WHO SHOULD ATTEND
Clinical Professionals: Mental health professionals including, but not limited to school counselors, psychologist, psychiatric nurses, Social Workers, Nurses, Occupational Therapists, Voice and Palliative Care Workers, Youth Workers, Mental Health Workers, Addiction Specialists, Mental & Family Therapists, Speech Language Pathologists, Social workers, Rehabilitation Consultants, School Counsellors, Behavioral Therapists, Psychologists, Physiotherapists, Social Workers, and all professionallooking to expand therapeutic skills.

HOTEL & ACCOMMODATIONS
BEST WESTERN PREMIER CALGARY PLAZA HOTEL
1316 33rd Street NE
HOW TO BOOK
• Phone: 403.396.8000
• Please refer to the Jack Hirose & Associates room block
• Website: www.bestwestern.com

“The price, non-refundable, is subject to availability.” When booking hotel rooms, ask for the Jack Hirose and Associates room block. To receive our negotiated rate, name must be booked a month ahead near the workshop dates. Please keep in normal hotel rate if not available. Please see our website for more details.

DISCOUNT RATES
Early-Bird Discount Rate is only available by phone, fax, email, or mail. No mail-in registration. All online students (in classes per semester) must provide proof of enrollment. Please contact registration@jackhirose.com for more info.

EARLY BIRD DEADLINE
Early-Bird Deadline is 4 weeks prior to the date shown. Early-Bird Fee is determined by the date shown except Registration and payment must be received by this date. Please note: Registration and payment must be received by this date.

TERMS & CONDITIONS
All cancellations must be submitted by email to registration@jackhirose.com. Refunds will be available to attendees who make a conference fee or cancellation fee to attend the conference. Unused hotel rooms, registration fees, and meals will not be refunded. A 10% administrative fee will apply for all cancellations. In the event of a cancelled conference, we will issue a full refund to the registrant(s) who has/have paid the full registration fee. Early-Bird Fee is determined by the date shown except early bird registration deadline is 4 weeks prior to the date shown. \n
CANCELLATION POLICY: Registrations must be submitted to |||EMAIL_ADDRESS||| before the early bird discount deadline. The registrant’s full name will be used to confirm their registration. If a registrant cancels their registration after the early bird discount deadline, they will be responsible for the full registration fee. In the event of a cancelled conference, we will issue a full refund to the registrant(s) who has/have paid the full registration fee.

Refunds
To be eligible for a partial refund, registrants must cancel their registration at least 14 days prior to the start date of the conference. Registrants who have paid the full registration fee and cancel their registration at least 14 days prior to the start date of the conference will receive a 75% refund of the registration fee. Registrants who cancel their registration within 14 days of the start date of the conference will not be eligible for a refund.

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EARLY BIRD SAVINGS
All cancellations must be submitted by email to registration@jackhirose.com. Refunds will be available to attendees who make a conference fee or cancellation fee to attend the conference. Unused hotel rooms, registration fees, and meals will not be refunded. A 10% administrative fee will apply for all cancellations. In the event of a cancelled conference, we will issue a full refund to the registrant(s) who has/have paid the full registration fee. Early-Bird Fee is determined by the date shown except early bird registration deadline is 4 weeks prior to the date shown. In the event of a cancelled conference, we will issue a full refund to the registrant(s) who has/have paid the full registration fee.
SUMMIT10.

He is co-author of blogs on depression for professionals from entrepreneurs to corporate for panic, worry and social anxiety has helped work, Jeff serves as director of the international BPD. He is on Faculty with Educational Institutes in hospitals in the state of Oklahoma. During that time, treatment programs at two different psychiatric and conducts regular MBCT for PTSD within the Clinical Neuroscience. He was clinical lead on one of the first trials using MBCT for PTSD within the

Jeff is a board certified clinical psychologist in Cincinnati, Ohio, where he runs a private practice and conducts regular MBCT groups for medical centres as well as for the community. He is director of the Centre for Clinical Mindfulness & Metapathic Healing in Quito, Ecuador, and he & his staff have treated over 500 patients with BPD. He is on Faculty with Educational Institutes in Canada, Australia, and South Africa and has trained over 15,000 mental health professionals in all 50 US states and abroad. In his clinical work, Jeff serves as director of the international Personality Disorders Awareness Network.

Reid Wilson

PH.D.

is Adjunct Associate Professor of Psychology at the UNC School of Medicine. Prior to this he was the Clinical Director of the Anxiety and Effective Disorders Service and the London Health Sciences Centre. She has published over 80 peer reviewed articles and book chapters, and given hundreds of presentations and workshops on MI. She is a book author of Motivational Interviewing in the Treatment of Anxiety and was also co-editor with Akiskal, Miklow and Rollnick on the book Motivational Interviewing in the Treatment of Psychosocial Disorders which has been translated into eight languages.

