### **2023 MAMFT Annual Conference: Breakout Sessions Summaries**

# Practicing what we preach: Mitigating Burnout through Conventional Wisdom and Innovative Technologies (60 minutes)

11:45am-12:45pm

In synchrony with therapists' reports of commitment to (and loving) their work, they are oftentimes burned-out with their caseloads, workplace politics, administrative demands, and tendencies to underreport personal struggles or seek help. In this presentation, contemporary understandings of this problem, alongside empirically-supported strategies to mitigate it, will be described.

To begin, alarming scholarship that confirms the generally poor functioning of Western healthcare providers (mental health, physical health) will be outlined. In synchrony with increased attention to self-care over the past 10+ years, investigators have shown that family therapists', psychologists', physicians', nurses', and other care professionals' struggles are getting worse (not better). This is true across indicators of physical health (e.g., insomnia, obesity), health behaviors (e.g., alcohol use disorders, poor work/life boundaries), mental health (e.g., depression, burnout, compassion fatigue, suicidality), social health (e.g., divorce, intimate partner violence), and work-related performance (e.g., late charting, low professionalism, medical errors).

Conventional (old) wisdom – including things that we all know are important, but usually do not do (e.g., sleep hygiene, physical activity, purposeful time management, appropriate boundary setting), will be presented and paired with novel ways to promote and sustain beneficent behavior change. New and innovative technologies (e.g., wellness apps designed for the general public, compassion fatigue / satisfaction tracking apps designed specifically for healthcare providers) will be demonstrated in-vivo, and paired with individual- and team-based systems of maintaining provider wellness.

All told: attention to our whole selves (biopsychosocial/spiritual health) is essential. To effectively practice what we preach, and thereby honor our own humanness and well-being alongside that of the patients and families we serve, we must move beyond insight(s) into sustained action.

#### **Learning Objectives:**

1) Articulate how family therapists and other health care providers are an especially high-risk population for burnout and compassion fatigue

2) Describe novel ways to promote and sustain positive health behavior change in conventional self care practices (e.g., sleep hygiene, exercise)

3) Begin using new and innovative technologies to monitor and track personal wellness (some for general public, others specifically for health providers)

**Presenter:** Dr. Tai Mendenhall is a Medical Family Therapist and Professor in the Couple and Family Therapy Program at the University of Minnesota (UMN). He is an Adjunct Professor in the UMN's Department of Family Medicine and Community Health and Director of the UMN's Medical Reserve Corps' Mental Health Disaster-Response Teams. He works actively in

collaborative family health care and community-based participatory research (CBPR). Across these formats, Tai integrates foci centered on burnout- and compassion fatigue- prevention / mitigation. This work engages MFT trainees, medical residents, and trauma-responders representing a diverse range of mental- and biomedical- health disciplines.

#### Cultural Humility in Relationships: Responding to the Self and Others (60 minutes)

11:45am-12:45pm

Responding to cultural differences has been a topic of discussion for a number of years and continues to grow in importance as individuals from diverse backgrounds increasingly seek therapeutic services. Learning to use cultural humility in relationships allows participants to take the pressure off of knowing the "right thing to say" about different cultures and instead focus on the relationship being built by showing up as the whole self. Participants will learn how to identify their own intricate cultural identities so that they can reflect on ways that their human experiences show up in the therapy room. Participants will also learn how to repair cultural ruptures when there are inevitable misunderstandings or microaggressions that often occur in human interactions. By increasing cultural humility, conversations about culture will become more open, more honest, and more comfortable in order to create safe and effective therapeutic relationships.

#### Learning Objectives:

- 1. Learn how to define cultural humility and identify why it is important in relationships.
- 2. Learn the three components that make up cultural humility.
- 3. Reflect on one's own aspects of identity using the ADDRESSING model.
- 4. Begin to explore ways to repair cultural ruptures.

**Presenter:** Hannah Dufek, MS, LADC, LPCC, mental health professional and the Diversity, Equity, and Inclusion (DEI) Specialist at CARE Counseling. Prior to working in outpatient mental health, Hannah worked in higher education as a career and academic advisor and participated in leading panels and discussions regarding DEI initiatives at the university. She has additional professional experience working at an intensive residential treatment facility as well as community mental health work supporting refugees and immigrants. Hannah has studied the experiences of marginalized groups in therapy and has training in assessing and treating substance use and recovery in individual and group settings. Her clinical interests include identity exploration and intersections, substance use concerns and recovery, relational work, and trauma.

