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THE CLINICAL EXPERT SERIES
AND
THE DIALECTICAL BEHAVIOR THERAPY SERIES

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The Courtyard Marriott, 75 Felton Street, Marlborough, MA

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Continuing Education Approved For:
Psychologists, Social Workers, MA & RI Marriage and Family Therapists,
MA Licensed Mental Health Counselors,
MA Licensed Alcohol and Drug Counselors
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**The Dialectical Behavior Therapy Series**  
*With Jennifer Eaton, LMHC*

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Many of the clients we work with struggle with the need to make changes in their lives. Their ambivalence about making changes is normal if one considers the conflict that naturally arises, as change can lead to a combination of positive and negative consequences. The strategies of Motivational Interviewing allow a practitioner to use a directive, client centered counseling style for eliciting change by helping clients explore and resolve ambivalence. Rather than confronting clients about the need to change, it leads them toward self-confrontation as a way to become unstuck from their indecision about change. The strategies also help clients strengthen their commitment to change specific aspects of their lives once they have decided to work toward change.

During this one-day MI training, participants are given a thorough introduction to the theory, concepts and techniques of MI. The Stages of Change model will also be introduced as a way to understand how the practice of MI fits into that model. Video segments will be viewed that demonstrate the effective use of MI strategies. Attendees will be given the opportunity to practice basic MI techniques during class.

Following this training the participants will:
1. Understand the fundamental spirit and principles of MI
2. Generalize ways to apply the spirit and principles of MI to the specific groups of clients they work with.
3. Understand how the empathetic listening skills (OARS) may differ from the methods the clinician now employs.
4. Understand new techniques to decrease resistance to change and to encourage “change talk.”
5. Perform 2-3 role plays in order to understand how to apply skills to encourage, identify and elaborate “change talk” from clients.
6. Give examples of the importance of assessing a client’s confidence about their ability to change an identified behavior.

Harry Cunningham, LICSW is the Director of Consultation, Education and Research at The Mental Health Center of Greater Manchester (MHCGM) where he provides consultation and training services to assist human service agencies to implement various effective practices, especially as they relate to Evidence Based Practices. He is also the Coordinator of the Research Department at MHCGM. He received degrees in Social Work from the University of Pittsburgh and the University of Connecticut.

Harry has worked in the mental health field for 30 years. He previously worked for 18 years at Riverbend Community Mental Health Center in Concord, NH. He also worked at the Psychiatric Research Center of Dartmouth College from 2002 until 2006 as a consultant and trainer for the development and implementation of major Evidence-Based Practices including: Evidence-Based Supported Employment (EBSE), Motivational Interviewing, Illness Management and Recovery (IMR), Integrated Treatment for Co-Occurring Disorders, Family Psychoeducation (FPE), and Dialectical Behavior Therapy (DBT). He has led trainings in Vermont, Connecticut, Illinois, Texas, Maine, Massachusetts, Maryland, Minnesota, California, Denmark, Pennsylvania, Montana, New York, Nevada, Iowa, Hawaii, Utah, New Hampshire and Arkansas.
This training will provide an overview of transgender identities including trans*, gender non-conforming, gender queer and gender fluid identifies (Trans* is a common shorthand to refer to the umbrella term that encompasses the wide range and variation of gender identity, gender expression and those with fluid gender boundaries). Emphasis will be made on exploring issues related to working with transgender children, adolescents and their families. This will include discussion of gender identity and gender identity development, the role of the mental health counselor in working with trans* youth and their families, and best practices. School-related issues will also be discussed, with a focus on unique issues associated with secondary school and college experiences.

A major aspect of the training will be to discuss current theories and practices related to working with transgender youth and their families. Review of gender identity development and theory will be provided, along with current clinical practice in working with transgender youth (e.g., gender assessment, coordinator role, support letters, etc.) The training will also discuss how substance use is a possible coping strategy by trans* youth.

Following this training the participants will understand:
1. The variety of trans* identities and unique aspects of each
2. The role of mental health clinicians as coordinators of care for transgender youth & their families
3. A variety of assessment instruments and methods
4. Specific counseling methods appropriate to transgender youth
5. How to advocate for transgender youth in various settings

Sidney M. Trantham, Ph.D. is an Associate Professor in the Graduate School of Arts and Social Sciences Division of Counseling & Psychology at Lesley University. Dr. Trantham received his Ph.D. in 1999 from the University of Florida (Gainesville). His doctoral work focused on exploring the impact of early childhood sexual experiences on the psychological functioning of adult males. He was a Harvard Clinical Fellow (1996 – 2000) at the Cambridge Health Alliance in Cambridge, Massachusetts, where he completed his clinical psychology internship and neuropsychological post-doctoral fellowships, as well as engaged in research identifying early cognitive markers of HIV-related dementia. His work as a psychotherapist at Fenway Health (1999 – 2006) in Boston, Massachusetts included working with adults to address a variety of issues related to sexual identity development.

In addition to his university appointment, Dr. Trantham maintains a private practice where he provides integrative psychological, neuropsychological, and gender assessment as well as psychotherapy with children, adolescents, adults, and families. Areas of clinical interest and expertise include working with gender variant and transgender children and adolescents, sexual and racial identity development, and mood disorders.
Suicide in the United States remains the 10th leading cause of death and the second for young people. Almost 43,000 people in our country died by suicide in 2014.

