

# Fourth International Conference on Families with Parental Mental Health Challenges

Addressing the Needs of the Whole Family



**April 25 – 27, 2014**

Ed Roberts Campus, Berkeley  
California, USA

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Conference Information Online: [interprofessional.ubc.ca/MentalHealth2014](http://interprofessional.ubc.ca/MentalHealth2014)

**GENERAL INFORMATION**

**Description** This conference will bring researchers, educators, policy-makers, and providers from across disciplines together with members of the judiciary and those with lived experience. The primary aim is to share knowledge and experience, to advance the rights and highlight the needs of families striving to live well with parental mental health challenges. Related objectives include provision of an interactive forum to discuss common experiences, effective and evidence informed support and advocacy strategies, and contemporary, cutting edge research.

**Conference Objectives** Participants will have opportunity to explore two general theme areas:

- The challenges of parenting for adults with psychiatric disability or mental health concerns; and
- The impact and challenges for children & young people living in families with parental psychiatric disability or mental health concerns, including those associated with being a young carer

**Audience** This conference is interdisciplinary and international in scope. The aim is to bring together professionals working in the field of mental health, family members and other stakeholders in the area of parental mental health. Interested disciplines will include but are not limited to Psychology, Social Work, Medicine, Nursing, Education, Occupational Therapy, Sciences, Pharmacy and other health disciplines.

**Themes & Topics**

- Evidence informed supports and services for young people, parents and families
- The legislative/legal barriers parents confront in maintaining custody of their children including interactions with the child welfare system and family law courts
- Strategies for building trust and reducing stigma while supporting parents and children
- Information on how psychiatric disabilities and mental health concerns are experienced by parents and both their young and adult children
- The use of technology-based platforms to provide information, training, education and support to parents and families
- Advocacy strategies for supporting families living with parental mental health challenges

**Location & Accommodations** **Ed Roberts Campus**  
 3075 Adeline Street  
 Berkeley, CA 94703  
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 The Ed Roberts Campus commemorates the life and work of Edward V. Roberts, an early leader in the independent living movement of persons with disabilities. Ed believed in the strength of collaborative efforts: he called it “working toward our preferred future.”  
 To learn more, please visit [www.edrobertscampus.org](http://www.edrobertscampus.org).  
 To view a list of hotels near the Ed Roberts Campus that are offering special rates for conference participants, please visit our website at [interprofessional.ubc.ca/MentalHealth2014/location](http://interprofessional.ubc.ca/MentalHealth2014/location).

**Registration and Tuition Fees** Please see the Registration Form on the last page of the brochure.

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**Professional Credits / Certificate of Attendance** Participants attending the conference will be given a certificate stating 13 hours of educational instruction. This program is Approved by the National Association of Social Workers (Approval #886463608-2554) for 13 Social Work continuing education contact hours. California continuing education credit offered by Through the Looking Glass, California BBS Continuing Education provider # 5244. This course meets the qualifications for up to 13 hours of continuing education credit, if all conference courses are attended, for MFTs and/or LCSWs as required by the California Board of Behavioral Sciences.



**Exhibiting** Organizations interested in exhibiting at this conference are invited to contact the conference organizers for more information. Exhibit space is limited. Please contact Pilar Onatra by phone: 1-604-822-7524 or by e-mail to [pilar.ipce@ubc.ca](mailto:pilar.ipce@ubc.ca).

**Friday, April 25, 2014**

3:30 - 4:30pm	Registration
4:30 - 5:00pm	Welcome, Introductions & Historical Perspective
5:00 - 6:00pm	Keynote
6:00 - 7:20pm	Entertainment & Reception

**Saturday, April 26**

7:30 - 8:30am	Registration
8:30 - 10:00am	Plenary Session
10:00 - 10:20am	Break
10:20 - 11:50am	Concurrent Session A
11:50am-1:10pm	Lunch
1:10 - 2:40pm	Concurrent Session B
2:40 - 3:00pm	Break
3:00 - 4:30pm	Plenary Session/Panel on Infant Mental Health

**Sunday, April 27**

7:30 - 8:30am	Registration
8:30 - 10:00am	Concurrent Session C
10:00 - 10:20am	Break
10:20 - 11:50am	Concurrent Session D
11:50am - 1:10pm	Lunch
1:10 - 2:40pm	Concurrent Session E
2:40 - 3:00pm	Break
3:00 - 4:00pm	Closing Plenary

## EXECUTIVE COMMITTEE

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MSW, MDiv, EdD, RPsych, Associate Clinical Team Leader, Child and Youth Mental Health, Government of British Columbia, Chilliwack, BC, Canada

**Dr. Joanne Nicholson**

PhD, Professor of Psychiatry and Licensed Psychologist Dartmouth Psychiatric Research Center, The Geisel School of Medicine at Dartmouth, Lebanon, NH, USA

**Katia Selezeneva**

Senior Education Manager, UBC Interprofessional Continuing Education, Vancouver, BC, Canada

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PhD, Associate Professor, School of Social Work, University of British Columbia, Vancouver, BC, Canada

**Christine Cooper**

Executive Director, Family Association for Mental Health Everywhere, Etobicoke, ON, Canada

**Dr. Adrian Falkov**

MD, Senior Staff Specialist, Child Youth & Family Mental Health Service, Sydney West Area Health Service, Sydney, NSW, Australia

**Dr. Brenda Gladstone**

PhD, Project Investigator, Child Health Evaluative Sciences, SickKids, Adjunct Lecturer, Lawrence S. Bloomberg Faculty of Nursing, University of Toronto, Toronto, ON, Canada

**Dr. Darryl Maybery**

PhD, Associate Director, Monash University Department of Rural and Indigenous Health and Associate Professor, Monash University, Moe, Victoria, Australia

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PhD, RN, Assistant Professor, Faculty of Nursing, University of Manitoba, Winnipeg, MB, Canada

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**Dr. Karin van Doesum**

PhD, Prevention psychologist, Senior-researcher Mental Health Center, Mindfit, & Radboud University Nijmegen The Netherlands. Guest researcher at the University of Tromsø and Bergen, Norway

## FRIDAY, APRIL 25

3:30 - 4:30pm **Registration**4:30 - 6:00pm **Welcome****Keynote Presentation: What's Working for Families Where Parents have Mental Illness? A Global Perspective to Start the Conversation****Robert Lees**, MSW, MDiv, EdD, RPsych, Associate Clinical Team Leader, Child and Youth Mental Health, Government of British Columbia, Chilliwack, BC, Canada**Evan Kaplan**, Executive Director, Child and Family Connections, Inc., Philadelphia, Pennsylvania, USA**Kim Foster**, RN, PhD, Professor, Faculty of Health, Disciplines of Nursing & Midwifery, University of Canberra, Bruce, Australia

The opening plenary will provide context from the three preceding World Conferences, (Australia 2009, Norway 2010, Vancouver, 2012), a report on global findings from the Children of Parents with a Mental Illness (COPMI) world survey and activity, and a unique example of how one of those findings is changing the conversation about parental mental health.

## Learning Objectives

1. Participants will have an understanding of the three prior conferences that are backdrop and context for this gathering
2. Participants will be familiar with findings from Dr. Foster's Winston Churchill Grant study of programs and practices serving children and families with parental mental illness across jurisdictions
3. Participants will appreciate how lived experience has the power to inspire and shape creative treatments for families with parental mental health challenges

6:00 - 7:20pm **Entertainment & Reception**

## SATURDAY, APRIL 26

7:30 - 8:30am **Registration**8:30 - 10:00am **Plenary Session - Family Recovery****Gary Blau**, PhD, Chief, Child, Adolescent and Family Branch Center for Mental Health Services, Substance Abuse and Mental Health Services Administration, Rockville, MD, USA**Adrian Falkov**, MD, Senior Staff Specialist, Child Youth & Family Mental Health Service, Sydney West Area Health Service, Sydney, NSW, Australia

Recovery from mental illness is deeply embedded within a parent's network of social relationships; family relationships being among the most important. Similarly, the development of resilience and well-being in children, especially those living with mental health challenges of their own, requires the support of a network of caregivers; including family, community and, if needed, professional.

This plenary will explore the interplay between the recovery process, the development of resilience and well-being and family relationships. Particular emphasis will be given to lived experience and the quality of connections between family members and other caregivers, practitioners/clinicians & managers, given the importance of these relationships in determining outcomes.

By providing a rationale and strategies to integrate approaches across the child and adult systems, this session will identify a mix of policy and practice ideas that improve cross-system collaboration. The information will be based on evidence informed practice, be aspirational in scope and take a cross-national perspective.

Participants will acquire better awareness & knowledge based on:

1. An overview of contemporary recovery and resilience principles & practices including partnership, continuity, respect, and choice
2. Examples of family focused approaches, including use of The Family Model as developed in Australia and the UK, and the Systems of Care framework for children, youth and families in the U.S.
3. Collaborative approaches to promote integrated care for children, parents and families

10:00 - 10:20am **Break**10:20 - 11:50am **Concurrent Session A****A1 Mini Plenary – Technology****Using Online Interventions to Address the Needs of Families Impacted by Parental Mental Health Challenges****Facilitator: Joanne Nicholson**, PhD, Professor of Psychiatry and Licensed Psychologist Dartmouth Psychiatric Research Center, The Geisel School of Medicine at Dartmouth, Lebanon, NH, USA**Katy Kaplan**, PhD, Co-Chair, Director of Human Services & Special Initiatives, Philadelphia Councilman-At-Large Dennis M. O'Brien; Investigator, Temple University Collaborative on Community Inclusion, Philadelphia, PA, USA**William R. Beardslee**, MD, Director, Baer Prevention Initiatives and Chairman Emeritus, Department of Psychiatry, Boston Children's Hospital; Gardner/Monks Professor of Child Psychiatry, Harvard Medical School, Boston, MA, USA

The Internet has become a mechanism where individuals with health conditions seek out support and services. It allows for anonymity, provides the ability to access services from the comfort

of your home, and overcomes barriers to accessing supports such as transportation, meeting times that aren't convenient and child care. This session will provide overviews of several free online interventions designed to address the needs of families affected by parental mental health challenges. First results from a randomized controlled trial accessing the effectiveness of an Internet based parenting education course and support group for mothers with a psychiatric disability will be discussed. Then experiences with web-based training in combination with live training for the Family Talk intervention developed by Beardslee and colleagues will be presented. Thirdly, an online intervention used to encompass the FOCUS intervention for families facing multiple deployments will be briefly reviewed.

