

**NCAMFT**  
**2018 Annual Conference**  
**April 5—7, 2018**  
**Twin City Quarters**  
**(Marriott, Embassy Suites and Benton Convention Center)**  
**Winston Salem, NC**



## **Conference Schedule**

**Thursday, April 5, 2018**

Pre-Conference Institutes (extra fees apply)

**8:00 – 9:00 am      Pre-Conference Registration**

**9:00 – 12:00 noon   Morning Sessions**

- 100    “If Only...” Second Chances in MFT Ethics
- 101    Collaborative Whole Person Care of Children and Adolescents
- 102    A Biopsychosocial-Spiritual Approach to Weight-Related Health Concerns in Therapy
- 103    Alzheimer’s Disease and Attachment Theory within Couples Therapy

**12:00 – 1:30 pm      Lunch on your own**

**1:30 – 4:30 pm      Afternoon Sessions**

- 104    Navigating Technology Related Ethical Issues in Ground Based Practices
- 105    Pornography Addiction vs Sexual Addiction
- 106    Interpersonal Violence an African American Women
- 107    Integrated Behavior Health: What is it? And, How do I get Started?

**4:30 – 5:30 pm      Early Conference Registration**

**6:00 – 10:00 pm      Board Meeting (open to all members)**

**Program descriptions and speaker information is available on pages 5—8**

**NCAMFT**  
**2018 Annual Conference**  
**April 6—7, 2018**

**Of Walls and Wars: Dialogues to Bridge Differences**  
**Kenneth V. Hardy, Ph.**

**Friday, April 6, 2018**

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| 7:30 – 8:30 am   | Registration – Coffee & Juice                                   |
| 8:30 – 10:15 am  | Session I: Assumptions and Theoretical Considerations           |
| 10:15 – 10:30 am | Break   |
| 10:30 – 12:15 pm | Session II: Establishing a Multicultural Relational Perspective |
| 12:15 – 1:30 pm  | Lunch & Awards Program  |
| 1:30 – 3:15 pm   | Session III: Diversity and The Dynamics of Oppression           |
| 3:15 – 3:30 pm   | Break   |
| 3:30 – 5:15 pm   | Session IV: Experiential Considerations                         |

**Saturday, April 7, 2018**

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| 7:30 – 8:30 am   | Registration – Coffee & Juice                              |
| 8:30 – 10:15 am  | Session V: Difficult Dialogues: Strategies and Techniques  |
| 10:15 – 10:30 am | Break  |
| 10:30 – 12:15 pm | Session VI: Difficult Dialogues: Strategies and Techniques |
| 12:15 – 1:30 pm  | Lunch & Membership Meeting                                 |
| 1:30 – 3:15 pm   | Session VII: Self of the Therapist Considerations          |
| 3:15 – 3:30 pm   | Break  |
| 3:30 – 5:15 pm   | Session VIII: Closure                                      |

## Conference Information

### Hotel Information

All events will be held at Twin City Quarters using the Embassy Suites, Marriott and the Benton Convention Center. Blocks of rooms have been set up at the Embassy Suites and the Marriott in Downtown Winston-Salem. Please ask for the NC Association for Marriage and Family Therapy or NCAMFT Group Rate.

Marriott—Rate \$119—Deadline March 6, 2018—Call 800-320-0934

Embassy Suites—Rate \$139—Deadline March 6, 2018—Call 800-696-6107

Parking—There will be a parking fees ranging from \$2 to \$18 depending on the deck and the day of the week. More information will be provided after your registration.

### Book Sales

**General Book Sale** featuring professional books of general interest.

**Used Book Sale** – all books will be sold for \$5.00 each and all proceeds will go to NCAMFT. If you are interested in donating books for this sale, please contact the NCAMFT office at 919-518-1919 or [cathywomack@customassociation.com](mailto:cathywomack@customassociation.com).

