

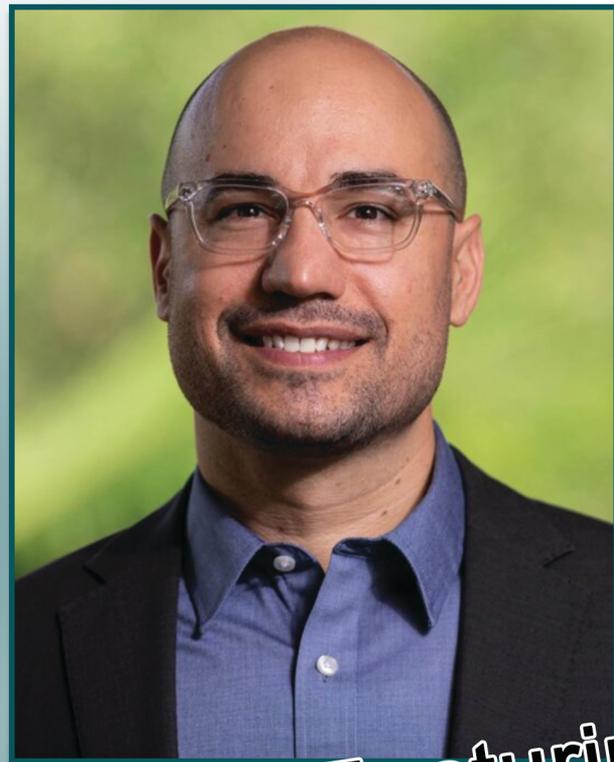
Idaho Society of Individual Psychology

Annual Conference Program

February 24th & 25th, 2023

Presents:

“Adlerian Counseling: Mondern Application”



Featuring:
Jon Sperry

IDAHO
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ISIP
INDIVIDUAL
PSYCHOLOGY

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WELCOME TO THE ISIP ANNUAL CONFERENCE

FEBRUARY 24th & 25th, 2023

Welcome to ISIP Membership. Membership is included in your registration.

Please read the following announcements!

1. As a courtesy to the presenter and your neighbors, please turn off your cell phone.
2. ISIP bylaws provide for the election of ISIP board members for the year 2023-2024 on Saturday of this Annual Conference. The ballot will be virtual using the qrcode provided or the link on the conference landing page. Paper copies will be available at the registration desk if you prefer.
3. The Riverside Grill is offering lunch buffets both days of the conference for a total of \$15. This includes a beverage and gratuity. Friday will be a Taco Bar and Saturday is a Pasta Bar.
4. We ask that you wear your name badges to all sessions. It will help you become acquainted with new folks as well as let us know that only registered participants are here.
5. CE certificates will be available upon conclusion of each day and the Friday evening session. Look for the alphabetical section with the first few initials of your last name. There will be assistance in getting them distributed.
6. If you are seeking CE for NBCC and Social Worker hours it is important that you sign in at the beginning of each session. We are required to report attendance verification to CE providers upon request. ISIP is an Approved Continuing Education Provider (ACEP) for the National Board for Certified Counselors (NBCC) and an Authorized Provider for Social Workers.
7. When you are ready to leave the conference, please complete the Conference Evaluation form by scanning the QR Code provided in your packet, paper copies are available at the registration desk. Your board really wants to know how you feel about your experience to guide them in responding to your interests for future conferences.
8. DVDs of past conferences are available in the Aspen Room. You may also order a DVD for later delivery of this year's conference.
9. Sponsor recognition activity. Prizes will be drawn. See Information below.

SPONSOR VISITATION ACTIVITY

COMPLETE THE YELLOW SPONSOR VISITATION CARD IN YOUR PACKET BY HAVING THE SPONSORS AND EXHIBITORS SIGN, INITIAL OR STAMP THEIR BOX ON THE CARD. DROP THE COMPLETED SPONSOR VISITATION CARD IN THE COLLECTION BOX IN THE ASPEN ROOM ON THE SPONSOR VISITATION TABLE.

BE SURE YOU HAVE PRINTED YOUR NAME ON THE BACK OF THE CARD SO WE CAN DRAW FOR PRIZES.



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ISIP Position on Ethics

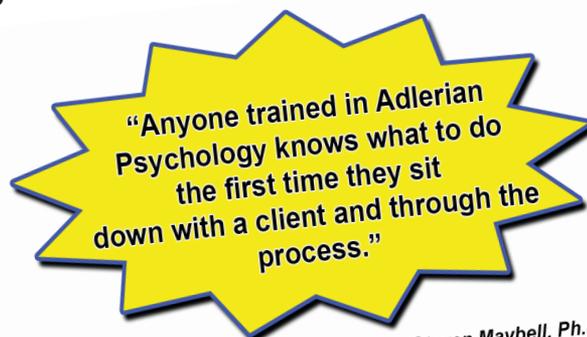
Adler believed that teaching his psychology to a wide audience would increase the mental health of the general population, and that is a good thing. However, Adler and ISIP recognize that knowledge should not be confused with competence. Each person attending the ISIP workshops and the conference needs to be reminded that the practice of psychotherapy in any profession is governed by the ethics and standards established by the profession. It is imperative that each person attending is required to apply the Adlerian tools within the scope of practice established by the person's profession. ISIP is concerned about how the tools are applied. The utility of Adlerian Psychology makes it tempting for trainees to use them even if that trainee's profession would not normally recognize the person's competence.

ISIP is aware of the need to respect the professional standards and practice limitations of all mental health providers. Because ISIP training is not specifically designed to apply to any profession, it runs the risk of being seen as an alternative to developing the competencies and standards of the professions utilizing it. Rightly or wrongly, that can easily be viewed as threatening to the goals and purposes of various professions.

Because of the concerns stated above, this statement, and a statement similar to the one below will be included in all training to alert attendees and prospective attendees of the need to be conscious of and guided by each attendees ethics and state laws.

“It is the individual responsibility of each attendee to be knowledgeable of the particular ethics and state laws of their profession with respect to areas of authorized practice, as well as those areas of practice that are beyond the scope of the attendees credentials. ISIP is not responsible for any misunderstanding, or misapplication of the training received.”

As far as the ethics training provided at our annual conference, ISIP does not believe the ethics presentations should be profession-specific since most of us have to be sensitive toward two or three different Codes anyway. The differences are fairly small and usually apply to a limited number of issues or work settings. Since ISIP is committed to promoting Adlerian theory and practice, it only makes sense for our conference to offer training that is Independent from any specific profession. Our goal is to promote ethical practice, regardless of one's profession or licensing. Therefore, it only requires that we present material that is more universally applicable.