## Learning Objectives

1. Increased understanding of Internet as a tool for overcoming barriers to accessing supports related to parenting with a mental health issue
2. Be familiar with several different free online interventions for addressing the needs of parents with mental health challenges and their families
3. Describe the challenges that parents with mental health challenges face and strategies for addressing those needs

**A2 Young Carers** | 90 minutes**Stories that Sustain: the Voices of Young People Whose Parents have Faced Mental Health Difficulties****Advanced**

**Olya Kozlova**, MA, MSW, RSW, Individual and Family Therapist, Oolagen Community Services, Toronto, ON, Canada

**Ruth Pluznick**, MSW, RSW, Clinical Director, Oolagen Community Services, Toronto, ON, Canada

In this workshop, Ruth Pluznick and Olya Kozlova will present the voices of young people whose parents are affected by mental health difficulties and describe the narrative ideas and principals that underpin their practice. Specifically, the objective of the workshop is to introduce the participants to different conversational pathways that help to bring forth double-storied accounts of young people's lives. The practices described can be used in a clinical work with individuals and families, as well as with groups and communities, and have been proven to help to reduce stigma.

## Learning Objectives

1. Understand the politics of 'naming rights' re: mental health difficulties
2. Learn how to separate a person's identity from the problem so that space can be created to explore life apart from the problem
3. Learn how to 'double-story': gathering stories which acknowledge both the hardship and the legacies of love and care in these families
4. Learn how to invite young people to reflect upon and share their experience of growing up with a parent facing mental health challenges

**A3 Parents with Young Children** | 3 30 minute sessions**Assessment and Intervention with Women with a Maternal Mental Health Disorder****Intermediate**

**Lisa Marie Dryan**, LCSW, Director, Harmony Behavioral Health, The Wylie Center, Riverside, CA, USA

Participants in this seminar will learn about the prevalence of the maternal mental health disorders, risk factors, symptoms, screening tools, how these disorders can be effectively treated and the impact of untreated mental illness on children.

## Learning Objectives

1. Learn about the prevalence of the maternal mental health disorders, risk factors, symptoms, screening tools which could be used in primary care settings, and effective treatment interventions
2. Learn about the impact of these disorders on the family, particularly the children, and what the family can do to help

ameliorate the stress and trauma of these disorders on the entire family

3. Learn about the possible continuum of care treatment models which should be available for women, but are not currently offered in our county or even in our State
4. Demonstrate what can be done to raise awareness regarding these disorders and how to help

**Children of Patients with Severe Illness or Substance Abuse: Prevalence, Identification, Perceived Needs, Services Received and Outcome. Protocol and Progress by April 2014****Intermediate**

**Kristine Amlund Hagen**, Director of Research, Center for Child and Adolescent Mental Health, Eastern and Southern, Norway

The presentation will describe the aims and design of a large multi-center study, what type of data we are collecting, what we expect to learn from the results, progress of the project, and challenges and problems we have faced so far.

## Learning Objectives

1. Learn about a large ongoing study on children with parental challenges due to substance abuse or mental or somatic illness
2. Understand some of the practical challenges in implementing the large study
3. Know what new knowledge to expect from the study when the results are studied

**Improving Outcomes for Families Impacted by Mental Illness****Advanced**

**Brahm Goldenberg**, BSW, MSW, RSW, Social Worker, CAST, Toronto, ON, Canada

**Franz Noritz**, BSW, RSW, Social Worker, Children's Aid Society of Toronto, Toronto, ON, Canada

The presenters will discuss a partnership venture between a child welfare agency and an adult mental health organization in Toronto. A mental health team will work with child welfare in order to address the psychosocial needs of the parent with a mental health issue as well as their family.

## Learning Objectives

1. Gain insight into the challenges for child welfare staff who work with a diverse group of parents who have a mental illness
2. Learn strategies used for engaging the health care system to recognize the impact of parental mental illness on their system
3. Learn how to secure a partnership between a child welfare agency and a community mental health organization

**A4 Advocacy** | 3 30 minute sessions**Parenting with Mental Health Challenges: Legal Barriers and Solutions****Intermediate**

**Katherine S Nemens**, JD, Attorney, Mental Health Legal Advisors Committee, Boston, MA, USA

Parents with mental health challenges are at high risk of losing custody of or contact with their children when the court is involved. Stigma and fear are real obstacles in the legal system which can be overcome with education, supports for families, advocacy and compassion.

## Learning Objectives

1. Legal barriers in the courts: The “best interests of the child” standard is often ill-defined; courts can make custody and parenting decisions based on a mental health diagnosis, rather than parenting abilities
2. Strategies to overcome these barriers: Providing parents with services and resources to support their family; educating judges and attorneys on the recovery model, to look beyond diagnosis, and to consider holistic, individualized and creative solutions for parents with mental health challenges; and training advocates to look for real-life solutions, and help clients redefine “success”
3. Discuss supports and resources for parents with mental health challenges: Include Recovery Learning Centers, Clubhouses, and other Peer Supports

### The Italian Program “Semola”: Focusing Recruitment Problems

#### Advanced

**Edoardo Re**, MD, Psychiatrist, NGO Contatto Onlus and Niguarda Hospital, Milano, Lombardy, Italy

Referrals to the new Italian Program “Semola” in Milano, despite a highly defined procedure, don’t exceed one third of recruitable families. Many factors seem to be related with this gap (first of them resistances offered by adult psychiatrist) will be discussed with participants.

## Learning Objectives

1. Discuss an in depth analysis of such a recruitment problem and to share experiences with participants

### Integrating a Mental Health Promotion Strategy for Families in the Postpartum Period within an Existing Public Health Program: Perspectives from Parents, Home Visitors, and Public Health Nurses

#### Intermediate

**Marion Cooper**, BSW, RSW, Manager of Mental Health Promotion Prevention and Early Intervention, Winnipeg Regional Health Authority, Winnipeg, MB, Canada

This multi-layered mental health promotion innovation strategy aims to improve parents’ mental health, strengthen public health workforce capacity in mental health promotion, support collaboration between mental health and public health systems, and create and sustain mechanisms for effective mental health promotion in community settings across Manitoba.

## Learning Objectives

1. To improve the mental health and decrease mental illness/distress of women and their children in the Families First home visiting program
2. To strengthen public health workforce capacity to address mental health promotion
3. To create and sustain mechanisms for effective mental health promotion interventions in community settings across Manitoba

## A5 Family Recovery | 3 30 minute sessions

### Coordinating Services for Children and Parents with Mental Illness

#### Intermediate

**Richard T Sullivan**, PhD, Social Worker, UBC School of Social Work, Vancouver, BC, Canada

**Stephanie A. Bryson**, PhD, Assistant Professor of Social Work, UBC School of Social Work, Vancouver, BC, Canada

**Yasmin Remtullah**, MSW, Ministry for Child & Family Development, Vancouver, BC, Canada

For health and social service professionals concerned with the provision of effective mental health and family services where parental mental illness is a factor, this workshop will assist participants in identifying the information they need from allied professionals in order to enhance their practice in the service of children and families.

## Learning Objective

1. Develop guidelines for a framework for collaboration in specific locales

### Think Family - Whole Family Multi-Agency Training and Family Intervention: Improving the Outcomes for Mentally Ill Parents and Their Children

#### Advanced

**Lina Gatsou**, MD, Child and Adolescent Psychiatrist, Leicestershire Partnership NHS Teaching Trust Child and Adolescent Mental Health Services (CAMHS), Valentine Centre, Leicester, Leicestershire, UK

**Scott Yates**, PhD, Head of Research for Youth, Community and Education, School of Applied Social Sciences, De Montfort University, Leicester, Leicestershire, UK

This presentation outlines a new adaptation of behavioral family therapy designed for training multi-agency workers who work with families where parents have mental health issues. The philosophy and practice behind the program are explained, and initial evaluation data presented that indicate positive results from the program in the UK.

## Learning Objectives

1. Inform attendees about the new approach
2. Explain the philosophy behind and outline how the training and intervention processes operate
3. Explore the initial data produced from the program in the UK relating to challenges workers experience in working with mental health issues and working holistically with families
4. Discuss how the program has achieved success in upskilling professionals and improving practice

### Implementing Let’s Talk about Children within a Recovery Framework in Australia

**Darryl Maybery**, PhD, Associate Director, Monash University Department of Rural and Indigenous Health and Associate Professor, Monash University, Moe, Victoria, Australia

Let’s Talk about Children is an intervention for adult psychiatry to help prevent children’s psychiatric problems. Research in Finland has shown positive findings concerning safety, feasibility and effectiveness. This session will outline how the intervention is being implemented and trialed in the Australian context.

