



Making Space for Change: Focusing on Process in Evidence-Based Treatment

An Evidence-based Psychotherapy Conference Presented by the Center for Deployment Psychology

April, 21, 2022

A Live, Interactive Webinar

Description:

The theme of our 2022 Evidence-Based Psychotherapy conference centers on the notion that provider competence requires more than skillful implementation of protocol elements. Equal attention to the context and process in which change occurs is required for implementation to be successful. The title is "Making Space for Change: Focusing on Process in Evidence-Based Treatment". The date of the conference is April 21, 2022 and will include a keynote address by Dr. Kirk Strosahl along with a series of presentations by some of our nation's training experts.

Total CE Credits: 7

Specific Presentation Descriptions:

Keynote: Process Based Therapy: The Future of Evidence Based Practice

Presenter: Dr. Kirk Strosahl

There has been a "sea change" in the field of psychotherapy theory and research that promises to reshape the landscape of evidence based practice for years to come. The era of disorder specific treatment protocols has resulted in a "tower of babel" effect, with each protocol claiming to be different from the others. In reality, evidence based protocols share many similar assumptions and routinely use the same intervention strategies. This had led to a widespread recognition that there may be uniform change processes responsible for positive clinical outcome in therapy, regardless of the treatment approach. Moreover, when compared to the daunting number of treatment protocols that clinicians must learn, research suggests that there are a relatively limited number of universal change mechanisms. This means clinicians will have the much simpler task of learning how to "activate" a specific change mechanism for a specific client, with a specific clinical problem. In short, process based therapy is the pathway to "personalized psychotherapy". In this presentation, I will review the long journey from protocol to process based therapy, starting with an analysis of the benefits and risks of research-oriented, protocol driven treatment development, and ending with a forward looking analysis of the process based therapy movement, including some obstacles that must be overcome for the movement to prosper. I will also examine some therapeutic mechanisms that are highly likely to



end up being designated as evidence based mediators of change.

Presentation #1: Enhancing Process, Maximizing Outcomes: Tailoring Prolonged Exposure to the Client

Presenter: Dr. Elizabeth Hembree

Prolonged exposure therapy (PE; Foa, Hembree, Rothbaum, & Rauch, 2019) has amassed a large body of research supporting its efficacy and effectiveness. PE has been designated as a first line treatment for PTSD in a number of clinical guidelines (e.g., Institute of Medicine, 2008; 2017 VA/DOD Clinical Practice Guideline) and has been broadly disseminated in the United States and abroad as well as in systematic roll-outs in the VHA and DOD. With the aid of detailed treatment manuals, thorough and expertly conducted workshops, and clinical supervision, thousands of clinicians have been trained to deliver this treatment. But as experienced PE therapists well know, challenging issues may arise in the course of therapy and the art of tailoring this treatment to individual clients develops over time through successive practice. In this presentation, I will describe two mechanisms that have strong evidence for their role in promoting symptom change in PE, and how the core procedures (education, in vivo and imaginal exposure, and processing or facilitating learning from exposure) activates these mechanisms. I suggest that the utility of PE procedures is increased when tailored to the individual client throughout the course of therapy. Case examples that illustrate what we have learned about the process of PE and the effective implementation of the procedures will be provided.

Presentation #2: Delivering Evidence-based Crisis Response Counseling with High-risk Vets via Telehealth: Challenges and Opportunities

Presenters: Venee Hummel & Dr. Nichole Ayers

Whether practicing in person or by telehealth, safety and crisis planning are essential elements of clinical practice with military members and veterans, who are identified as being at significantly increased risk for suicide compared to the US population overall (McCarthy, et. al 2009). The effectiveness of safety plans in reducing suicide attempt rates has been well demonstrated, for example Bryan et al (2017) examined the impact of crisis response safety planning on suicide attempts among US soldiers at high-risk. The authors reported a significant reduction in suicide ideation, with fewer hospitalization days required and a 76% reduction in attempts. Stanley and Brown (2012) reported similar findings in a cohort comparison study. Despite this, Moscardini and colleagues (2020) found that almost 70% of providers indicated a need for further training in this area. Furthermore, while a robust literature supports the efficacy of restricting access to lethal means, adherence among clinicians is highly variable (Wasserman, et.al, 2020) and not consistently included in the safety planning process (Boggs et al., 2020). The Covid-19 pandemic has further complicated training and adherence in safety and crisis response. The rapid shift to virtual care during the SARS CoV-2 pandemic presented both challenges and opportunities in terms of applying evidence-based safety and response planning protocols with fidelity and effectiveness. On the one hand, technologies such as telepsychiatry played an important and promising role in the management of mental health assistance during the COVID-