#### **Ketamine Assisted Psychotherapy: A Return to Connection (60 minutes)** 11:45am-12:45pm

Ketamine-assisted psychotherapy (KAP) is an intensive therapeutic approach that helps clients get to the core of concerns and encourages healthier thought patterns by enhancing neuroplasticity. The purpose of this presentation is to discuss the history of ketamine and common mental health concerns ketamine may be used for. The Institute for Integrative Therapies practices a three-part model consisting of preparation, administration, and integration. While research supports KAP to be an effective approach to psychotherapy, just like any other approach in this field there are potential risks involved that should be considered prior to clients partaking in KAP sessions with a therapist. In this workshop we will explore the use and benefits of ketamine in a therapeutic setting, as well as provide insight to mental health concerns that may not benefit from this approach.

#### Learning Objectives:

1. Identify key features of ketamine and how it works in the brain and body to reduce depression, anxiety, and stuck thinking

2. Understand key components and qualities needed to be an effective KAP therapist

3. Explore benefits and risks of KAP therapy and psychedelics as a whole, especially in relationship with couples and groups

**Presenters:** Mariya Javed-Payne is a Minnesota-based Licensed Independent Clinical Social Worker, Licensed Alcohol and Drug Counselor, and Certified Brainspotting Trainer and Consultant. She is the owner of Awaken Consulting Services, where she offers therapy intensives for complex PTSD and addictions. She currently serves as co-owner and Chief Clinical Officer

at the Institute for Integrative Therapies, a psychedelic healing center providing somatic trauma therapies,

psychedelic medicines, and integrative medicine.

Courtney Padjen, PhD, LMFT is a sex and relationship therapist based out of Minneapolis, MN. She is the owner of Centre for Sexual Wellness and specializes in human sexuality, relationships, communication, and trauma. She is currently learning how to practice KAP as an apprentice at the Institute for Integrative Therapies.

#### Ethics on the Record (120 minutes)

11:45am-2:45pm with lunch break

Although ethics trainings are required for providers, mental health licensure boards take on many disciplinary actions each year. A new research study (from AAMFT, to be published in 2023) indicates that higher CEUs mandated by boards have not been effective in reducing licensure violations. Specific CEUs, such as taking Ethics, have reduced specific types of violations (administrative) but not overall licensure violations. This presentation will contrast the various ethical codes (Marriage and Family Therapy, Social Work, Counseling) and look for commonalities. The highest standard will be utilized in developing a framework for ethical decision making. Examples of recent licensure violations, which are all public record, will be

explored from each mental health board in MN. These violations will be explored as learning opportunities and practice for ethical decision-making models.

#### Learning Objectives:

- 1. Participants will identify commonalties in the ethical codes of multiple disciplines
- 2. Participants will utilize a framework for ethical decision making
- 3. Participants will generate commonalities in existing licensure violations to apply to practice
- 4. Participants will review recent licensure violations and extrapolate lessons from each

Presenters: Barb Stanton, PhD, LPCC: ND and MN approved supervisor for graduate level interns and LPCCs. Practicing nearly 30 years. She works with children, adolescents, adults and families with a special interest in working with individuals on the autism spectrum, and is also working to become a licensed wildlife rehabber in MN, reptile enthusiast.

Emily Coler Hanson LMFT: AAMFT Approved Supervisor, MN and ND approved (MN BBHT too); Former ND LMFT board member. She has been practicing 15+ years and works with youth, adults, families, couples, groups. She has experience in inpatient, day treatment, private practice and outpatient clinic, and is also a LEGO Enthusiast.

## Parenting Under the Influence - Working with Parents Who are Using Drugs or Alcohol (120 minutes)

11: 45am-2:45pm with lunch break

In this presentation, we will speak at length about the role of the clinician when working within systems like child protection, guardians ad litem, and the criminal legal system. Old zero-tolerance approaches are giving way to more person-centered and collaborative models that recognize abstinence is not the only measure of success. Specific attention will be given to ethical dilemmas and challenging case studies, while we work to balance the needs of the parent with the safety and best interest of their children.