## Learning Objective

1. Learn the basics about the Let’s Talk about Children and how it may be implemented within a recovery framework

**A6 Young Carers** | 3 30 minute sessions**Parentification, Stress, and Problem Behavior in Adolescents with a Mentally Ill Parent****Beginner**

**Linda van Loon**, MSc, PhD-student, Behavioural Science Institute, Radboud University Nijmegen, The Netherlands

**Karin van Doesum**, PhD, Prevention Psychologist and Researcher, Mindfit and Behavioural Science Institute, Radboud University Nijmegen, The Netherlands

Results of a quantitative study about the relation between parentification, stress, and internalizing and externalizing problems of adolescents with a mentally ill parent will be presented. In addition, the concept of parentification and practical implications will be discussed.

## Learning Objectives

1. Become informed about the relation between parentification and internalizing and externalizing problems of adolescents with a mentally ill parent
2. Discuss the concept of parentification in adolescents with a mentally ill parent. Is parentification a risk factor only, or can it be a protective factor as well?

**Young Carers in Canada and the UK: a Statistical Comparison of the Incidence and Growth of Youth-Based Caregiving in Two Countries****Intermediate**

**Vivian Stamatopoulos**, MA, PhD Candidate, Toronto, ON, Canada

This workshop will provide a currently absent statistical overview of the incidence and growth of young carers in Canada using Census data from 1996-2006. Additionally, special attention will be paid to how the Canadian figures vary from those in the UK – a country with significant social programming and scholarship in the area.

## Learning Objectives

1. Provide a currently absent statistical overview on the incidence and growth of young carers in Canada using 1996-2006 census data
2. Reveal issues inherent in official country statistics that produce difficulties in making cross-national comparisons on the incidence of young carers
3. Compare the prevalence of young caring in Canada to that of the UK – the leading country for research and social provisioning geared towards young carers– in order to provide empirical justification for a similar national model of young carer service delivery in Canada

**Effect of the Psychiatric Family Caregiving Program on Caregiving Skills, Caregiving Stress, and Caregiving Burden Among Caregivers of Person with Schizophrenia, and Medication Adherence Among Person with Schizophrenia****Advanced**

**Patraporn Tungpunkom**, PhD, RN, APN, Director of the Thailand Centre for Evidence Based Nursing, Midwifery, and Health Science, Director of Mental Health Care Centre, Faculty of Nursing, Chiang Mai University, Chiang Mai, Thailand

Living with and caring for person with schizophrenia is difficult, often long term commitment. Therefore, family caregiving is crucial for psychiatric care due to the benefits of enhancing the patient to stay longer with the family and to decrease the relapse rate, as well as the cost of care. The intervention that focused on caregiving skills to enhance the capability of caregivers to take care of persons with schizophrenia effectively is needed. The psychiatric family caregiving program is one of choices that

developed and aimed to enhance the caregiving skills of caregiver to provide care effectively leading to positive outcome of care and well-being both for family caregivers and the patient themselves.

## Learning Objectives

1. Understand how caring for persons with schizophrenia effect on family caregivers
2. Understand the important of caregiving skills that required for caring of persons with schizophrenia
3. Understand and describe of how one of the interventions can help those caregiver related to caregiving stress caregiving burden when caring for persons with schizophrenia
4. Understand and know the invention of choices to increase the medication adherence for persons with schizophrenia

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11:50am-1:10pm **Lunch**

1:10 - 2:40pm **Concurrent Session B**

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**B1 Mini Plenary - Young Carers**

**Grant Charles**, PhD, Associate Professor, School of Social Work, University of British Columbia and the Division of Adolescent Health and Medicine, British Columbia Children's Hospital, Vancouver, British Columbia, Canada

There is a near invisible population of children and adolescents in many countries who have responsibilities beyond their years. These young people are forced by circumstances such as parental addictions, mental or physical illness or absence to fulfill a care giving role in their families far beyond what would be expected of a person their age even taking into account cultural differences on family responsibilities and expectations. The demands placed upon these young people have often negative and sometimes positive impacts upon their growth and development.

## Learning Objectives

1. Gain an understanding of the characteristics of young carers and the dynamics and circumstances associated with their caring responsibilities
2. Explore the possible positive and negative outcomes for them as a result of their care giving activities
3. Gain an understanding of the of the policies and programs that have been developed in a number of countries to support young carers

**B2 Family Recovery** | 3 30 minute sessions**Motherhood and Mental Health in the Context of Intergenerational Trauma: Reflections of Pregnant Aboriginal Women****Intermediate**

**Amrita Roy**, MSc, MD-PhD Candidate, Dept. Community Health Sciences, University of Calgary, Calgary, AB, Canada

Populations subjected to longterm, mass trauma show poorer health even several generations after the original events, due to intergenerational trauma. Intergenerational trauma is characterized by maladaptive psychological and social trauma responses, transmitted across generations through pathways including impaired parenting. The legacy of colonization continues to impact Aboriginal populations in Canada. Many of today's reproductive-aged Aboriginal individuals, for example, have relatives who survived the residential school system and "Sixties Scoop" child welfare policies. Their upbringing was thus impacted

by their caregivers' traumatic experiences; as they subsequently become parents themselves, the cycle of intergenerational trauma risks continuation.

#### Learning Objectives

1. Discuss intergenerational trauma as a determinant of Aboriginal mental health
2. Discuss findings from a constructivist grounded theory study (Voices and PHACES) in Calgary, Alberta, which examined depression in pregnant Aboriginal women
3. Discuss pregnancy as an intervention point for breaking the trauma cycle

### Opening all the Doors Through the Lifespan: Resources and Lessons Learned from Philadelphia's Multi-Portal Approach to Helping Families with Parental Mental Health Challenges

#### Intermediate

**Katy Kaplan**, PhD, Co-Chair, Director of Human Services & Special Initiatives, Philadelphia Councilman-At-Large Dennis M. O'Brien; Investigator, Temple University Collaborative on Community Inclusion, Philadelphia, PA, USA

**Edith Mannion**, LMFT, Manager and Co-Founder of Training & Education Center (TEC), Mental Health Association of Southeastern PA, Philadelphia, PA, USA

This workshop will offer participants an opportunity to access resources and lessons learned from Philadelphia's pioneering efforts in developing direct services for these parents and children through the lifespan, staff training programs in behavioral health and child welfare, and advocacy efforts for systems change to improve outcomes for these families.

#### Learning Objectives

1. Briefly describe at least one intervention Philadelphia has developed in each of these domains for improving outcomes for these families
2. Summarize at least 1 lesson learned in each of these domains
3. Access curricula and resources for parents, children, adolescents and adult daughters/sons, as well as providers in the behavioral health, child protective service systems and family court systems

### Paying Attention to Family of Origin Issues in Marginalized Youth

#### Advanced

**Elaine Mordoch**, PhD, RN, Assistant Professor, Faculty of Nursing, University of Manitoba, Manitoba, AB, Canada

Using a participatory action design, this study examined the perceptions of youth who were currently or had been homeless over the past 3 years. Participants were asked to reflect on their ideas regarding mental health, mental illness and addictions. Data was collected by interview, photo voice and focus groups.

#### Learning Objectives

1. Consider the early life experiences of marginalized youth who are currently or recently homeless and whose parents have psychiatric disability
2. Discuss the prevalence of co-morbidity of addictions and mental illness in parents of marginalized youth who are currently or recently homeless
3. Examine the accumulative trauma experiences within the childhood and adolescent years of marginalized youth who are currently or recently homeless

## B3 Advocacy | 3 30 minute sessions

### Effectiveness of a State (Province) Wide Strategy to Increase Family Focused Practice in Mental Health Clinicians

#### Advanced

**Darryl Maybery**, PhD, Associate Director, Monash University Department of Rural and Indigenous Health and Associate Professor, Monash University, Moe, Victoria, Australia

**Melinda J Goodyear**, PhD, MBSc, BBSc (Hons), Researcher, Monash University, Moe, Victoria, Australia

This is one of few International studies that examine the impact of a state (province) wide work force development strategy on adult mental health clinician family focused practices. The findings support the strategy but also highlight some unexpected clinician practices.

#### Learning Objectives

1. Understand the workforce behaviour changes that are likely to occur as a result of a state (province) wide workforce strategy
2. Recognise that adult mental health clinicians require skill and knowledge training in regard to working with parents and children to undertake family focused practice
3. Outline the workforce practices including referrals undertaken by mental health workers following the implementation of a state (province) wide workforce strategy

### Families at the Centre: a Call to Action for Public Systems to Reduce Vulnerability Within Families to Mental Health and Substance Use Problems

#### Beginner

**Stephen Smith**, Director, British Columbia Ministry of Health, Victoria, BC, Canada

**Deborah Saari**, Director, British Columbia Ministry of Children and Family Development, Victoria, BC, Canada

The multi-disciplinary British Columbia Family Mental Health and Substance Use Task Force has created a cross-sector action planning resource – Families at the Centre – to address risk and protective factors for individual family members and whole families affected by a mental health and/or substance use problem, and encourage family centred approaches.

"Families at the Centre" proposes this can be accomplished in two ways:

1. Encourage greater collaboration among all systems that touch and influence the lives of these, and future families
2. Help systems and their representatives to embrace a family-centred approach to policies, services and supports

### Writing the Next Chapter: Civil Rights and Parents with Mental Health Involvement and their Families

#### Advanced

**Ella Callow**, JD, Legal Program Director, The National Center for Parents with Disabilities and their Families Through the Looking Glass, Berkeley, CA, USA

In 2012, the American organizations National Council on Disability and The National Center for Parents with Disabilities and their Families collaborated on a groundbreaking compendium entitled "Rocking the Cradle: Ensuring the Rights of Parents with Disabilities and their Children." The presentation will examine the report's coverage of families where parents have mental health involvement, which of the identified systemic challenges and proposed recommendations for Congress and Administrative entities could positively impact this population of families, and how practitioners in the field are utilizing the report in advocating for parents with mental health involvement in custody litigation

particularly. It will also cover how other nations could benefit from creating similar compendiums, especially those who have ratified the UNCRPD and are mandated to work toward implementing Article 23: Respect for Home and Family.