### Continuing Education Information

Thursday: A possibility of 6 hours can be earned depending on what sessions you choose. Friday and Saturday will give you an opportunity to earn up to 7 per day. You will get credit for any you attend. **You must attend the entire day to get the maximum number of hours offered. You will be awarded the hours you attend.** NBCC hours have been applied for. Please contact the office if you have any questions [cathywomack@customassociation.com](mailto:cathywomack@customassociation.com)

### Refund Policy

All requests for refunds must be sent in writing, by March 23, 2018, and are subject to a \$30 cancellation fee. No refunds will be made after March 23, 2018 for any reason due to hotel meeting guarantees.

### Prices

Prices depend on member/nonmember and early bird/normal rate (early bird ends 3/6) For the 2 day conference (pre-conference rates are different). Please register online at <http://ncamft.org/annual-conference/>

Clinical Fellow Member \$275/\$295 one day \$140/\$150

Non Member \$325/\$350 one day \$165/\$175

Pre-Clinical Member \$170/\$185 one day \$90/\$100

Non Member LMFTA \$200/\$220 one day \$105/\$115

Student \$120/\$130 one day \$60/\$70

Non member student \$140/\$150 one day \$70/\$75

### For Additional Information Please Contact

NCAMFT 919-518-1919 [cathywomack@customassociation.com](mailto:cathywomack@customassociation.com) [www.ncamft.org](http://www.ncamft.org)

## Description and Speaker Information for Friday & Saturday, April 6—7, 2018

### Of Walls and Wars: Dialogues to Bridge Differences Kenneth V. Hardy, Ph.D.

Despite the array of heartwarming slogans and clichés regarding the value of diversity, having *meaningful* conversations remains a volatile issue that often creates discomfort and polarization. Rigid and self-righteous diversity-related “talk” often makes it difficult to engage in meaningful and transformative interactions across the gulf of cultural differences. Our undying, often romanticized, commitment to inclusion and connections across cultural groups, at times, doesn’t appear to be enough to prevent vast misunderstandings, and seemingly irreconcilable stand-offs. Claims to “not see color” in a color conscious society, or efforts to hold on fervently to the “feel good” ideal that differences don’t matter anymore, make meaningful dialogue virtually impossible. When much needed dialogues about diversity and power differences become stifled, the creation of *walls* and ultimately *wars* are inevitable. As family therapists, committed to the centrality of relationships, we must have the ‘will’ and ‘skill’ to facilitate these courageous conversations both in and outside of therapy.

This presentation will address how walls (i.e., polarization and cutoffs based on differences) contribute to wars (i.e., conflict, domination, and thirst for punishment) between and among us. A model will be presented for how we can explore new dialogues that will move toward bridging differences that have divided us historically. Implications for addressing difficult diversity related issues in the workplace will be discussed.

#### Objectives:

1. To explore the anatomy of oppression and its impact on cross cultural interactions and relationships;
2. To deconstruct how cross cultural tensions develop and prevent honest, meaningful interactions between and among members of different groups;
3. To provide a model for advancing inclusion and healthy interactions between diverse groups with a history of polarization, misunderstanding, and oppression.
4. To provide participants with tools that will facilitate meaningful cross cultural dialogues in the workplace.
5. To explore relevant cultural-related Self of the Therapist/Worker issues that may impede and/or facilitate constructive culturally-based conversations.

Kenneth V. Hardy, Ph.D. is a Professor of Family Therapy at Drexel University in Philadelphia, Pennsylvania and is the Director of the Eikenberg Institute for Relationships in New York City. He is an internationally recognized clinician, author, educator, and consultant.

He has received considerable acclaim for the contributions that his numerous publications and videotapes have made toward challenging our field to think critically about issues of diversity, trauma and oppression. In addition to his own writing, Dr. Hardy serves on the editorial boards of six publications including the Journal of Marital and Family Therapy, the Journal of Family Psychotherapy, the Journal of Divorce, the Journal of Couples Therapy, the Psychotherapy Networker, and the Journal of Family Counseling. He has been a frequent contributor to the popular media and has been featured on the Oprah Winfrey Show, Dateline NBC, and 20/20, and the Discovery Health Channel.