Non-suicidal self-injury (NSSI; e.g. cutting, self-hitting, skin picking, and burning) is a separate (but related) problem and is a major public health challenge in its own right. Data from 2013 in Massachusetts found that 14% of both middle and high school students self-injured during the previous year. National statistics point to an 18% lifetime prevalence. There is no denying an epidemic of NSSI is in our midst.

Given the intensity of these problems, the misery involved, and the complexity of providing help, it is crucial to keep our knowledge up-to-date and to employ the most state-of-the-art interventions available. This training will focus on what is most current and effective.

A new theory of suicide has been proposed by David Klonsky and colleagues. Known as the Three Step Theory, it arguably represents an evidence-based enhancement of Thomas Joiner’s Interpersonal Theory of Suicide. The first step in Klonsky’s theory is the experience of pain (misery) in combination with hopelessness. The second step is the dimension of connectedness which can serve to mitigate or exacerbate risk depending on its presence or absence. The third step is capability which Klonsky elaborates to include: dispositional, acquired, and practical aspects. In this training, the Three Step Theory will be used to explicate some examples of those who have survived serious suicide risk vs. those who have died due to its unfortunate power. Examples from the audience will also be employed.

Another important advancement in suicide prevention is Thomas Joiner’s new Acute Suicidal Affective Disturbance (ASAD). It too is evidence-based and offers four specific dimensions that are predictive of acute suicide risk. These are: 1) a geometric increase of suicidal intent in the short-term, 2) marked social and/ or self-alienation, 3) perception of hopelessness, and 4) two or more manifestation of overarousal (insomnia, nightmares, agitation, irritability). The ASAD will also be explored with real world clinical examples re: managing such risk.

The treatments of choice for suicidality appear to be two: Dialectical Behavior Therapy (DBT) and the Collaborative Assessment and Management of Suicidality (CAMS). And the former is often the treatment of choice for NSSI as well. Recent updates re: these treatments will be reviewed with practical applications emphasized.

Following this training, participants will:

1) Understand the full spectrum of self-destructive behavior.
2) Understand how NSSI is distinct from suicidal behavior yet, if long-term, is also a predictor of suicide attempts
3) Learn the four components of Joiner’s Acute Suicidal Affective Disturbance (ASAD)
4) Learn the components of Klonsky’s evidence-based Three Step Theory of Suicide
5) Review the therapeutic components of Jobes’ Collaborative Assessment and Management of Suicidality (CAMS)
6) Apply the above to real world clients during discussion periods at the training.


Dr. Walsh is Executive Director Emeritus and Senior Clinical Consultant at The Bridge, a human service agency headquartered in Worcester, MA. The Bridge specializes in implementing evidence-based practice models in public sector settings. Dr. Walsh can be reached at barry.walsh@thebridgecm.org
Regardless of how intelligent, competent and accomplished an individual is, he/she can still create and achieve certain goals only with the help of a team or group. Whether considering an ad hoc group with a specific agenda and timeframe, an open-ended “trouble shooting” team, a leadership team which meets regularly to oversee daily functioning of the system, or a team formed for a different purpose, each of these teams need to have clear routes of communication to function smoothly and effectively. In addition, whether in the for-profit or not-for-profit world, stress and pressure can have a negative impact, and when members of the team face issues of compassion fatigue, burnout or vicarious traumatization, both they and the team suffer if they do not receive the proper support. Teams and systems also often face a variety of challenges and difficult circumstances that challenge the building, maintenance and expansion of both the team and the greater system. Economic uncertainties, resource limitations, lack of understanding of diversity needs, political upheaval, and critical incidents linked to physical and mental health crises can all increase the pressure to perform and succeed in the eyes of the constituents and community. Effective leaders and engaged team members realize the need for methods to improve the strength and resilience of those involved with the team and the community it serves.

In this workshop we will explore key leadership (and key team member) attributes that enhance the team on both the individual and group levels. Using the “Three C’s” framework of “Communication, Collaboration, and Collegiality” we will look at interaction strategies, cooperative problem solving techniques, communication styles, and methods of enhancing the relational model that foster increased effectiveness, improved interactional styles, and self-efficacy. We will consider ways to handle change, transitions, and unexpected challenges in a confident, level headed and efficient manner. We will also review ways to promote self-care, creativity and flexibility among all members of the team to help decrease burnout of team and community members. The workshop will focus on intervention options for the team leader to improve the situation and we will also explore ways the other members of the team can add and contribute to the growth and change process in a positive manner. This workshop will include a mix of lecture, case method, multi-media presentation and discussion, and is designed to be informative, interactive, and even fun (which obviously helps when you address such serious issues). Hope you can come and join us for the exploration of these important issues.

Following this training the participants will understand:

1. Key factors that enhance team formation, collaboration, development and effective interaction
2. Communication strategies that enhance effectiveness in problem solving, crisis response and longer-range planning.
3. Steps to develop a relational model between leader and team members to improve effectiveness.
4. Initiatives and intervention points to effect cognitive, behavioral and systemic change.
5. Self-care and colleague support strategies, to decrease risk of compassion fatigue, and vicarious traumatization

Daniel B. Jacobs, Ed.M., M.B.A., Psy.D. is a Core Faculty member at William James College in the School Psychology Department Dr. Jacobs also serves as an adjunct faculty member in WJC’s Clinical Psychology and Organizational Leadership Psychology Departments, and created and teaches courses including The Psychology of Leadership and Followership and Creative Change and Transformative Leadership.