#### Learning Objectives:

1. Learn about the history of drug prohibition and recent developments in the epidemiological and public health literature of child welfare and parental substance use

2. Gain an up-to-date framework for understanding Substance use Disorder and common effective treatments like anti-relapse medications

3. Identify specific strategies they can use with parents who are using substances that focus on keeping them engaged while promoting recovery from addiction

**Presenters:** Ian McLoone, MPS, LPCC, LADC, is the Clinical Director at Expanse MN and a member of community faculty at the University of Minnesota. Prior to opening Expanse, Ian was the lead therapist at Alltyr Clinic, and worked alongside the clinic founder, Dr. Mark Willenbring, to co-develop the Alltyr model of care. In 2021, Ian was honored by his peers and colleagues at the Minnesota Association of Resources for Recovery and Chemical Health (MARRCH) as Counselor of the Year. Ian teaches courses on psychopharmacology for counselors, harm reduction, and person-centered care, placing an emphasis on fully integrating treatment approaches for both mental health and substance use disorders.

Krista Schaefer, MA, LMFT, LADC holds a Master of Arts degree in Marriage and Family Therapy from St. Mary's University of Minnesota along with an undergraduate degree in Alcohol and Drug Counseling. She has been practicing as a therapist since 2009. Prior to joining Expanse, she practiced with Alltyr clinic with Dr. Mark Willenbring.

### Supporting Clients Through Fertility Challenges (120 minutes)

11:45am-2:45pm with lunch break

In this workshop, we will discuss the unique complexities of fertility challenges and how we can support our clients going through these experiences. This presentation will give you a general idea of what clients may go through with infertility, pregnancy loss, or other fertility challenges so that you have a solid frame of reference to start off with.

Having an understanding of the processes of infertility and pregnancy loss, the common infertility diagnoses, as well as common fertility treatments can make sure that clients don't have to explain the process over and over again when they are seeking support. In addition to going through the logistics of different fertility challenges, we will discuss the anxiety, grief, trauma, and relationship difficulties that many will also face during these experiences.

You will also gain some tangible skills to help your clients process their experience, hold space for healing, and navigate their ongoing journey. We will discuss how to hold space for what they are feeling,

support them in making decisions during continual fertility challenges, as well as navigate additional anxiety they may face if they do become pregnant.

#### Learning Objectives:

1. Gain an understanding of the typical process of infertility and pregnancy loss as well as common infertility diagnoses and impacts that these can have on clients

2. Gain an understanding of common fertility treatments and how these can affect one's physical and mental health.

3. Gain tangible skills to help clients process their experiences, hold space for healing, and navigate their ongoing journey.

**Presenter:** Kayla Estenson Williams, LMFT serves clients struggling with attachment trauma, infertility, pregnancy, and postpartum in her private practice, Minnesota Attachment Collective. From her own struggles with infertility, pregnancy, and postpartum, she is passionate about supporting clients through these experiences as well as helping other therapists to increase their competence in these areas. She finds importance in everyone's inherent self-worth and enjoys helping clients heal through trauma and difficult experiences so that they can connect to their self-worth, personal values, and goals. Kayla uses an eclectic approach of Narrative Therapy, Acceptance and Commitment Therapy, Internal Family Systems, Somatic and Mindfulness Approaches, and Trauma-Informed Approaches. She values relationships with those she works with and shows up in a genuine human-first style.

### Starting Your Career as an MFT - A Panel Discussion (60 minutes)

1:45pm-2:45pm

Panel will consist of two board approved supervisors, one non-supervisor LMFT, and one LAMFT. Panelists have worked in a wide range of settings; ranging from solo private practice, group private practices large and small, school-based mental health organizations, community mental health clinics, and MICD treatment facilities. Panelists will each talk about their experiences of finding their way as a new therapist. Topics will include: pros and cons of working in different settings. How to find a supervisor that is a good fit. How to prepare for board exams while working as a clinician. And how to develop skills to advocate for yourself within clinical settings. Basically we will share the things we wish someone would have told us as new therapists, and answer audience questions about finding your way as an early career MFT.

#### Learning Objectives:

- 1. Understand pros and cons of working in various clinical settings
- 2. Understand options and process for working with a supervisor
- 3. Develop skills for advocating for self in work environments
- 4. Review options for developing a healthy self-care or work/life balance in this field

**Presenters:** Birgitte Eppel, MA, LMFT, LADC is the Practicum Specialist at NUWAY's St. Paul Counseling Center, and is an adjunct faculty member at Saint Mary's University of Minnesota. Birgitte is an AAMFT Approved Supervisor, MN BMFT Approved Supervisor, as well as an MN BBHT Approved supervisor for LADCs and LPCC candidates. Her passions include training, supervision, working with co-occurring disorders, networking, and couples therapy with high-conflict/high-needs systems.

