



IMHCA's 20th Annual Conference

Paths to Progress

May 6-8, 2026

CONFERENCE BREAKOUTS – FULL DESCRIPTION



PRE-CONFERENCE, WEDNESDAY MAY 6, 2026 (ONLINE ONLY)

Session PC: Ethics in Private Practice: How to NOT Lose Your Mind or Your License! (3.0 CEs in Ethics)

i. Program Overview (Advanced Level)

The private practice world can be a daunting place. Whether you're planning to go into practice on your own or expanding into group practice, failure to maintain ethical practices can potentially lead to losing your license and your livelihood. This advanced program is designed to help you navigate the complexities of taking on all of this liability, while feeling confident that you know the right steps to take. They didn't teach us this in school, we have to learn it on our own. It's hard to find training that focuses on not only the clinical nuances of private practice, but also the business and ethical ones.

Do you understand credentialing well enough to know what you are agreeing to when you sign a contract with an insurance company? How many times over the course of your career have you rolled your eyes when you were required to read a policy and procedure manual? Did you know that creating clear policies and procedures to spell out the processes you use to maintain HIPAA and improve client outcomes will not only help you remain in compliance, but could also qualify you for grants and other resources? It's likely that your answer to these questions is "no." There's no shame in that! The fact is, it's rare for us as providers to know these things unless we've made the choice to research and learn about them on our own. For some of us, being in practice on our own is enough. For others, the opportunity to grow your practice to the point of hiring other providers is enticing! Do you know the licensure laws and rules in your state of license? This is important for you to protect your own license, but it's also necessary if you plan to do anything within the field that is outside of direct client work. Clinical supervision, social advocacy, and teaching (among other things) all have standards that are dictated by licensing boards and insurance panels. You don't know what you don't know - this is your chance to learn.

ii. Learning Objectives

1. Identify common ethical challenges in individual and group private practice.



2. Apply practical strategies to ensure compliance with ethical and legal standards.
 3. Identify systems that support ethical decision-making, professional wellbeing, and sustainable business practices.
- iii. **Presenter(s):**
Jennifer Becker, LMHC, LPC, ACS, has been practicing in the mental health field for nearly 20 years. She has worked in non-profit and private practice settings offering mental health counseling, clinical supervision, program development, consultation, and generally wearing every possible hat in a clinical office setting.
- Kristten Buttermore, MS, LMHC, NCC**, is a seasoned clinician and founder of Creative Counseling Services, a nonprofit established in 2008. Licensed since 2005, she has worked across PMIC, in home, child welfare, EAP, and adolescent substance use treatment, and has operated a full-time private practice in Ames since 2019.

THURSDAY, MAY 7, 2026

HYBRID: WEST DES MOINES SHERATON & ZOOM EVENTS

Session 1 Options:

Sessions 1A & 2A: Therapy with Babies: Exploring the Meaning and Treatment of Infants and Young Kids in Therapy (3.0 CEs)

- i. **Program Overview (Beginner Level)**
This presentation will explore the meaning and treatment of infant and early childhood mental health. Participants will learn the principles of infant mental health intervention and assessment, increase awareness of services available, receive an overview of the DC:0-5 manual for assessment, and how to utilize the relationship between an infant and their caregiver as an assessment factor and treatment tool.



ii. **Learning Objectives**

1. Participants will gain an understanding of infant and early childhood mental health including its meaning, importance, and how to assess mental health in infants and young kids.
2. Participants will increase awareness of signs and indicators within parenting/caregiving relationships that would necessitate infant mental health assessment and intervention.
3. Participants will receive an overview of the DC:0-5 including the five axes for diagnostic formulation and conceptualization of cases.

iii. **Presenter:**

Denise Stadter MA, LMHC, CADC, IMH-E® is the Clinical Director of Behavioral Health Services at Children & Families of Iowa (CFI) and the owner of Nurturing Connections, LLC. Denise graduated from Augustana College in Rock Island, IL in 2011 with a bachelor's degree in psychology and sociology with an emphasis in social welfare. She attended Olivet Nazarene University in Bourbonnais, IL and graduated with her master's degree in professional and school counseling in 2014. As a therapist, Denise utilizes evidenced based practices to support her clients and is trained in Eye Movement Desensitization and Reprocessing (EMDR) and is nationally rostered as a Child Parent Psychotherapy clinician and supervisor. Denise is endorsed as an Infant Mental Health Specialist and Reflective Supervisor (IMH-E®) in the state of Iowa, is a state trainer for the DC:0-5, serves as the president of the board of the Iowa Association for Infant & Early Childhood Mental Health, and offers reflective supervision to professionals to support their professional development and reduce burnout.

Session 1B: Navigating Ethical Dilemmas in Eating Disorder Care Within Collegiate Athletics (1.5 CEs in Ethics)

i. **Program Overview (Intermediate Level)**

This presentation provides a structured framework for navigating ethical dilemmas in eating disorder care within collegiate athletics. Participants will learn to distinguish the five essential steps of ethical case management, gaining clarity on how to approach complex situations systematically and responsibly. The session also outlines key clinician action-steps that support effective and consistent execution of care. In addition, attendees will identify critical departmental resources that strengthen interdisciplinary coordination and



enhance overall treatment quality. Finally, the session offers introductory guidance for managing high-risk cases involving diverse ethical challenges, equipping participants with foundational tools to promote athlete safety, uphold professional standards, and support ethical decision-making across athletic environments.

ii. **Learning Objectives**

1. Participants will be able to distinguish the five steps necessary for ethical eating disorder case management.
2. Participants will become familiar with the clinician action-steps needed for optimizing execution.
3. Participants will be able to identify a list of department resources critical to enhancing care.
4. Participants will gain an introductory knowledge of how to navigate high-risk cases with varying ethical dilemmas.

iii. **Presenter:**

Catelyn Fix, MA, M.Ed, LMHC, made history in July 2022 when she joined Iowa State Athletics as the department's first fully embedded mental health provider, marking a transformative step in prioritizing the psychological well-being of collegiate student-athletes. With over a decade of experience delivering clinical mental health and sport psychology services to high-performers, Catelyn brings deep expertise, compassion, and strategic vision to her role. In July 2025, her leadership and impact were recognized as she was elevated to Assistant Athletic Director of Psychological Health and Performance. In this role, Catelyn leads and oversees a multidisciplinary team of clinical mental health and sport psychology professionals, shaping the mental performance landscape of the department. Her work ensures that athletes receive comprehensive, integrated care that supports both their competitive success and personal development. Catelyn's commitment to innovation and athlete-centered care was recognized in May 2025, when she was awarded by the Iowa Mental Health Counselors Association for her exemplary dedication to mental health advocacy. Catelyn holds an undergraduate degree in Psychology from Defiance College and two Master's Degrees from Bowling Green State University in Clinical Mental Health Counseling and Kinesiology with a specialization in Sport Psychology.