19 outbreak (Wasserman et al., 2020), improving access while maintaining physical safety from exposure. On the other hand, clinicians have simply not been trained in how to conduct specific suicide prevention interventions by telehealth and research on best practices, including RCTs related to the effective application of telehealth in reducing suicide risk, is quite limited. Still, evidence does generally suggest an important role for telehealth in the prevention of suicide. While high-risk populations have largely been excluded from RCTs comparing telehealth with in-person treatment, the literature does provide evidence that emergency situations can be effectively managed through telehealth (Hetrick et al., 2017; McGinn et al. 2019). Gilmore and Ward- Ciesielski (2019) state that suicide risk assessment and psychotherapy can be effectively completed via telemedicine and even cited potential benefits including reduced travel and increased anonymity. In this presentation we hope to build on the limited evidence base on the effective use of telehealth for suicide prevention by providing lessons from direct clinical practice within a large mental health system serving veteran, active duty, and military family members. While we will touch on the research literature to date, the focus of the presentation will center on clinical experience, with a focus on multiple illustrative case examples.

Presentation #3: An Application of Emotional Intelligence

Presenter: Dr. Katrice Byrd

The Application of Emotional Intelligence presentation will provide participants the opportunity to gain an in-depth understanding of the components of Emotional Intelligence through the lens of both their personal and professional identities. Professionals will then be given an opportunity to reflect and devise an action plan leading to improvement in needed areas when working with patients/peers. There will be opportunities for discussion, reflection, and feedback in addition to an introduction to tools/strategies to assist participants with implementation after the presentation.

Presentation #4: Moving Involuntary Clients Toward Positive Changes using EBPs

Presenters: Dr. Patrice Miller, Erica Rosen, & Janine Fesler

A voluntary patient arrives at the therapy office mostly convinced that therapy will be beneficial; an involuntary patient arrives convinced that it will be at best a waste of time and at worst, may have negative effects on their life and career. We will discuss skills that clinicians can use to build therapeutic alliance and move toward positive changes when using EBPs with involuntary clients. Effective treatment strategies must include an emphasis on strategic development of the therapeutic alliance, trust, and instilling hope and this presentation will emphasize these points. We will also discuss the unique ethical issues of autonomy, safety and confidentiality and strategies for addressing related issues that may arise when working with involuntary patients. The panel members will share their experiences and their own successful methods for building the provider-patient alliance and addressing ethical issues that arise with the involuntary treatment population.



Presentation #5: "Not Sufficient, but Surely Necessary: Interpersonal and Intrapersonal Factors in Delivering ERP for Pediatric OCD"

Presenter: Dr. Martin Franklin

Exposure plus Response Prevention (ERP) is an empirically supported treatment for obsessive compulsive disorder across the developmental spectrum, and its efficacy above and beyond non-specific treatments is well established. Nevertheless, intra- and interpersonal factors affect delivery of this EST, and will be the focus of this lecture. Franklin, Freeman, & March (2019) discussed therapist factors in detail in their ERP manual, emphasizing the establishment of trustworthiness, empathy, confidence, humility, flexibility, and tolerance of one's own discomfort as non-specific factors likely to influence treatment delivery, within- and between-session patient protocol adherence and, by extension, treatment efficacy. Emphasis will be placed on how to develop and demonstrate each of these characteristics, with ample clinical examples employed to enhance understanding of these concepts and their clinical applications.

Presentation #6: The Process of Cultural Sensitivity in the Context of Evidence-Based Psychotherapy

Presenter: Dr. Brittany Hall-Clark

This workshop focuses on elucidating the importance of attending to cultural factors when using evidence-based psychotherapies. The presentation will include an overview of the need for cultural sensitivity in this area and will share information from extant research related to cultural adaptations. In addition, specific strategies related to clinician self-awareness and client assessment, diagnosis, and treatment will be discussed. Case examples will be used to illustrate concepts

Target Audience: For behavioral health providers who treat military personnel, veterans, and their families.