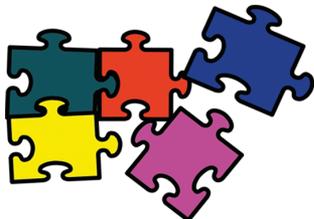
Wes Wingett, Ph.D. & Steven Maybell, Ph.D.

**COMING
SOON**

2023 Spring Workshops!

**March 31st-April 1st
Idaho Falls, Idaho**

**ADLERIAN
PSYCHOTHERAPY**



**April 28th-29th
Boise, Idaho**

**ADLERIAN THEORY
OF PERSONALITY
DEVELOPMENT
AND FAMILY
FUNCTIONING**



**Summer 2023
Coeur d'Alene, Idaho**

**ADLERIAN
FAMILY THERAPY**

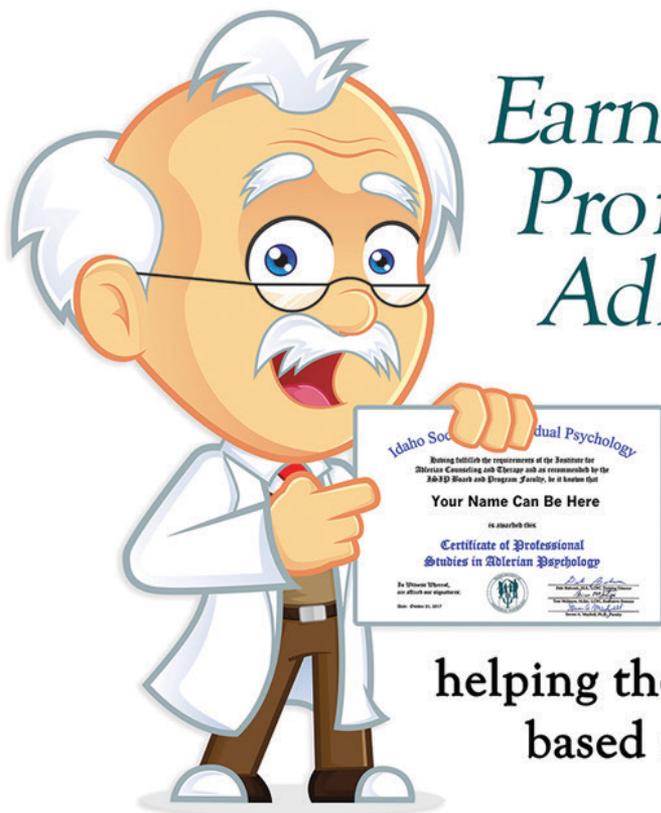


**April 14th & 15th
Boise, Idaho**

**2023 ADVANCED
WORKSHOP**



Save the date to attend the Series workshops! We are offering our Series Workshops this spring in Idaho Falls and Boise. All of our workshops will be available to attend online. Workshop 1 “Adlerian theory of personality development and family functioning” and Workshop 2 “Adlerian Psychotherapy” will be offered online or in-person and will be presented by Brad Lambson. Workshop 3 “Adlerian Family Therapy” will be offered online or in-person in Coeur d’Alene this summer, we are working on the dates and the presenter. The spring 2023 advanced workshop will be presented by Raissa Miller discussing Translations of Neuroscience in Counseling and Psychotherapy.



Earn Your Certificate of Professional Studies in Adlerian Psychology!

ISIP offers workshops in all three regions of Idaho twice per year. We strive to assist mental health professionals by helping them understand human behavior based on the teaching of Alfred Adler.

FRIDAY, FEBRUARY 24TH

7:30 a.m.	Online Attendees: Zoom Room Opens In-Person: Registration & Continental Breakfast
8:30 a.m.	Session 1: Adlerian counseling in 2023- foundations and core concepts
10:00 a.m.	BREAK
10:15 a.m.	Session 2: Lifestyle Assessment- implications for in-person and telehealth
11:45 a.m.	LUNCH BREAK
1:15 p.m.	Session 3: Adlerian case conceptualization- case study and application
2:15 p.m.	BREAK
2:30 p.m.	Session 4: Using Adlerian counseling with groups and communities- social interest and rhythm activities
3:30 p.m.	BREAK
3:45 p.m.	ETHICS: "The Ethical Me '23" Scott Rasmussen <i>Part 1</i>
4:45 p.m.	BREAK
Conclusion of Day 1 for those that do not want all 3 hours of Ethics	
5:00 p.m. - 7:00 p.m.	ETHICS: "The Ethical Me '23" Scott Rasmussen <i>Part 2</i>



Keep up to date!

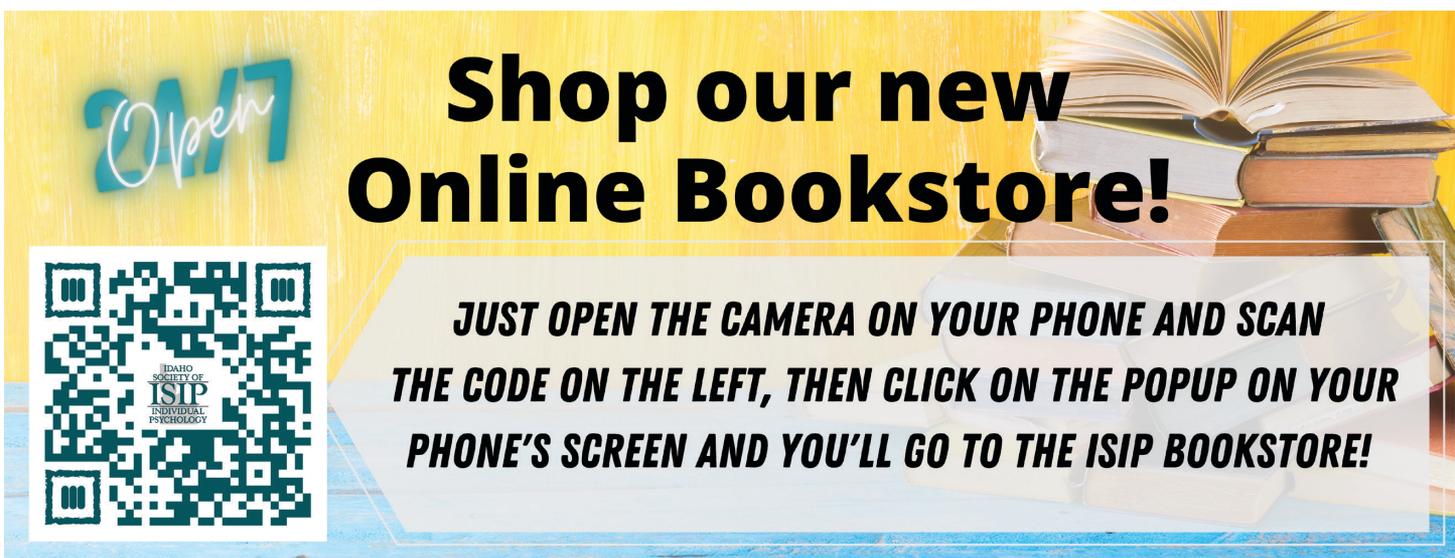
Follow The ISIP Facebook Group!



