated treatment
- How to assess for both adaptive and maladaptive psychological functions of spiritual belief/practice
- How to facilitate the inclusion of spiritual activity into treatment

**Mini Workshop 12**

**Core Competencies in CBT: Becoming an Effective and Competent Cognitive-Behavioral Therapist**

*Cory F. Newman, University of Pennsylvania*

*Basic level of familiarity with the material*



Specifically designed for graduate students, early-career clinicians, and newcomers to ABCT and/or CBT practice, this Mini-Workshop will identify and illustrate some of the essential means by which to deliver CBT competently. Regardless of whether participants expect to follow set, manualized protocols or conduct principle-based, individually conceptualized CBT, this Mini-Workshop will communicate the core components of effective CBT practice. Special emphasis will be placed on creating good session structure with a flexible agenda, establishing an atmosphere of collaborative empiricism, improving the therapeutic relationship as a value in its own right and using it as an aid toward conceptualization and intervention, and utilizing specific

CBT techniques both in session and for homework. Participants will learn to infuse all of the above with cultural awareness and adherence to professional and humanistic ethics. Participants will learn the core values at the heart of CBT, including ways to openly communicate and model these values to clients, and the importance of using and practicing CBT methods on themselves—becoming skilled at self-reflection—so that their actions with clients are mindful, congruent, and beneficent. An additional focus will be on the ways in which competent therapists achieve higher levels of proficiency by making CBT sessions more memorable and inspirational to clients. The Mini-Workshop will include role-playing and video clips.

**You will learn:**

- 1) To establish well-organized, well-focused, productive therapy sessions
- 2) To implement several key CBT techniques, including cognitive and behavioral monitoring, guided discovery, rational responding, and role-playing
- 3) To ask clients key questions that lead to the development of a culturally informed CBT case conceptualization

**Recommended Readings:**

- Beck, J. S. (2011). *Cognitive-behavior Therapy: Basics and beyond* (2<sup>nd</sup> ed.). New York: Guilford.
- Newman, C. F. (2010). Competency in conducting cognitive-behavioral therapy: Foundational, functional, and supervisory aspects. [For the Special Section on Psychotherapy Competencies and Supervision of Trainees]. *Psychotherapy: Theory, Research, Practice, Training*, 47, 12-19.
- Newman, C. F. (2011). Cognitive-behavior therapy for depressed adults. In D. W. Springer, A. Rubin, & C. Beevers (Eds.), *Clinician's guide to evidence-based practice: Treatment of depression in adolescents and adults* (pp. 69-111). Hoboken, NJ: Wiley.
- Newman, C. F. (2012). *Core competencies in cognitive-behavioral therapy: Becoming an effective cognitive-behavioral therapist*. New York: Routledge.