Dr. Hardy has provided Diversity and Racial Sensitivity training to an extensive list of Health and Human Services agencies as well as a host of educational institutions. Some of his former clients include: The Alameda County Department of Public Health; The San Francisco Department of Public Health; Berkeley and Contra Costa Departments of Public Health; The California Endowment; Cascadia Behavioral Health in Portland, Oregon; The University of California-Berkeley; The Wright Institute; the Children’s Defense Fund; Allegheny County Department of Human Services; the South Carolina Department of Mental Health; Four-Winds Psychiatric Hospital; Rockland Children’s Psychiatric Center; Philadelphia Department of Human Services; Westchester County Department of Human Services; Princeton University-Counseling Center; Boston University; Merritt College; New York University School of Social Work; Appalachian State University; Antioch New England; Alliant International University the American Pastoral Counseling Association, the New York State Office of Mental Health, Harlem Hospital, the Washington D.C. Superior Court; and Family and Children’s Services of Washington D.C., Nashville, Louisville, and Minneapolis.

Dr. Hardy is a frequent workshop presenter and trainer on the topics of diversity, trauma and oppression and has published prolifically. He is the author of numerous articles and book chapters and has co-authored the following books: **Culturally Sensitive Supervision: Diverse Perspectives and Practical Applications**; **Minorities and Family Therapy: Teens Who Hurt: Clinical Interventions for Breaking the Cycle of Violence**; and **Revisoning Family Therapy: Race, Class, Gender and Culture**. In addition to his publications, Dr. Hardy is also featured in several therapy videotapes as well as a documentary devoted to slavery. His videotape “**The Psychological Residuals of Slavery**” has been well received by both the professional and lay communities for serving as a catalyst to promote conversations about race relationships.

Dr. Hardy maintains a practice in New York, New York.

## Description and Speaker Information for Thursday, April 5 Pre-Conference Institutes

### Morning Options

**100 “If Only...” Second Chances in MFT Ethics**  
**Susan Perkins, PhD, LMFT (Michigan)**  
**Stephanie Phelps**  
**Janet Farrell**

Abstract: This advanced workshop builds on participants' knowledge of the AAMFT Code of Ethics. Participants will briefly review ethical decision making models and build their own model. Participants will then apply these models to couple and family therapy scenarios that illustrate ethical issues of secrets, defining the client, engaging each person, and other issues. In these scenarios, therapists make varying levels of ethical errors. Participants will identify ethical errors and propose alternative, ethical ways to address ethical issues.

**Learning Objectives:** Attendees will...

- Review ethical decision making models.
  - Identify ethical issues in couple or family case studies.
  - Apply an ethical decision making model to couple or family case studies.
  - Develop several appropriate options for addressing ethical issues in couple and family case studies
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**101 Collaborative Whole Person Care for Children and Adolescents**  
**Lisa Tyndall, PhD, LMFT**  
**Sara Herrity, MS, LMFT**  
**Amelia Muse, PhD, LMFTA**  
**Monica Williams Harrison, LCSW**

Abstract: Effective collaboration between medical and mental health providers remains a significant challenge in the current healthcare landscape of North Carolina. It is critically important for marriage and family therapists in North Carolina to understand how to navigate the processes of collaboration to effectively deliver whole person care. This is most crucial for clients struggling with medical and behavioral health challenges, especially those clients that are children or adolescents. In this workshop, the ethics of consent and confidentiality for children and adolescents will be explored, including the parameters of confidential health information for school-age minors and the consent to treatment process for unaccompanied minors. Next, biopsychosocial interventions for children and adolescents will be presented using case studies and role play methods. The interventions presented will focus on addressing comorbid medical (e.g., obesity, diabetes, asthma) and behavioral health conditions among children and adolescents. The third and final portion of the workshop will address collaboration with the medical system and best practices for effective communication with medical providers. This workshop will outline specific strategies for North Carolina marriage and family therapists to use to engage in collaboration with medical and psychiatric professionals treating shared clients.