Reid Wilson

PH.D.

is a practicing clinical psychologist. She coaches professionals for around the world, and has been a trainer for 25 years. She is a guest speaker after a conference for conferences and trainings, consistently getting the highest ratings for her dynamic style and high quality content. Her individualized coaching for panic, worry and social anxiety has helped professionals prepare for anxiety and help patients with complex health, from executives, from sales personnel to IT specialists. Margaret is a frequent contributor to the award-winning Psychotherapy Networker newsletter and blogs on depression for Psychology Today.
ATTACHMENT-FOCUSED EMDR WORKING WITH ADULTS ABUSED AS CHILDREN (PART 2 WILL BE BUILT ON THE CONTENT PROVIDED IN PART 1)

LAUREL PARNELL PH.D.

Over the last two decades, EMDR has emerged as one of the most powerful and meaningful therapeutic tools. However, many of these individuals have rarely developed life skills to build a proactive and responsive life versus a defensive and reactive one. Dr. Parnell will teach how to integrate an attachment focus into EMDR and to use EMDR in combination with a variety of complementary techniques.

This workshop is built around videos of actual therapy sessions conducted with these individuals. These videos bring the training to life. Participants can learn what to do and when to do it. The procedures they’re learning are used with real patients in the real world. Dr. Parnell is an EMDRIA Approved Basic Training Provider and is an experienced and highly skilled therapist. Her workshops are as enjoyable as they are instructive, and consistently receive rave reviews.

LEARNING OBJECTIVES (Day 1 & 2)
1. Describe the five basic principles of Attachment-Focused EMDR and how these principles can be integrated into the treatment of relational trauma.
2. Discuss how an attachment-focus can be integrated into the historical and present preparation phases of EMDR.
3. List the four most commonly used resources that participants and how they can be integrated into EMDR with an attachment focus.
4. Repair early developmental stages using imagination and bilateral stimulation.
5. Name three techniques for working with dissociation.

DAY 2 OUTLINE
Attachment-Focused EMDR: Working with Adults Abused as Children

Dr. Parnell will present standard EMDR protocols in addition to modified protocols to work effectively with this very challenging population. Victims of early abuse may easily become distorted, dysregulated, or avoidant. EMDR therapists may need a specific and advanced understanding of the EMDR method, as well as additional skills, to work with them successfully. Topics addressed during the day will include: how to modify standard EMDR procedural steps with patients abused as children when necessary; developing appropriate targets; recognizing and dealing with blocked processing; using interwoven strategies; working with abstractions, dissociation and memory chaining; and much, much more. Participants will leave with an array of new insights, ideas, perspectives, and skills that will help them to work more effectively with victims of childhood abuse.

DAY 1
THE 10 BEST-EVER ANXIETY MANAGEMENT TECHNIQUES
MARGARET WHELENBERG, PSY.D.

In The Best-Ever Anxiety Management Techniques, Margaret Wheelerberg, Psy.D presents the most useful psychotherapeutic techniques for generalized anxiety, panic and social anxiety. Via discussion, practice in the seminar, and concise client examples in the book, this book demonstrates what anxiety that work in every clinical population. Even experienced clinicians will come away with tools to help clients resolve their anxiety symptoms.

LEARNING OBJECTIVES
1. Describe neurobiological basis of anxiety and how why panic and social anxiety work to “roll with resistance.” Wheelerberg demonstrates comprehensive techniques to stop panic and social anxiety that can help clients participate in social environments without distress.
2. Among the 10 Best-Ever Anxiety Management Techniques are methods that manage the physiological aspects of anxiety: stress, the dread and agitation of generalized anxiety, panic attacks, and the nervous system-based blushing, sweating and shaking of social anxiety. You will get information about useful psychotherapeutic approaches to anxiety.

OUTLINE
1. Describe neurobiological basis of anxiety and the theoretics of how/how the therapies work to use the brain to change the brain. The 2. Base of panismic anxiety and how to the brain to change the brain. The 3. Base of panismic anxiety and how to the brain to change the brain.
4. Develop core competencies in CBT, including building depression, anxiety disorders, and the unique processing present in specific symptom sets
5. Learn evidence-based strategies for treating clinical and subclinical depression, anxiety disorders, and the unique processing present in specific symptom sets.
6. Utilize specific mindfulness-based techniques to temper the narrative of negative thoughts and emotions.

OUTLINE
Competencies of MBCT
• Foundations of MBCT
• Principles
• Understanding Distress & Core Theoretical Perspectives
• Awareness and Automatic Pilot
• Living in Our Heads
• The Scattered Mind
• Recognize Aversion
• Mentalising
• Thoughts Are Not Facts
• How Can I Best Take Care of Myself?
• Maintaining and Extending Mindfulness: New Clinical Issues – Advanced Strategies for Working with Challenging Clients
• Proactive and Reactive Anxiety
• Limitations of the Research and Potential Risks

CBT STRATEGIES: CORE SKILLS & COMPETENCIES TO TREAT YOUR MOST CHALLENGING CLIENTS
JEFF RIGGEBACH, PH.D.