KC Gammage, MA, LAMFT leads the Community Leadership Development and Training (CLDT) project at Change Inc. KC has worked for Change Inc. since 2015 and has taken on her own therapy caseload while

working her way up to become a supervisor for the Community & School Collaborative, and as a leader in the highly successful Crossroads mentoring program. She approaches her work with a lens of how we can share the experiences of Black youth and young adults in the Twin Cities as they connect to their African heritage.

Leah Seeger, MA, LMFT, LADC is a second career therapist who works in a large group private practice in Minneapolis, MN. Leah has worked in multiple settings large and small since entering the field in 2014. Leah is currently the President-Elect for MAMFT, and has previously worked as an adjunct faculty member at St. Mary's University in Minnesota. Leah operates from a social justice, trauma-informed lens and is working to become certified in Brainspotting. Leah specializes in serving individuals, couples, and families with struggles complicated by trauma, challenging upbringings, and/or chemical use issues.

Tessa Gittleman, MA, LMFT, is an AAMFT and an MN BBHT Approved Supervisor, working in private practice in Golden Valley, and is the current Treasurer for MAMFT. Tessa's specialty is in working with individuals who are often successful at work, but struggle in their relationships. Many of these clients have OCPD. Tessa also works as an organizational consultant and public speaker where she focuses on helping businesses think through the "Emotional Economics" of their practices, the "Emotional Infrastructure" needed for increased sustainability, and how to best manage the internal polarity that cultural and generational differences compound in the workplace.

#### Using the Emotionally Focused Therapy to help Individual Clients (60 minutes) 1:45pm-2:45pm

Participants will learn how to bring systems concepts, attachment theory, and experiential processes to their work with individual clients. This workshop extends the EFT model for couples to effectively guide individual work. Specifically, we will address how to asses for negative cycles of intrapsychic/interpsychic interactions that keep individuals stuck in places of distress, identify the underlying attachment fears that drive the negative cycles, and learn how to assess for and identify blocks to a positive view of self and competency.

We will cover the strategies needed for helping clients engage with their emotional responses, reprocess primary emotion with tasks and experiments that engage clients in corrective emotional experiences, and restructuring interactive patterns using new patterns that improve emotional regulation, create a secure base for functioning, and support health. Therapists will learn the skills needed to experientially help individuals restructure how they view themselves and others to create a greater sense of value and competency.

#### **Learning Objectives:**

1. Participants will demonstrate a basic understanding of an "Emotionally Focused" approach therapy with individuals.

Participants will conceptualize individual distress based on theories of attachment and emotion.
Participants will understand skills used to help individuals shape new response patterns to distress in order to develop a positive sense of self and competency.

**Presenters:** Kurt Wical, Ph.D., LMFT will be presenting the training. He is a certified EFT therapist, Supervisor, and Trainer and has been providing workshops on EFT and training therapists in the EFT model for the last 16 years. Kurt owns and directs the MN Couple Therapy Center group practice which specializes in couple therapy using Emotionally Focused Couple Therapy.

Kurt is also the President of the MN Center for EFT. He is a graduate of the University of Minnesota, Department of Family Social Science.

Renee Segal, MA, LMFT is a certified Emotionally Focused Therapist and Supervisor and Minnesota Board Approved Supervisor with both the Board of Marriage and Family Therapy and the Board of Behavioral Health. She is the owner of a group practice, Evolve Therapy in Plymouth, Minnesota. Evolve Therapy uses Emotionally Focused Therapy to help people in relationships. The mission of Evolve is to empower people, inspire hope and restore love and respect in relationships. Evolve works individuals, couples and family members that have been negatively impacted by affairs, addictions, betrayals, communication issues, emotional needs not being met, attachment issues among others.

# Answering the Call: Why you should become a board approved clinical supervisor (60 minutes) 1:45am-2:45pm

At a time in which the demand for mental health services is outpacing the supply, it's more important than ever to examine how we can grow the behavioral health workforce. Research suggests that one of the barriers to increase the number of licensed providers is the availability of board approved supervisors. This interactive workshop will explore both the philosophical and practical reasons to become a board approved clinical supervisor. Participants will reflect on their own motivations for being a therapist while exploring how providing supervision fits within their career path. Additionally, participants will leave the training with knowledge on the required steps to become a board recognized supervisor.