Instructional Content Level: Introductory/Beginner



Learning Objectives:

Following the conference, attendees will be able to:

Keynote:

1. Analyze risks and benefits associated with the current research-oriented model of protocol-driven, evidence-based psychotherapies.
2. Assess the potential advantages of adopting a process-based psychotherapy approach.
3. Evaluate two change mechanisms that are commonly stimulated by clinical interventions.

Presentation 1:

1. Evaluate two mechanisms that have strong evidence for their role in mediating treatment outcome in PE
2. Explain the rationale for PE to clients in two different ways that emphasize understanding and meaningfulness
3. Design a plan to facilitate the client's learning from exposure procedures

Presentation 2:

1. Appraise key elements of crisis response planning that control risks and capitalize on opportunities when managing high risk patients virtually.
2. Use evidence- based safety planning via virtual platforms.

Presentation 3:

1. Evaluate personal and professional identities to identify at least two areas for improvement related to Emotional Intelligence
2. Explain how at least two "-isms" can impact professional and/or personal encounters
3. Apply two techniques/strategies from the training to increase professional awareness of Emotional Intelligence

Presentation 4:

1. Incorporate relevant therapeutic skills to increase the success of EBPs with involuntary patients.
2. Formulate strategies to address ethical issues that may present when working with involuntary patients in various settings.

Presentation 5:

1. Evaluate the core clinical techniques included in Exposure plus Response Prevention
2. Integrate key intra- and inter-personal characteristics to promote patient understanding and protocol adherence when using Exposure plus Response Prevention

Presentation 6:

1. Evaluate at least 3 culturally relevant measures that enhance assessment.
2. Apply strategies to ensure that cognitive and behavioral treatment components are culturally sensitive.
3. Modify evidence-based psychotherapies according to cultural needs.

Agenda:



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Center for Deployment Psychology - Evidence Based Psychotherapy Conference

PMIs April 19-20, 2022 & Conference April 21, 2022

Conference Agenda

9:00am- 9:10am	Welcome and Introduction
9:10am- 10:10am	Enhancing Process, Maximizing Outcomes: Tailoring Prolonged Exposure to the Client Elizabeth Hembree, PhD
10:10am- 11:10am	Delivering Evidence-based Crisis Response Counseling with High-risk Vets via Telehealth: Challenges and Opportunities Venee Hummel, LCSW and Nichole Ayers, DSW, LICSW
11:10am- 11:20am	Break
11:20am- 12:20pm	An Application of Emotional Intelligence Katrice Byrd, DSW, LCSW, MSW
12:20pm- 1:20pm	Lunch / Virtual Poster Session
1:20pm- 2:20pm	Keynote Address: Process Based Therapy: The Future of Evidence Based Practice Kirk Strosahl, PhD
2:20pm- 3:20pm	Moving Involuntary Clients Toward Positive Changes using EBPs Patrice Miller, PhD, LCPC, LCADC, Erica Rosen, LCSW-C, and Janine Fesler, LCSW-C, LCADC
3:20pm- 3:30pm	Break
3:30pm- 4:30pm	Not Sufficient, but Surely Necessary: Interpersonal and Intrapersonal Factors in Delivering ERP for Pediatric OCD Martin Franklin, PhD
4:30pm- 5:30pm	The Process of Cultural Sensitivity in the Context of Evidence-Based Psychotherapy Brittany Hall-Clark, PhD
5:30pm- 5:40pm	Conclusion

For more information, please contact Project Manager: Jeremy Karp at jeremy.karp.ctr@usuhs.edu

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Continuing Education:

Course Completion Requirements: Participants are required to attend the entire training. Partial credits cannot be issued. Attendance is taken through the use of electronic logs, and a post-training evaluation form must be completed in order to receive social work CE credits. For psychology CE credits, completion of the evaluation is strongly encouraged. If you do not wish to complete the evaluation but desire to receive psychology CEs please contact the POC after the training event.

There is a 30-day time limit post-training to complete all CE requirements. CE Credit Certificates will be emailed within 30 days after all course requirements have been completed.

American Psychological Association Sponsor Approval:

The Center for Deployment Psychology is approved by the American Psychological Association to sponsor continuing education for psychologists. The Center for Deployment Psychology maintains responsibility for this program and its content.