Nicole Kiley, MS, RD, LD, CSSD, joined Iowa State Athletics as the Assistant Athletics Director for Sports Nutrition in April 2022. With over a decade of



experience serving elite athletes, Nicole leads her team of registered dietitians, undergraduate student workers and culinary experts to provide first class clinical and food services to ISU student-athletes. In addition to supporting the football and men's and women's basketball programs, Nicole serves as the lead dietitian for wrestling, gymnastics and high-risk disordered eating cases. Nicole has been recognized for her interdisciplinary collaboration and program development and has spoken nationally for the American Sports and Performance Dietitians Association (APSDA) on the following topics: Collaborating, Cooperating and Communicating to Build an Impactful High Performance Team (May, 2024), Navigating Ethical Dilemmas in Eating Disorder Care Within Collegiate Athletics (November, 2023), and Building a Sustainable Nutrition Program (May, 2022). Prior to ISU, Nicole served as the University of Nevada Las Vegas' first Director of Performance Nutrition from 2017-2022. She also had stints with Cirque du Soleil, a professional mixed martial arts company, and USA Volleyball. Nicole holds an undergraduate and graduate degree in Nutritional Science from California State University Long Beach.

Session 1C: Awakening the Therapist: Embodied Presence as a Tool for Transformation (1.5 CEs)

i. Program Overview (Intermediate Level)

Traditional talk therapy has long emphasized cognitive insight, meaning-making, and narrative work. While these are important, research and clinical practice consistently show that insight alone rarely produces lasting change. Clients may understand their patterns, articulate their histories, have profound emotional breakthroughs and still find themselves reacting from old nervous system states. Sustainable transformation requires embodiment: the ability to remain aware, regulated, and present even when discomfort or emotional activation arises. This intermediate-level program introduces a neuroscience-informed, mindfulness-based approach to therapeutic presence grounded in interoception, nervous system science, and conscious awareness. Drawing from the Kerbys' Embodiment Protocol, a model used in both traditional and psychedelic-informed therapy, this presentation reframes integration not as something that happens after a meaningful experience, but as a daily practice that conditions the nervous system for stability, clarity, and conscious choice. The program begins with theory. Participants will explore why embodiment is essential for emotional regulation and trauma healing, review the role of the



autonomic nervous system in shaping behavior, and learn how interoceptive awareness helps clients reinterpret internal sensations as safe. The session also introduces the anterior midcingulate cortex (aMCC), the brain region responsible for sustaining awareness and values-based action during discomfort.

Strengthening this region enhances a therapist's (and client's) capacity to remain present without defaulting to fight, flight, or freeze responses. Next, the presentation reviews how mindfulness-based interventions, somatic awareness, and breath-based practices work across therapeutic modalities. Because this training is not tied to any one approach, it is relevant for clinicians practicing CBT, EMDR, ACT, trauma therapy, somatic or body-based modalities. Embodied presence enhances every therapeutic relationship by improving attunement, co-regulation, and the therapist's capacity to respond rather than react. Half of the program is experiential and application-focused. Participants will engage in guided practices drawn from the Embodiment Protocol. Each exercise includes a structured debrief and clinical application, helping participants understand how to titrate these practices safely with clients. The applied section explores how embodiment can be integrated into sessions to support clients experiencing anxiety, trauma activation, emotional overwhelm, or dissociation. Therapists will explore when to introduce somatic awareness, how to pace interoceptive work appropriately, and how to maintain grounded presence with clients whose nervous systems are highly reactive. These tools help clinicians remain centered while offering clients practical pathways to regulate, reorient, and expand their capacity for emotional resilience. By the end of this presentation, participants will understand why embodied presence is foundational for effective therapy and trauma resolution. They will leave with practical skills and experiential practices that deepen their own awareness and enhance their clinical work, regardless of modality. Ultimately, this program invites therapists to consider awakening not as a moment of insight, but as a lived capacity of regulated, conscious presence.

ii. **Learning Objectives**

1. Participants will be able to describe how interoception, mindfulness-based awareness, and nervous system regulation contribute to therapeutic presence and client transformation.
2. Participants will be able to explain the role of the anterior midcingulate cortex (aMCC) and autonomic regulation in sustaining awareness during discomfort or emotional activation.



3. Participants will be able to apply at least two embodied awareness techniques to enhance therapist grounding and support clients experiencing anxiety, activation, or dysregulation.

iii. Presenters:

Amber Kerby, LMFT, specializes in Ketamine-Assisted Psychotherapy, IFS, and embodied clinical practice. As founder of Non Ordinary Therapy, she advocates for expanded access to trauma informed, evidence-based mental health care. Amber trains, teaches, and consults nationally, and co-created the Embodiment Protocol, a neuroscience-informed model for cultivating awareness and transformation.

Stephan Kerby, MS in progress, blends trauma-informed practice with extensive experience guiding individuals through non-ordinary states of consciousness. Completing his Marriage and Family Therapy degree, he specializes in Ketamine Assisted Psychotherapy and embodied awareness. As co-creator of the Embodiment Protocol, he supports clients in transforming expanded-state insights into grounded, sustainable healing and personal growth.

Session 1D: Embodied Healing: Implementing Movement Therapy in Clinical and Self-Care (1.5 CEs)

i. Program Overview (Intermediate Level)

As mental health professionals, our need for effective treatment tools often feels urgent. Serving the estimated 473,000 Iowans experiencing mental illness is a tremendous undertaking. We need resources that serve our clients and protect us from the risks of burnout and secondary trauma. As mental health research continues, we gain more insight into the bodily processes that contribute to low mood, high anxiety, impulsivity, isolation, and harmful behaviors. The science is revealing the biological mechanisms for what we have felt at a gut level: stress and trauma change the body, for the individual and through generations. This is true for our clients – and for us. Community mental health colleagues Denise Kinney, LMHC, RYT, and Katie Sandquist, LMHC, of Myrtue Mental Health Center in Harlan, are excited to return to the IMHCA Conference to share resources to enhance clinical care and support vital self-care and burnout prevention. Studies on the autonomic nervous system, fight/flight/freeze responses, epigenetics, and attachment are underscoring the need to center body-based work and safe, attuned connection in mental health care. As clinicians trained in



multiple evidence-based treatments, Kinney and Sandquist have spent years diving into the research and training in somatic modalities such as Somatic Experiencing, EMDR, trauma-informed yoga, body-based attachment therapies, mindfulness-based CBT, and Adlerian Play Therapy. They have integrated their knowledge and experience in their innovative group treatment model Movement Therapy. This program weaves together multiple evidence-based modalities to help clients understand and listen to their bodies, identify stuck patterns of stress and trauma, and use movement, breathwork, sensory engagement, and social connection to move toward healing.

At the 2024 Conference, Kinney and Sandquist introduced Movement Therapy, shared the rationale and development process, and introduced attendees the practices involved. They are excited to return to this year's conference to preview a new therapist training program to replicate Movement Therapy across the state. With grant funding from the Delta Dental of Iowa Foundation, Kinney and Sandquist are developing the Movement Therapy curriculum with plans to launch initial training cohorts in the coming months. Kinney and Sandquist understand the challenges facing mental health professionals. As clinicians with over 40 years of combined experience in the field, they have spent thousands of hours with lowans of all ages with a variety of mental health challenges. They have felt their limitations in the face of generational trauma, multiple overlapping diagnoses, and systemic barriers to recovery. They have also experienced the impact of robust evidence-based tools in treatment, and they want to share those tools with their colleagues across Iowa. In this workshop, Kinney and Sandquist will preview the Movement Therapy Therapist Training curriculum, which covers both adult and family groups. They will also highlight elements that help strengthen therapists' own nervous system health, capacity for co-regulation, and professional sustainability. Attendees will participate in experiential learning opportunities with practices that they can incorporate into their own self-care and their work with clients. Attendees will also receive a 10% discount on the training program, should they choose to move forward with participating.

ii. **Learning Objectives**

1. Participants will be able to describe the foundational evidence-based modalities and theories supporting Movement Therapy's approach.
2. Participants will be able to identify Movement Therapy elements applicable to clinical work and self-care.