#### Learning Objectives:

1. Understand the MFT workforce gaps and the need for more licensure supervisors as part of the solution to meeting increasing demand for services.

2. Explore how providing licensure supervision can be intrinsically connected to participants career pathway.

3. Identify the steps and rules required to become a Board Approved Clinical Supervisor for Marriage and Family Therapists in Minnesota.

**Presenter:** Thad Shunkwiler is a Licensed Marriage and Family Therapist who works as an Associate Professor in the Department of Health Science at Minnesota State University, Mankato. In addition to his faculty role, he is the founding Director of the Center for Rural Behavioral Health, which aims to ensure access to quality mental health care in outstate Minnesota. In 2021, he was named both a Presidential Teaching Scholar and a Fellow for the Center for Excellence in Teaching and Learning. Professor Shunkwiler's research includes the process of clinical supervision and its intersection with behavioral health workforce development. His academic and clinical work has led to various national and statewide appointments to include a Governor's appointment to the Board of Marriage and Family Therapy. Having been an invited speaker to numerous professional conferences, he is recognized as a national leader in training healthcare professionals on issues surrounding behavioral health and wellness.

#### Mental Health Medication: A Simple Overview (60 minutes)

3:00pm-4:00pm

Family therapists receive comprehensive training in psychotherapeutic techniques. However, there is a whole other side to treating mental health that remains outside of our training and understanding: mental health medications. Seeing that 17% of all Americans have taken mental health medications in the last year (compared to 10% who have received therapy), it is pertinent for Family therapists to understand the complimentary (and sometimes contradictory) role that mental health medications can serve for our clients. Further, collaboration and consultation between Family Therapists and Prescribers is a central component of increasing the quality and effectiveness of care. Thus, this presentation serves as a bridge between the often-siloed areas of Medicine and Therapy.

Pulling from her experience working in various settings, Lydia Sherman, RN, CNP will be leading a discussion, designed for therapists, that will provide a comprehensive overview of mental health medications and answer common questions even the most seasoned Family therapist may have. Initially, this presentation will provide a primer on mental health medical treatment in general. This will include detailing the different classes of medications, the different uses each class serves, and the observable effect of these medications. With an understanding of the "what" of mental health medication, participants will be better able to explain the potential positive role they may serve for their clients, as well as serve as an additional eye to catch potential problems that clients can sometimes face when on medications.

Following this, this presentation will provide helpful guidelines that Family Therapists can use for their clients with respect to knowing how long to take a medication for, and things to look for that may indicate a change or elimination of mental health medication is appropriate. While it is not expected that Family Therapists make medication decisions or recommendations, being equipped with general knowledge may improve the collaboration and consultation for our clients.

Lastly, this presentation will provide common guidelines that prescribers follow when titrating a client off a medication. As client symptoms decrease and mood improve in therapy, they may be tempted to end medication. Doing so in a structured way, observed by both their Prescriber and Therapist increases the likelihood that they will titrate down in a safe, effective, and efficient way.

If there is time available at the end, Lydia will open up the floor for case consultation and specific questions concerning mental health medication and the delivery of quality care.

#### **Learning Objectives:**

1. Obtain a general understanding of Mental Health Medication and the potential role it may serve for clients.

2. Understand general guidelines for when recommending a client begin medication treatment is appropriate and inappropriate.

3. Assist clients in titrating down from mental health medication in structured and effective manner.

**Presenters:** Lydia Sherman, RN, CNP is a Certified Nurse Practitioner with over 20 years experience in Medicine. She is also a mental health medication specialist at ALL IN Therapy Clinic.

#### 3:00pm-4:00pm

Death either impending or completed, has significant effects on the living. Sitting with clients in their pain which manifests in a variety of both significant and small ways is critical. What support can a therapist provide during crisis and ongoing grief? How as clinicians do we listen and support without trying to fix. What is complicated grief and when would our clients be outside of the normative responses to a death in their circle. What are the differences between grief and depression? Explore ways working with a whole family or other groupings can be helpful in grief. This interactive session will explore basic skills in supporting our grieving clients and assist in recognizing ways grief can both negatively and positively affect all aspects of a client's life.