Core clinical decision-making mechanisms that make mindfulness techniques effective for stress, depression, anxiety, trauma, pain, and addiction. Much has been written about mindfulness in recent decades, but clinicians are often left without concrete, practical skills to teach clients in acute distress. Applying the methods of an evidence-based intervention such as Mindfulness-Based Cognitive Therapy (MBCT), requires decades of depth and personal experience. MBCT is an empirically established program developed by Zindel Segal, Mark Williams, and John Teasdale, and has been shown to cut relapse rates for depression in half. It has been shown to be helpful for such issues as stress, anxiety, depression, chronic pain, PTSD, and is also beneficial for clinicians themselves. Join mindfulness expert Dr. Richard Sears, author of Building Competence in MBCT, as he personally walks you through the core principles of MBCT through lecture, discussion, and experiential exercises. This in-depth education workshop will foster skills and concepts that you can immediately apply in all of your clinical work.

LEARNING OBJECTIVES
1. Describe neurobiological basis of anxiety and how these therapies work to use the brain to change the brain. The 2. Base of panicismic anxiety and how to the brain to change the brain. The 3. Base of panicismic anxiety and how to the brain to change the brain.
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OUTLINE
Competencies of MBCT
• Foundations of MBCT
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• How Can I Best Take Care of Myself?
• Maintaining and Extending Mindfulness: New Clinical Issues – Advanced Strategies for Working with Challenging Clients
• Proactive and Reactive Anxiety
• Limitations of the Research and Potential Risks

DAY 1 WEDNESDAY, NOVEMBER 20, 2019

WEDNESDAY, NOVEMBER 20, 2019
HARNESSING THE TRANSFORMATIVE POWER OF MINDFULNESS & COMMITMENT (ACT)

JOHN P. FORSYTH, PH.D. & JAMIE R. FORSYTH, PH.D.

Acceptance and mindfulness-based practices are rapidly making their way into the fields of mental health and medicine, and society both to alleviate human suffering and nurture psychological health and wellness. This body of work also offers a fresh, perceptive on psychological suffering and a set of powerful clinical strategies that support meaningful life changes. In this workshop, we will learn about one particular approach and set of practices based on Acceptance and Commitment Therapy (ACT, as said one word).

ACT is a new third-generation evidence-based behaviour therapy that balances mindfulness and acceptance processes with commitment and behaviour change processes to (a) weaken the influential influence of thoughts and emotional avoidance in guiding actions, while (b) promoting greater experiential and motivational flexibility in the service of (c) valued ends. It is both a form of therapy and an approach to living well, with evidence showing that it is useful for many forms of psychological and emotional suffering. In short, ACT teaches clients how to blend their thoughts and emotions, and do the work to live well, richly, meaningfully, without first having to defeat sources of emotional and psychological suffering.

This 1-day workshop will introduce ACT, both as a model and intervention technology, and illustrate its use across a broad set of problem areas that are commonly seen in mental health settings (e.g., anxiety, depression, anger). The workshop will include rich mix of didactic teachings, live and video demonstrations, and practical experiential exercises that will work individually, dyads, and small groups.

LEARNING OBJECTIVES

1. Define the three pillars of ACT
2. Describe and practice the six hexaflex ACT processes that contribute to human suffering and therapeutic change
3. Understand the role of ACT intervention processes that are used to promote psychological flexibility
4. Clarify underlying common clinical concerns (e.g., anxiety, depression, problem anger) within an ACT process-oriented approach
5. Define and identify the core mindfulness and compassionate alternative behaviours that work to cultivate psychological flexibility
6. Deliver values clarification exercises in dyads and small groups.

FAREWELL TO LAUNCH: OVERCOMING DELAYS IN INDEPENDENCE

RANDY PATERSON, PH.D., R.PSYCH.

Parents who frequently worry about “empty nest syndrome” might today worry more that their children will never leave home. In countries around the world, increasing numbers of young people – particularly males – are having difficulty navigating the transition from adolescence to adulthood. They remain isolated, avoidant, jobless or underemployed, and a-motivational – often staying in their childhood home into their 30s.

The causes are numerous: economics, internet connectivity, changes in parenting, features of the educational system, and more. Yet the issue is increasingly studied, perhaps because it does not fit into a diagnostic category. Despite this, clinicians are increasingly seeing these individuals – or their parents – in therapy.

At Change Clinic in Vancouver, Dr. Randy Paterson has been working with failure-to-launch cases for over 20 years. In this one-day workshop, he reviews the nature of the problem, the factors that seem to contribute, and a wide variety of interventions drawn from the therapy he’s developed, including exercises focused on and attachment theory, and attachment therapy. Whether you work with young people directly or support parents struggling with a teen in the hit-and-miss, this program will provide you with perspectives and practices to help.