3. Participants will be able to engage in Movement Therapy practices to support personal nervous system health, capacity for co-regulation, and professional sustainability.
4. Participants will be able to contribute professional insights to the rollout of Movement Therapy Therapist Training and secure early access to join initial training cohorts.

iii. Presenters:

Denise Kinney, MS, LMHC, NCC, RYT, received her Bachelor's in Psychology and Human Resource Management from Buena Vista University and her Master's in Human Services Mental Health Counseling from Bellevue University. She has been in the human services field since 2002 and in practice as a mental health counselor since 2009.

Katie Sandquist, MA, LMHC, NCC, received her Bachelor's in Journalism and Sociology from University of Kansas and her Master's in Professional Counseling from Liberty University. She has been in the helping profession since 2005 and in practice as a mental health counselor since 2018. She is also involved in Community Wellness efforts.

Session 2 Options:

Session 2A: Therapy with Babies: Exploring the Meaning and Treatment of Infants and Young Kids in Therapy continued (see above)

Session 2B: Sex Therapy For All (1.5 CEs)

i. Program Overview (Beginner Level)

Therapists need to feel comfortable with talking about sex with clients, and not be afraid to bring up the topic. Sex education at all life stages is necessary and this training can help equip therapists with providing age-appropriate and accurate information to children, adolescents, adults, and the elderly. This beginner level training is to help clinicians learn what is needed to help clients with sexual education and functioning to live a healthy and satisfying life.

ii. Learning Objectives

1. Participants will learn appropriate use of sex therapy skills for different diagnoses and therapeutic concerns throughout the life span.



2. Participants will be able to identify techniques appropriate for all clinicians to use with clients, as well as recognize when referrals to certified sex therapists or other specialists are needed.
 3. Participants will be able to define appropriate sex education for different ages, cognitive and physical abilities, and levels of risk.
- iii. **Presenter:**
Rachel Taylor, MS, LMHC, SOTP-II, AASECT Certified Sex Therapist, has been providing sex education and therapy for individuals, couples, and groups since 2017 in residential group homes for adolescents, schools, and currently in group private practice. She created the group curriculum called CHOICES to provide evidence-based sex education to youth and prevent future sexual harm. Rachel is currently a clinical member of AASECT, ATSA and IBTSA, as well as AMHCA and is secretary of IMHCA.

Session 2C: Wholehearted Living for Rural Clients (1.5 CEs)

- i. **Program Overview (Intermediate Level)**
Rural Iowa continues to face critical challenges in mental health service delivery due to workforce shortages, geographic isolation, and socioeconomic barriers. Nearly 73 of Iowa's 99 counties are designated Mental Health Professional Shortage Areas, meaning they lack an adequate supply of clinicians relative to community needs. Many counties—particularly rural ones—have little to no psychiatric coverage, forcing residents to travel long distances for care or go without services altogether. Carver College of Medicine+1 Iowa ranks among the lowest states in the nation for mental health provider availability per capita, with approximately 300 psychiatry providers statewide and extensive wait lists that can extend three to six months for appointments. Radio Iowa Broadband access, critical for reliable telehealth, remains uneven across the state. Nearly 1 in 10 Iowa households lack broadband access, and in some rural counties, half of the residents lack sufficient connectivity, compounding barriers to virtual care. Ways and Means - Democrats Transportation also remains a major barrier. In rural counties, long travel distances, limited public transit, and economic constraints often prevent individuals from attending in-person sessions—a challenge that is alleviated through virtual delivery. Wholehearted Living: A Virtual, Group-Based Solution: Wholehearted Living (WL) is a fully virtual curriculum with a 16-year history of success in engaging participants in structured group learning, even in areas with limited local services. By removing



the need for transportation and allowing access from home or community access points, WHL expands reach and continuity of care for rural residents.

Recognizing that many rural or low-income individuals primarily access the internet via mobile phones, the program supports flexible technology access strategies—including partnerships for laptop loan programs, temporary hotspots, and collaboration with local agencies where participants can access devices discreetly and conveniently. The curriculum is expressly group-focused, designed around multiple learning modalities (e.g., reflective writing/life application exercises, group discussions, reading, and audio materials) that enhance engagement and promote tangible results. This group emphasis fosters community, mutual support, accountability, and reduced isolation, addressing barriers that are particularly acute in rural settings. Group format with pre-established, sequential areas of focus for each session.

ii. **Learning Objectives**

1. Participants will be able to articulate the Wholehearted Living group approach to mental and relational wellness.
2. Participants will be able to identify rural barriers to mental health access in Iowa and explain how virtual WL groups remove many of those challenges.
3. Participants will be able to describe how WL's multimodal curriculum supports self-awareness and connection.
4. Participants will be able to apply strategies from the curriculum to support rural clients in fostering community, resilience, and lasting change.

iii. **Presenters:**

Tracy Keninger, MA, CRC, has more than 25 years of experience supporting individuals with disabilities and their families. She serves as the Director of Assistive Technology and Rural Solutions at Easterseals Iowa, where she oversees programs serving farm families, rural residents, and Veterans across the state. Tracy specializes in group facilitation, assistive technology, and practical problem-solving tools that enhance independence and quality of life. She holds professional certifications as an Assistive Technology Practitioner (ATP) through the Rehabilitation Engineering Society of North America (RESNA) and as a Certified Rehabilitation Counselor (CRC). Tracy earned her master's degree in Rehabilitation Counseling from Minnesota State University and also serves as an Adjunct Faculty member in the Drake University Master's Counseling Program.



Alicia Economos, BS, Certified Mentor/Life Coach is the founder of Wholehearted Living, a nonprofit improving mental, physical, and spiritual health by developing relationships that thrive! Author of six books and a sought-after speaker, Alicia shares practical tools to help people live wholeheartedly, loving themselves and others with ALL their hearts.

Session 2D: "Protecting the Public": Avoiding Licensing Violations (1.5 CEs in Ethics)

i. Program Overview (Beginner Level)

Protecting the public is a core responsibility of licensed clinicians and the regulatory bodies that oversee professional practice. This program is designed to enhance clinician awareness and understanding of licensing violations, professional conduct concerns, and the disciplinary processes that address them. By focusing on cases and trends reviewed by the disciplinary subcommittee, the program supports clinicians in recognizing behaviors and practices that may place patients, the public, or their own licensure at risk. The program provides an overview of the disciplinary subcommittee's role, including how complaints are received, evaluated, and resolved. Participants will gain insight into common categories of licensing violations, such as boundary concerns, documentation deficiencies, scope-of practice issues, ethical lapses, and failure to comply with regulatory requirements. Emphasis is placed on understanding not only overt misconduct, but also patterns of behavior and system-level issues that may contribute to disciplinary action.