SATURDAY, FEBRUARY 25TH

7:30 a.m.	Online Attendees: Zoom Room Opens In-Person: Registration & Continental Breakfast
8:30 a.m.	Session 5: Teleological (Adlerian) interpretation of disorders included in the DSM-5-TR
10:00 a.m.	BREAK
10:15 a.m.	Session 6: Trauma-informed Adlerian counseling- theory and practice
11:45 a.m.	LUNCH BREAK
1:15 p.m.	Session 7: Modern Adlerian counseling-demonstration and application practice
2:45 p.m.	BREAK
3:00 p.m.	Session 8: Integration of Adlerian counseling and other theories including feedback-informed treatment, culturally responsive practice, and EMDR integration
4:30 p.m.	Conclude Conference

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PHONE'S SCREEN AND YOU'LL GO TO THE ISIP BOOKSTORE!**

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ISIP
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“Adlerian Counseling: Modern Application”



Jon Sperry, ***Ph.D., LMHC, LCSW, NCC***

Jon Sperry, Ph.D., LMHC, LCSW, NCC is a core faculty member in the Clinical Mental Health Counseling program at Lynn University. He is a board certified licensed mental health counselor and a licensed clinical social worker in the state of Florida and has been a staff therapist at the Counseling and Psychological Services at Florida Atlantic University (FAU) since 2010. Dr. Sperry is currently the co-editor in chief of the Journal of Individual Psychology. Dr. Sperry has co-authored seven textbooks and various book chapters and professional articles.

In addition to his clinical experience and publications, he has given workshops and lectures throughout the United States and in 23 countries around the globe.

How to find Jon:

Website: www.drjonsperry.com

Jon's Books: <https://drjonsperry.com/books>

The learning objectives for his presentation are:

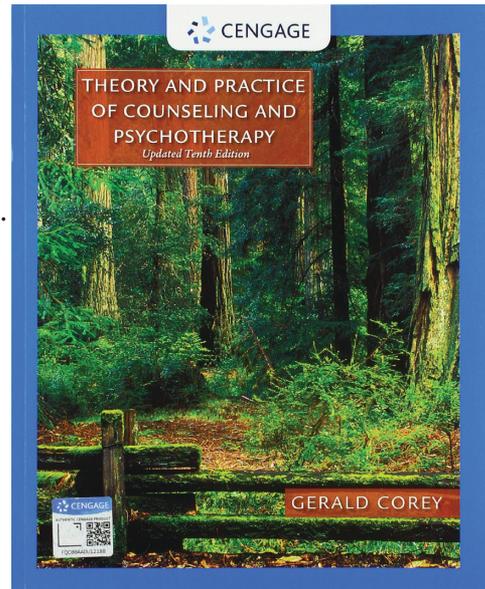
1. Explain and apply Lifestyle Assessment and Adlerian case conceptualization.
2. Understand methods to foster social interest and wellness among groups and communities.
3. Understand a Teleological (Adlerian) interpretation of disorders included in the DSM-5-TR and learn 15 updates from the recently published DSM-5-TR.
4. Explain and apply Trauma-informed principles in an Adlerian psychology framework.
5. Understand modern Adlerian counseling interventions and methods for integrating other therapeutic models.



PERSONAL APPLICATION: THE LIFESTYLE ASSESSMENT

The lifestyle assessment is typically done at the initial phase of therapy as a way to obtain information about the client's family constellation, early recollections, dreams, and strengths as a person. This information is then summarized and interpreted, especially in light of the client's faulty assumptions about life (or "basic mistakes"). From the results of this assessment procedure, counselors make tentative interpretations about the client's lifestyle.

Although there are a number of formats for the lifestyle questionnaire, counselors may develop their own variation by focusing on information deemed most valuable for exploration in therapy. What follows is an example of a lifestyle questionnaire that has been modified and adapted from various sources but especially from Mosak and Shulman's Life Style Inventory (1988; Accelerated Development, Muncie; IN). To give you an experiential sense of the process of thinking and responding to this early life-history material, complete the following questionnaire as it applies to you. As much as possible, try to give your initial responses, without worrying about what you can and cannot remember or about any "correct" responses. I strongly encourage you to fill in the blanks and to make brief summaries after each section.



Family Constellation: Birth Order and Sibling Description

1. List the siblings from oldest to youngest. Give a brief description of each (including yourself). What most stands out for each sibling?
2. Do a rating of each of the siblings, from the highest to the lowest, on each of the following personality dimensions. Include your own position in relationship to your siblings.

Most To Least

Intelligent _____
Achievement-oriented _____
Hardworking _____
Pleasing _____
Assertive _____
Charming _____
Conforming _____
Methodical _____
Athletic _____
Rebellious _____
Spoiled _____
Critical of Others _____
Bossy _____

Most to Least

Feminine _____
Masculine _____
Easygoing _____
Daring _____
Responsible _____
Idealistic _____
Materialistic _____
Fun-loving _____
Demanding _____
Critical of Self _____
Withdrawn _____
Sensitive _____

3. Which sibling is the most different from you, and how? _____

Reference: Corey, G. (2016). Theory and practice of counseling and psychotherapy (10th ed). Brooks Cole.

-
-
4. Which is most like you and how? _____
 5. Which played together? _____
 6. Which fought each other? _____
 7. Who took care of -Whom _____
 8. Were there any unusual achievements by the siblings? _____
 9. Any accidents or sickness? _____
 10. What kind of child were you? _____
 11. What was school like for you? _____
 12. What childhood fears did you have? _____
 13. What were your childhood ambitions? _____
 14. What was your role in your peer group? _____
 15. Were there any significant events in your physical and sexual development? _____
 16. Any highlights in your social development? _____
-
17. What were the most important values in your family? _____
 18. What stands out the most for you about your family life? _____

Family Constellation: Parental figures and Relationships

- | | |
|---|--|
| 1. Father's current age _____ | Mother's current age _____ |
| 2. His occupation _____ | Her occupation _____ |
| 3. What kind of person is he? _____ | What kind of person is she? _____ |
| _____ | _____ |
| 4. His ambitions for the children _____ | Her ambitions for the children _____ |
| _____ | _____ |
| 5. Your childhood view of your father _____ | Your childhood view of your mother _____ |
| _____ | _____ |
| 6. His favorite child, and why? _____ | Her favorite child and why? _____ |
| _____ | _____ |
| 7. Relationship to children _____ | Relationship to children _____ |
| _____ | _____ |

Reference: Corey, G. (2016). Theory and practice of counseling and psychotherapy (10th ed). Brooks Cole.