#### Learning Objectives:

- 1. Recognize symptoms of grief and effects on functioning
- 2. Learn supportive statements versus statements that increase suffering for clients
- 3. Explore similarities and differences between depression and grief
- 4. Discover ways a therapist can build strengths when anxiety is present in grief

**Presenter:** Stacey Allen, LMFT provides therapy services to individuals, families, couples, adults, teens, and children who are living with or supporting someone with cancer, chronic illness, medical issues, or grief. Stacey has served patients and their families around medical issues and grief in many different contexts including group private practice therapy, as a Certified Child Life Specialist in local pediatric hospitals, 8 years as a cancer support group facilitator at Gilda's Club Twin Cities, and community grief support groups. Stacey sees clients during illness, through post-treatment phases, and in the event of a terminal diagnosis, impending death, or after a death. Stacey is a Minnesota Marriage and Family Therapy Board Approved Clinical Supervisor.

# ADHD Avenue: A Road to Working with Individuals and Couples with ADHD (120 minutes) 3:00pm-5:15pm

ADHD is so much more than focus and attention differences. Anxiety, shame, depression, and relationship challenges co-occur with – and are often caused by – ADHD because of the pressure to conform to societal expectations. However, these expectations are often not in line with our experiences of the world, our strengths, and our challenges. Over time, this shame can build up and lead us to internalize the belief that we are inherently defective. By gaining a deeper understanding of the traits and characteristics of ADHD and how it impacts daily life, clinicians can work with clients on their level while holding and affirming the unique features of an ADHD brain. We often hear, "ADHD is not an excuse!" and while that is true, it IS an explanation. ADHD must be taken into account when considering how to manage responsibilities, expectations, relationships, and more. Whether a client is coming to you for ADHD-related care, or you learn or begin to suspect that they have ADHD while working toward other goals, understanding about how an ADHD brain influences all aspects of their life is vital to creating an affirming, client-centered therapeutic space.

We utilize four stages in our conceptualization of working with ADHD:

1. We start with providing information on neurobiology and behavior as they relate to ADHD. This context helps to depersonalize behavior often seen as challenging or problematic which allows for clinicians, clients, and loved ones to gain a different perspective on what they are observing/experiencing.

2. We explore self-compassion and acceptance. By understanding their brain and the link to their behavior, clients can look back at their lives with clearer focus and adjust their narrative(s) about who they are as they move forward.

As clients begin to accept their full selves and recognize their strengths and limitations, we can address skills. We focus on clients' unique needs when considering behavioral change rather than focusing on what they "should" be doing. We believe it's not a problem unless it's a problem.
Finally we address relationships with others and the common patterns that emerge in ADHD relationships. We work within the ADHD lens to help clients live in a meaningful, connected way with others while also keeping in mind the characteristics of an ADHD brain that can create or exacerbate challenges within relationships. We separate the problem from the client and help them recognize it for themselves.

#### Learning Objectives:

1. Gain a better understanding of the neurobiology and behavioral traits associated with ADHD to better understand and work with your clients with ADHD.

2. Develop greater competence in helping a client with ADHD recognize their strengths and challenge areas in a non-shaming and affirming way. Distinguish between the essence of the individual and the traits of ADHD.

3. Gain a better understanding of the client harm caused by pathologizing practices and assumptions of trauma in working with ADHD clients.

4. Identify relational patterns that may be present in the relationships of a client with ADHD.

**Presenters:** Jackie Morrison, LAMFT earned her Master of Arts in Marriage and Family Therapy at Saint Mary's University of Minnesota. Jackie also holds a Master of Science in Teaching and a Bachelor of Science in Psychology. Jackie was diagnosed with ADHD in adulthood and unsurprisingly became hyperfocused on learning more about it, which quickly transitioned into a clinical interest. Using both clinical and lived experience, Jackie works with clients who have been diagnosed with or suspect they may have ADHD on psychoeducation, self-compassion, skills, and relationship dynamics.

Marcus Manning is a licensed professional clinical counselor who earned his Master of Counseling and Psychological Services at Saint Mary's University of Minnesota. Marcus was diagnosed with ADHD at the age of 32. He brings a blend of ethnicity, flavor, positive energy, and a bright light to the table while working with ADHD. Over the past several years, Marcus has integrated unique and creative ways of helping people to develop rich and meaningful lives while dealing with the inevitable ADHD challenges that come with it.