Through case-based examples drawn from real-world disciplinary concerns (with identifying details removed), clinicians will explore how seemingly minor lapses can escalate into significant public safety risks or licensure consequences. The program highlights early warning signs, risk factors, and decision points where corrective action, consultation, or continuing education could prevent harm. Attention is also given to the impact of disciplinary actions on patients, colleagues, and public trust in the profession. In addition, the program addresses clinicians' responsibilities when concerns arise about their own practice or that of a colleague. Participants will review reporting obligations, appropriate use of supervision and peer consultation, and strategies for responding constructively to complaints or investigations. The goal is to promote a culture of accountability, transparency, and continuous improvement rather than fear or avoidance of the disciplinary process. By increasing familiarity with



licensing standards and the work of the disciplinary subcommittee, this program empowers clinicians to practice more safely, ethically, and confidently. Ultimately, it reinforces the shared commitment of clinicians and regulators to protect the public, uphold professional integrity, and support high-quality care through proactive awareness and responsible professional conduct.

ii. **Learning Objectives**

1. Participants will be able to identify common categories of licensing violations and professional conduct concerns that are reviewed by disciplinary subcommittees, including ethical, legal, and scope-of-practice issues, in accordance with NBCC ethical standards.
2. Participants will be able to explain the role and function of the disciplinary subcommittee and the complaint review process, including a counselor's rights and responsibilities during an investigation, consistent with NBCC guidelines for professional accountability.
3. Participants will be able to apply ethical decision-making models and risk-management strategies to case examples in order to prevent behaviors that may place clients, the public, or licensure at risk.

iii. **Presenter:**

Dr. Napoleon Harrington, DBH, LPC, NCC, is the founder of Ambassador Counseling & Resource Group and counseling faculty at Oakland University. An educator and former president of the Michigan Mental Health Counselors Association, he serves as Vice-Chair of the Michigan Board of Counseling and is a media voice on mental health.

Session 3 Options:

Session 3A & 4A: Foundations and Applications of Sandtray Play Therapy (3.0 CEs)

i. Program Overview (Beginner Level)

This workshop provides a comprehensive and experiential introduction to sandtray play therapy, grounded in a developmentally sensitive and relational theoretical framework that integrates principles of Adlerian play therapy, constructivism, and the Therapeutic Powers of Play. Participants will explore how sandtray work provides a nonverbal, symbolic medium through which children and adults express inner experiences, construct meaning, and engage in corrective emotional processes that support regulation, resilience, and relational healing. The workshop begins with an overview of the historical roots



of sandtray and sand play therapy, highlighting key theorists and the evolution of these modalities within the broader field of play therapy. Clear distinctions between sandtray therapy and sand play therapy will be identified to help clinicians select appropriate modalities for their client populations. A strong emphasis is placed on practical application.

Attendees will learn essential materials, setup considerations, and processing skills required for effective sandtray work with children, adolescents, and adults. Through case examples, participants will deepen their understanding of how sandtray facilitates exploration of lifestyle patterns, emotional themes, trauma responses, and developmental needs. Participants will also examine at least 10 common themes observed in sandtray play therapy and consider how these themes indicate both areas of concern and pathways toward change. The workshop further incorporates cultural humility as an essential guiding value, offering strategies for creating inclusive, culturally responsive sandtray play therapy environments.

ii. **Learning Objectives**

1. Participants will be able to identify at least five foundational components of sandtray play therapy, including materials, setup, and distinctions from sand play therapy.
2. Participants will be able to describe three non-directive play therapy principles as they apply to facilitating and processing sandtray work with children.
3. Participants will be able to analyze two sandtray play therapy case examples and accurately identify a minimum of three therapeutic themes present in each tray.

iii. **Presenter:**

Kim Feeney, MSW, LISW, RPT, is an experienced child and family therapist specializing in play therapy, sandtray therapy, and trauma-responsive care. She provides clinical services, supervision, and high-quality training, helping professionals and families use play to promote connection, healing, and long-term emotional growth.

Session 3B & 4B: Building Community Among Independent Clinicians (3.0 CEs)

i. **Program Overview (Intermediate Level)**



Rural private practices face unique challenges beyond clinical care. Clinicians often work independently, managing licensing, schedules, and caseloads, which can hinder collaboration and shared decision-making. This 3-hour interactive session aims to help mental health professionals develop resilient practices and a collegial culture that balance individual autonomy with a shared mission in rural settings. Drawing on expertise in clinical practice, organizational development, and leadership, presenters will guide participants through frameworks for aligning strategy, culture, and operations within small or independent teams. The session combines practical tools, real-world examples, and interactive exercises to enable attendees to apply insights immediately to their practices and networks.

Participants will explore the strategic foundations of rural private practice, including clarifying values, aligning clinical services with operational priorities, and establishing shared goals among independent clinicians. Topics such as workflow optimization, telehealth integration, and resource management will address logistical challenges faced by autonomous clinicians. The session will then focus on fostering a cohesive organizational culture among independent practitioners. Participants will learn methods to promote collaboration, accountability, and professional connection at both the practice and peer levels. This includes strategies for shared decision-making, supervision, peer consultation, and professional development that support collaboration without compromising independence. Emphasis will be placed on integrating ethical standards and resilience into daily practice while maintaining a culture aligned with shared objectives. Presenters will discuss strategic leadership and growth planning tailored for rural practices.

Participants will use research-informed approaches to guide practice development, resource management, and scalable service opportunities. Interactive exercises will help attendees identify gaps between individual priorities and collective goals, leading to actionable strategies that enhance alignment and teamwork. The session will also cover continuing education, licensure, professional growth, and how these tools reinforce both individual excellence and organizational shared objectives. Ethical considerations, rural-specific challenges, and maintaining autonomy while contributing to a collective mission will be woven throughout, ensuring participants leave with practical, sustainable strategies.

ii. **Learning Objectives**



1. Participants will be able to build a resilient organizational culture that supports collaboration, professional connection, and accountability.
2. Participants will be able to implement practical tools for workflow optimization, supervision, and peer collaboration within independent or small-team practices.
3. Participants will be able to use research strategies to guide practice development and scalable growth in rural settings.
4. Participants will be able to integrate continuing education, ethical practice, and professional development to support both individual autonomy and collective success.

iii. **Presenters:**

Shoshannah Guerrero, Ph.D, LMFT, is a systems leader and licensed marriage and family therapist with 20+ years of experience designing collaborative learning and implementation models in behavioral health. She specializes in Motivational Interviewing, Project ECHO, and cross system change, with work recognized as a 2024 CDC Top 15 Success Story.

Elise Healzer, D.M., LMFT, is a licensed clinician and practice builder, authoring her doctoral dissertation on management and behavioral health clinician burnout. She offers expertise in organizational strategy, culture, and operations across nonprofit, behavioral health, and medical sectors, supporting teams in sustainable growth and success.

Session 3C: Roots and Ripple Effects: How Early Experiences Shape Regulation and Mental Health Across Life (1.5 CEs)

i. **Program Overview (Beginner Level)**

Emotional regulation is a primary driver of mental health and symptom expression across the lifespan. Regardless of age, mental health counselors frequently work with clients whose challenges—such as anxiety, depression, behavioral dysregulation, trauma responses, relationship conflict, identity struggles, chronic stress, and burnout—are tied to underlying patterns of regulation and dysregulation shaped early in life. This presentation bridges Infant and Early Childhood Mental Health (IECMH) with lifespan counseling practice to offer a cohesive, developmentally grounded framework for understanding social-emotional well-being. Drawing on developmental science, early relational health (ERH), and trauma-informed care, the session explores how early experiences of



co-regulation, attachment, and caregiver responsiveness shape brain development and establish lifelong patterns of emotional processing, distress tolerance, and relational engagement.