8. Sibling most like father. In what ways? _____ Sibling most like mother. In what ways? _____

9. Describe your parents' relationship with each other. _____

10. In general, how did each of the siblings view and react to your parents? _____

11. In general, what was your parents' relationship to the children? _____

12. Besides your mother and father, were there any other significant adults in your life? Who were they? How did they affect you? _____

Early Recollections and Dreams

1. What is your earliest single and specific memory? _____
2. What are some other early recollections? Be as detailed as possible. _____

3. What feelings are associated with any of these early memories? _____

4. Can you recall any childhood dreams? _____

5. Do you have any recurring dreams? _____

Lifestyle Summary

1. Give a summary of your family constellation. (What stands out most about your role in your family? Are there any themes in your family history? _____

2. Summarize your early recollections. (Are there any themes running through your early memories? Do you see any meaning in your early recollections? _____

Reference: Corey, G. (2016). Theory and practice of counseling and psychotherapy (10th ed). Brooks Cole.

3. List your mistaken self-defeating perceptions. (What do you see as your “basic mistakes”? _____

4. Summarize what you consider to be your strengths as a person. (What are your assets?) _____

Now that you have finished filling out this lifestyle questionnaire, answer the following questions:

- How much help is this questionnaire in getting you focused on what you might want from a therapeutic relationship?
- Assuming you will be a client in Adlerian therapy, based on the questionnaire, what theme(s) do you most want to address?
- Do you see connections between your past and the person you are today? What about any continuity from you past and present to your strivings toward the future?
- Do you see any patterns in your life? Are there any themes running through from childhood to present?

Consider bringing the results of your lifestyle summary to class. Form small groups and exchange with others what you learned from taking this self-assessment questionnaire.

Reference: Corey, G. (2016). Theory and practice of counseling and psychotherapy (10th ed). Brooks Cole.

Case Conceptualization-Informed Assessment

The assessment content provided in this section offers a list of case conceptualization-informed assessment questions.

9 Behavioral Markers	Basic Screening Questions	Detailed Commentary
<i>Presenting problem and precipitants</i>	<p>“What problems brought you here?”</p> <p>“In what ways have your current problems caused problems in your life?”</p> <p>“Why are you seeking help now, and not two months ago?”</p> <p>“Have you recently experienced any major stressor(s) or changes in your life?”</p>	Clarify problem list [<i>presentation</i>] and recent or ongoing triggers [<i>precipitants</i>].
<i>Maladaptive or adaptive pattern- Generic Lifestyle assessment questions</i>	<p>“How would you describe yourself as a person?”</p> <p>“Do you have a way of relating to other people that causes problems in your relationships?”</p> <p>“What are some of your growing edges?”</p>	Clarify pattern themes and goal orientation.
<i>Predisposition</i>	See Adlerian Lifestyle assessment questions for this section	Elicit their story and hypothesize an understanding of it through a theoretical lens [<i>predisposition</i>].
<i>Perpetuants</i>	“What makes your problem/symptoms worse?”	Search for risk factors and <i>perpetuants</i> , which can be environmental or psychological.
<i>Cultural Factors: Cultural identity, acculturation level and acculturative or cultural stress, explanatory model</i>	<p>“What is your ethnic background?”</p> <p>“What cultural group(s) do you identify with?”</p> <p>“What generation are you?”</p> <p>“What language do you prefer to use?”</p> <p>“Who do you prefer to engage with in social activities?”</p>	Ethnic identity, race, age, gender and sexual orientation, religion, migration and country of origin, socioeconomic status, level of <i>acculturation</i> , language, dietary influences, and education.
	“How would you explain the reasons you’re having these symptoms (problems)?”	Clarify client’s <i>explanatory model</i> , setting the stage for negotiating a mutually agreeable case conceptualization.

<i>Protective Factors and Strengths</i>	<p>“What is going well in your life?”</p> <p>“What are your strengths?”</p> <p>“What are you passionate about?”</p> <p>“Who can you contact when you needed emotional support?”</p>	<p>Listen for factors that influence positive outcomes in the client’s life. Incorporate these factors into the therapy process.</p>
	<p>“How have you tried deal with this issue recently and in the past?”</p>	<p>Probe client’s own efforts to deal with the, any past efforts, and successes in making changes.</p>
<i>Plan-Treatment</i>	<p>“What would you like to get out of our sessions?”</p> <p>“What are realistic goals that you would like to see happen as a result of our sessions?”</p>	<p>Elicit therapy goals.</p>
	<p>“How are you presenting problems best treated? What do you see as your role in seeing improvements happen in this process? Therapist’s role?”</p>	<p>Identify expectations for treatment and if client is motivated to make changes.</p>
	<p>“When do you expect things will get better for you?”</p> <p>“On a scale of 1-10, how ready are you to work on your identified goal?”</p>	<p>Specify level of readiness for change. Tailor treatment according to the client’s stage of change and treatment expectations.</p>
<i>Predictive Factors</i>	<p>“What challenges or issues might prevent you from achieving your therapy goals?”</p>	<p>Specify internal and external obstacles and challenges and determine mutually agreed upon strategies to mitigate or overcome those obstacles.</p>

Sperry, L., & Sperry, J. (2021). *The 15-minute case conceptualization*. Oxford University Press.



Full-Scale Case Conceptualization Worksheet

Instructions: Please write a phrase or sentence for all of the *Full Case Conceptualization Statement Prompts*. Then use these “prompts” to guide your writing of *Full-Scale Case Conceptualization Statement* on the lines provided.

1. Identify/write the Presentation and Precipitant and specify the link between them.

Presentation: _____

Precipitant: _____

2. Identify the client’s basic movement and purpose, and then write a brief & concise Maladaptive Pattern

Pattern: _____

3. Identify a Predisposition statement which effectively explains the origins of the maladaptive pattern and presentation in terms of biopsychosocial factors. Then, indicate the Perpetuants (factors which maintain the maladaptive pattern and presentation).