Association of Social Work Boards Approved Continuing Education Provider Approval:

The Center for Deployment Psychology, #1761, is approved to offer social work continuing education by the Association of Social Work Boards (ASWB) Approved Continuing Education (ACE) program. Organizations, not individual courses, are approved as ACE providers. State and provincial regulatory boards have the final authority to determine whether an individual course may be accepted for continuing education credit. The Center for Deployment Psychology maintains responsibility for this course. ACE provider approval period: May 19, 2021 – May 19, 2022. Social workers completing this course receive 7 Live, Interactive Webinar continuing education credits. Inquiries regarding CE credits may be directed via email to Jeremy Karp at jeremy.karp.ctr@usuhs.edu.

Participate:

Online Platform: Zoom

Date: April, 21, 2022

Time: 9:00 am – 5:40 pm Eastern

Registration Information: Registration is via event management website: Eventbrite.

Registration Deadline: April 14th, 2022.

Cancellations/Questions: Please contact jeremy.karp.ctr@usuhs.edu if you have any questions or need to cancel your registration.

Registration Cost/Refunds: \$20

Registration fees will be refunded to participants who send a written cancellation via email to jeremy.karp.ctr@usuhs.edu no less than 4 weeks before the conference. No refunds will be made after the conference.

Location Information: This training will be conducted via Zoom video conferencing. Registrants will be emailed one week prior with a Zoom registration link. After registering via Zoom, registrants will be sent a personal Zoom login link.



Instructional Format: This live webinar is fully interactive. Attendees may ask and answer questions throughout the presentation and participate in instructor-led discussions.

System Requirements:

Zoom:

- Internet connection
- Operating System: Windows 7 or higher, Mac OS X with MacOS 10.9 or higher
- Web Browser: Internet Explorer 11+, Edge 12+, Firefox 27+, Chrome 30+, Safari 7+
- Hardware: 1Ghz processor or higher

Special Accommodations: If you require special accommodations due to a disability, please contact Jeremy Karp, jeremy.karp.ctr@usuhs.edu 4 weeks prior to the training so that we may provide you with appropriate service.

Grievances: For any grievances or concerns with this training including those related to course content, non-receipt of certificate or other occurrences, participants may contact CDP’s Continuing Education Director, Ms. Amanda Milochik, via email at Amanda.milochik.ctr@usuhs.edu.

Instructor Biographies:



Dr. Kirk Strosahl is a co-founder of Acceptance and Commitment Therapy and founder of Focused Acceptance and Commitment Therapy, a brief therapy approach to ACT. He has authored numerous papers and books on the application of FACT in health care as well as other brief intervention settings. He was instrumental in developing the US Air Force Behavioral Health Optimization Program (BHOP), an approach designed to integrate evidence based behavioral health services within primary care.



Dr. Elizabeth Hembree is Associate Professor of Psychology in the Department of Psychiatry at Perelman School of Medicine, University of Pennsylvania. A former senior faculty member in the Center for the Treatment and Study of Anxiety at the University of Penn, she worked on the early studies during the development of PE and has 25+ years of clinical and research experience investigating the treatment of PTSD via PE and other interventions. Dr. Hembree collaborated with Edna Foa on the development and implementation of the 5-year training plan to disseminate PE into Veterans Health Administration practice settings. She has authored or co-authored many papers and chapters on PTSD and its treatment as well as the published treatment manuals for PE.



Venée Hummel, LCSW, is the Assistant Director at The Steven A. Cohen Military Family Clinic at Centerstone in Clarksville, Tennessee, where she is the champion of evidence-based practice and serves as primary clinical leader to a multi-disciplinary mental health team. Ms. Hummel has a specialty focus on providing treatment, training, and clinical consultation on PTSD (particularly when related to combat or military sexual trauma) and suicide prevention. She earned her Masters of Social Work from Baylor University, where she is a Lead Instructor teaching Evaluation of Practice to graduate social work students.



Dr. Nichole Ayres is the Clinic Director at The Steven A. Cohen Military Family Clinic at Valley Cities, located in Lakewood, Washington where she oversees all clinical operations while following evidence-based practice guidelines. She brings more than ten years of experience to the clinic, with a special focus on the treatment of trauma/complex trauma, trauma-informed care across healthcare settings, military social work, maternal mental health and clinical risk management. Dr. Ayres has additional experience in providing training supporting the implementation of trauma-informed care practices, measurement-based care, suicide prevention, understanding the whole-person impact of trauma and motivational interviewing for health care professionals. She earned a Doctor of Social Work degree from the University of Tennessee and a Master of Social Work degree from the University of Southern California.