Participants will examine the neurobiological foundations of regulation, including stress response systems, sensory processing differences, and the role of safe, attuned relationships in buffering stress. The session highlights how disruptions to early regulation—such as inconsistent caregiving, trauma exposure, chronic stress, or unmet relational needs—can echo into later developmental stages, showing up as emotional flooding, avoidance, impulsivity, shutdown responses, rigidity, or difficulty forming and sustaining healthy relationships. Case examples demonstrate how dysregulation drives symptom patterns commonly associated with ADHD, anxiety disorders, depressive disorders, trauma-related conditions, personality-related adaptations, and relational instability. Instead of viewing these patterns as fixed or purely internal, the presentation reframes them as adaptive responses shaped by developmental, relational, and environmental contexts. This lens enhances clinical insight and intervention planning.

Throughout the session, participants will learn IECMH-informed strategies that can be applied with all ages—not only infants and young children but also adolescents, adults, and older adults. These include attunement and co-regulation techniques, relationship-based assessment approaches, reflective practice, and interventions designed to strengthen emotional regulation and relational safety. The presentation also addresses social determinants of health, cultural norms, and systemic inequities that influence regulation capacities and shape the expression of distress across diverse communities. By integrating IECMH principles with lifespan counseling practice, clinicians will gain a deeper understanding of how early relational foundations influence emotional well-being, symptom patterns, and treatment responsiveness throughout life. This session is relevant for counselors in private practice, community agencies, health systems, schools, and family therapy settings. Participants will leave with practical tools, a clearer developmental map for interpreting client behavior, and a relationally grounded lens for promoting social-emotional competency across the lifespan.

ii. **Learning Objectives**



1. Participants will be able to describe how early relational experiences and IECMH principles shape emotional regulation and social-emotional competency across the lifespan.
2. Participants will be able to identify patterns of dysregulation underlying common diagnostic presentations and differentiate between diagnosis-driven symptoms and regulation-based behaviors.
3. Participants will be able to explain how emotional regulation and dysregulation manifest differently across developmental stages, including early childhood, adolescence, adulthood, and older adulthood.
4. Participants will be able to apply at least two regulation-focused or relationally informed strategies—such as co-regulation techniques, attunement skills, or reflective practice—to enhance client well-being and relational functioning.

iii. Presenter:

Alyssa Caldbeck, PhD, MSW, LISW, RPT-S, IECMH-E, is an endorsed infant and early childhood mental health professional, reflective consultant, practitioner-researcher, and educator specializing in early relational health, social-emotional well-being, and workforce wellness. She serves as Assistant Professor and MSW Practicum Education Director at Grand View University and provides consultation, training, and project support across systems.

Session 3D: Advocacy and the National Landscape (1.5 CEs)

i. Program Overview (Beginner Level)

This program will provide participants with an overview of the national organization's current legislative agenda, an up-to-date snapshot of mental health policy at the federal level, and an update to the counseling compact. Presenters will highlight recent advocacy efforts and key legislative wins, examining how these developments have directly impacted the mental health profession and service delivery. Attendees will gain insight into ongoing and emerging policy issues, learn how to stay informed about national advocacy initiatives, and discover practical ways to engage with and receive support from the organization in advancing mental health legislation. Practitioners in Iowa will be updated with the latest movements to the counseling compact and gain insight to how it is working in other states.

ii. Learning Objectives



1. Participants will be able to identify key components of the national organization's current legislative agenda and summarize the current landscape of mental health legislation.
2. Participants will be able to describe recent legislative wins and explain their impact on the mental health profession and practice.
3. Participants will be able to demonstrate knowledge of opportunities to engage in national advocacy efforts, including how to follow policy updates and access support and resources from the organization.
4. Participants will be able to identify what states have active counseling compact practice, learn how this is working in other states, and understand where Iowa is in the process.

iii. **Presenters:**

Courtney Ackerson, MA, LMHC (presenting live) obtained her degree in forensic psychology from The Chicago School of Professional Psychology. She provides part-time therapy, consults with nonprofits, and has experience in Medicaid oversight. Trained in EMDR, CBT, TF CBT, and motivational interviewing, she is active in state and national mental health advocacy and serves as AMHCA president.

Dr. Denise Takakjy, Ph.D, LPC, LPCMH, NCC, C-DBT, CATP, BSL (co-presenting online) is an associate faculty with University of Phoenix and Grand Canyon University and a licensed professional counselor and private practice owner specializing in working with teens and young adults. She is currently licensed in PA, NJ, CT, and DE. Denise provides trauma-focused therapy and has been working for over 10 years in various clinical settings including in-home, residential, and outpatient community settings. Denise obtained her MS in Clinical Mental Health Counseling from Walden University in 2014 and her PhD in Counselor Education and Supervision from Walden University in 2025. Denise currently services as co-chair of the Policy and Legislation Committee for AMHCA and serves on the Governance and Board Operations committee for the ACA. Denise has presented on issues related to trauma-informed care, supervision, working with children and adolescents, and advocating for marginalized populations and counselor involvement in their community.

Shama Winston-Ford, MS, LPC, NCC (co-presenting online) is a Licensed Professional Counselor, National Certified Counselor, and founder of Disruptive Thinking Counseling. She is a full-time Psychology Professor at Charleston Southern University and is completing her Ph.D. in Counselor Education and



Supervision at Regent University, with graduation scheduled for May. Known for her eclectic and creative approach, Shama uses a range of modalities—including walk-and-talk sessions, beach therapy, art therapy, and play therapy—to meet clients where they are. Her guiding belief is that therapy is not one-size-fits-all, and her work centers on trauma-informed, accessible, and culturally responsive care that fosters healing, resilience, and connection.

Session 4 Options:

Session 4A: Foundations and Applications of Sandtray Play Therapy continued (see above)

Session 4B: Building Community Among Independent Clinicians continued (see above)

Session 4C: Bridging the Gap: Integrating Assistive Technology into Mental Health Therapy (1.5 CEs)

i. Program Overview (Beginner Level)

As the landscape of mental health care evolves, assistive technology offers powerful tools to enhance therapeutic engagement, communication, and outcomes—especially for clients with sensory, cognitive, or communication differences. This interactive session will explore how clinical social workers can incorporate a range of assistive technologies into their practice to better support diverse client needs. Participants will learn about tools that enhance communication (such as visual emotion identifiers and augmentative communication devices), promote kinesthetic and sensory engagement (including fidgets, wearable tech, and movement-based interventions), and support clients outside of sessions (like headphones and other sensory aids). The session will also address how these tools can be applied across the lifespan, including in aging populations and in suicide prevention contexts.

ii. Learning Objectives

1. Participants will be able to increase awareness of assistive technologies that support mental health therapy.
2. Participants will be able to identify practical tools for enhancing client communication and engagement.
3. Participants will be able to explore the role of sensory and kinesthetic tools in therapeutic settings.



4. Participants will be able to examine the application of assistive technology in aging and provide tools for suicide prevention.
- iii. **Presenters:**
- Tony Raymer, MSW, LISW, RPT-S**, directs Brain Health at Easterseals Iowa, leading therapy, crisis stabilization, and Multisystemic Therapy programs. Since 2007, he's supported children, families, and adults with disabilities through individual, group, and community-based care. A Wartburg College and an Iowa MSW graduate, Tony enjoys biking, kayaking, hiking, and woodturning.