Biological _____

Psychological I am _____

The world is _____

Others are _____

Therefore _____

Family constellation _____

Goals/striving _____

Social current _____

past _____

Perpetuants: _____

4. Identify and write the cultural formulation, which includes cultural identity, acculturative stress & cultural stress, explanatory model, whether cultural or personality factors dominate (Culture vs. Personality), and if culturally sensitive treatments are indicated.

Cultural Identity _____

Cultural Stress _____

Acculturative Stress _____

Explanatory Model _____

Culture vs. Personality _____

Culturally Sensitive Treatment _____

5. Identify Strengths & Protective Factors:

6. Identify/write the Plan: which includes Treatment Goals: first order & second order, and the Treatment Interventions which are likely to achieve these goals.

Treatment Goals

1st order goals: _____

2nd order goals: _____

7. Treatment interventions

Culturally sensitive Interventions

8. Identify Treatment Obstacles & Challenges.

Presenting issues/symptoms	Goals	Interventions

Sperry, L., & Sperry, J. (2021). *The 15-minute case conceptualization*. Oxford University Press.

Case Conceptualization Worksheet

Client initials:

Date:

Clinician name:

Presentation:

Precipitant:

Pattern:

Perpetuants:

Predisposition:

Family Constellation:

Lifestyle convictions:

Life tasks:

Goals/striving:

Cultural factors: acculturative stress/cultural stress/explanatory model:

Culture vs. Personality:

| Stage of Change:

Protective Factors & Strengths:

Treatment Goals:

1ST order:

2nd order:

Treatment Interventions:

Outcome Rating Scale (ORS)

Name _____ Age (Yrs.): ____ Sex: M / F
Session # ____ Date: _____
Who is filling out this form? Please check one: Self _____ Other _____
If other, what is your relationship to this person? _____

Looking back over the last week, including today, help us understand how you have been feeling by rating how well you have been doing in the following areas of your life, where marks to the left represent low levels and marks to the right indicate high levels. *If you are filling out this form for another person, please fill out according to how you think he or she is doing.*

Individually
(Personal well-being)

I-----I

Interpersonally
(Family, close relationships)

I-----I

Socially
(Work, school, friendships)

I-----I

Overall
(General sense of well-being)

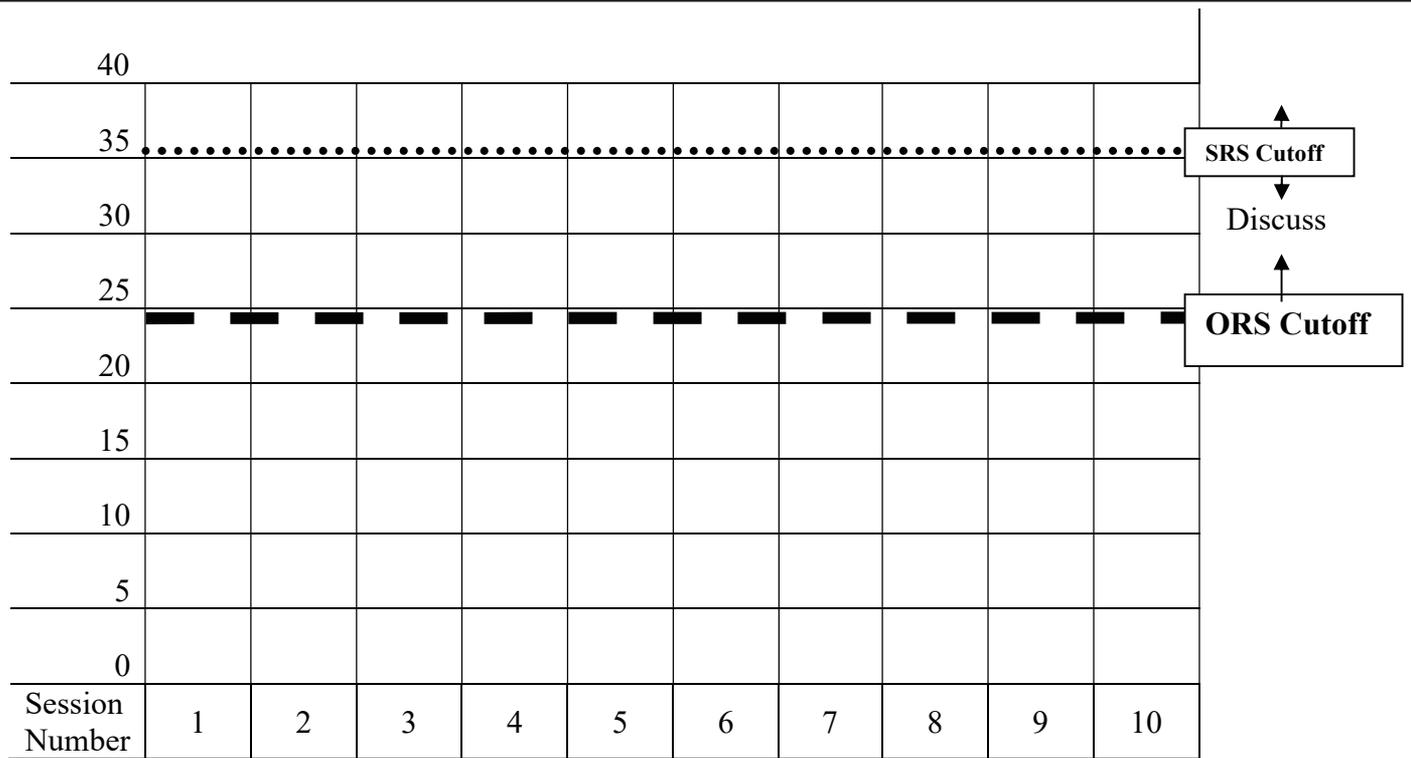
I-----I

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Session Rating Scale (SRS V.3.0)

Name _____	Age (Yrs.): _____
ID# _____	Sex: M / F
Session # _____	Date: _____

Please rate today's session by placing a mark on the line nearest to the description that best fits your experience.

Relationship

I did not feel heard,
understood, and
respected.

I-----I

I felt heard,
understood, and
respected.

Goals and Topics

We did *not* work on or
talk about what I
wanted to work on and
talk about.

I-----I

We worked on and
talked about what I
wanted to work on and
talk about.

Approach or Method

The therapist's
approach is not a good
fit for me.

I-----I

The therapist's
approach is a good fit
for me.

Overall

There was something
missing in the session
today.

I-----I

Overall, today's
session was right for
me.