**Learning Objectives:**

- Participants will be able to identify ethical processes for child and adolescent consent and confidentiality of health information.
- Participants will be able to apply appropriate biopsychosocial interventions to treatment of common mental health issues in outpatient care for children and adolescents.
- Participants will be able to use effective communication strategies for collaborating with child and adolescent clients' psychiatric and medical providers.

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**102 A Biopsychosocial-Spiritual Approach to Weight-Related Health Concerns in Therapy**  
**Katherine Didericksen, PhD, LMFT**  
**Andrew Brimhall, PhD, LMFT**  
**Erin Sesemann, MS**

**Abstract:** Child, adolescent, and adult obesity are all problems of epidemic proportions within the United States (Flegal, Carroll, Ogden, & Curtin, 2010) and North Carolina. The challenges of obesity are both individual and systemic, and obesity is often comorbid with biomedical health (e.g., hypertension, gallbladder disease, high cholesterol, type II Diabetes, and coronary heart disease; Must et al., 1999), psychological health (e.g., depression and anxiety; Blaine, 2008), and social health (e.g., family interactions and home environment; Didericksen & Berge, 2015). One way to therapeutically conceptualize biopsychosocial-spiritual treatment for weight-related concerns is attachment theory. Several studies indicate that insecurely attached people are more likely to experience emotional distress and enact ineffective coping strategies (e.g., emotional overeating, food as incentive or comfort, etc.) than those who are securely attached (Buelow, Lyndon, & Johnson, 2002; Mikulincer & Shaver, 2007). Additionally, conversations that families have may increase risk for obesity and other weight-related comorbidities (Didericksen et al., in press; Neumark-Sztainer et al., 2010). Recent research has indicated that marriage and family therapists (MFTs) often lack training for weight-related concerns (Pratt, Holowacz, & Walton, 2014), yet MFTs frequently work with clients who have identified and non-identified weight-related concerns. The presenters will address this training gap by discussing the clinical implications they have discovered via their weight-related research with mother-father-young adult triads. The presenters will also address additional weight-related challenges in therapy (e.g., weight bias, weight talk, comorbidities, etc.).

**Learning Objectives:**

- Participants will be able to identify the biopsychosocial-spiritual comorbidities of obesity.
- Participants will be able to understand how to address weight-related concerns in therapy.
- Participants will be able to identify and address weight bias within therapy.

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**103 Alzheimer's Disease and Attachment Theory within Couples Therapy**  
**Tasha Cadet**  
**Deneisha Poe**  
**Ivy Beth Abernethy**

**Abstract:** The purpose of this research is to review articles to establish the importance of acknowledging attachment theory within couples' therapy. More specifically, we are interested in exploring how a diagnosis such as Alzheimer's Disease can affect a couple's relationship and attachment. We will focus on gathering articles from databases to illustrate a connection between and use of attachment theory in working with couples where one member has a diagnosis of Alzheimer's Disease. Society often tells the story of the hardship caregivers face and the increasing loss of function experienced by the individual, however there is a need for a shift from I (the individual) to we (the couple).

Here are our learning objectives for presentation:

- Why is this important?
- What is the societal narrative that couples are being told about this disease?
- How can moving to a relationship-focused model be beneficial for the couple?