LEARNING OBJECTIVES (Day 1 & 2)

1. Describe the five basic principles of Attachment-focused ACT
2. Understand how focus on attachment can be integrated into the treatment of relational trauma
3. List the common comorbid resources to tailor and protect in the different attachment strategies
4. Repair early developmental stages with imagination and bilateral stimulation
5. Name strategies for working with dissociation

DAY ONE OUTLINE

Attachment-Focused ACT: Basic Principles, Video Taped Demonstrations and “Resource Tapping”

This part of the workshop will enable you to learn the five basic principles of attachment-focused ACT. For many traumatized patients, attachment repair and repair of the self-regulation is one of the cornerstones of treatment - a component that can be accomplished effectually and efficiently by using ACT within a positive therapeutic alliance. Videotaped demonstrations, which will include both exercises in the attachment-focused ACT and a more traditional approach. In addition, Dr. Paterson will emphasize how the technique called “Resource Tapping” can be used to repair past developmental deficits as well as help patients reconnect trauma processes and how they will watch Dr. Paterson use Resource Tapping, will have a chance to practice this technique yourself, and learn how to integrate it with ACT.

BOOK: "The Inexperienced Acrobat" by LaShawn Fussell

"The instructor was incredibly knowledgeable and I am able to take away many new techniques to use with my clients and try to incorporate them into my practice." - Alba Ros | Fall 2017

"I enjoyed all of the lessons. Very useful information that will help me with my clients." - Brennan Lane | Fall 2017

ATTACHMENT-FOCUSED EMDR: BASIC PRINCIPLES, VIDEO TAPED DEMONSTRATIONS & RESOURCE TAPPING

(PART 1 OF 2)

LAUREL PARNELL PH.D.

Over the last two decades, EMDR has emerged as one of the most powerful clinical tools available to trauma therapists. In this workshop, Dr. Laurel Parnell will teach you how to integrate a new attachment focus into EMDR and use EMDR in combination with a variety of complementary techniques. Much of this workshop is built around video clips of actual EMDR sessions conducted by Dr. Parnell. These videos bring the training to life and do not just teach the ideas and procedures they’re learning are used with real patients in the real world. Dr. Parnell is an EMDR Approved Basic Training Provider as an experienced and highly skilled therapist. Her expertise helps you approach ACT as a constructive, and consistently receive rave reviews.

LEARNING OBJECTIVES (Day 1 & 2)

1. Describe the five basic principles of Attachment-focused ACT
2. Understand how focus on attachment can be integrated into the treatment of relational trauma
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THE CHALLENGE OF SELF-INJURIOUS BEHAVIOURS

LEADING CLINICANS ON A JOURNEY OF RESILIENCE & HEALING

LISA FERENTZ, LCSW, DAPA

Become empowered as a trauma clinician! Learn from expert trauma clinician Lisa Ferentz how to shift your clients’ self-injurious identity and creativity – while planting the seeds of hope and Post-Traumatic Growth even in the earliest stages of therapy! When we work with traumatized clients, we often feel compelled to stay focused on the inevitable byproducts of PTSD. As we look for the ways in which clients have been adversely affected by their trauma, it can inadvertently narrow our sense of who they are that day and who they can be as “damaged” or “broken.” Although helping clients to reconnect with and process their pain and grief is important, this workshop takes you further. You will learn respectful and powerful ways to weave Trauma into the treatment process.

Using moving and inspiring case examples and video demonstrations clients will identify the tangible markers of post-traumatic growth.

OUTLINE

1. The Case of Jerrold: A Specific Look at How Neural Networking Affects Psychological Flexibility and Linking It with the Six Corresponding ACT Core Processes
2. Define and identify “fusion” and “experiential fusion” within an ACT process-oriented approach (e.g., anxiety, depression, problem anger)
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5. Define and identify “fusion” and “experiential fusion” within an ACT process-oriented approach (e.g., anxiety, depression, problem anger)
EXPLORE THE MANIFESTATIONS OF POST TRAUMATIC SUMMIT

AVOIDANT PD

Move Beyond a Trauma Identity

DAY 2

5.

3.

2.

1.

The Power of Positive Self-Talk

Move Beyond a Trauma Identity

Explore the nature of the problem, the factors that seem to contribute, and a wide variety of interventions drawn from many therapy approaches, and attachment theory. Whether you have your youth directly or indirectly, or if the parents struggled with a toxic history, this program will provide you with perspectives and techniques to help.

LEARNING OBJECTIVES

1. Learn to identify this non-diagnostic clinic population, and to distinguish normal developmental differences from an intervention, including the unique needs of adolescents. Develop an awareness of the multiple factors likely to be operating in any given case.