#### Learning Objectives

1. Explain the report and its relevance to the families our conference is focusing upon
2. Discuss the recommendations that could create structural improvements for this population of families vis a vis their right to familial integrity
3. Highlight some of the ways the report is being used by advocates in the field and could be used by advocates in other countries

## B4 Parents with Young Children | 3 30 minute sessions

### Better Parenting for Parents and Caregivers with Complex Trauma and PTSD

#### Intermediate

**Maja Misic**, MA, Supervisor, Counselling Services, Burnaby Family Life, Burnaby, BC, Canada

Better Parenting for Parents and Caregivers with Complex Trauma and PTSD is designed to offer strategies created to help parents and caregivers in forming better relationships with their children.

#### Learning Objectives

1. Identify signs and symptoms of trauma and neglect in parents and their unhealthy coping strategies
2. Understand the effects of trauma and neglect on parenting
3. Learn new strategies for better parenting, attachment and abuse prevention

### Pregnant and then? Prevention Program for Pregnant Women with Mental Illness Combined with a Home-Visiting Mother-Baby Intervention After Birth

#### Advanced

**Karin van Doesum**, PhD, Prevention Psychologist and Researcher, Mindfit and Behavioural Science Institute, Radboud University Nijmegen, The Netherlands

The development of a prevention program for pregnant women with mental illness combined with a home visiting mother-baby intervention will be presented. Also the results of the pilot study of the pre and post measurement on the program for pregnant women will be discussed.

#### Learning Objectives

1. Learn about the impact of maternal mental illness during pregnancy on child development
2. Apply this knowledge to the development of prevention program for pregnant women with mental illness
3. Discuss the outcomes of the pilot study of the pre and post measurement on program for pregnant women

### Changing Mental Health Practice to Support Parents with a Mental Illness: Report on the Implementation of the 'Let's Talk About Children' Intervention in Australia

#### Intermediate

**Melinda J Goodyear**, PhD, MBSc, BBSc (Hons), Researcher, Monash University, Moe, Victoria, Australia

This mixed methods study examined the impact of a supported implementation framework supporting the introduction of Let's Talk about Children in adult focused mental health services. Results highlight the essential components of an implementation

framework to support workforce change to better meet the needs of parents with a mental illness.

#### Learning Objective

1. Better understanding of essential workforce development and organisational change strategies for the integration of family focused interventions in mental health practice to meet the needs of parents with a mental illness

## B5 Family Recovery | 3 30 minute sessions

### Children as Next of Kin and the General Practitioners: a Mixed Method Study

#### Intermediate

**Marit Hafting**, MEd/PhD, Senior Researcher/Senior Consultant, Uni Health/Helse-Vest, Bergen, Voss, Norway

Our main objective is to generate knowledge on how GPs can contribute to the identification of children as next of kin to parents with mental illnesses, substance abuse and somatic disorders, and to establish mental health promotion, disease prevention and treatment when needed. We want to elicit what the children, their parents and the GPs perceive as good care in general practice to meet the special needs of these children and their families.

#### Learning Objectives

1. Explain how the parents' GPs might be in a good position to give support to the children and their family
2. Discuss how GPs can identify the children, support the parents in the parenting role and take part in multidisciplinary collaboration
3. Learn about GP challenges both within the frames of the consultations and the doctor-patient relationship
4. Discuss how the development of guidelines and tools for GPs the perspective of the children and their parents is needed

### Making Change Happen: Getting Systems, Agencies and Providers to Think about Parental Mental Illness

#### Intermediate

**Toni Wolf**, BA, Co-Chair, Executive Director, Employment Options, Marlborough, MA, USA

**Joanne Nicholson**, PhD, Professor of Psychiatry and Licensed Psychologist Dartmouth Psychiatric Research Center, The Geisel School of Medicine at Dartmouth, Lebanon, NH, USA

The paradigm shift required to "think about families" presents challenges for mental health systems and agencies. This lecture will explore "how to make change happen" at system, community, intervention and individual levels on behalf of families living with parental mental illness in an effort to support family recovery.

#### Learning Objectives

1. Demonstrate basic understanding of the system, community, intervention and individual landscape for families living with parental mental illness
2. Identify domains critical to facilitating a paradigm-shift to thinking about families
3. Identify strategies to overcoming barriers to change

### Supporting Employment and Family Life Among Parents Living with Serious Mental Health Conditions

#### Intermediate

**Alison Luciano**, MPH, Mental Health Services Researcher, The Geisel School of Medicine at Dartmouth, Psychiatric Research Center, Lebanon, NH, USA

**Joanne Nicholson**, PhD, Professor of Psychiatry and Licensed Psychologist Dartmouth Psychiatric Research Center, The Geisel School of Medicine at Dartmouth, Lebanon, NH, USA

We will provide the most up-to-date figures describing the prevalence and economic status of parents with serious mental illness using data from a nationally-representative survey conducted in 2009 and 2010. We will also offer practical advice on how to support the employment goals of parents with serious mental illness based on qualitative interviews with vocational specialists in a national learning collaborative of supported employment programs.

#### Learning Objectives

1. Elaborate the relationships among parenting, serious mental illness and economic status using data from a nationally representative U.S. survey
2. Suggest strategies for supporting successful employment and family life for parents living with serious mental illnesses using data obtained from supported employment services providers

## B6 Advocacy | 3 30 minute sessions

### Working Better Together: Strategies for Families and Mental Health Providers

#### Beginner

**Angela Guy**, MSW, RCSW, Clinical Social Worker, Vancouver Coastal Health, Squamish, BC, Canada

The mental health system is transitioning to better welcome the involvement and wisdom of supportive networks and families. Barriers to collaboration are briefly reviewed. This lecture utilizes implementation research and Elliott Jacques' values-based Stratified Systems Theory as a lens in which to suggest ways of enhancing ideological change and shift in practice as we proceed toward Family-centered Mental Health Care.

#### Learning Objectives

1. Review of some barriers to collaboration
2. Learn about Elliott Jaques' values-based approach and Stratified Systems Theory
3. Utilizing an example of implementation research and applying concepts of Stratified Systems Theory observe how Strengthening Families Program, Institute of Families and Safe Relationships Safe Children Initiative can promote better collaboration and thus facilitate a shift in practice

### Registered Psychiatric Nurses' Practice with Mentally Ill Parents and their Children/Families within General Adult Mental Health Services in Ireland

#### Intermediate

**Anne Grant**, MEd, University Lecturer (Nursing), School of Nursing, Midwifery and Health Systems University College, Dublin, Ireland

This presentation will outline key findings from a mixed methods study that is being undertaken to obtain a Doctoral level qualification at Monash University in Australia. The research measured and explored RPNs' practice with mentally ill parents and their children/families in general adult mental health services in Ireland.

#### Learning Objectives

1. Develop an awareness of the significant predictors of RPNs' FFP, within general adult mental health services in Ireland, and how these predictors compare with other countries such as Australia
2. Understand the significant differences in RPNs' FFP according to service setting including acute units and community mental health nursing services
3. Comprehend the various elements that comprised high scoring RPNs' FFP including family focused activities, principles and processes
4. Identify and understand the factors that facilitated high scoring RPNs to engage in FFP
5. Recognise how high scoring RPNs overcame various barriers to FFP
6. Establish what these findings mean for the development of RPNs' FFP in Ireland and elsewhere

### Behind the FOG: The Application of Arts-Informed Methods as Spaces for Representing and Asserting Needs in Social and Health Care Work with Young Adults from Families with Mental Health Issues

#### Advanced

**Marion Goldstein**, MSc, PhD Candidate, University of Hildesheim, Hildesheim, Lower Saxony, Germany

In this session we are going to look at study outcomes from Germany and Canada on the lived experiences of young adults from families with mental health challenges and discuss the application of arts-based methods for identifying young people's needs in research and mental health and social work settings.

#### Learning Objectives

1. Broaden their view on family systems with (parental) mental health issues
2. Learn to recognize various (implicit) needs of young people
3. Be able to discover how easily art-informed methods can be applied in research and social work and health care settings

2:40 - 3:00pm **Break**

3:00 - 4:30pm **Plenary Session/Panel on Infant Mental Health**

**Facilitator: Megan Kirshbaum**, PhD, Founder & Executive Director, Through the Looking Glass; Co-Director, The National Center for Parents with Disabilities & their Families, Berkeley, CA, USA

#### Panelists:

**Nahoko Nishizawa**, PsyD, Associate Professor, Japan Clinical Psychology Master's Program, California School of Professional Psychology, Alliant International University, SF, Family Clinician/Clinical Supervisor, Through the Looking Glass, Berkeley, CA, USA

**Teresa Ostler**, PhD, Clinical/Developmental Psychologist, School of Social Work, University of Illinois at Urbana-Champaign, Urbana, IL, USA

**Karin van Doesum**, PhD, Prevention Psychologist and Researcher, Mindfit and Behavioral Science Institute, Radboud University, Nijmegen, The Netherlands

**Laura Mayorga**, PhD, Licensed Clinical Psychologist, HEAL Program, Alameda County Family Justice Center, Private Practice, San Rafael, California

This session will explore the strong potential for the earliest preventive intervention to support parents with psychiatric disability and their young children which is available in the rapidly growing infant mental health specialty.

The specialty's expertise about how to facilitate secure attachment relationships between parent and child in the face of maternal depression or trauma can be particularly helpful for providers.

Panelists will discuss the promising blending of infant mental health, family systems and disability culture-based approaches, integrating adaptations. They will provide information about the influence of infant mental health practice on services to parents with psychiatric disability during pregnancy and with their babies and toddlers, as it's evolving in Japan, the Netherlands, and the U.S.