## Afternoon Options

### **104 Navigating Technology Related Ethical Issues in Ground Based Practices** **Bobbi Miller, PhD, LMFT (Colorado)** **Laura Bryan, PhD, LMFT** **Andrew Brimhall, PhD, LMFT**

Abstract: Rapid increases in technology have created new opportunities for initiating and maintaining contact with clients, sharing information, and even providing and supplementing treatment. The ubiquity of smartphones, tablets, laptops, and other technologies provide more opportunities for tools to become integrated into therapeutic practice. These increased opportunities also create new questions about boundaries, privacy, and effectiveness. While the use of technology in therapy is not new, all therapists, regardless of comfort level in the digital world, are being confronted with new opportunities, client expectations, and challenges related to the evolving culture. The 2015 revision of the AAMFT Code of Ethics reflects these changes in practice through the inclusion of codes directly related to therapists' utilization of technology.

The presenters will assist participants in understanding their own comfort with technology and how this might impact them in the current milieu. They will give an overview of common ways various technologies (e.g., smartphones, social media, digital record keeping and scheduling) are shaping expectations, opportunities, and practice for therapists. Participants will also be introduced to the ethical implications of utilizing these tools in their work, including common dilemmas that may arise, strengths and limitations of the tools themselves, and preventative measures to consider when incorporating new tools into one's practice. Informed consent, confidentiality, security, competency, and multiple relationships will all be addressed within the context of practicing in the digital age. Changes in the AAMFT Code of Ethics specific to technology will be discussed, as well as their implications for common practice.

#### **Learning Objectives**

- Participants will learn more about their own orientation toward technology
- Participants will learn more about how technology is being implemented in primarily "face-to-face" practices
- Participants will learn more about ethical questions and dilemmas that arise when integrating these tools into their practice
- Participants will learn guidelines for using new tools in an ethically sound manner

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### **105 Pornography Addiction vs Sexual Addiction** **Stefanie Petyak Jester, MA, LMFT, CSAT** **Kim Leppert, MSW, LCSW, CSAT**

Abstract: An examination of the traits that make sexual behavior addictive. Discussion of the impact of sexual addiction vs pornography addiction and how to identify this in your clients. The generational differences and how they impact sexual addiction and pornography. (millennials, gen X, and baby boomers)

#### **Learning Objectives:**

- Participants will gain understanding of the trait and treatment differences of pornography addiction vs sexual addiction
- Participants will be able to adequately assess and differentiate between sexual addiction and pornography addiction in clients.
- Clients will gain an understand of how technology has impacted the norms of sexual behaviors across the generations.

## **106 Interpersonal Violence an African American Women**

**Lorin Kelly**

**Nickolas Jordan, PhD, LMFT**

**Chélynn Randolph**

**Tatjna Farley**

**Abstract:** The disproportionate rate of African American women being killed by IPV is higher than any other racial group. For African American women ages 15-24 the second leading causing factor of death is IPV and fourth for women ages 25-34. Why is this? Is toxic masculinity a contributing factor to this? Systematic racism? My goal is to further the research to encourage education and prevention to hopefully eradicate this social ill.

Learning Objectives:

- Educate clinicians in the field
  - Aid in research to enable prevention
  - Encourage communication and awareness for advocacy
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## **107 Integrated Behavioral Health: What is it? And, How do I get Started?**

**Jeff Krepps, PhD, LMFT**

**Abstract:** As healthcare continues to change, embedding mental health specialists in medical settings is becoming more common. In addition to traditional therapy, therapists working in medical settings can provide behavioral health consultations to patients, working alongside the medical provider to improve health outcomes. Such consultations can be directed toward traditional mental health issues, as well as behavioral health changes related to such conditions as diabetes, hypertension, obesity, pain, cardiovascular disease, and other chronic illnesses. This workshop will define integrated behavioral health, provide examples of behavioral health consultations in integrated settings, focus on how to sell the idea to medical practices, and discuss how the systemic perspective of family therapists is ideally suited for work in family medicine practices.

Learning Objectives:

- Participants will understand what behavioral health specialists do in integrated settings
- Participants will learn basic ideas on how to sell the idea to primary care medical practices
- Participants will understand how a systemic perspective is ideal for work in integrated settings