3. Know strategies for addressing the client with an engagement motivation.

4. Understand when to hold back and when to push progress.

6. Develop an array of intervention strategies that can be tailored to the individual.

7. Develop an understanding of the role of families in shaping growth and development.

“An incredible amount of information delivered in an effective manner. I will definitely use this information in my practice. It was relevant, clear and just makes so much sense. I also really enjoyed listening to his delivery, it came across as sincere and genuine. Fully satisfied!”

- Beth Crystal | Fall 2017

ATTACHMENT-FOCUSED EMDR: BASIC PRINCIPLES, VIDEOTAPED DEMONSTRATIONS & RESOURCE TAPPING

Over the last two decades, EMDR has emerged as one of the most powerful clinical tools available to trauma therapists. In this workshop, Dr. Parnell will teach you how to integrate an attachment focus into EMDR and use EMDR in combination with a variety of complementary techniques. Much of this workshop is built around vignettes of clinical cases and demonstrations conducted by Dr. Parnell. These videos bring the training to life–not just in the theoretical ideas and procedures they’re learning are used with real patients in the real world. Dr. Parnell is an EMDRIA Approved Basic Training Provider as an experienced and highly skilled therapist. Her knowledge and ability to integrate ACT as a constructive, and consistently receive rave reviews.

LEARNING OBJECTIVES (Day 1 & 2)

1. Describe the five basic principles of Attachment-focused EMDR

2. Discuss how an attachment-focus can be integrated into the treatment of relational trauma

3. List 5 common complementary resources to use as well as other useful resources how and can be integrated into EMDR

4. Repair early developmental stages with imagination and bilateral stimulation

5. Name 3 techniques for working with dissociation

DAY 1 OUTLINE

Attachment-Focused EMDR: Basic Principles, Video Taped Demonstrations and “Resource Tapping”

In this part of the workshop you will learn to use the five basic principles of attachment-focused EMDR.

For many traumatized patients, attachment repair and the development of healthy boundaries are treated as a primary goal. In this workshop, you will watch Dr. Parnell use Resource Tapping, will have a chance to observe the technique yourself, and learn how to integrate it with EMDR.

“Your workshop was the most engaging and enjoyable program that I have attended this year! You have successfully combined your knowledge of the therapeutic process with your ability to engage your trainees in an enjoyable and helpful format. You will have a lasting impact on the lives of your trainees.”

- Alison Ross | Fall 2017

“I enjoyed all of the lessons. Very useful information that will help me with my clients.”

- Brennan Lane | Fall 2017

Attachment-Focused EMDR: Basic Principles, Video Taped Demonstrations & Resource Tapping (Part 1 of 2)

Laurel Parnell, Ph.D.

Attachment-Focused EMDR: Basic Principles, Video Taped Demonstrations & Resource Tapping (Part 2 of 2)

Laurel Parnell, Ph.D.

ATTACHMENT-FOCUSED EMDR: BASIC PRINCIPLES, VIDEOTAPED DEMONSTRATIONS & RESOURCE TAPPING

Parents who formerly worried about “empty nest syndrome” might today worry more that their children will never leave home. In countries around the world, increasing numbers of young people—particularly males—are having difficulty navigating the transition from adolescence to adulthood. They remain isolated, avoidant, jobless or unemployed, and a motivational—often staying in their childhood home into their 30s.

The causes are numerous: economic, internet connectivity challenges, changes in parenting, features of the educational system, and more. Yet the issue is infrequently studied, perhaps because it does not fit within a diagnostic category. Despite this, clinicians are increasingly seeing these individuals—and their parents—in therapy.

At Change Casino in Vancover, Dr. Randy Paterson has been working with failure-to-launch cases for over 20 years. In this one day workshop, he reviews the nature of the problem, the factors that seem to contribute, and a wide variety of interventions drawn from many therapy approaches, and attachment theory.

Learn to use the techniques of ACT. Whether you are working with youth directly or indirectly, or if the parents struggled with a toxic history, this program will provide you with perspectives and techniques to help.

LEARNING OBJECTIVES

1. Define the three pillars of ACT

2. Describe and demonstrate five of the six hexaflex ACT processes that contribute to human suffering and toxic emotional and psychological pain.

3. Understand the core principles of ACT intervention processes that are used to promote psychological flexibility

4. Consolidate common clinical concerns (e.g., anxiety, depression, problem anger) into an ACT process-oriented approach

5. Practice essential exercises designed to cultivate psychological flexibility

6. Deliver value clarification exercises in dyads and small groups

HARRIES HARMING THE TRANSFORMATIVE POWER OF MINDFULNESS COMMITMENT (ACT)

JOHN P. FORSYTH, PH.D. & JAMIE R. FORSYTH, PH.D.

JOURNEY OF RESILIENCY

Dependency from an interruption in development

Why is it that the people who are the most vulnerable to trauma—infants, children, adolescents—do not develop full and healthy attachment relationships?