#### Learning Objectives

1. Learn about the potential of infant mental health work for the relationships between parents with psychiatric disability and their children
2. Increase awareness of the relevance of infant mental health-based services responding to maternal depression, trauma and PTSD
3. Understand the feasibility of combining infant mental health approaches with a disability-culture or lived experience perspective
4. Become familiar with efforts to apply infant mental health ideas in varied cultures

7:30 - 8:30am **Registration**

8:30 - 10:00am **Concurrent Session C**

## C1 Mini Plenary – Young Parents with Young Children: Developmental Issues

#### Panelists:

**Toni Wolf**, BA, Co-Chair, Executive Director, Employment Options, Marlborough, MA, USA

**Karin van Doesum**, PhD, Prevention Psychologist and Researcher, Mindfit and Behavioural Science Institute, Radboud University Nijmegen, The Netherlands

**Nick Mark Kowalenko**, MD, Psychiatrist, University of Sydney & Deputy Chair, AICAFMHA, Sydney, Australia

Young children bring a specific set of developmental needs and challenges to the family. In addition, their parents may be young as well. Young adults living with mental health challenges may have developmentally appropriate priorities like completing their education, finding employment and establishing themselves in the adult world, at the same time they are attempting to meet the needs of their young children. Panelists representing diverse disciplines will reflect on video vignettes of interviews with young parents, and offer suggestions for developmentally relevant family interventions and supports.

#### Learning Objectives

1. Describe the developmental needs and characteristics of young children as they relate experiences of being parented
2. Provide examples of the specific concerns of young parents
3. Address the confluence of developmental issues of child and parent through intervention and support strategies

## C2 Technology | 90 minute session

### International Policy Pitch: Most Significant Change Stories

## C3 Family Recovery | 90 minute session

### The Family Model... An Integrated Approach to Supporting Mentally Ill Parents and their Children Intermediate

**Adrian Falkov**, MD, Senior Staff Specialist, Child Youth & Family Mental Health Service, Sydney West Area Health Service, Sydney, NSW, Australia

The presenter will use material from The Family Model Handbook, which elaborates the model originally developed for the Crossing Bridges program to provide an overview on key domains & conceptual approaches to the Model; use of the materials to support family focused practice; Children's understanding of parental symptoms; and service user & carer perspectives. Clinical case material, DVD footage & PowerPoint presentation will be used to facilitate participant dialogue and learning objectives.

#### Learning Objectives

1. Improve awareness about prevalence, risk & resilience in this high risk cohort of families
2. Improve knowledge of how to use the Family Model to facilitate family focused practice.
3. Understand ways to promote liaison between Child & adult MH services
4. Recognize the need for a training strategy linked to practice-based initiatives to ensure sustainable, family focused practice

## C4 Young Carers | 2 45 minute sessions

### Childhood Conditions and Challenges when Growing up with Parents with Serious Mental Health Problems in Sweden Intermediate

**Annemi Skerfving**, MSW, Project Manager, Forum, Centrum för psykiatriforskning, Karolinska Institutet/SLL, Stockholm, Sweden

The presentation builds on an interview study with 28 boys and girls aged 7-18. The focus is on how the situation can differ, depending on which parent has the problems; social situation; roles and relationships in the family; child's sex and competence; attitudes and resources in the surrounding society.

#### Learning Objectives

1. Illuminate how childhood with a parent with mental health problems can differ, depending on factors like parent's sex and the parental roles in the family; the competence and social situation of the well parent; the parents' relationship; the child's sex and competence; attitudes and resources in the family and in the contemporary Swedish society
2. Explain how a whole family perspective can be necessary in supporting the children
3. Discuss methods of support to the children and the whole family
4. Give information about how the new legislation is being implemented in the Swedish care system

### Young Adult Children of Parents with Psychiatric Disabilities Intermediate

**Paul Preston**, PhD, National Center for Parents with Disabilities and their Families, Berkeley, CA, USA

This presentation will summarize qualitative and quantitative findings from a new eight-year national study of young adults who have a parent with a disability, focusing on the subset of those young adults who have a parent with a psychiatric disability.

## Learning Objectives

1. Recall how study participants whose parents have psychiatric disabilities compare regarding the overall experience (positive or negative) with those participants whose parents have other types of disabilities
2. Recall how study participants whose parents have psychiatric disabilities compare in self-esteem with young adults to those participants whose parents have other types of disabilities and to national studies of those young adults whose parents have no disabilities
3. Identify at least one of the top five challenges study participants identified as a significant challenge of having a parent with a psychiatric disability
4. Identify at least one factor that may mitigate the potentially negative impact of having a parent with a psychiatric disability

**C5 Advocacy** | 3 30 minute sessions

### Child and Family Connections, Inc.: an Exhilarating Journey: Creating Workshops for Parents with Psychiatric Disabilities by Parents with Psychiatric Disabilities

**Beginner**

**Loran B Kundra**, JD, MSS, Social Worker, Child and Family Connections, Inc., Wayne, PA, USA

**Evan Kaplan**, Executive Director, Child and Family Connections, Inc., Philadelphia, PA, USA

Evan Kaplan and Loran Kundra, two parents with lived experience, knew how scary it was to talk with their own children about parental mental illness. Join the founders of Child and Family Connections, Inc., as they tell their story and share some surprising lessons they learned while creating a workshop to teach other parents how to foster trust and promote childhood resiliency by talking about parental mental illness.

## Learning Objectives

1. Discuss three reasons why the workshops have been so successful
2. Discuss three challenges of building and conducting the workshops
3. Discuss two methods for measuring outcomes and workshop effectiveness

### Paying Attention to Parenting in Adult Focused Services

**Intermediate**

**Carol Clark**, BSW, Social Work Manager, Ruah Community Services, Perth, Australia

Adult focused services are not designed to pay attention to the parenting needs of clients. This presentation describes an organisation's journey to proactively support the parenting task and improve recovery for the whole family. Procedures, training and resources were developed to enable workers and parents to work out how well each child is doing.

## Learning Objectives

1. Examine practices in adult focused services which can proactively support people living with a mental illness in their parenting roles

### Social Emotional Health Approaches to Working with Children and Youth Living with Parents who Experience Mental Health Challenges

**Intermediate**

**Andrea Harstone**, BSW, MSW, Social Work, BC Centre for Ability, Vancouver, BC, Canada

This lecture will discuss the importance of Social Emotional development for children and youth who live with parents who experience mental health challenges; the importance of responsive relationships and supportive environments. Participants will learn about core Social and Emotional competencies, including ways to develop and enhance learning for typically developing young people and those with special needs.

## Learning Objectives

1. Describe social and emotional needs for children and youth
2. Identify core social and emotional competencies
3. Locate evidence-based and informed resources

**C6 Family Recovery** | 90 minute session

### Preventive Family Service Coordination for Parents with a Mental Illness in the Netherlands

**Intermediate**

**Henny Wansink**, PhD, Researcher, Parnassia Group, The Hague, Zuid-Holland, The Netherlands

Preventive family service coordination for parents with a mental illness in the Netherlands: intervention model, and preliminary results of a randomized controlled trial.

## Learning Objectives

1. Discuss insight in the needs, vulnerabilities and strengths of families of parent with a mental illness and support and resources
2. Discuss challenges and methods for building evidence-based interventions
3. Utilize study outcomes for improving and implementing preventive family policies in services

10:00 - 10:20am **Break**

10:20 - 11:50am **Concurrent Session D**

**D1 Mini Plenary - Advocacy**

### Comparative International Law, Policy and Practice Impacting Parents with Mental Health Involvement and their Families

**Panelists:**

**Ella Callow**, JD, Legal Program Director, The National Center for Parents with Disabilities and their Families Through the Looking Glass, Berkeley, CA, USA

**Priscila Rodríguez Benavides**, MA, LLM, Director of Women's Rights Initiative of the Americas at Disability Rights International (DRI), Washington, DC, USA

**Phil Robinson**, MPsych, Chair, AICAFMHA, National COPMI Initiative, North Adelaide, Australia

**Doron Dorfman**, JSM Candidate, Stanford Law School, Stanford, CA, USA

The panel will be devoted to discussing the current legislative and policy regime in your respective countries generally addressing mental health involvement in parents and the well-being of children. This will cover a range of issues including but not limited to how current policy supports or undermines the UN Convention

on the Rights of Children and the UN Convention on the Rights of Persons with Disabilities' goals of ensuring the right of children to remain with their families but to be safe, the right of persons with mental health involvement to enjoy community, including the role of parent, and whether or not panelists feel their nation's policy is consistent in its application to indigenous communities/Nations.

#### Learning Objectives

1. Learn about differences and similarities in the experience of parenting with mental health challenges across nations
2. Gain ideas related to practical strategies to improve systems and practice for these families and engage in knowledge transfer around tools panelists suggest for advocating on an individual or community basis for these families

## D2 Parents with Young Children | 3 30 minute sessions

### Relationship-Focused Intervention for Maternal Substance Abuse Improves Child Mental Health

#### Intermediate

**Stacey Dominique Espinet**, PhD, Research Psychology, Breaking the Cycle, York University, Toronto, ON, Canada

**Mary Motz**, PhD, CPsych, Psychologist, Breaking the Cycle, York University, Toronto, ON, Canada

A relationship-focused approach to intervention for maternal addiction offered at Breaking the Cycle (BTC) was compared to treatment-as-usual (TAU). While both groups ( $n_s = 65$  BTC, 25 OFC) improved in addiction severity, only BTC mothers improved in relationship and mental health functioning. Relationship functioning was associated with child behavioral outcomes.