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Child Outcome Rating Scale (CORS)

Name _____ Age (Yrs.): _____
Sex: M / F _____
Session # _____ Date: _____
Who is filling out this form? Please check one: Child _____ Caretaker _____
If caretaker, what is your relationship to this child? _____

How are you doing? How are things going in your life? Please make a mark on the scale to let us know. The closer to the smiley face, the better things are. The closer to the frowny face, things are not so good. *If you are a caretaker filling out this form, please fill out according to how you think the child is doing.*

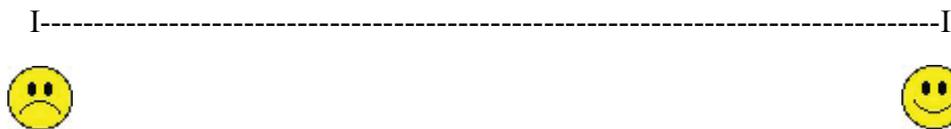
Me
(How am I doing?)



Family
(How are things in my family?)



School
(How am I doing at school?)



Everything
(How is everything going?)



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Child Session Rating Scale (CSRS)

Name _____ Age (Yrs.): _____
Sex: M / F
Session # _____ Date: _____

How was our time together today? Please put a mark on the lines below to let us know how you feel.

Listening

_____ I
did not always
listen to me.



_____ I
listened to me.

How Important

_____ I
What we did and
talked about was not
really that important
to me.



_____ I
What we did and
talked about were
important to me.

What We Did

_____ I
I did not like
what we did
today.



_____ I
I liked what
we did
today.

Overall

_____ I
I wish we could do
something different.



_____ I
I hope we do the
same kind of
things next time.

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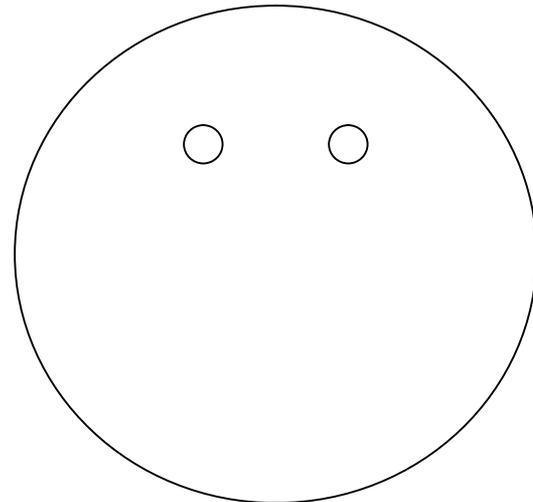
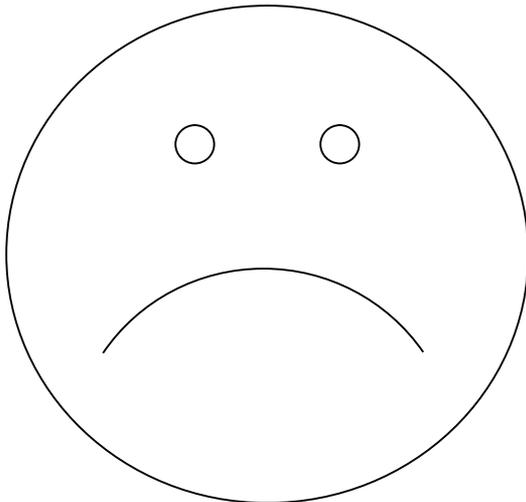
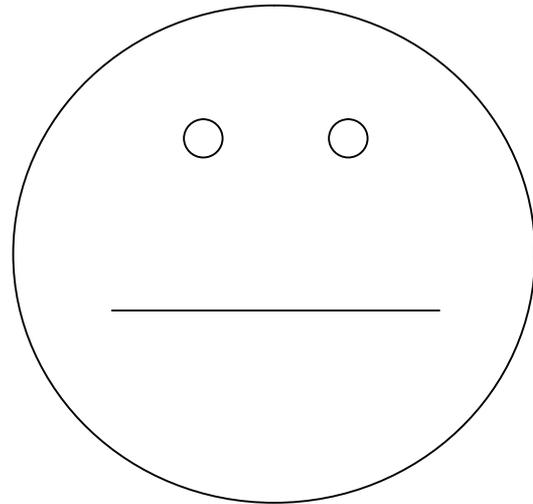
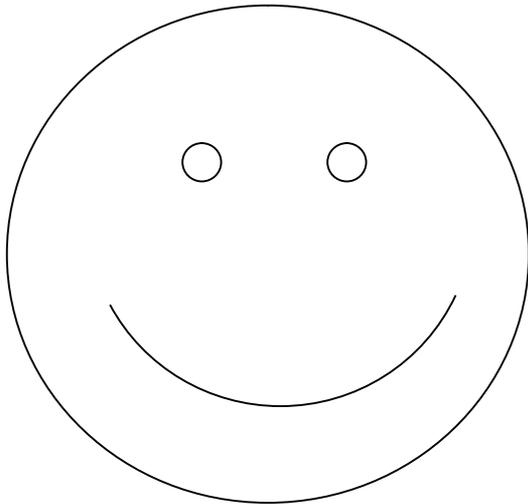
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Young Child Outcome Rating Scale (YCORS)

Name _____ Age (Yrs.): _____
Sex: M / F _____
Session # _____ Date: _____

Choose one of the faces that shows how things are going for you. Or, you can draw one below that is just right for you.