Over the last two decades, EMDR has emerged as one of the most powerful clinical tools available to trauma therapists. In this workshop, Dr. Parnell will teach you how to integrate an attachment focus into EMDR and use EMDR in combination with a variety of complementary techniques. Much of this workshop is built around vignettes of clinical cases and demonstrations conducted by Dr. Parnell. These videos bring the training to life—not just in the theoretical ideas and procedures they’re learning are used with real patients in the real world. Dr. Parnell is an EMDRIA Approved Basic Training Provider as an experienced and highly skilled therapist. Her knowledge and ability to integrate ACT as a constructive, and consistently receive rave reviews.

LEARNING OBJECTIVES

1. Immediately intervene on the specific type of depression

2. Improve motivation and mobilize energy in depressed clients

3. Identify and dismantle cognitive patterns to energize action

4. Demonstrate the impact of neural networks and how to break out of negative neural networks that keep depression in place

5. Utilize strategies from positive psychology and mindfulness to develop new attitudes and outcomes related to treating depression.

6. Increase clients’ abilities to formulate new options for problems by replacing the narrowing cognitive themes of worthlessness and inadequacy

OUTLINE

• Process the Impact of Trauma on the Brain

• The Power of Positive Self-Talk

• Move Beyond a Trauma Identity

• Explore the Manifestations of Post Traumatic Growth

• Move Beyond the Traumatized Self

• Help Clients Pay Forward

• Creating a Neural Circuitry for Post Traumatic Growth

“Dr. Parnell was highly engaging and knowledgeable, and I am able to take away many new information that will help me with my clients.”

- Individuals with personality disorders have long been considered the most challenging clients. Often, patients lack motivation, most begin with poor insight, and some have such deeply engrained dysfunctional beliefs, unhealthy coping skills, and destructive behavioural patterns that continue to frustrate providers, family members, and many of the patients themselves. Even professionals often continue to view them as unteachable.

However, there is hope. Emerging research suggests this is simply not the case. DBT, or Dialectical Behavior Therapy, and Schema Therapy have paved the way in pioneering new attitudes and outcomes related to treating of complex personality disorders. Many personality disorder specialists are now finding that DBT is not only effective in treating all but the most severely impaired patients, but may be equally suited for those with more complex personality disorders. The challenge is that many in the field who are well-versed in DBT and Schema Therapy have been slower to incorporate these treatments in the clinic setting. But the potential is there. How can we take these treatments and make them work for our patients?

JOURNEY OF RESILIENCY

BECOME EMPOWERED AS A TRAUMA CLINICIAN!

Learn how to integrate it with EMDR.

Depression is painful. Ruminating thoughts, lethargy, and increasing alienation from others create a negative cycle and slowly erode hope. These symptoms actively interfere with carrying out basic demands of daily life. While depression is one of the most common mental health conditions, there are different causes. Treatment options run a gamut that includes new technologies to directly affect brain activity, advances in stress management, improved tools to relieve the impact of childhood trauma and focused relationship repairs. How does a therapist know where to get started in the treatment? In this seminar, identifying four different kinds of depression, you will master 10 strategies to jump start therapy and provide immediate relief of symptoms. You will be able to set the stage for longer term recovery.

LEARNING OBJECTIVES

1. Immediately intervene on the specific type of depression

2. Improve motivation and mobilize energy in depressed clients

3. Identify and dismantle cognitive patterns to energize action

4. Demonstrate the impact of neural networks and how to break out of negative neural networks that keep depression in place

5. Utilize strategies from positive psychology and mindfulness to develop new attitudes and outcomes related to treating depression.

6. Increase clients’ abilities to formulate new options for problems by replacing the narrowing cognitive themes of worthlessness and inadequacy

OUTLINE

• A direct interaction between neurochemistry and cognition function and lifestyle to explore the 4 types of depression.

• A specific look at how neurochemical neglect and depression develop and recovery from depression.

• Identify the unique hopes and expectations of depressed clients.

• The underpinnings of depression as seen in four kinds of depression (endogenous, situational, PTSD and the outcome of early life adversity).

• Techniques that energize the leptothalamic mind and body of the depressed client. Identify and cool the hot emotions.

• Energizing isolation, balancing life activities, and preventing destructive behaviors.

• Broadening the perspective of the depressed mind and learning to live more fully. These techniques will help depressed clients open the mind to possibility and will look at building positive circuits in the brain that will enhance the long-term quality of depressed mood.

• Identifying symptoms related to each type of depression.

• Types of depression and the therapy goals.

• What works for each type of depression.

• How to use the feedback for your clients.

• How to write the treatment plan.

• How to use the strategies effectively to treat the depressed client.

• The best ever depression management techniques

MARGARET WEIHNERBERG, PSYD.
Describe neurobiological basis of anxiety and how emotions work in the body.