Tracy Keninger, MA, CRC, has more than 25 years of experience supporting individuals with disabilities and their families. She serves as the Director of Assistive Technology and Rural Solutions at Easterseals Iowa, where she oversees programs serving farm families, rural residents, and Veterans across the state. Tracy specializes in group facilitation, assistive technology, and practical problem-solving tools that enhance independence and quality of life. She holds professional certifications as an Assistive Technology Practitioner (ATP) through the Rehabilitation Engineering Society of North America (RESNA) and as a Certified Rehabilitation Counselor (CRC). Tracy earned her master's degree in Rehabilitation Counseling from Minnesota State University and also serves as an Adjunct Faculty member in the Drake University Master's Counseling Program.

Session 4D: CCBHCs in Iowa: Changing Iowa's Landscape for Improved Behavioral Health Care (1.5 CEs)

- i. **Program Overview (Beginner Level)**

Certified Community Behavioral Health Clinics (CCBHCs) are designed to strengthen clinical care by ensuring timely access to comprehensive, coordinated behavioral health services across the lifespan. In Iowa, the CCBHC model has been implemented to support organizations in delivering evidence-based, team-based care while addressing the complex needs of individuals with mental health and substance use disorders. This presentation will briefly review the development of the CCBHC model and then focus on how CCBHC implementation in Iowa has changed day-to-day clinical practice. Topics will include expanded service arrays, same-day access, use of interdisciplinary care teams, care coordination across behavioral health, primary care, and social services, and expectations for evidence-based practices and outcomes



tracking. Real-world examples from Iowa CCBHCs will illustrate how clinics have adapted workflows, documentation, and team roles to meet certification standards while maintaining clinical quality. The session will conclude with practical lessons learned from clinicians working in Iowa CCBHCs, including common implementation challenges, strategies for sustaining clinician engagement, and opportunities to improve client outcomes through integrated, community-based care.

ii. **Learning Objectives**

1. Participants will be able to identify core CCBHC services and how they support clinical practice.
2. Participants will be able to describe how interdisciplinary teams and care coordination function in Iowa CCBHCs.
3. Participants will be able to apply lessons learned from Iowa's CCBHC experience to clinical settings.
4. Participants will be able to identify how CCBHCs can enhance your work with persons served.

iii. **Presenters:**

Lindsay Stack, MA, LMHC, CADC, EMDR-C, serves as the Special Projects Director at Pathways Behavioral Services, where she has been employed for 14 years. In this role, she is responsible for oversight of the CCBHC. Additionally, she is a practicing therapist, specializing in complex trauma and addictions.

Laura Larkin, MS, LMSW, is the Project Director for Iowa's CCBHC Demonstration. She has worked for Iowa HHS in mental/behavioral health policy for 17 years. Before this she worked for ten years as a mental health clinician in school, home, and clinic-based settings, providing individual and family therapy to children, youth, and adults.

Darci Grave, MS, LMHC has been working as a psychotherapist in Northwest Iowa since 2012, experienced in outpatient, residential, and in-home settings working with all ages, families, and groups. She now serves as the Chief Program Officer of Clinical Services overseeing clinicians, case managers, the crisis program, and an ACT team at Plains Area Mental Health Center.



Optional Session

Legislative Update

i. Program Overview (Beginner Level)

This session will highlight legislation and public policy issues related to the current state of Iowa's mental health counseling profession. Attendees will receive an in-depth review of legislation proposed during the 2025 legislative session that is relevant to the profession and participate in a discussion pertaining to future public policy agendas and areas for advocacy action. Audience members will be provided with opportunities throughout the presentation to voice any questions, concerns, and recommendations to presenters.

ii. Learning Objectives

1. Participants will become familiar with and provide valuable input on IMHCA's legislative agenda and advocacy action plan.
2. Participants will review legislation from our bill watch list, understand the process of a bill, and discuss the current status of important legislation so participants can effectively advocate.
3. Participants will learn the value of professional advocacy and identify alternative methods for advocating locally.
4. Participants will be able to assist in mapping out legislative advocacy goals for future sessions and help determine the policy initiatives IMHCA will focus on moving forward.

iii. Presenters:

Allison Levine, Ph.D., NCC, CRC, tLMHC, is an Assistant Professor of counselor education at the University of Iowa. Her research focuses on disability bias, social justice in student assessment, and inclusive counselor education. She is an award-winning educator, published scholar, and active leader in national counseling organizations.

Anna Murphy, LMHC, earned her Bachelor of Arts in Psychology and Studio Arts from the University of Iowa in 2012 and her Master of Science in Art Therapy and Counseling from The College of New Rochelle in 2015. Throughout her career,



Anna has worked with a diverse range of populations, including individuals with co-occurring disorders, children with behavioral challenges, adults in crisis, adolescents involved in the juvenile court system, and families engaged with DHHS. Anna has advanced her clinical training with specialized education in EMDR and DBT and intends to pursue full certification in both modalities. She is the owner and therapist at Healing Connections in Sioux City, where she is dedicated to supporting individuals as they navigate trauma, life transitions, and other environmental stressors. Anna remains passionate about fostering healing, resilience, and growth through a compassionate, client-centered approach.

Emily Piper has worked in the legislative arena for 34 years including 14 years before Congress and 20 years before the Iowa Legislature. Born in Ohio, Emily grew up in Indiana and returned to Ohio to graduate from Miami University (Oxford, Ohio) with degrees in political science and international studies and a minor in economics. She received her master's degree in public administration from Drake University. Emily Piper formed Piper Consulting Services in 2002, bringing her extensive experience in state and federal lobbying and grassroots skills to her clients. Emily worked for the American Meat Institute in Washington, D.C. before moving to Iowa and joining the Iowa Farm Bureau Federation. Since 2002, she has worked as an independent lobbyist representing clients before the Iowa legislature and Congress. Emily's skills in political intuition were honed through her work on a variety of campaigns from the local to presidential level over the course of her career. Throughout her career, she has provided legislative, grassroots and political strategies to non-profit associations and private industry.

Session 5: Keynote

Session 5: Keynote: From Survival to Connection: A Polyvagal Map for Human Resilience (3.0 CEs)

i. Program Overview (Intermediate Level)



In this keynote, participants will explore how Polyvagal Theory reframes stress, safety, and resilience through the lens of the autonomic nervous system. Rather than viewing reactions as pathology, PVT reveals the deeply adaptive patterns that shape how we move through the world. This keynote will illuminate the three core states, the biology of safety, and how neuroception influences behavior and relationships. Attendees will leave with a clearer, more compassionate understanding of human functioning—both in themselves and those they serve.

ii. **Learning Objectives**

1. Participants will be able to recognize the nervous system as a source of innate wisdom and protection.
2. Participants will be able to see how neuroception shapes moments of threat, safety, and connection.
3. Participants will be able to reframe resilience as an inherent, biological capacity we can nurture.

iii. **Presenter:**

Ruby Jo Walker, MSW, LCSW, Author, Polyvagal Institute Course Partner, specializes in the neurobiology of trauma and resilience. She has been working in the field of trauma for 35 years. She works with a wide range of professionals from various disciplines to provide trauma-informed training using the lens of the nervous system. She has facilitated several hundred trainings for individuals and organizations nationally. She is the founder of Post-Traumatic Growth Somatic Therapy, a unique combination of advanced somatic therapy practices rooted in neurobiology, resilience, trauma healing, and attachment theory, using applied Polyvagal Theory. She contributed a chapter, titled Neurobiology of Resilience, in a book published by Norton Press in 2025. She has completed her own book, titled Applied Polyvagal Theory for Post-Traumatic Growth and Resilience: A Clinician's Guide, to be published in 2026.