Dr. Jacobs is a licensed clinical psychologist with over 18 years of experience working with individuals, families, programs and systems. Dr. Jacobs also has a private practice in Andover, MA, Jacobs Psychological and Consulting Services and provides individual, family and couples therapy focusing on effective coping strategies to manage depression, anxiety, and other mental health and dual diagnosis concerns, and he consults and trains nationally addressing issues of behavioral and systemic change and on topics of self-care and prevention of burnout, compassion fatigue and vicarious traumatization. He has worked on promoting collaboration and creative problem solving in both for-profit and not-for-profit systems with a variety of teams. Dr. Jacobs was formerly the Director of Sub Acute Services at NSMC/Salem Hospital in Salem, MA. Dr. Jacobs believes hope is always an option and believes utilization of strength-based approaches is the most effective way to help our clients learn to make positive changes in their lives.
Dialectical Behavior Therapy (DBT) has recently been applied in settings such as public schools, community-based group homes, and outreach treatment settings. DBT has been proven to be effective with people who are in persistent emotional distress, have chronically unstable relationships, and present with recurrent self-injury and/or suicidal behavior. DBT has been used to treat high performing, but-distressed students, seriously disturbed adolescents and people with persistent mental illness and/or developmental disabilities.

Why use DBT strategies when working with families? DBT theory is based on a developmental model, called the biosocial theory. It was originally designed as an explanation of Borderline Personality Disorder and its development; however, it is a theory of individuals with emotional sensitivity and how the world responds to them beginning with the families.

Families can become divided by intense emotion and invalidation which are the two key aspects of the biosocial theory. This can lead to relationships deteriorating, emotions intensifying, and behaviors escalating. Although there are many family system theories and treatment models, DBT teaches and emphasizes building skills to apply to everyday lives – Skill that benefit Children and Parents. It is a practical approach and one with evidence of success.

This is a DBT specialty course. It is strongly recommended that those who attend have previous DBT training which may include reading DBT literature or books. Although DBT concepts will be reviewed, they won’t be taught comprehensively.

Those who attend this training can expect to learn how to:

1. Teach the biosocial theory to families which can increase understanding within the family system
2. Validate families and teach validation techniques to families
3. Conduct a family chain analysis and help families come up with practical and skillful solutions
4. Use DEARMAN when communicating with families and teach families how to use this skill when communicating with each other
5. Teach families how to observe and communicate one’s limits
6. Coach family members in DBT skills to manage distress

Jennifer Eaton, M.S., LMHC, is the Director of DBT Training and Consultation for The Bridge of Central Massachusetts, Inc. In this capacity Ms. Eaton provides training and consultation to agencies across the country. She also provides consultation to DBT programs at The Bridge, including programs that serve adolescents, young adults, mentally ill adults, adult women with physical disabilities and traumatic brain injury, and adults with developmental disabilities. Ms. Eaton has extensive experience providing DBT treatment and has supervised clinicians and interns.

Ms. Eaton, holds a masters degree in clinical psychology. She was intensively trained in DBT by Dr. Charles Swenson and completed an Advanced Intensive Training under Dr. Marsha Linehan, the developer of DBT. Ms. Eaton has presented numerous times at the annual ISITDBT Conference, and at various local and national conferences.

Ms. Eaton maintains a private practice specializing in DBT and is on the faculty at Becker College.

Marie-Paule de Valdivia, MBA, LCSW worked in advertising and marketing before experiencing mental health challenges within her family. After learning about BPD, she joined the National Education Alliance for Borderline Personality Disorder, where she helped the Family Connections program grow from helping a few hundred families to over 3000 families last year – and where she serves today as Executive Vice President. As an avid advocate for family support, she taught these peer led classes for three years before embarking on an MSW program at Southern Connecticut State University; during which she trained in the DBT-SUD section of the Adult Intensive Outpatient Program of Yale-New Haven Psychiatric Hospital.

After graduation, Ms. de Valdivia went on to work at the Bridge of Central Massachusetts. She then rejoined Yale-New Haven Psychiatric Hospital, working with adolescents, adults and families. Within a few months she was appointed Assistant Clinical Professor of Social Work in Psychiatry on the Yale School of Medicine faculty.

Ms. de Valdivia speaks frequently about her family's experience and the Family Connections program throughout the country, at several Yale Annual BPD Conferences and along with Marsha Linehan at the NIMH 9th annual conference. From a professional perspective, she has been invited to address the importance of family involvement in DBT treatment – most recently as a Master Clinician at the 2015 North American Society for the Study of Personality Disorders conference in Boston. Marie-Paule is also the founder of Families On The Line, a private practice aimed at coaching family members in DBT based skills.
Cognitive-Behavioral Therapy (CBT) is increasingly established by research as the treatment of choice for a wide array of substance abuse, mood, behavioral disorders and most recently, as a key component in the treatment of psychotic disorders. Initially developed as a treatment for depression, CBT is now recognized to be effective with a range of clinical conditions such as phobias, anxiety, addiction, borderline personality disorder, obsessive-compulsive disorder, non-suicidal self-injury, eating disorders and post-traumatic stress disorder.

CBT is an empirically-based and pragmatic treatment that focuses on understanding and changing problematic thoughts, feelings and behaviors and thus having a sustained and positive impact on the person’s emotional wellbeing.

This foundational training will provide the practitioner with an understanding of the theoretical structure of CBT and the essential clinical skills you can apply in your practice.

Following this training the participants will understand:
1. The CBT theory of the relationship between thoughts, feelings and behaviors
2. The essential measuring tools to assess therapeutic progress
3. How to tailor the CBT treatment plan to the specific presentation of the client.
4. How psychopharmacological treatment can be an adjunct to CBT treatment
5. How to integrate the individuals use of medications into the treatment process.