In The Best Ever Anxiety Management Techniques, Margaret Wehrenberg, Psy.D presents the most useful psychotherapeutic perspectives to personalize generalized anxiety, panic and social anxiety. Via discussion, practice in the seminar, and concise client examples in role-plays, you will learn how to help clients resolve their anxiety symptoms.

Learning about the neurobiological basis of anxiety will help you understand why psychotherapy is so effective. Wehrenberg demonstrates comprehensive techniques to stop negative automatic thoughts and change the brain and how to address specific diagnoses via the DBT and its relationship to the Biopsychological model, the neurological impact of trauma on the developing brain and how to address specific diagnoses via the brain. She will discuss the importance of integrating neurobiological concepts with the earliest part of treatment and utilizing skills as a foundation for life.

Outlining:
1. Describe neurobiological basis of anxiety and how this knowledge can help how therapists work. • To use the brain to change the brain.
2. Identify two neurobiological symptoms of anxiety: stress, the dread and elimination of panic triggers. • To develop the key attitude (“MI Spirit”) necessary for our clients to develop an effective interdependent and reactive life versus a defensive one. Dr. Eboni Webb will introduce and demonstrate unique tools you can use in your very next session!
3. Utilize techniques from traditional CBT, meta-cognitive, and schema based approaches in information processing and the unique processing present in specific symptom sets.
4. Describe the brain changes associated with depression, anxiety disorders, addiction, and much more. Dr. Eboni Webb will introduce and demonstrate unique tools you can use in your very next session!
5. Understand the role of cognitive distortions in information processing and the unique processing present in specific symptom sets.
6. Utilize specific mindfulness-based techniques to help clients disengage from the narrative of negative thoughts and emotions.

OUTLINE
1. The key to eating your clients to identify key mindfulness markers in the process of therapy (ambivalence, talk, talk, talk) • To develop a more informed and engaging commitment to change.
2. To learn key skills in responding to mindfulness markers in order to move productively to help clients disengage and enhancing commitment to change.
3. To cultivate empathic understanding and use it to enhance the therapeutic relationship.
4. To develop the attitude (“IM Spirit”) necessary for the client to realize full health and well-being. • You will be able to utilize concrete strategies with any client. Leave this conference armed with practical CBT strategies to use immediately and build confidence and awareness.
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Margaret Wehrenberg Ph.D. is a practicing clinical psychologist. She coaches professionals for stress management and has been a trainer for 25 years. She is a spouse-of-a-survivor for 37 years and a grandparent to four children. Margaret has been a frequent contributor to the award- winning Psychotherapy Networker magazine and blogs on depression for Psychology Today.

Henny Westra Ph.D. is Professor in the Department of Psychology at York University in Toronto. Prior to this she was the Clinical Director of the Anxiety and Effective Disorders Service at the London Health Sciences Centre. She has published over 60 peer reviewed articles and book chapters, and given hundreds of presentations and workshops on MI. She is a book reviewer for MI journals and also was co-editor with Aronik, Miklós and Rollnick on the book Motivational Interviewing in the Treatment of Psychosocial Disorders, which has been translated into eight languages.

Reid Wilson Ph.D. is Adjunct Associate Professor of Psychiatry at the UNC School of Medicine. He is the co-author of Stopping the Noise: How to persuade clients to adopt a self-help protocol to voluntarily, purposefully, and aggressively seek out uncertainty moment-by-moment. Reid Wilson, Ph.D. to study what cutting edge research is showing us about the possibility of rapid change. Wilson will outline the treatment strategy, step-by-step, and illustrate each stage with brief, professionally videotaped segments of therapist-client interaction within the first two sessions of treatment.

LEARNING OBJECTIVES
1. How to persuade clients to adopt a self-help protocol to voluntarily, purposefully, and aggressively seek out uncertainty moment-by-moment.
2. The paradoxical approach to change and how to use language to reframe anxiety, phobias, and OCD.
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“Reid Wilson – best presenter, best handouts, best process". — John P. Forsyth, Ph.D.

ADVANCED MOTIVATIONAL INTERVIEWING (PART 2 WILL BE BUILT ON THE CONTENT PROVIDED DURING PART 1)

HENNY WESTRA, PH.D.