Session 6 Options:

Session 6A & 7A: PVT in Practice: Applied Skills for Clinicians (3.0 CEs)

i. Program Overview (Intermediate Level)

This hands-on session transforms keynote concepts into practical clinical tools. Clinicians will learn PVT-informed techniques to help clients downregulate, shift state, and access greater regulation. Through exercises, practices, and demos,



participants will deepen their ability to support clients by working directly with physiology—not just symptoms.

ii. Learning Objectives

1. Participants will be able to learn PVT-informed techniques that help clients downregulate their nervous systems and move toward regulation.
2. Participants will be able to identify key physiological cues that signal shifts in client state and guide intervention choices.
3. Participants will be able to apply exercises and practices that support state change by working directly with autonomic physiology rather than symptom management.

iii. Presenter:

Ruby Jo Walker, MSW, LCSW, Author, Polyvagal Institute Course Partner, specializes in the neurobiology of trauma and resilience. She has been working in the field of trauma for 35 years. She works with a wide range of professionals from various disciplines to provide trauma-informed training using the lens of the nervous system. She has facilitated several hundred training courses for individuals and organizations nationally. She is the founder of Post-Traumatic Growth Somatic Therapy, a unique combination of advanced somatic therapy practices rooted in neurobiology, resilience, trauma healing, and attachment theory, using applied Polyvagal Theory. She contributed a chapter, titled *Neurobiology of Resilience*, in a book published by Norton Press in 2025. She has completed her own book, titled *Applied Polyvagal Theory for Post-Traumatic Growth and Resilience: A Clinician's Guide*, to be published in 2026.

Session 6B & 7B: On People-Making: Exploring Focal Dimension in Long-Term Therapy (3.0 CEs)

i. Program Overview (Intermediate Level)

Short-term treatment requires focused attention, promptly addressing the initial complaint presented by patients. Long-term treatment allows for the extravagance of people-making or attending to several important dimensions that support the growth and maturity of the client and the therapist. Currently, there is broad-spread consideration to offer compassionate attunement and procedures towards symptom reduction, emotional regulation, and trauma-specific support for clients. This workshop is an exploration about what helps people know themselves, emphasizing emotional experience, personal communication, and self-reflective capacities within the treatment.



ii. **Learning Objectives**

1. Participants will review current treatment practices analyzing their strengths and shortcomings.
2. Participants will identify events in the therapist's personal life that have significantly contributed to growth and change.
3. Participants will evaluate current treatment philosophy and method and design strategies for creating richer emotional experiences, depthful and challenging conversations, and self-reflection opportunities.

iii. **Presenter:**

Dr. Carlos Canales, Psy.D., CGP, AGPA-F, SEP™, is a bilingual/bicultural licensed Clinical Psychologist in full-time private practice in West Des Moines. He specializes in working with affect, the body, and relational psychodynamics. He leads five training groups for therapists, and two supervision/consultation groups. He is also a regular presenter emphasizing attachment and somatic therapy.

Session 6C: When Growth Feels like Grief: Understanding Anticipatory Loss and Identity Transformation in Graduate Students and Early-Career Clinicians (1.5 CEs)

i. **Program Overview (Beginner Level)**

Anticipatory grief is most often understood through the lens of preparing for the death of a loved one (Reese, 1974). Yet, emerging research expands the concept to include emotional responses to all types of expected change or loss, including those tied to identity, community, and life transitions (Maturen, 2024). This presentation introduces anticipatory grief as a critical but often overlooked experience within the developmental journey of graduate counseling students, counselors in training, and newly licensed counselors who have recently exited their graduate programs. These three groups share a common transition, including the process of becoming, entering, or solidifying their identity as a mental health professional. These transformations involve letting go of previous identities, roles, relationships, and imagined futures. Graduate students and new clinicians often encounter forms of anticipatory loss that do not resemble traditional grief but are impactful and challenging (Maturen, 2024). These may include grieving the loss of prior roles (such as a student leader, athlete, caregiver, etc.), shifting relationships with peers or faculty, or the fading predictability of academic structures once clinical practice begins. Students



nearing graduation or those entering the workforce may grieve the imminent loss of their cohort community, the guidance of supervision, or the sense of certainty provided by structured training environments. Early-career clinicians navigate additional anticipatory grief as they adjust to professional expectations and the emotional weight of transitioning into full responsibility for clients' care.

This session utilizes established grief theories, ambiguous loss and non-death loss frameworks, and widely used developmental and identity theories relevant to counselor formation. Erikson's psychosocial stages of development highlight the tension of identity formation and role confusion, Kegan's constructive-development theory discusses the liminal period between the old and emerging selves, and Super's career development theory helps situate anticipatory grief within the broader context of professional identity construction. Throughout this presentation, anticipatory grief is reframed not as something to be cured, but as a natural feature of developmental progression.

Participants will learn more about how identity transformation during graduate education, supervision, licensure attainment, and early clinical practice may create a sense of living in the "no longer" and the "not yet," which is a liminal psychological space where individuals have outgrown previous identities but have not yet fully integrated new professional ones. This "in-between" period can bring excitement, pride, fear, sadness, and uncertainty, often at the same time. When left unresolved, anticipatory grief and ambiguous loss can contribute to burnout, self-doubt, relational isolation, and diminished clarity in professional identity (Boss, 2010). In addition to theoretical underpinnings, participants will also explore strategies to support those experiencing anticipatory grief. These include reflective practices that help individuals articulate identity shifts, relational and supervisory strategies that encourage processing of grief-related emotions and meaning-making approaches that assist students and new clinicians in integrating past and emerging identities.

ii. **Learning Objectives**

1. Participants will be able to define anticipatory grief apart from death-related contexts and explain its relevance to identity, relational, and role transitions experienced by graduate students, counseling clinicians in training, and early clinicians exiting graduate programs.
2. Participants will be able to connect anticipatory grief and ambiguous loss experiences, such as changing identities, sense of belonging, and



professional expectations, to developmental and identity theories relevant to counselor formation.

3. Participants will be able to apply reflective, relational, and supervisory strategies that support graduate students, current trainees, and newly graduated counseling clinicians as they navigate anticipatory grief during their academic completion, licensure processes, and early professional identity formation.

iii. Presenters:

Rachel Valentine, M.Ed., M.A., tLMHC, CCC, NCC is a doctoral student in Counselor Education at the University of Iowa and is a Temporary Licensed Mental Health Counselor. She specializes in career development, sports counseling, and holistic wellness. Her research explores financial wellness, identity, and mental health among diverse student populations, integrating advocacy and inclusive practices.

Allison Levine, Ph.D., NCC, CRC, tLMHC, is an Assistant Professor of counselor education at the University of Iowa. Her research focuses on disability bias, social justice in student assessment, and inclusive counselor education. She is an award-winning educator, published scholar, and active leader in national counseling organizations.

Session 6D: From Referral to Relationship: Multicultural & Social-Justice Collaboration Between Schools and Community Mental Health Providers (1.5 CEs)

i. Program Overview (Intermediate Level)

Licensed mental health counselors frequently serve children and adolescents whose care intersects with schools, families, and multiple community systems. However, despite shared goals, collaboration between schools and community mental health providers often breaks down due to role confusion, systemic barriers, cultural misunderstandings, and inequitable access to services. These challenges disproportionately affect students and families from historically marginalized racial, cultural, linguistic, and socioeconomic backgrounds. This interactive session examines school–community collaboration through a multicultural and social-justice lens, emphasizing how licensed mental health counselors and school counselors can move beyond referral-based relationships toward intentional, ethical, and equity-centered partnerships that improve student mental health outcomes. Grounded in professional practice



and informed by multicultural counseling competencies and social justice counseling frameworks, the presentation explores how systemic inequities such as transportation barriers, insurance limitations, stigma, language access, and fragmented service delivery impact treatment continuity and engagement for diverse student populations.