**Dr. Peter Moran** is a senior partner and clinical director of Cornerstone Behavioral Health, a multi-disciplinary practice with offices in Worcester and Fitchburg.

Dr Moran is an assistant professor of psychiatry at UMass Medical School where he teaches Cognitive-Behavior Therapy to psychiatry residents. He also teaches psychopharmacology in the graduate school at Assumption College.
Psychological First Aid (PFA) is an evidence informed approach to help children, adolescents, adults and families in the immediate aftermath of disasters, acts of violence, sudden death, terrorism and similar distressing events. PFA is designed to reduce the initial distress caused by traumatic events and to foster short and long term adaptive functioning and coping.

This workshop will provide practical information to help mental health professionals safely, effectively and efficiently respond to the immediate effects of traumatic events. Participants will receive in-depth information on the impact traumatic events have on a person’s psychological functioning and specific intervention techniques. This training uses didactic and experiential (role playing) approaches to teach the human response to trauma, the importance of the responder fully understanding his/her role in the work, and the 8 core components of Psychological First Aid.

PFA has been developed by the National Child Traumatic Stress Network and the National Center for PTSD, and is the default trauma response supported by the World Health Organization. It is considered an evidence-informed intervention, as it is based on best practices and available evidence as to what activities best promote recovery from disaster. Participants will practice using several components of PFA.

Following this training the participants will:
1. Describe key attributes of the responder that will facilitate successful administration of PFA
2. Be able to identify the human psychological response to trauma/stress
3. List and describe the 8 core functions of Psychological First Aid (PFA)
4. Identify common bereavement reactions and describe two models of understanding grief
5. Using role play, demonstrate use of several core functions of PFA

Lawrence Berkowitz, Ed.D, is the Director and co-founder of the Riverside Trauma Center, which provides community response to help people recover from highly stressful events. He was previously the Director of the Riverside Outpatient Center in Wakefield, MA., and currently holds an appointment as a part-time Teaching Associate in Psychology at Harvard Medical School. He has extensive experience as a psychologist, consultant and trainer, including significant experience providing training in suicide prevention, assessment and postvention. Major trauma responses have included responding to Logan Airport following the attaches of 9/11, directing the FEMA crisis counseling program after the tornados in western and central Massachusetts in June, 2011, and helping to coordinate behavioral health responses to the Boston marathon bombing.

Jim McCauley, LICSW, is the co-founder and Associate Director of the Riverside Trauma Center which provides critical incident response and postvention services to schools and communities throughout Massachusetts. He has more than twenty years’ experience managing outpatient programs for both children and adults. For twenty-five years he was a Senior Lecturer in the Sociology Department at Suffolk University. Jim has a special interest and provides consultation and training on postvention services, suicide clusters, and suicide prevention coalitions. He has presented at several statewide, national and international conferences on these topics. Jim is also a developer and trainer for the “Suicide Assessment and Intervention Training for Mental Health Clinicians” which is listed in the Best Practices Registry of the Suicide Prevention Resource Center. He is the co-author of “Organizational Postvention after Suicide Death” in Grief After Suicide: Understanding the Consequences and Caring for the Survivors; Jordan and McIntosh, Routledge, 2010.
Multi-stressed families are faced with a variety of concerns that make it harder for therapeutic and agency supports to provide service. Helping guide these families forward in positive change directions can be difficult for a variety of reasons. Overwhelmed children and adults have been exposed to pain and loss many times over and often feel that others only see them as their diagnoses or problems. Repeated buffering by the effects of substance abuse concerns, traumatic events, mental health challenges and financial stressors often leave these families in a reactive state of chaos and unprepared to make effective and lasting positive changes. For some of these families these mental health and substance abuse challenges have crossed generations and there is a very low sense of self-efficacy regarding the ability to make positive and impactful changes. The individuals and families are in need of conflict mediation skills and coping strategies, and they greatly benefit from interventions that foster positive cognitive change around seizing opportunities to make a difference.

In this workshop we will explore ways to find the potential for positive change, discovering the "hope and beauty in the chaos" in painful and challenging situations and discuss interventions that engage reluctant or resistant clients to address long-standing problems. Drawing on theoretical concepts of Appreciative Inquiry, Collaborative, Solution-Focused and Narrative therapies, this workshop is designed to help participants learn practical interventions that foster possibilities, collaboration and accountability in work with multi-stressed families. Issues of diversity, difference, gender, social class and other key factors will be considered in the context of fostering empowerment in the family unit. Emphasis will be given to proactive and strength-based approaches to help family members break out of the “stuck loop” that can be so common. We will also explore self-care and coping strategies designed to help support the clinicians engaged in this important and challenging work.

This workshop will include a mix of lecture, case method, multi-media presentation and discussion, and is designed to be informative, interactive, and even fun (which obviously helps when you address such serious issues). Hope you can come and join us for the exploration of these important issues.

Following this training the participants will be able to:
1. Identify “opportunity windows” for best-fit, strength-based interventions when working with multi-stressed families
2. Engage reluctant families in positive change efforts with clinicians and find ways to foster collaborative relationships with agency supports.
3. Conduct interventions that respect and reflect the specific narrative-histories and perceptions of the individuals and families being seen.
4. Become familiar with helpful collaborative assessments, therapy contracts and other therapeutic documents that reflect a family-centered approach designed to address transgenerational mental health and substance abuse concerns.
5. Employ self-care strategies to decrease risk of compassion fatigue, burnout and/or vicarious traumatization response patterns that can develop in the face of exposure to pressure, challenge and crisis.