#### Learning Objectives

1. Learn about a relationship-focused intervention approach to maternal addiction that aims to improve the mental health of both mother and child
2. Understand the relative effect of improvements in maternal addiction, mental health, and relationship functioning on child outcomes

### Persons with Mental Illness who Have Young Children: Parenting Related Difficulties and Barriers to Receiving Help

#### Intermediate

**Ron Shor**, PhD, Social Work, School of Social Work and Social Welfare, The Hebrew University of Jerusalem, Mt. Scopus, Jerusalem, Israel

Parents with mental illness who have young children are vulnerable to multiple stressors. To enhance knowledge about the greater difficulties they experience, along with the barriers to receiving help and support they encounter, a study was conducted in Israel with 80 parents incorporating quantitative and qualitative methods.

#### Learning Objectives

1. Provide a knowledge base about the needs for support of parents with mental illness beyond the common crisis-driven and short term response to this population
2. Discuss the results relating to areas in which parents indicated they encounter greater difficulties with their parental responsibilities and for which they indicated a need for help will be discussed, along with the barriers they experience when seeking help, and how to help them overcome these barriers

### Parental Mental Illness and Coping

#### Intermediate

**Robert Lees**, MSW, MDiv, EdD, RPsych, Associate Clinical Team Leader, Child and Youth Mental Health, Government of British Columbia, Chilliwack, BC, Canada

**Lisa Baker**, MA, Registered Clinical Counselor, MCFD, Chilliwack, BC, Canada

This workshop reports on an exploration of the mental health challenges of parents bringing children and youth for mental health care. Clinicians providing care to young people were interviewed about what they knew of the mental health concerns of the parents of their young clients. Then, the 28 parents were contacted and interviewed to gain confirming information regarding prevalence but as well to elicit information about how those who have mental health challenges cope.

#### Learning Objectives

1. Learn about a prevalence study of COPMI issues within a Child and Youth Mental Health Clinic
2. Reflect on the practice and policy implications when COPMI issues are considered within the Child and Youth Mental Health Services field

## D3 Family Recovery | 2 45 minute sessions

### BPD, Parental Self-Harm and Child Protection: Confronting Stigma while Ensuring Safety

#### Beginner

**Jenn Crowell**, MFA, Author, Forest Grove, OR, USA

Using a variety of case studies, this presentation highlights stigma in child protection practice with parents who self-harm or have a diagnosis of borderline personality disorder, and offers several examples of innovative programs which provide tailored parent support.

#### Learning Objectives

1. Gain awareness regarding stigma and controversies in the treatment and child welfare proceedings of parents who self-harm or have a BPD diagnosis
2. Gain knowledge of innovative models for tailored parent support

### Implementation of a Family-Child Perspective in Somatic Adult Care in Order to Provide Support for Children with Sick Parents

#### Intermediate

**Kerstin Maria Åkerlund**, MSc, BEd, Head of Multidisciplinary Unit and Psychotherapist, Karolinska University Hospital, Karolinska sjukhuset, Neurologiska kliniken, Råd och stödenheten, Stockholm, Sweden

I will talk about what factors are important to consider when implementing a family-orientated perspective in somatic adult care. As a background I will lecture on the situation of children of neurologically ill parents, what we know from research and clinical experience. I will talk briefly about how the current clinic worked to develop procedures and methods.

#### Learning Objective

1. Learn more about the feasibility of implementing a family perspective in somatic adult care, based on a case study

**D4 Technology** | 3 30 minute sessions**Parents with Mental Health Challenges Turn to Mobile Apps****Beginner**

**Joanne Nicholson**, PhD, Professor of Psychiatry and Licensed Psychologist  
Dartmouth Psychiatric Research Center, The Geisel School of Medicine at  
Dartmouth, Lebanon, NH, USA

**Toni Wolf**, BA, Co-Chair, Executive Director, Employment Options, Marlborough,  
MA, USA

We will present a systematic review of mobile technology applications (smartphone or tablet "apps") for parents, conducted by parents living with serious mental health challenges and provider and researcher colleagues, along with findings from focus groups of parents regarding the current use and acceptability of mobile technology to support parenting.

## Learning Objectives

1. List design considerations for individuals with serious mental illnesses and related cognitive challenges
2. Describe tasks and content recommended by parents for mobile technology support
3. List the potential domains of impact of mobile technology identified by parents with mental health challenges

**Implementing Dutch Online Preventive Care for Young People (12-24) Living with a Family Member Experiencing a Mental Illness in (Adult) Mental Health Care Services in the Regions of Northern Denmark and Southern Sweden****Advanced**

**Louisa M Drost**, MSc, Researcher, Department of Psychiatry, University of Groningen, The Netherlands

**Lisbeth Juhlin**, MSc, Health and Society, Project Leader, Mental Health Services Region Skane, Lund, Sweden

Psychiatry Skane and Mental Health Services Capital Region Denmark collaborate in a project targeting children of mentally ill parents (COPMI) in all psychiatric units in order to improve services. To support the adolescent and young adult COPMI an online intervention was implemented that was developed in the Netherlands. This presentation demonstrates how COPMI may be supported by web based help and how such an online intervention may be implemented into adult psychiatric services.

## Learning Objectives

1. Explain the pros and cons of online help for COPMI
2. Explain the practical difficulties of an implementation process
3. Integrate experiences into a blueprint for implementing new online interventions to safeguard COPMI

**Changing the Story: (Co) Producing Help-Seeking Narratives with Children of Parents with Mental Illnesses****Advanced**

**Brenda M. Gladstone**, PhD, Assistant Professor, Dalla Lana School of Public Health, University of Toronto and SickKids Foundation/CIHR New Investigator, Community Health Systems Resource Group, SickKids, Toronto, ON, Canada

Young people produced digital stories about managing everyday life. Analyzing their own stories, and each other's, they considered what was helpful, and who they would like to share their stories with and why. Listeners will consider how changing one story could change those of other young people and their families.

## Learning Objectives

1. Listen to young people describe how they manage everyday life
2. Learn what they identify as helpful
3. Consider how changing (or acting upon) one story could lead to change in those of other young people and their families

**D5 Young Carers** | 3 30 minute sessions**Family Impact: Finding the Balance****Beginner**

**Heather Chapman**, Student, (B. of Design & B. of Applied Science), Fitzroy North, Australia

This presentation focuses on family and individual impacts of having a parent with Bipolar Disorder. Central to the discussion is the difficulty of competing rights; is the right to confidentiality maintained, despite negatively impacting family member's wellbeing?

## Learning Objectives

1. Gain insight and understanding of how imposed secrecy can restrict children and how a parent with Bipolar Disorder shapes the family dynamic

**Young Carers of a Parent with Huntington's Disease: Impact of Parental Symptoms and the Need for Social Support****Intermediate**

**Melinda Kavanaugh**, PhD, Assistant Professor, Helen Bader School of Social Welfare, University of Wisconsin - Milwaukee, Milwaukee, WI, USA

This session discusses the role children and teens play in providing care for a parent with Huntington's disease. Quantitative results focus on the effect of parental symptoms on the young carers' well-being and school performance, while qualitative exploration describes young carer support needs.

## Learning Objectives

1. Understand experiences of HD young carers
2. Recognize links between parental symptoms and negative effects on young carers
3. Identify ways to provide support to HD young carers

**Disclosure of Caring: Families Confronting Stigma Through an Ethic of Care****Intermediate**

**Lara Bober**, BA, MES, PhD Candidate, McGill University Montreal, Halifax, NS, Canada

This session will explore recently developed advocacy tools and resources that have afforded young carers and parents opportunities to articulate their concerns, hopes for social care provision, and conceptions of mental health. The session will conclude with further discussion around the lived experiences of young carers and the challenges and opportunities in mental health care.

## Learning Objectives

1. Analyze an ethic of care (Tronto, 1993) in relation to the lived experiences of young carers and parents confronting socially stigmatizing practices
2. Explore recently developed advocacy tools and resources that have afforded young carers and parents opportunities to articulate their concerns, hopes for social care provision, and conceptions of mental health

**D6 Parents with Young Children** | 3 30 minute sessions**Developing a Parental Mental Health Team Providing Early Help in an Inner London Borough****Beginner**

**Chris J McCree**, RN, BSc (Hons), Nurse, South London and Maudsley NHS Foundation Trust, Chaucer Community Resource Centre, Rotherhithe, London, UK

This lecture presents the development of a team working with children under five whose parents are experiencing mental distress. The lecture will describe the challenges of providing an early intervention service for parents with mental health concerns, and illustrate the importance of "Think Family" and early intervention.

**Learning Objectives**

1. Understand the challenge of providing an early intervention service for parents with mental health concerns who have children under five
2. Appreciate the importance of "Think Family" and early intervention

**Parenting and Psychiatric Rehabilitation: a New Approach****Intermediate**

**Peter C Van der Ende**, MSc, Senior Researcher, Professorship of Rehabilitation, Hanze University of Applied Sciences, Groningen, The Netherlands

Pilot study to identify results of the program Parenting with Success and Satisfaction (PARSS), which was developed to support parents with severe mental illness on the basis of psychiatric rehabilitation.

**Learning Objectives**

1. Gain insight in a program to support parents on the basis of psychiatric rehabilitation
2. Learn about instruments for measuring outcomes from supported parenting
3. Get acquainted with the results of an evaluation study on a program for supported parenting

**Mothering in a Context of Homelessness and Mental Health Problems****Advanced**

**Denise M Zabkiewicz**, PhD, Assistant Professor, Simon Fraser University, Burnaby, BC, Canada

This presentation draws from a subsample of women who participated in the national At Home Study, a multi-site, randomized controlled trial among homeless adults with serious mental illness conducted in five Canadian cities. Drawing from mixed methods, differential patterns of mental health problems by parental status will be discussed as well as some specific challenges that homeless mothers face as they struggle to parent and provide for their children within a context of housing instability.