#### **Antiracism in Therapeutic Practices (120 minutes)**

3:00pm-5:15pm

While therapeutic practices have become more and more attentive to the systemic workings of patriarchy and heteronormativity, there is a startling lack of attention to Whiteness as an organizing principle of identity development. Moreover, DEI trainings that focus on content at the expense of embodied processes struggle to overcome internalized resistances. As Resmaa Menakem wrote, "We've tried to teach our brains to think better about race. But what if white-body supremacy doesn't live in our thinking brains? What if it lives and breathes in our bodies?" This session seeks to highlight the need for and benefit of DEI training that takes an embodied approach to the function of Whiteness in society. This reorientation includes identifying White supremacy as being at work within what we call good,

nonracist, White communities. These are often loving communities that believe in justice and are opposed to racism, but struggle to understand their role in fighting oppression.

By locating themselves within these communities, and by exploring their own internalized Whiteness and racism, Ellie and Kevin work to create a generative space of vulnerability and accountability. Their work is founded in a belief calling in, not out, and locating the problem of White Supremacy within communities of White people. The work is designed to reveal what can be hidden in plain sight by offering new frameworks based on the work of people of color, including James Baldwin, Toni Morrison, Thandeka, and Resmaa Menakem. By examining these new frameworks, the work of antiracism becomes more tangible, sensible, and simple.

The work is rooted in the deeply held belief that, as we make sense of and heal from internalized racism, the problem of racism becomes both much more clear and much less tolerable. We are all deeply wounded by Whiteness. It is only in the process of healing from that wound that we can make antiracism a reality.

#### Learning Objectives:

1. Locate Whiteness in historical, political, and social contexts

- 2. Make sense of racism as problem of Whiteness and White people
- 3. Clarify the difference between "being" nonracist and practicing antiracism

4. Better understand the ongoing role of everyday White socialization in sustaining White supremacy and racism

5) Introduce practices for processing and healing from internalized racism

**Presenters:** Ellie Roscher (she/her/hers) is the author of The Embodied Path, 12 Tiny Things, Play Like a Girl and How Coffee Saved My Life. She teaches yoga at Up Yoga and teaches writing at The Loft Literary Center and the Minnesota Writing Project. Ellie holds an MFA in Writing from Sarah Lawrence College and an MA in Theology from Luther Seminary. Follow her at @ellieroscher and find out more at ellieroscher.com.

Kevin Lally PhD (he/him) is the author of Whiteness and Antiracism: Beyond White Privilege Pedagogy. His scholarship focuses on White identity development and the paralytic function of shame within liberal communities. Kevin is currently a teacher educator and high school English teacher in the Twin Cities area.

# **Best Practices When Working with Biological Parents Involved in Child Welfare (120 minutes)** 3:00pm-5:15pm

Working with biological parents of children involved in the child welfare system requires thoughtful action and attention to risk and resilient factors. The familial and environmental context surrounding their involvement with the child welfare system creates an opportunity for C/MFTs as systems thinkers to help navigate and improve outcomes for children and families. Often there can be an intergenerational pattern of abuse and/or child welfare involvement, one that can be disrupted, if the families receive quality services. In order to work most effectively with biological parents, presenters will discuss the necessity of a trauma-informed lens integrated with adverse childhood experiences research and the use of a resilience model that can help CFTs working with these families.

The limited research examining biological parent's perspectives and experiences within the child welfare system and mandatory parenting interventions will be explored so attendees can have a broader understanding of what it is like for biological parents. Specifically, we will be sharing information from our personal experiences working within this population as well as the results of our systematic review examining this topic. Further, given the expansion of research on adverse childhood experiences and the impact it has on adults including neuroscience and epigenetic advancements will be shared and discussed to encourage trauma-informed work with parents in the child welfare system. Lastly, the presenters will provide a resilience framework to help guide clinical work with biological parents. Participants will leave with an empirical understanding of biological parents' experiences in the child welfare experience as well as tools to help optimize the biological parents' resilience and outcomes.

#### Learning Objectives:

1. Identify factors that lead to the intergenerational transmission of abuse.

2. Describe the findings of the original ACE study and apply it to biological parents in the child welfare system.

3. Apply trauma informed practices to their work with biological parents.

**Presenters:** Armeda Stevenson Wojciak is an Associate Professor and program director for the Couple and Family Therapy program at the University of Minnesota. Her work centers around improving outcomes of youth and families involved with child welfare.

Ana Mireya Diaz is a second year doctoral student in the Department of Family Social Science and first year MSW student at the University of Minnesota. Her work focuses on parents parenting with mental health concerns.

Jessica Simpson is a fourth year doctoral student in the Department of Family Social Science specializing in couple and family therapy. Jessica's research focuses on improving outcomes for American Indian families involved in child welfare.