**Daniel B. Jacobs**, Ed.M., M.B.A., Psy.D. is a Core Faculty member at William James College in the School Psychology Department. Dr. Jacobs also serves as an adjunct faculty member in WJC’s Clinical Psychology and Organizational Leadership Psychology Departments, and created and teaches courses including The Psychology of Leadership and Followership and Creative Change and Transformative Leadership.

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Solution focused therapy is a competency based model of treatment that minimizes emphasis on past problems and failings, and instead focuses on client’s preferred future, their strengths, and prior successes. This approach of treatment is in accordance with the positive psychology movement that emphasizes well-being and optimal functioning instead of pathology and etiology. A solution-focused approach provides an additive dimension to problem-focused techniques.

Solution-focused therapy provides practical techniques that strengthen the therapeutic alliance while detecting and magnifying patients’ strengths, resources, and successes. The development and maintenance of the therapeutic relationship is a primary curative component of therapy, providing the context in which specific techniques exert their influence. For a clinician working with adolescents and families, gaining mastery at building simultaneous alliances with dyads, parents, adolescents, and others in a child’s life is a formidable task. The challenge is further complicated by the need to engage with the myriad of outside relationships often involved in an adolescent’s life.

Solution-focused therapy offers both a philosophy and a skill set for helping people move forward in their life. This approach to therapy is a conversational discipline that directs patients toward their preferred future and strengths instead of their past problems and failings. Rather than looking for what is wrong and how to fix it, solution-focused tends to look for what is right and how to use it.

This workshop will provide an overview of the fundamentals of the evidenced-based approach of Solution-Focused Brief Therapy. A special emphasis will be placed on how to use this approach to engage children and families. Participants will learn how solution building differs from problem solving, learn practical tools to engage with externally motivated clients building on their strengths and resources, and learn how to utilize a system’s perspective to enhance goal negotiation. The workshop is designed so participants will be able to immediately implement the practical skills learned, and will be taught using a combination of didactics, interactive practice exercises, video and case examples.

Following this training the participants will understand:
1. The unique aspects of solution-focused therapy and how this differs from a problem-focused perspective.
2. Solution-focused skills that assist in engaging with children and families.
3. The skills of identifying and amplifying positive differences (exceptions) uncovering resources and strengths.
4. Several types of solution-focused scaling questions.
5. How to ask the miracle question.
6. How to remain solution-focused in follow-up sessions.
7. Learn how to maintain a solution-focused conversation when things are worse and when clients appear stuck.

Anne Bodmer Lutz, M.D. is the Director of Training for the Institute for Solution Focused Therapy. Anne is a board certified adult and child and adolescent psychiatrist, and was a nurse prior to becoming a physician. She was trained by the founders of Solution focused therapy, Insoo Kim Berg and Steve DeShazer. Anne is the author of Learning Solution-Focused Therapy: An Illustrated Guide, published by the American Psychiatric Association Press.

Dr. Lutz is an assistant professor in psychiatry at the University of Massachusetts in Worcester MA, and adjunct professor at Framingham State University. She provides direct clinical supervision, teaching and training to psychiatric residents and workshops for community based treatment organizations. Anne worked for 9 years as a consulting psychiatrist for a residential treatment center for adolescent girls suffering from addiction and co-occurring disorders integrating solution-focused approaches within their treatment setting.

Dr. Lutz has worked in community mental health agencies integrating solution focused approaches within these treatment settings. She currently has a private practice in West Boylston where she sees children and families, providing solution focused psychiatric treatment and teaches an on-line solution focused certification courses through Framingham State University.
Join bestselling author, psychologist and consultant Dr. Christopher Willard in this one-day workshop on bringing mindfulness to kids, teens and families. Dr. Willard will be sharing proven practices that can be used by therapists, educators and others looking for practical and creative ways to sharing mindfulness and contemplative practices with others. Mindfulness is more than just breathing, and so is this workshop. Participants should be prepared for a fun day learning and practicing mindfulness through awareness, movement, games, play, and creative activities for all ages.

This practical workshop will focus on adapting mindfulness for individuals and groups, young and old, in therapeutic, educational, medical and other settings. Special emphasis will be placed on getting young people to buy in, as well as on nurturing mindfulness in their daily lives. We will also explore the importance of our own practice, starting or deepening our own mindful self-care. We will also cover strategies for starting mindfulness programs in larger institutions such as schools and hospitals. Special attention will also be given to harnessing the power of technology and social media.

Learning will take the form of lecture, video, case presentations, small group and dyad activities and well as experiential activities and ample time for question and answer and discussion with colleagues. Illustrations and case studies from inner-city schools to leafy college campuses, from Harvard Medical School to teen meditation retreats, bring the instruction to life.

Learning differences, cultural differences, developmental differences, not to mention settings like classrooms or offices all affect how children learn best, and this workshop explores ways to adapt mindfulness, rather than a one-size fits all approach. We will discuss how to tailor techniques to a range of presenting issues, including depression, anxiety, ADHD, executive function challenges, addiction, impulse control difficulties, trauma and stress. Different practices will engage different learning styles through arts, sports, games, music, technology and more, for attention spans ranging from 30 seconds to 30 minutes.