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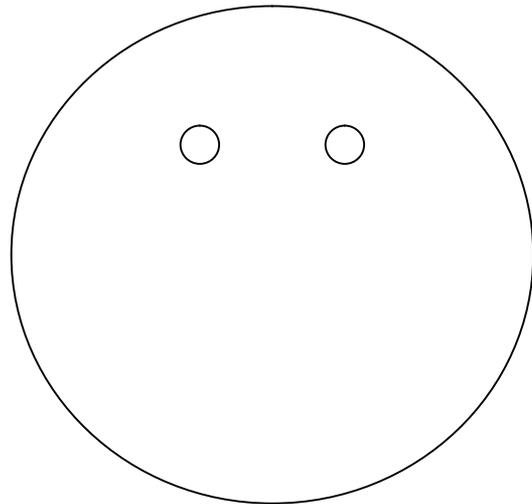
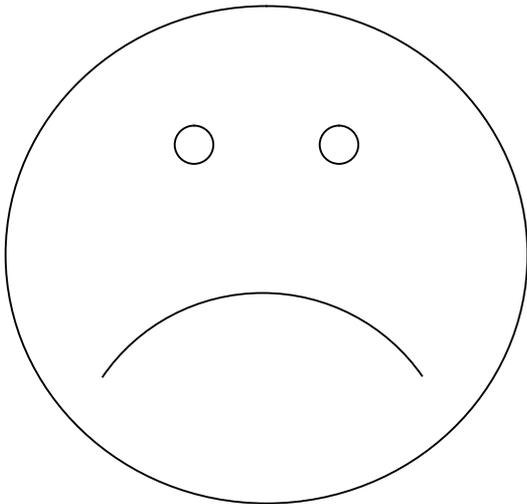
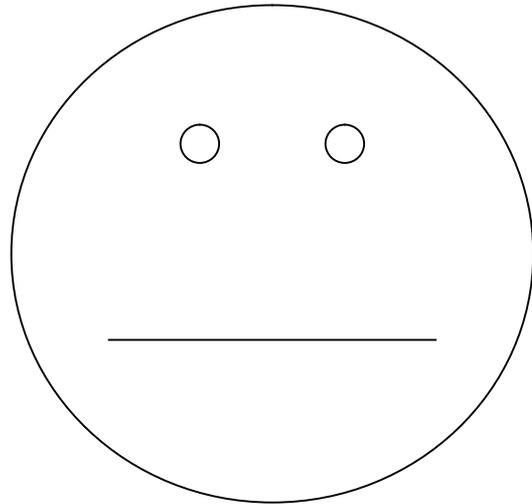
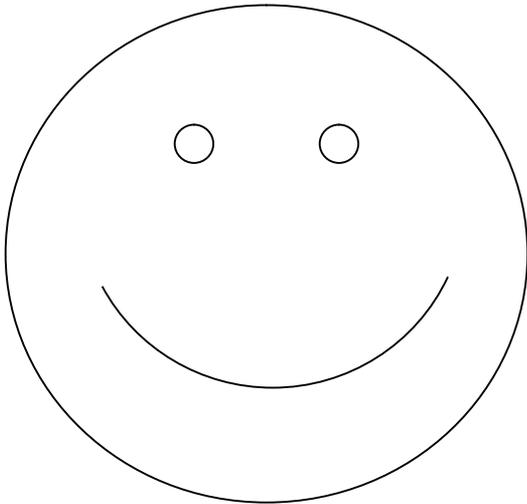
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Young Child Session Rating Scale (YCSRS)

Name _____ Age (Yrs.): _____
Sex: M / F _____
Session # _____ Date: _____

Choose one of the faces that shows how it was for you to be here today. Or, you can draw one below that is just right for you.



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Group Session Rating Scale (GSRs)

Name _____	Age (Yrs.): _____
ID# _____	Sex: M / F
Session # _____	Date: _____

Please rate today's group by placing a mark on the line nearest to the description that best fits your experience.

Relationship

I did not feel understood, respected, and/or accepted by the leader and/or the group.

I-----I

I felt understood, respected, and accepted by the leader and the group.

Goals and Topics

We did *not* work on or talk about what I wanted to work on and talk about.

I-----I

We worked on and talked about what I wanted to work on and talk about.

Approach or Method

The leader and/or the group's approach are/is not a good fit for me.

I-----I

The leader and the group's approach are a good fit for me.

Overall

There was something missing in group today—I did not feel like a part of the group.

I-----I

Overall, today's group was right for me—I felt like a part of the group.

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Social Interest and Rhythm Activities

Music can cure things medication never will
-unknown

Music happens to be an art form that transcends language
-Herbie Hancock

- What is the first sound that we hear?
- ABC's of drumming
- Djembe- "gathering together in peace"
- Drumming has been around for many years for various purposes
- Why group drumming: it's fun, brings people to the present moment (MINDFULNESS), adapts to all ages and various groups, biopsychosocial benefits, great projective technique, empirical support among various populations, AND promotes social interest!!
- "Music plays an important role in bringing out therapeutic change for individuals, groups, and the communities that individuals connect themselves to." -Rudolf Dreikurs
- Drum circle as a metaphor: chaos, synchronicity, cooperation, empathy, communication, expression, relationships, boundaries, movement through life
- Question for this workshop: How do you follow your own rhythm and still cooperate with others?

Examples of drum circle activities: (Kalani, 2004)

Free drum

Let's all play our (drum)

Team drumming- groups of 3-4 and create a rhythm. Teach group and group plays it together.

Orbit game- Play the rhythm that the person before you played.

Rumble ball- Hit your drum each time the ball hits the ground.

Rumble to a groove- Play drum when the facilitator points at you

Affirmations: play affirmation (on each syllable), play the rhythm to the group, they reflect it.

Releasing emotions on the drum: play current emotion state

Name game: play a rhythm that represents your name

Layers of Rhythm Activity:

- Ham and Cheese (hands off x2)
- (hands off x2) peanut butter sandwich
- Mac, mac N' Cheese

Process Questions:

- What did you like or not like about this activity?
- What did you notice about the process? Did you feel connected to others? How so?
- What was your experience of the activity?
- How does this experience relate to your life?
- What can you take with you from this experience?

Rhythm Questions: (Friedman, 2000, p. 162)

- What rhythms are you aware of in your life?
- Do you see yourself as being slow, medium, or fast in your thinking, also behaviors?
- Describe your life tempo (speed)? Do you see yourself being in synchronicity with the world, or do you usually feel out of synch with the world?
- Do you feel that your day to day rhythm is cohesive with who you are as a person? To what extent is your personal rhythm influenced by others?
- If you could play your life on a drum, how would it sound? Would it be loud or soft, busy or sparse? Would your song have many notes or few? What tempo would it be?

Friedman, R.L. (2000) *The healing power of the drum: A psychotherapist explores the healing power of rhythm*. White Cliffs Media Inc.

Kalani (2004). *Together in rhythm: A facilitators guide to drum circle music*. Alfred Publishing Co.



Why I Oughtta



Learning Objectives

1. Use an interactive learning process to provide new and reviewed information/knowledge about ethics, what they are, how they are developed, and guides for ethical decision making.
2. Create a personal plan for solidifying ethical responses that includes action steps and accountability.
3. Learn together.

Plan of Development

- Discuss standard answers to why we practice ethically.
- Introduce the concept of metaethics.
- Evaluate our current practice level of ethical conduct.
- Learn to recognize when we are contemplating potentially making a poor ethical decision.
- Recognize ethical strengths.
- Develop a personal plan to implement markers, highlight strengths, and reduce the probability of making an unethical decision.
- Discuss principles and models for ethical decision making.

Guess Who Said It...

- "Ethics is knowing the difference between what you have a right to do and what is right to do."
 - Mahatma Gandhi
 - Jennifer Lopez
 - Potter Stewart
 - Harry Potter

Guess Who Said It...

- "Relativity applies to physics not ethics."
 - Jon Bon Jovi
 - Isaac Newton
 - Albert Einstein
 - Harry Potter

Guess Who Said It...