**Learning Objectives**

1. Describe the social and service related circumstances that contribute to family fragmentation among women mothering in a context of housing instability
2. Differentiate mental health problems among homeless women by mothering status
3. Discuss the specific health and social service challenges that homeless women face as they struggle to parent in a context of housing instability

11:50am – 1:10pm **Lunch**1:10 – 2:40pm **Concurrent Session E****E1 Mini Plenary - Family Recovery**

**Facilitator: Barbara Friesen**, Regional Research Institute, Portland State University, Portland, OR, USA

**Panelists:**

**George Badillo** - an active peer advocate and has helped to train psychiatrists, staff, families and peers on advocacy, how to improve the mental health system, and how to improve the quality of life of the people that they serve in national and international settings, including Puerto Rico, Hawaii, and Saipan.

**Melinda J Goodyear**, PhD, MBSc, BBSc (Hons), Researcher, Monash University, Moe, Victoria, Australia

**Toni Wolf**, BA, Co-Chair, Executive Director, Employment Options, Marlborough, MA, USA

Members of this panel will address the meaning of recovery as applied to families where a parent has mental health challenges, and will share strategies to promote recovery in families of various constellations and in various stages of family life.

**Learning Objectives**

1. Increase knowledge and understanding of the concept of recovery in families when a parent has a mental illness
2. Learn about successful strategies to promote family recovery
3. Increase their knowledge of resources and services essential to family recovery efforts
4. Identify policies that can support family recovery, as well as needed practice and policy changes

**E2 Technology** | 90 minute shared session**National Strategic Initiatives to Promote Health and Well Being for Children of Parents with Mental Illness in Australia****Advanced**

**Nick Mark Kowalenko**, MD, Psychiatrist, University of Sydney & Deputy Chair, AICAFMHA, Sydney, Australia

**Phil Robinson**, MPsych, Chair, AICAFMHA, National COPMI Initiative, North Adelaide, Australia

**Bradley Morgan**, MPH, Director, National COPMI Initiative, Adelaide, Australia

In describing key strategies developed by the Australian National Children of Parents with Mental Illness (COPMI) initiative, we will review achievements, limitations and potential. Integrating priorities that span the interests of many stakeholders including consumers (of different ages), carers, policy makers, funders, academics and service providers can be challenging.

**Learning Objectives**

1. Learn about processes that support strategizing and integration of a wide range of stakeholder perspectives in a partnership that sustains a national initiative
2. Reflect on this one example of addressing COPMI issues nationally and reflect on similar opportunities in their own nations
3. Become aware of national approaches to strategizing for COPMI initiatives

**E3 Young Carers** | 2 45 minute sessions**The 5 Cs of COPMI: Confidence, Competence, Comfort, Curiosity and Courage in Children of Parents with a Mental Illness****Intermediate**

**Paul A Fitzgerald**, BSW Dip Ed, Social Worker/Educator, Wanslea Family Services, Cloverdale, Western Australia

**Beth Olsen**, Youth Consultant, Student, Cloverdale, Western Australia

**Jeremy Tucker**, Youth Consultant, Student, Cloverdale, Western Australia

The session will be co-presented by two Youth Consultants (young people with the experience of having a parent with a mental illness) who will share their understanding of the program, its objectives, strategies and activities. The presentation will also include excerpts of videos created by the young people in the program.

## Learning Objectives

1. Acknowledge that the experiences of stigma for COPMI can be greater for them as they progress through adolescence
2. Understand the importance of peer support, leadership, mentoring and education in tackling stigma for older COPMI

**Early Experiences of Role Reversal with a Parent with Mental Illness: Links to Mistrust, Anger, and Parenting Risk****Advanced**

**Teresa Ostler**, PhD, Clinical/Developmental Psychologist, School of Social Work, University of Illinois at Urbana-Champaign, Urbana, IL, USA

This presentation explores the long-term sequelae of childhood experiences of role reversal with a mentally ill parent by looking at the lives of eight women with chronic depression. Role reversal is closely linked to later mistrust, anger, a suppression of a need for help, and parenting risk.

## Learning Objectives

1. Learn how to identify the long-term sequelae of role reversal, including mistrust, anger, and a suppression of a need for help
2. Learn to identify the variety of ways that role reversal may contribute to parenting risk

**E4 Parents with Young Children** | 3 30 minute sessions**Making Mother Known: a Personal & Professional Perspective on the Need for Appropriate Interventions and Supports for both Mother and Child****Beginner**

**Shannon Byrd**, MA, Grants and Public Policy Coordinator, Alabama Department of Mental Health, Montgomery, AL, USA

This session will provide participants with a personal and professional perspective on the need for appropriate interventions and supports for both mother and child. Information will include how individual situations and circumstances can determine the health, stability, and connectedness of a mother with paranoid schizophrenia to her child, as well as the child's own ability to grow and develop into a healthy functioning adult.

## Learning Objectives

1. Identify the issues, concerns, misconceptions, and successes of being raised by a mother with schizophrenia
2. Describe how living with a parent with mental illness can play a role in personal and professional development

3. Gain awareness of the unique needs of both mother and child
4. Understand the challenges and barriers of mothers with schizophrenia

**Mental Health Supports for Teen Parents: a Pilot Project****Beginner**

**Taylor Cumming**, BA, Mental Health Recovery Facilitator, Canadian Mental Health Association - Edmonton Region, Edmonton, AB, Canada

**Laura Fulmer**, Manager, Education and Early Learning, Terra Child & Family Support Centre, Edmonton, AB, Canada

This session will examine the issue of teen pregnancy and the increased risk of mental health concerns. The Mental Health Supports for Teen Parents project will be described and how it addresses these concerns. Findings from the project and direction moving forward will also be presented.

## Learning Objectives

1. Increased understanding of the impact of teen pregnancy on mental illness
2. Discuss our program's influence in addressing mental health concerns experienced by young mothers
3. Discuss successes and challenges within the program and our direction moving forward

**Interventions for Children of Parent with a Mental Illness (COPMI): Children's Experiences and Outcomes****Intermediate**

**Christine Grove**, BPsych(Hons), MPsych(Ed/Dev), Psychologist, Monash University, Clayton, Australia

This session will be interactive, providing attendees with real life case examples and reporting the best practice/latest research regarding supports and interventions for COPMI. An evidence-based intervention, a DVD called "family focus" will be provided freely to professionals attending this session. Samples of an evidence-based intervention, a DVD called "family focus" can be provided freely available for professionals who might be interested.

## Learning Objectives

1. Examine the "active" ingredient/s that potentially makes interventions effective for promoting positive change for children of parents with a mental illness
2. Understand different types of interventions and how they work for children, including their experiences, views and understanding of support available
3. Reflect on the differential impact of prevention interventions for children
4. Determine how and what occurs for children during and following two different interventions

**E5 Advocacy** | 3 30 minute sessions**The Judicial Picture of Mothers with Mental Disabilities in Child Welfare Decisions****Intermediate**

**Judith Mosoff**, BA, MA, LLB, LLM, Associate Professor, Faculty of Law, University of British Columbia, Vancouver, BC, Canada

This session will explore the final step in the child welfare process where the state seeks permanent custody of children. Participants will learn that mothers rarely keep their children in this clearly gendered proceeding. While the judicial decisions

focus on mental health, disability, or addiction, it is probably poverty that underlies family difficulties.

#### Learning Objectives

1. Set out the characteristics of mothers in child welfare cases
2. Describe the role of disability in child welfare cases
3. Analyze the impact of mental disability on judicial reasoning in applications for permanent custody in child welfare cases

### 'Pathways to Care': an Evaluation of a Resource for Early Childhood Service Providers

#### Intermediate

**Stella Laletas**, MPsych/PhD candidate, Researcher, Monash University, Melbourne, Australia

This presentation will describe a new resource, 'Pathways to Care', specifically designed for childcare and mental health workers alongside evaluation data regarding its effectiveness. Recommendations will be made for mental health service providers working with families where a parent has a mental illness with young children.

#### Learning Objectives

1. Describe a new resource for mental health professionals working with parents who have a mental health concern and have young children
2. Report on evaluation outcomes regarding the effectiveness of the resource for various workers
3. Discuss the implications for future resource development, policy and research

### The Bap-Study: Intervening in Adult Mental Health Services to Support Children of Mentally Ill Parents

#### Advanced

**Charlotte Reedt**, Regional Center for Child and Youth Mental Health and Child Welfare, UiT Arctic University of Norway, Tromsø, Norway

In this session, the results of a comprehensive strategy to change practice in adult mental health services will be presented. Is it possible to include a parenting focus in the treatment of mentally ill patients?

#### Learning Objectives

1. Discuss the implementation of new interventions led to increased identification of patients' children
2. Discuss the implementation of new interventions that led to changes within the workforce in terms of attitudes and knowledge

## E6 Family Recovery | 3 30 minute sessions

### Family and Parenting in Recovery Models

#### Intermediate

**Andrea Reupert**, PhD, Psychologist, Faculty of Education, Monash University, Clayton, Victoria, Australia

**Darryl Maybery**, PhD, Associate Director, Monash University Department of Rural and Indigenous Health and Associate Professor, Monash University, Moe, Victoria, Australia

A systematic literature review was conducted to determine the place of family and parenting in recovery models. The presentation will provide a comprehensive overview of the recovery concept and strategies for how to promote valued family relationships and active family roles for those in recovery.