MOTIVATIONAL INTERVIEWING (MI) is an empirically derived intervention that has been shown to enhance engagement and outcomes (especially long-term outcomes) for numerous clinical problems. MI is a brief, center client-therapy aimed at understand and resolving ambivalence to change. MI has been shown to be effective in the treatment of addictions and numerous other mental and health problems. This workshop will show you how to integrate MI techniques with the parent and child. MI will help clients identify the roadblocks that keep them stuck and help them move forward. Prepare to roll up your sleeves and work as this workshop is highly interactive. This novel program has been recently been modelled and evaluated with the latest training innovation in our field, namely the concept of “Deliberate Practice”. Deliberate Practice is the mode used to turn everyone from musicians, to athletes, and surgeons to is now being applied to psychotherapy training. It involves the use of repeated feedback to actual specific uses and simulations in order shape and improve trainee responding. You will learn through meditation your capacity of engaging exercises & will grow in your skills as you get feedback about how to respond to those often complex and difficult issues. Clinical tools include active listening and empathy, and client hostility/anger across a wide variety of clinical domains (anxiety, eating disorder, addictions, health behaviors, etc.). Emphasis is placed on using videotape and other exercises to show clients how to listen for the experience of the client and therapist to help you identify moment-to-moment markers of ambivalence and resistance and then brainstorm effective responses to enhance client engagement. Emphasis is also placed on managing your own self-talk and that of clients during face-to-face encounters. You will also have the chance to apply and expand your learning to many specific situations and client resistance statements you have encountered in your own clinical work and unique context.

LEARNING OBJECTIVES
1. Train your clients to identify key motivational markers in the process of therapy (ambivalence, resistance, timidity).
2. Learn key skills in responding to motivational markers in order to move progressively to resolving ambivalence and enhancing commitments to change.
3. Cultivate empathic understanding and use this foundation in motivating clients.
4. Develop the key attitude (“MI Spirit”) necessary to ‘sell with resistance’.
5. Learn how to support clients to blend more supportive and directive clinical styles.
WHO SHOULD ATTEND
Clinical Professionals: Mental health professionals including, but not limited to social workers, psychologists, psychiatrists, psychotherapists, Social Workers, Nurses, Occupational Therapists, Physiotherapists and Behavioural Consultants. Specialties include: Addiction, Trauma, Depression, Anxiety, Suicide and other professional looking to enhance their therapeutic skills.

HOTEL & ACCOMMODATIONS
BEST WESTERN PREMIER CALGARY PLAZA HOTEL
1316 33rd Street NE

HOW TO BOOK
• Phone: 403.248.8888
• Please refer to the Jack Hirose & Associates associate.
• Website: www.calgaryplaza.com

“Please note, room reservations are subject to availability” When booking hotel rooms, call the Jack Hirose and Associates corporate suite. To receive our corporation rate, room must be booked using this phone number prior to the workshop date. Please keep in normal hotel registration policies. Please see our website for more details.

DISCOUNT RATES
Early-Bird Deadline: November 6, 2019
• Workshop #1: $599
- Early-Bird Fee: $599
• Workshop #2: $579
- Early-Bird Fee: $579
• Workshop #3: $559
- Early-Bird Fee: $559
• Workshop #4: $559
- Early-Bird Fee: $559
• Workshop #5: $539
- Early-Bird Fee: $539
• Workshop #6: $499
- Early-Bird Fee: $499
• Workshop #7: $369
- Early-Bird Fee: $369
• Workshop #8: $619
- Early-Bird Fee: $619
• Workshop #9: $599
- Early-Bird Fee: $599
• Workshop #10: $599
- Early-Bird Fee: $599

TERMS & CONDITIONS
Day tickets are sold separately for conference fee only. Jack Hirose & Associates reserves the right to cancel a event; however, a full refund will be made less than one full business day prior to the event. In the event of a cancelled conference, we will issue a full refund for conference fee only. Jack Hirose & Associates is not responsible for any lost or stolen property. The use of audio and video taping devices, beepers, and all other electronic devices is prohibited for all sessions. Children and unaccompanied guests are not permitted to the meeting room. Contact person shared by individuals.

CANCELLATION POLICY: Attendees must be submitted by email to registrations@jackhirose.com. No registration at conference fee will be refunded for cancelled or missed dates or any circumstances. Refunds will only be issued to those who have a 60% non-refundable registration fee for full-time students (5 BUSINESS DAYS) must provide proof of enrolment. The use of audio and video taping devices, beepers, and all other electronic devices is prohibited for all sessions. Children and unaccompanied guests are not permitted to the meeting room. Contact person shared by individuals.

CERTIFICATES: Provided for pre-registered attendees only. Those who register at the door, or want additional copies can download the original registation@jackhirose.com.

CONTINUING EDUCATION CREDITS
Canadian Psychological Association approved by the Alberta College of Social Workers, Canadian Counselling & Psychotherapy Association, Canadian Addiction Counsellors Certification Federation, Canadian Vocational Rehabilitation Association, Canadian Professional Counselling Association, Employee Assistance Certification Examination (EACE), Health Protection Certification Board of Canada (HPCB).

TOPICS INCLUDE:
• ANXIETY MANAGEMENT TECHNIQUES
• CBT STRATEGIES
• MINDFULNESS
• ANXIETY & COMMITMENT THERAPY (ACT)
• DELAYS IN INDEPENDENCE
• EMDR

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Wed – Fri | 9:00AM – 4:00PM