Participants will examine the school counselor's role as a systems navigator and advocate, and how LMHCs can align their clinical work with educational environments while maintaining ethical boundaries and scope of practice. Through case-based discussion and guided reflection, participants will analyze real-world scenarios involving culturally complex student needs, cross-system communication challenges, and ethical considerations in information sharing, consent, and family engagement. Emphasis will be placed on culturally responsive collaboration practices that honor family voice, recognize community strengths, and reduce institutional bias within service delivery systems. Participants will also be introduced to a practical collaboration framework that supports multidisciplinary coordination among schools, licensed mental health providers, social services, and community-based organizations. This framework highlights strategies for building trust across systems, clarifying professional roles, and creating referral pathways that are responsive to the lived realities of diverse families. The session is designed to be highly interactive and outcome-focused.

Attendees will engage in brief activities to map community mental health assets, identify equity gaps within their current practice, and develop at least one actionable strategy to enhance collaboration with school-based professionals in a culturally responsive manner. This program aligns with NBCC continuing education standards by integrating ethical considerations, multicultural competence, and applied clinical collaboration strategies relevant to licensed mental health counselors working with children, adolescents, and families.

ii. **Learning Objectives**

1. Participants will be able to identify systemic and cultural barriers that limit equitable access to school-connected mental health services.
2. Participants will be able to describe the complementary roles of school counselors and licensed mental health counselors in supporting student mental health.
3. Participants will be able to apply multicultural and social-justice principles to school–community collaboration.



4. Participants will be able to implement at least one ethical, culturally responsive collaboration strategy to enhance continuity of care for diverse student populations.
- iii. **Presenter:**
Nakia Avery, Ph.D., is an education professional and licensed school counselor holding PhD-level licensure in North Carolina, with additional licensure in Minnesota and Texas. Her professional work centers on culturally responsive, equity-focused approaches to student mental health and school–community collaboration. She has partnered extensively with licensed mental health providers and community agencies to address systemic barriers impacting diverse students and families. Nakia has presented at several college and university conferences across the state, sharing applied strategies related to social justice, ethical collaboration, and multidisciplinary student support. Her interests emphasize advocacy, systems alignment, and culturally informed practice.

Session 7 Options:

Session 7A: PVT in Practice: Applied Skills for Clinicians continued (see above)

Session 7B: On People-Making: Exploring Focal Dimension in Long-Term Therapy continued (see above)

Session 7C: Participatory Ethics for Working with the LGBTQ+ Community During Hateful Times (1.5 CEs in Ethics)

- i. **Program Overview (Intermediate Level)**
Divisive and harmful rhetoric and policies have been prevalent throughout Iowa news, media, and lawmaking. The harm done to LGBTQ+ youth is as yet incalculable, however data show that LGBTQ+ young people are negatively impacted by recent politics, and that anti-transgender laws appear to be attributable to suicide attempts among trans and nonbinary people (The Trevor Project, 2025). Given the harm of policies, rhetoric, and discrimination experienced by members of the LGBTQ+ community as a result of these policies, counselors must focus on ways to incorporate client voice and autonomy into all aspects of their practice, including ethical decision making (Williams et al., 2022). Traditionally, ethical decision-making models center on the practitioner as they move through a decision-making process. Participatory ethical decision



making provides an opportunity for a powerful collaboration between client and counselor (Tarvydas et al., 2015). A participatory ethical decision-making approach places the client alongside the counselor during the decision-making process, creating an experience in which a client can experience validation, autonomy, and respect. This approach allows counselors to better remain client-centered, to integrate ethical values, and to practice social justice with a client. The participatory ethics model includes four phases: input, process, behavioral output and attitudinal output. Each phase is aligned with a conceptual element; input and ethical knowledge, process and therapeutic relationship, behavioral output and client involvement, and attitudinal output and client empowerment. Using this inclusive and collaborative approach during such turbulent and harmful times is an additional way to incorporate safety, allyship, social justice, and validation into the counseling experience for marginalized and vulnerable clients. This presentation will incorporate an introduction to a model of participatory ethical decision making, as well as more traditional ethical decision-making models. Participants will discuss a case study to represent the utility of participatory decision-making, and the ways counselors can incorporate this into their practice. In addition, the presenters will discuss the importance of and methods for supporting and advocating alongside LGBTQ+ clients and colleagues.

ii. **Learning Objectives**

1. Participants will be able to understand the impact of the political climate on LGBTQ+ clients' wellbeing.
2. Participants will be able to compare a participatory ethical decision-making model with traditional ethical decision-making models.
3. Participants will be able to assess the ways in which a participatory ethical decision-making approach may improve wellbeing and autonomy among LGBTQ+ clients during this time.

iii. **Presenters:**

Allison Levine, Ph.D., NCC, CRC, tLMHC, is an Assistant Professor of counselor education at the University of Iowa. Her research focuses on disability bias, social justice in student assessment, and inclusive counselor education. She is an award-winning educator, published scholar, and active leader in national counseling organizations.

Rachel Valentine, M.Ed., M.A., tLMHC, CCC, NCC is a doctoral student in Counselor Education at the University of Iowa and is a Temporary Licensed



Mental Health Counselor. She specializes in career development, sports counseling, and holistic wellness. Her research explores financial wellness, identity, and mental health among diverse student populations, integrating advocacy and inclusive practices.

Session 7D: Improving Wellness and Professional Quality of Life for Counselors (1.5 CEs)

i. Program Overview (Beginner Level)

Counselors spend most of their work time making sure that their clients, and sometimes their coworkers, are cared for and doing well. However, what does wellness mean for the counselor themselves? The American Counseling Association Code of Ethics (2014) identifies self-care as a professional responsibility for mental health counselors but what does that really mean? This presentation will present research regarding Myers & Sweeney's Indivisible Self Model of Wellness and the Professional Quality of Life scale that is applicable to counselors working in a variety of settings. Counselors from private practice and community mental health will learn how to understand the contexts that influence their own wellness and create their own wellness plan to improve their professional quality of life.

ii. Learning Objectives

1. Participants will be able to name and describe the five factors of wellness.
2. Participants will identify two active ways to improve their own wellness and professional quality of life.
3. Participants will demonstrate understanding of the contexts which influence wellness and quality of life by identifying the two that are most impactful in their day-to-day.

iii. Presenters:

Bethany Zeitz, Doctoral Candidate, MS, LMHC is a licensed mental health counselor. She is currently a doctoral candidate in Counselor Education and Supervision at the University of the Columbians and focusing her dissertation on supervision and wellness. She works at Pink Couch Wellness in Ankeny. She also serves as the Treasurer for IMHCA.

Tiffany Sumrall, Doctoral Candidate, MS, LMHC is a licensed mental health therapist at Pink Couch Wellness in Ankeny. She is also a doctoral candidate in Industrial-Organizational Psychology, focusing her research on burnout and



professional well-being among community mental health therapists. She is passionate about creating healthier, more supportive workplaces.