Following this training the participants will understand:
1. The basic definition of mindfulness
2. The neuroscience of mindfulness
3. A variety of mindfulness practices for youth
4. How to adapt mindfulness to a variety of learning styles
5. Specific mindfulness activities to address a range of clinical conditions
6. Mindfulness practices for self-care

Christopher Willard, Psy. D. is a psychologist and educational consultant in the Boston area specializing in mindfulness-based work with adolescents and young adults. He holds teaching appointments at Harvard Medical School and leads workshops nationally and internationally. Dr. Willard has been practicing meditation for over 15 years. His thoughts on mental health have been featured in The New York Times, cnn.com, and elsewhere. He is the author of Child’s Mind (2010); the co-editor of Teaching Mindfulness to Children and Teens (2015) and; Growing Up Mindful (2016) along with four other books. Dr. Willard is on the board of directors of the Mindfulness in Education Network and The Institute for Meditation and Psychotherapy.
The assessment and treatment of children with problematic sexual behavior has been influenced by metaphors, models, and methods that were borrowed thirty years ago from work with adult sex offenders. This “one size fits all” approach is gradually giving way to a developmentally informed framework with which to understand problematic sexual behavior in children. Using detailed case examples, this workshop analyzes the emergence and function of problematic sexual behavior through the lens of developmental psychopathology. Risk assessment techniques based on common elements of threat assessment, guided professional judgment, and functional behavioral analysis will be presented. The developmental narratives that are the product of these risk assessments will be used to create individualized risk management and treatment plans.

Participants will learn to recognize sexual behavior that is developmentally normal for children and adolescents of all ages as well as behavior that indicates a need for further investigation and intervention.

Course Objectives
Following this training the participants will understand:

1. behaviors that characterize normal sexual development in children and adolescents at various ages;
2. five developmental trajectories in children who engage in problematic sexual behavior
3. the role of functional behavioral analysis, threat assessment, and guided professional judgment in understanding the origin and function of problematic sexual behavior in children and adolescents;
4. the limitations of actuarial assessment techniques for problematic sexual behavior;
5. the role of a strength-based approach in creating positive replacement behaviors that reduce risk while remediating the effects of adverse childhood experiences; and
6. special challenges in assessing and treating children and adolescents with problematic sexual behavior.

Dr. Craig Latham completed his undergraduate studies at the Massachusetts Institute of Technology. He received a master's degree in Child Development and a doctorate in Personality and Developmental Psychology from Harvard University. He completed his clinical training at the Judge Baker Children's Center and a post-doctoral fellowship at McLean Hospital.

Dr. Latham worked with violent and emotionally disturbed adolescents in a variety of capacities for state agencies in Massachusetts from 1980 to 1990. When he left state service for private practice, Dr. Latham was the Senior Forensic Child Psychologist for the Massachusetts Department of Mental Health, where he was responsible for forensic mental health services provided to children in Massachusetts, and he also served as a consultant to the United States Secret Service. Currently, Dr. Latham is in private practice, where he continues to serve as a consultant for law enforcement professionals, the judiciary, state agencies, and private providers on the treatment of children, adolescents, and young adults who engage in high-risk behavior.
The Dialectical Behavior Therapy Series

Dialectical Behavior Therapy (DBT) is a leading example of an evidence-based practice. Originally developed as an outpatient treatment, DBT has more recently been applied in diverse settings such as public schools, community-based group homes, hospitals and outreach treatment settings.

DBT has been proven to be effective with people who are in persistent emotional distress, have chronically unstable relationships, and present with recurrent self-injury and/or suicidal behavior. DBT has been used to treat high performing, but distressed students, seriously disturbed adolescents, people with eating disorders, substance use disorders and people with persistent mental illness and/or developmental disabilities.

DBT is a supportive and collaborative treatment that emphasizes skill-building and highly individualized treatment plans. The treatment is delivered in two modalities: DBT Skills Groups and Individual Therapy. This rigorous and comprehensive training series will provide the clinician with a full understanding of all aspects of DBT theory and clinical practice. In addition, the content of these trainings will prepare you to meet the education requirement for DBT credentialing developed by the DBT-Linehan Board of Certification. See details at www.dbt-lbc.org.

The training is presented in 2 parts:

- A 4-Day DBT Skills Training Track
- A 4-Day Individual Therapy Track

In addition, all participants will have free, unlimited access to The DBT Insider, our online training and support center where you will have access to training materials, videos, articles and webinars.

Your Trainer

Jennifer Eaton, M.S., LMHC, is the Director of DBT Training and Consultation for The Bridge of Central Massachusetts, Inc. In this capacity Ms. Eaton provides training and consultation to agencies across the country. She also provides consultation to DBT programs at The Bridge, including programs that serve adolescents, young adults, mentally ill adults, adult women with physical disabilities and traumatic brain injury, and adults with developmental disabilities. Ms. Eaton has extensive experience providing DBT treatment and has supervised clinicians and interns.

Ms. Eaton, holds a masters degree in clinical psychology. She was intensively trained in DBT by Dr. Charles Swenson and completed an Advanced Intensive Training under Dr. Marsha Linehan, the developer of DBT. Ms. Eaton has presented numerous times at the annual ISITDBT Conference, and at various local and national conferences.

Ms. Eaton maintains a private practice specializing in DBT and is on the faculty at Becker College.