- "Research shows the presence of women raises the standards of ethical behavior and lowers corruption."
 - Harry Potter
 - Billy Ray Cyrus
 - Beyonce
 - Hillary Clinton

Guess Who Said It...

- "The final forming of a person's character lies in their own hands."
 - Anne Frank
 - Mother Theresa
 - Pope John Paul II
 - Harry Potter

Why Ethical Practice

- Client/Worker
- Personal
- Professional
- Organizational
- Societal

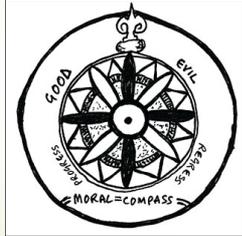


Can Ethics Be Learned/Developed?

- "Let us then suppose the mind to be, as we say, white paper void of all characters, without any ideas. How comes it to be furnished? Whence comes it by that vast store which the busy and boundless fancy of man has painted on it with an almost endless variety? Whence has it all the materials of reason and knowledge?"

▪ - John Locke

What are Metaethics?



Crash Course



Moral Frameworks: Ethical Theories

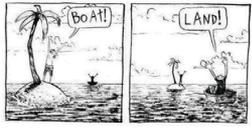
- Natural Law Theory – God created the universe according to a well ordered plan.
- Utilitarianism – All people desire to seek pleasure and avoid pain.
- Ethical Principles
 - Do no harm
 - Right to self-determination (with restrictions)
- Conscience – What causes you to pause when making a decision?

How Ethical Are You?

- True or False: Most adults have solid, well-founded ethical beliefs that can be changed only by new evidence or reasoned arguments.
- True or False: I am more ethical than my peers.
- John is the captain of a submarine. An explosion has caused the sub to lose most of its oxygen supply and has injured a crewman who is bleeding badly and is going to die from his wound no matter what happens. The remaining oxygen is not sufficient for the entire crew to make it to the surface. The only way to save the other crew members is for John to shoot dead the injured crewman now. Then there will be just enough oxygen for the rest of the crew to survive. Is it morally acceptable for John to shoot the injured crewman?
- True or False: Sally is a tourist in New York City. Late at night she is confronted by a vicious mugger on a side street. Sally starts screaming for help. Sally is better off if there are 20 bystanders close by rather than only one?
- True or False: If you were in a job interview and an interviewer started asking you sexually inappropriate questions, you would stand up and walk out of the interview.

Where to Start?

- Being grounded in YOU!



- Being outward focused!

Game Plan for Development

- Using the attached worksheet create a game plan for your own personal ethical development. How are you going to enhance your capacity to pause when internally you are saying, "Why I oughta...?"



Ethics and Viewpoints



The Story Spine (Spring Storm)

- Once upon a time...
- Everyday...
- But one day...
- Because of that...
- Because of that...
- Because of that...
- Ever since then...
- The moral of the story is...



Ethical Decision Making Principles

ACA Code of Ethics

The ACA's Code of Ethics is based on Kitchener's five moral principles:

- Autonomy** refers to the concept of independence and the ability to make one's own decisions.
- Justice** means treating each person fairly, but it does not mean treating each person in the same way.
- Beneficence** refers to doing what is in the best interests of the client.
- Nonmaleficence** means doing no harm to others.
- Fidelity** involves the concepts of loyalty, faithfulness, and honoring commitments.

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PEARSON

Ethical Decision Making Model

1. Identify	Identify the problem
2. Apply	Apply Code of Ethics
3. Determine	Determine the nature and dimensions of the dilemma
4. Generate	Generate potential courses of action
5. Consider	Consider potential consequences of options, choose course of action
6. Evaluate	Evaluate the course of action chosen
7. Implement	Implement the selected course of action, and evaluate results

From White & Davis, 1983

Vignettes – Information Access

- A former client in another region of the Department is involved in a shooting, injuring a community member. Employees throughout the Department hear of the shooting and their curiosity is peaked. Because of electronic records employees could access information that would appease their inquiring minds. What actions do you take given your current role?

Vignettes – Mandates From Authority

- Agency resources are becoming more limited due to a number of factors including, but not limited to budget cuts. You have a client who is currently receiving a resource from the agency. However a person in authority has just told you that you have to discontinue providing that resource to your client. You believe this resource is essential to your clients continued well-being, stability, and functional wellness. What do you do?



Vignettes – Legal Responsibilities versus Helping Relationship

- A family voluntarily initiates services with your agency. You have met with the family a few times and have begun to establish a therapeutic relationship. During an individual session with the child he/she discloses to you that one of the parents has abused them physically and shows you the bruising. The parent acknowledges that managing their anger is a problem and this is the reason they initiated services. You believe that if you report them to CPS the parents will no longer come in for the services the family really does need. What do you do?



Vignettes – Dual Relationships & Confidentiality

- A counselor is working with a client who has been diagnosed with AIDS and reports to you that he is having unprotected sex. A year after treatment has been terminated he shows-up at the counselor's house to take the sister out on a date. What do you do?



Vignettes – Agency Policy & Professional Codes

- You work for a religious funded private agency. A client comes in seeking your assistance with understanding the option of abortion. Your agency's policy prohibits you from discussing/counseling abortion as an option. Your professional code of ethics requires you to discuss all possible options a client may have available. What do you do?

Vignettes – Clients Right to Self-Determination

- You are asked to complete a risk evaluation on an individual. The person you're evaluating reports that they have been diagnosed with a terminal illness and are refusing treatment that could prolong life. The medical staff believes the individual is at a high risk because this decision and are requesting you to do something about it. What do you do?

Calvin and Hobbes



Ethical Decision Making – Remember

- Codes are not intended to be a blueprint that removes all need for the use of judgment and ethical reasoning (Welfel & Lipsitz, 1984)
- Formal ethical principles can never be substituted for an active, deliberative, and creative approach to meeting ethical responsibilities (Corey, Corey, & Callanan, 1991)
- Keith-Spiegel & Koocher (1985) suggest that a final ethical judgment depends on the therapist's individual bias, experience, orientation with the discipline, personality, and personal values.

ISIP would like to thank the continued support of our sponsors. We are grateful for the past support these sponsors have given to the ISIP Society and its members.



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Scan the code to the left with the camera on your phone, then click the link to fill out the evaluation form digitally.

The 4 Objectives of the Idaho Society of Individual Psychology

1. Provide an opportunity for people to share in applying Individual Psychology to education, medicine, business, family, and mental health.

2. Encourage personal and professional growth.

4. Assemble a library relating to Adlerian Psychology for use by the members.

3. Encourage research in and stimulate the further scientific development of individual psychology.