#### Learning Objectives

1. Appreciate the role of family life in recovery for those with a mental illness
2. Identify the current gaps in recovery models, especially in regard to parenting
3. Consider ways of promoting valued family relationships and active family roles for those in recovery

### Community Mental Health Parent Consumers Describe their Recommendations for Psychoeducation for their Minor Children

#### Intermediate

**Joanne Riebschleger**, PhD, MSW, Social Work, Michigan State University, East Lansing, MI, USA

**Tori Edgar**, BA, 3rd year College of Law Student, Michigan State University, East Lansing, MI, USA

**Olivia Ehret**, BASW Student, School of Social Work, Michigan State University, East Lansing, MI, USA

Mental health consumer parents participated in a focus group research study. Parents offered recommendations for the design and delivery of education and support groups (psychoeducation) for their minor children. They recommended lively, fun, and age-appropriate programs be developed to teach children about mental illness, recovery, and coping.

#### Learning Objectives

1. Describe the rationales for developing psychoeducation programs for children of a parent with a mental illness
2. Summarize this sample of mental health consumer parents' recommendations for developing psychoeducation programs for their minor children

### A New Zealand Long Term Family Support Service for Children and their Families where Parental Mental Health is Present: a Strategy for Building Trust and Reducing Stigma?

#### Intermediate

**Adele R Parkinson**, Dip. SW, working to MSW, Clinical Social Worker, Stepping Stone Trust, Christchurch, Canterbury, New Zealand

The interim results of a programme evaluation of a dedicated service for children of parents with mental illness and their families in Christchurch, New Zealand, has found this long term service aids children in building trusting relationships with other adults and their peers, and has a role in de-stigmatizing mental illness for the child clients.

#### Learning Objectives

1. Explain the original vision of the Caroline Reid Family Support Service and its alignment with conference objectives
2. Link this vision to the service goals and research questions
3. Outline the methodology of the project (if time allows)
4. Discuss findings in relation to the service 'building trust' with child clients
5. Briefly link these findings to the literature on relationship focussed work with vulnerable children
6. Discuss findings in relation to reducing stigma with child clients
7. Briefly link these findings to the literature on de-stigmatisation of mental illness pertaining to children of parents with mental illness and/or addiction
8. Discuss practice implications from these findings (if time allows)

2:40 – 3:00pm **Break**

3:00 – 4:00pm **Conference Highlights and  
Future Directions**

**Joanne Nicholson**, PhD, Professor of Psychiatry and Licensed Psychologist  
Dartmouth Psychiatric Research Center, The Geisel School of Medicine at  
Dartmouth, Lebanon, NH, USA

**Darryl Maybery**, PhD, Associate Director, Monash University Department of  
Rural and Indigenous Health and Associate Professor, Monash University, Moe,  
Victoria, Australia

In this plenary session, we will summarize the highlights of the conference, integrate important messages from conference workshops and presentations into the larger international agenda on families living with parental mental health challenges and, based on conference proceedings, make recommendations for future directions for the field.

Learning Objectives:

1. Summarize the highlights of the conference
2. Integrate important messages from conference workshops and presentations into the larger international agenda on families living with parental mental health challenges
3. Make recommendations for future directions for the field

4:00pm **Adjourn**

### American Parents with Mental Illness Describe Their Knowledge of, and Needs for, Protecting Their Parental Rights

**Tori Edgar**, BA, 3rd year College of Law Student, Michigan State University, East Lansing, MI, USA

**Joanne Riebschleger**, PhD, MSW, Social Work, Michigan State University, East Lansing, MI, USA

**Olivia Ehret**, BASW Student, School of Social Work, Michigan State University, East Lansing, MI, USA

### Audit of the Think Family - Whole Family Approach in Child and Adolescent Mental Health Services in Leicester, UK

**Lina Gatsou**, MD, Child and Adolescent Psychiatrist, Leicestershire Partnership NHS Teaching Trust Child and Adolescent Mental Health Services (CAMHS), Valentine Centre, Leicester, Leicestershire, UK

**Rahat Ghafoor**, MD, Trainee in Child and Adolescent Psychiatry, Leicestershire Partnership NHS Teaching Trust, Westcotes House, Leicester, Leicestershire, UK

### Intervention for Children of Parents with Affective Disorder: Experiences and Outcomes

**Christine Grove**, BPsych(Hons), MPsych(Ed/Dev), Psychologist, Monash University, Clayton, Australia

### Pilot Results for Adapting Dialectical Behavior Therapy for Mothers with Borderline Personality Disorder

**Maureen Zalewski**, PhD, Assistant Professor, University of Oregon, Eugene, OR, USA

### Overcoming the Challenges of Prevention Program Recruitment for Children who Have a Parent With a Mental Illness

**Olivia Ehret**, BSW Student, Social Work, Michigan State University, East Lansing, MI, USA

**Tori Edgar**, BA, 3rd year College of Law Student, Michigan State University, East Lansing, MI, USA

**Joanne Riebschleger**, PhD, MSW, Social Work, Michigan State University, East Lansing, MI, USA

### “The way we Interact. The way my Partner and I Interact. The way we Interact as a Family.” Family Functioning when a Parent is Mentally Unwell and Well.

**Natasha Marston**, MPsych, PhD Candidate, Monash University, Australia



**PLEASE WRITE IN BLOCK LETTERS:**

One registration form per person. Please photocopy if more are needed.

Ms.     Mrs.     Miss     Mr.     Dr.

\_\_\_\_\_  
Last Name                                      First Name                                      Initials

\_\_\_\_\_  
Organization Name/Mailing Address

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
City    Prov / State                                      Postal Code

\_\_\_\_\_  
Daytime Telephone Number / Local

\_\_\_\_\_  
E-Mail

\_\_\_\_\_  
Special Accommodation Needs

**Affiliation/Profession:**

Please indicate which Affiliation(s) / Profession(s) best describes you:

- Administrator / Manager                       Occupational Therapist
- Behaviour Therapist                               Person with Lived Experience
- Caregiver     Pharmacist
- Case Manager/Planner                           Physician
- Counselor     Psychiatrist
- Educator     Psychologist
- Family Member                                       Researcher
- Mental Health Therapist                           Social Worker
- Nurse    **Other:** \_\_\_\_\_

**Concurrent Session Choices:**

Please refer to the program for session descriptions. Please specify which concurrent sessions that you plan to attend so we may allocate appropriate rooms. Some sessions may fill up quickly, in this case you will be registered in your second choice.

<i>Example shown in grey.</i>	1 <sup>st</sup> Choice	2 <sup>nd</sup> Choice
Example:	<u>    A 1    </u>	<u>    A 4    </u>
<b>Session A:</b>	_____	_____
<b>Session B:</b>	_____	_____
<b>Session C:</b>	_____	_____
<b>Session D:</b>	_____	_____
<b>Session E:</b>	_____	_____

**Boxed Lunches**

The Ed Roberts Campus does NOT have restaurants in the immediate proximity. We encourage you to purchase boxed lunches to allow you to stay on campus during the lunch breaks and network with your colleagues. We will contact you closer to the conference date regarding food selection. Alternatively, you would need to take the subway to Downtown Berkeley (next station). A restaurant guide is posted on our website.

- Boxed Lunch - Saturday**                                      **\$20.00**
- Boxed Lunch - Sunday**    **\$20.00**

**Please visit our website for updates and to register online:**

[interprofessional.ubc.ca/MentalHealth2014](http://interprofessional.ubc.ca/MentalHealth2014)

**Tuition Fees:**

Pre-registration prior to March 21, 2014 is strongly recommended to ensure you receive all conference materials. All rates are quoted in Canadian Dollars. Please use one registration form per person. The registration fee includes conference materials and a certificate of attendance.

**\*EARLY BIRD RATE, BEFORE/ON MARCH 10, 2014**

**Main Conference – Full Program (Friday to Sunday)**                                       **\$425**

**RATE AFTER MARCH 10, 2014**

**Main Conference Full Program (Friday to Sunday)**                                       **\$525**

**Main Conference – Individual Day Rates**

- Friday, April 25 only                                       **\$125**
- Saturday, April 26 only                                       **\$250**
- Sunday, April 27 only                                       **\$250**

**Student Rate**

Full Program (Before March 10, 2014)                                       **\$350**

\*A letter from your supervisor/department head stating that you are a full time student along with a copy of valid student photo ID must be sent with student registrations. If you register online, please e-mail a scanned copy to Lydia.ipce@ubc.ca.

**TOTAL:**

**Add lunch total in this final amount.**

**Method of Payment**

**Payment by Credit Card**

- Complete the full registration online at [interprofessional.ubc.ca/MentalHealth2014](http://interprofessional.ubc.ca/MentalHealth2014) with your Visa or MasterCard
- Fax the registration form to +1 604-822-4835 and indicate that you would like to pay with Visa or MasterCard. We will send you the secure on-line link to enter your credit card information  
\*PLEASE DO NOT FAX CREDIT CARD INFORMATION\*
- Register and pay over the phone: Local/International: +1-604-827-3112 or toll free within Canada/USA: 1-855-827-3112 (VISA or MasterCard)

**Payment by Cheque:** Please make your cheque payable to the **University of British Columbia** and send it along with complete registration form to: Interprofessional Continuing Education, The University of British Columbia, Room 105 – 2194 Health Sciences Mall, Vancouver, BC V6T 1Z3

**Alternative Payment Methods**

Mail or fax complete registration form along with one of the following:

- Signed purchase order (PO)
- Letter of Authorization (LOA) from the manager on the organization's letterhead stating that they will be paying the registration fees. The letter should include the amount of registration fees, name and contact information of the manager.
- Signed cheque requisition form (ChReq)

Please Indicate Payment Method

- Credit Card:** Please e-mail me a secure on-line link to enter my credit card number
- Cheque:** Payment is enclosed with mailed registration form
- PO/LOA/ChReq:** Purchase order/letter of authorization/cheque requisition form is enclosed with faxed/mailed registration form