Olivia Tomforhde, PhD, is a graduate of the Department of Family Social Science and a clinician specializing in trauma. Her dissertation explored intergenerational trauma and supports of biological parents involved in foster care.

Guanyu Want is a third year doctoral student in the Department of Family Social Science specializing in couple and family therapy. Her research focuses on cultural and contextual impacts on dynamics and parenting.

### **Common Questions & Best Practices - Things the MN Board of MFT Wants You To Know (120 minutes)** 3:00pm-5:15pm

Representatives from the MN Board of Marriage & Family Therapy (the state regulatory and licensure board) will discuss the following: (1) upcoming new requirements for LMFT Board-Approved Supervisors and new secondary supervisors; (2) what to do when notified a complaint has been filed against you; (3) what to include in an administrative variance request; (4) requirements & restrictions on telehealth practice in MN; (5) recent & upcoming changes to continuing education requirements; (6) license portability; (7) changes and streamlining of the LMFT licensure process; and (8) Board work in addressing barriers to licensure.

#### Learning Objectives:

1. Learn upcoming new requirements for LMFT Board-Approved Supervisors and new secondary supervisors

- 2. What to do when notified a complaint has been filed against you
- 3. What to include in an administrative variance request
- 4. Requirements & restrictions on telehealth practice in MN
- 5. Recent & upcoming changes to continuing education requirements
- 6. License portability
- 7. Changes and streamlining of the LMFT licensure process
- 8. Board work in addressing barriers to licensure.

Presenters: Jessie Everts, PhD, LMFT, Board Chair; Shonda Craft, PhD, LMFT, Board Vice Chair; and Jennifer Mohlenhoff, Executive Director, MN

#### Legislative Advocacy for Mental Health Professionals (60 minutes) 4:15pm-5:15pm

Members of the HAL Team will explain the legislative/advocacy process and how MAMFT members can participate with confidence and no fear.

MAMFT members are busy and are client focused. Much is probably not known about the true legislative process and how MAMFT members can be active participants to the benefit of their clients and their profession.

#### Learning Objectives:

- 1. Demystify the Legislative Process
- 2. Help MAMFT Members Know How They Can Influence the Process
- 3. Explain How The Legislative Process Can Benefits Them and Their Clients

**Presenters:** Brian R. McDaniel is an attorney, college professor, stand-up comedian, and Minnesota governmental relations professional with over 25 years of experience working both inside and outside of the Minnesota State Capitol. Prior to his lobbying career, Brian served as Legislative Director to the Speaker of the Minnesota House, Director of Government Relations for the Minnesota Department of Employment & Economic Development, Director of Fiscal Policy for the Minnesota Business Partnership, an appointed Member of the Metropolitan Council, and as Committee Administrator for the House Committee on Commerce, Jobs & Economic Development.

Isabella Rojas is a Government Relations Specialist and graduated from Iowa State University with a BA in Political Science and History. At Iowa State, Isabella was active in government, including advancing equitable racial representation in student government. She advocated on behalf of the student body at the local, state, and federal levels. Her work in Iowa included laying the groundwork for equitable housing policy and passing a medical amnesty bill into law. Isabella also spent time working in the British Parliament during her senior year of college. Isabella joined Hylden Advocacy & Law in 2020 following her graduation.

#### Four Types of Brain Reprocessing - Introduction and Comparisons (60 minutes)

4:15pm-5:15pm

Many therapists have heard of four main techniques that focus upon brain processing to heal specific thoughts or memories. The four chosen for this presentation are: EMDR, brain spotting, EMDR 2.0, and ART. The common denominator in all four is the incorporation of bi-lateral stimulation of the brain. EMDR has the longest history and use, being developed in the 1980's by Francine Shapiro. Other approaches were since developed, and each has a certain protocol. This workshop will provide introductory information and application so that a licensed provider will be able to determine which training or specialty to pursue if desired. The presentation is not intended to promote any one specific approach.

#### Learning Objectives:

- 1. Understand basic premises for all four techniques
- 2. Differentiate basic differences amongst the four techniques
- 3. Discern how one or more of the techniques may enhance your practice and treatment of clients
- 4. Apply the strengths and limitations for techniques, especially as they may be used in a given setting

**Presenter:** Sandy Sample, LMFT, is a therapist in private practice in Edina, Minnesota. She works mainly with adults, specializing in anxiety, depression, trauma, and couples work. She was EMDR trained in 2018, and has since received extensive advanced training and is and EMDRIA-approved Consultant.