Dr. Katrice Byrd currently serves as a Military Social Worker with the Center for Deployment Psychology (CDP). She is co-chair of the North Carolina National Association of Social Worker's Legislative Committee and is passionate about serving the village through research, policy, and programmatic changes. Katrice has served as a mental health therapist with extensive training in trauma-focused interventions, working with various populations including Veterans, Active Duty, Family Members, children, adolescents, and government employees throughout her career. Dr. Byrd is a retired Veteran of the U.S. Army in addition to serving in the U.S. Marine Corps. She currently resides in Charlotte, NC.



Janine Fesler, LCSW-C, LCADC, SAP is a Clinical Social Worker in private practice at Charter Counseling. Her previous experience of 26 years with the DOD included Family Advocacy, Preventive Medicine, Army Substance Abuse Program and Behavioral Health. She also has experience working with the Veterans Health Administration Mental Health Program. Her current work focuses on mental health care including individual and group therapy with mandated/involuntary clients and voluntary clients. She has established herself as a subject matter expert in the areas of addiction and mental health within the military community. She also provides services as a Substance Abuse Professional (SAP) for the Department of Transportation (DOT) providing evaluations, recommendations, and follow-up testing. She has received numerous accommodations and awards for her work with Service Members in CONUS and OCONUS. She develops and conducts workshops centered on Clinical Social Work and provides clinical supervision and training for students and professional Social

Workers. She is actively engaged in service work in her community centered on addictions and mental health.



Dr. Patrice Miller completed a BA degree in psychology and a MA degree in clinical psychology at Towson University and completed her PhD in Psychology at Capella University. Dr. Miller is a Licensed Clinical Professional Counselor and a Licensed Clinical Alcohol and Drug Counselor with over 25 years of experience in the mental health, substance abuse and human services professions. Dr. Miller is also a Certified Clinical Trauma Professional. Dr. Miller's professional experiences have included providing services in a variety of mental health and substance abuse treatment settings to include outpatient, inpatient, correctional, and military programs.



Erica Rosen LCSW-C is currently a social worker in the Behavioral Health Clinic at Fort Meade. She has over 25 years of experience working with involuntary clients including maximum security, juvenile justice, military and emergency room settings. Ms. Rosen's professional interests include in trauma treatment and how involuntary client work affect professional staff's wellbeing. Her personal interests include long distance running, yoga and classic humorous science fiction....in other words, "Don't Panic".



Martin E. Franklin, Ph.D., is an internationally recognized expert in the phenomenology, assessment, and cognitive-behavioral treatment of OCD and related disorders across the developmental spectrum. Dr. Franklin is Associate Professor Emeritus of Clinical Psychology in Psychiatry at the University of Pennsylvania School of Medicine, and Clinical Director of Rogers Behavioral Health in Philadelphia. He has published over 240 scholarly articles, chapters, and books, has lectured around the world on these and related topics, and has been honored for teaching excellence three different times during his time at Penn. At Rogers, Dr. Franklin has played a leading role in examining pediatric OCD's response to multi-modal treatment at higher levels of care, as well as the effectiveness of telehealth applications.



Brittany N. Hall-Clark, Ph.D., is a Consultant with the PTSD Consultation Program through the National Center for PTSD, a Texas-licensed clinical psychologist in private practice, and an Assistant Professor within the Division of Behavioral Medicine and the Department of Psychiatry at the University of Texas Health Science Center at San Antonio. In addition, she has been certified a Master Clinician in Prolonged Exposure therapy and serves as a consultant with the STRONG STAR Training Initiative. Dr. Hall-Clark's research interests include acculturative stress, cultural identity, and culturally sensitive treatment. She obtained her PhD in Clinical Psychology at the University of Texas at Austin. Dr. Hall-Clark completed a 2-year fellowship with STRONG STAR, a multidisciplinary PTSD research consortium.

**Dr. Elizabeth Hembree receives royalties on the sale of PE manuals, but for all other presenters there is no commercial support or conflict of interest to report.