Ms. Eaton has consulted and trained many organizations including: Harvard-Vanguard Behavioral Health, Massachusetts Department of Youth Services, New York State Office of Development Disabilities, Alabama Mentoring Network, Denver Health Systems, The Mental Health Association of Lowell, Community Counseling of Bristol County, Baycove Human Services, The Key Program, and Deveraux, in addition, Ms. Eaton has provided training at the following schools: Assabet Valley Collaborative, Dover-Sherborn, Fairfield CT, Greenwich CT, Mendon-Upton Regional Schools, Milford, Millis, Nashoba Regional, Reading, Scituate, Wachusett Regional, Westborough and Westport CT.

Register: On-Line at www.thebridgetraininginstitute.org  By Phone (508) 755-0333
DBT Skills Training Series

The DBT Skills are the heart of the treatment. All aspects of DBT are based on assisting the person to learn and use a set of skills that have been proven to enhance coping and reduce distress. This 4-part series provides a thorough training in all aspects of the DBT skills including mastery of the skills, running skills groups and teaching the skills to a variety of populations. The presentation will include lecture, extensive use of video examples and in-vivo practice.

Participants are urged to purchase the DBT Skills Training Manual, 2nd Edition and the DBT Skills Training Handouts and Worksheets, 2nd Edition by Marsha Linehan. Both books will be an integral part of the curriculum and will be available for purchase on the first day of the training.

Friday, November 18, 2016, 9:00 AM—4:00 PM
DBT Skills Part 1

DBT Skills Part 1 will cover the treatment elements of DBT, The Bio-Social Theory of personality disorders, how DBT can be applied in a variety of clinical settings, and the first skills module, Core Mindfulness.

Following this training, participants will understand:
- The components of DBT, including the biosocial theory and who may benefit from the treatment
- The role and function of DBT skills groups, individual therapy, DBT coaching, and the consultation team
- The hierarchy of targets used to set treatment goals
- Orienting clients to DBT and the use of diary cards
- Core Mindfulness skills

Friday, December 16, 2016, 9:00 AM—4:00 PM
DBT Skills Part 2

DBT Skills Part 2 will provide in-depth coverage of how to develop and implement a DBT skills training group, the Distress Tolerance skills and the role and function of skills cards. Numerous practical examples of these skills will be demonstrated.

Following this training, participants will understand:
- Developing and implementing a DBT skills training group
- Assigning DBT skills practice and homework
- The theory and application of the Distress Tolerance skills
- The use of skills cards

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DBT Skills Part 3 will provide in-depth coverage of the Emotion Regulation skills. These skills are critical components of the client’s ability to develop satisfying relationships and enhance the person’s overall recovery. In addition, methods of behavior management in the group setting and the use of DBT homework will be discussed. Numerous practical examples of these skills will be demonstrated.

Following this training, participants will understand:
- How to review skill practice and homework
- Reviewing assigned skill practice and addressing nonpractice in group
- Behavior management techniques in the group setting
- The theory and application of the Emotion Regulation skills

DBT Skills Part 4 will provide in-depth coverage of interpersonal effectiveness skills, walking the middle path module, and teaching specialty groups. Providing skills coaching between groups and sessions and applying skills to specific behaviors will be provided. The presenters will address a variety of teaching strategies to enhance skill acquisition. In addition the special considerations when implementing DBT in milieu and school settings will be discussed. Participants will be encouraged to submit advance questions relative to their DBT practice for discussion.

Following this training, participants will understand:
- Interpersonal effectiveness module
- Walking the middle path
- Coaching clients outside of the group and individual session
- How to effectively implement DBT in milieu and school settings

DBT Individual Therapy Series

DBT Individual Therapy is the modality that tailors the treatment to the person. This 4-part series provides comprehensive training and will progressively build your skills. Participants will develop a full understanding of all aspects of DBT individual therapy including: developing a treatment plan based on a hierarchy of treatment targets, the use of diary cards, identifying and addressing therapy interfering behaviors (client and therapist), conducting chain analyses, and helping the person to generalize the skills learned in skills training. Treatment strategies specific to DBT will be addressed. Dialectics and balancing DBT strategies will also be discussed.

Please note: The Individual Therapy Series assumes that participants have a full understanding of the DBT skills. While the skills will be discussed, they will not be taught during this series. Those new to DBT are strongly encouraged to attend our DBT Skills Training Series or have similar training before registering for this series. Please contact Stephen Murphy if you have questions about your readiness for this training – 508-755-0333, stephen.murphy@thebridgecm.org.
Friday, March 24, 2017, 9:00 AM—4:00 PM
DBT Individual Therapy Part 1
Following this session, participants will understand:
- The hierarchy of treatment targets
- How to structure pre-treatment and the first 4 sessions
- Behavioral assessment and the chain analysis

Friday, April 21, 2017, 9:00 AM—4:00 PM
DBT Individual Therapy Part 2
During this session, participants will understand:
- Dialectics and dialectical strategies
- Communication strategies
- Insight and relationship strategies
- Therapy interfering behaviors

Friday, May 19, 2017, 9:00 AM—4:00 PM
DBT Individual Therapy Part 3
During this session, participants will understand:
- The DBT suicide assessment protocol
- The coaching call
- Crisis strategies
- Hospital strategies

Friday, June 2, 2017, 9:00 AM—4:00 PM
DBT Individual Therapy Part 4
During this session, participants will understand:
- Cognitive modifications
- Exposure techniques
- Case management strategies
- The secondary targets
- The consultation team
General Information

Where
The Courtyard Marriott, 75 Felton Street, Marlborough, MA

When
8:30 AM - Registration and Continental Breakfast
9:00 AM - 12:00 PM Training
12:00 PM - 1:00 PM Lunch is on your own. There are restaurants at the hotel and in the local area.
1:00 PM - 4:00 PM Training

How Much and Discounts
$159 per training - Includes 6 CEUs – Purchase any combination of 3 trainings and receive $50 off the total cost.

Nursing Mothers: On a space available basis, a private guest room can be provided at no charge. Please contact Stephen Murphy at stephen.murphy@thebridgecm.org or at 508-755-0333.

Continuing Education Credit
6 CE credits approved for: Psychologists; MA Licensed Mental Health Counselors; MA Social Workers, MA & RI Licensed Marriage & Family Therapists, MA Licensed Alcohol and Drug Counselors

Educators - Massachusetts, New Hampshire & Maine Certificate of Attendance - 6 hours
Nurses - Trainings satisfy the MA & NH Boards of Nursing (244 CMR 5.00) for 6 contact hours

Snow Cancellation - Rescheduling Policy: A training event will only be cancelled due to extreme inclement weather and will always be rescheduled. Cancelation information will be posted on our website at: www.thebridgetraininginstitute.org

Registrant Cancellation: If a registrant is unable to attend a workshop, he/she is welcome to send a substitute, or, if notice of cancellation is received at least 5 business days prior to the workshop, the registrant may credit his/her registration fee toward another workshop within the same training season. No refunds will be given.

Grievance Policy: Any registrant who is dissatisfied with any aspect of a training is encouraged to contact Stephen Murphy at 508-755-0333. Every effort will be made to remediate the complaint in a satisfactory manner.

Special Accommodations: The facilities at the Courtyard Marriott are fully accessible. Please contact Stephen Murphy at 508-755-0333 to request special accommodations.

Directions to The Courtyard Marriott, 75 Felton Street, Marlborough, MA
From Boston
Massachusetts Turnpike West (I- 90). Take exit 11A (I-495 North) to exit 24B (Route 20 West/Northborough). Take your first right onto Felton St. before the Shell Gas Station. Hotel is on your right.

From Worcester:
Take I-290 East until the end then take I-495 South to exit 24B (Route 20 West/Northborough). Take your first right onto Felton St. before the Shell Gas Station. Hotel is on your right.

From 495 North or South:
Exit 24B (Route 20 West/Northborough) Take your first right onto Felton St. before the Shell Gas Station. Hotel is on your right.

From Western Massachusetts/New York State:
Take the Massachusetts Turnpike East (I- 90). Take exit 11A (I-495 North) to exit 24B (Route 20 West/Northborough). Take your first right onto Felton St. before the Shell Gas Station. Hotel is on your right.

Massachusetts Psychological Association is approved by the American Psychological Association to sponsor continuing education for psychologists. MPA maintains responsibility for this program and its content.
The Bridge Training Institute
2016 – 2017 Mail-In Registration

Cost: $159 per training, includes 6 CEUs - Purchase any combination of 3 trainings and receive $50 off the total cost.

Please indicate your workshop preferences

The Clinical Experts Series
☐ October 7, 2016  Motivational Interviewing  Harry Cunningham, LICSW
☐ October 28, 2016  Understanding Gender Identity  Sidney Trantham, Ph.D.
☐ November 4, 2016  Suicide and Self Injury Behaviors  Barent Walsh, Ph.D.
☐ December 2, 2016  Building Teams  Dan Jacobs, Psy.D
☐ December 9, 2016  DBT with Families  J. Eaton, MS & M. de Valdivia, LCSW
☐ January 13, 2017  Introduction to CBT  Peter Moran, Ph.D.
☐ February, 10, 2017  Psychological First Aid  L. Berkowitz, Ed.D, J McCauley, LICSW
☐ March 10, 2017  Multi-Stressed Families  Dan Jacobs, Psy.D
☐ March 17, 2017  Solution Focused Therapy  Ann Bodner Lutz, M.D.
☐ April 7, 2017  Mindfulness - Children and Teens  Christopher Willard, Ph.D.
☐ May 5, 2017  Problematic Sexual Behavior  Craig Latham, Ph.D.

The DBT Skills Training Track
☐ November 18, 2016  DBT Skills Part 1
☐ December 16, 2016  DBT Skills Part 2
☐ January 27, 2017  DBT Skills Part 3
☐ February 17, 2017  DBT Skills Part 4

The DBT Individual Therapy Track
☐ March 24, 2017  DBT Individual Therapy Part 1
☐ April 21, 2017  DBT Individual Therapy Part 2
☐ May 19, 2017  DBT Individual Therapy Part 3
☐ June 2, 2017  DBT Individual Therapy Part 4

Please indicate the type of continuing education credit requested:
☐ American Psychological Association  ☐ MA – NASW  ☐ LADC
☐ MA - Licensed Mental Health Counselor  ☐ MA/RI LMFT

Registrant Name: ____________________________ Telephone: ____________________________

Organization: __________________________________________________________________________

Street: ____________________________  City: ____________________________

State: ___  Zip Code: ________  Email Address: ____________________________

Cost: $159 per training includes 6 CEUs - Purchase any combination of 3 trainings and receive $50 off the total cost.

Pay by Check: Mail this form and your check payable to The Bridge Training Institute, 4 Mann Street, Worcester, MA 01602

Pay by Purchase Order: Fax (508-755-2191) or mail your purchase order with this form to: The Bridge Training Institute, 4 Mann Street, Worcester, MA 01602

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Trainings are held at: The Courtyard Marriott, 75 Felton Street, Marlborough, MA