



Idaho Society of Individual Psychology
Annual Conference Program

March 1st & 2nd, 2024

Presents: **“SIMPLE & BROAD:
DISCOVERING ADLERIAN
PSYCHOLOGY IN ALL
ASPECTS OF LIFE”**



**Featuring:
Calvin Armerding**

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WELCOME TO THE ISIP ANNUAL CONFERENCE

MARCH 1st & 2nd, 2024

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 2024-2025 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 a Taco Bar lunch buffet Friday for a total of 15\$ which includes a beverage the Taco Bar and the gratuity. This is a great option to stay on site and have lunch.
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.

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ISIP Position on Ethics

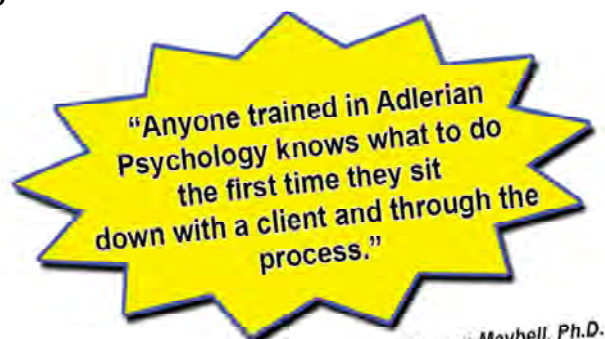
Adler believed that teaching his psychology to a wide audience would increase the mental health of the general population, and that is a good thing. However, Adler and ISIP recognize that knowledge should not be confused with competence. Each person attending the ISIP workshops and the conference needs 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.

FRIDAY, MARCH 1ST 2024

7:30 a.m.	Online Attendees: Zoom Room Opens In-Person: Registration & Continental Breakfast
8:30 a.m.	Session 1: Establishing a common vocabulary, articulating the rationale for broadening the application of Adlerian Theory to non-clinical disciplines (comparing/contrasting with Freudian/Jungian theory)
10:00 a.m.	BREAK
10:15 a.m.	Session 2: Applying Adlerian Theory to literary/film analysis (analysis of film clips)
11:45 a.m.	LUNCH BREAK
1:15 p.m.	Session 3: Applying Adlerian theory to current events, pop culture, social issues
2:15 p.m.	BREAK
2:30 p.m.	Session 4: Bringing the "Broad" back to the counseling office: seeing Individual Psychology simply in our clients (demonstration)
3:30 p.m.	BREAK
3:45 p.m.	ETHICS: A Change of Scenery: Navigating Professional Ethics Amidst Increasing Legal Directives and Mental Health Needs ~ Veronica Timbers Part 1
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: A Change of Scenery: Navigating Professional Ethics Amidst Increasing Legal Directives and Mental Health Needs ~Veronica Timbers Part 2

Spring Advanced Training - April 12-13, 2024

On April 12th and 13th, 2024, the ISIP Advanced Workshop in Boise will feature Dr. Bill Pettit, a psychiatrist who has been in practice for 50 years. He will be presenting on Psychospiritual Reeducation and will be introducing ISIP to understanding the Three Principles of Mind Consciousness and Thought. Bill is an internationally known Three Principles presenter and his workshop will include a comparison of the Three Principles with the teachings of Alfred Adler. This will be a powerful training.

Please check out his work at <https://drbillpettit.com/>



SATURDAY, MARCH 2ND, 2024

7:30 a.m.	Online Attendees: Zoom Room Opens In-Person: Registration & Continental Breakfast
8:30 a.m.	Session 5: Q&A; Lifestyle Investigation demonstration(s)
10:00 a.m.	BREAK
10:15 a.m.	Session 6: Lifestyle Investigation demonstration(s)
11:45 a.m.	LUNCH BREAK
1:15 p.m.	Session 7: Q&A; Lifestyle Investigation demonstration(s)
2:45 p.m.	BREAK
3:00 p.m.	Session 8: Articulating techniques for effective reorientation and encouragement using narrative, art, literature, etc.; Q&A
4:30 p.m.	Conclude Conference



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“Simple and Broad: Discovering Adlerian Psychology in All Aspects of Life.”



Calvin Armerding, ***MA, LPC-S (South Carolina)***

Calvin is Senior Associate at Travelers Rest Counseling Associates, where he works with adults, couples, and families. He is the author of *The Cooperative Family: How Ridding Ourselves of Competitive Goals Helps Us Flourish* (Henosis Press, 2021), and the co-creator of The Telos Project, a web-based self-help program based on Adlerian lifestyle

investigation. He currently serves as the President of the South Carolina Society of Adlerian Psychology, and has presented on Adlerian Psychology at local and regional universities, national conferences, and joined the faculty of ICASSI in 2022. He is also the co-founder of The Alfred Adler Fellows Program, a regional postgraduate training program in Adlerian Psychology that launched in 2023. In his spare time, Calvin loves to spend time with his children, informally study architecture, and write/record his own music.

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.



SIMPLE AND BROAD:

DISCOVERING ADLERIAN PSYCHOLOGY IN ALL ASPECTS OF LIFE

CALVIN D. ARMERDING, MA

1. A theory of why Adlerian Psychology has struggled to maintain prominence



"Peasant Meal" (le Nain)



"Peasant Family in an Interior" (le Nain)

2. Establishing a common vocabulary

Life Tasks:

Emotions as "fuel"

Law of Movement

Creative Self

Lifestyle = _____ + _____

Holism

Gemeinschaftsgefühl

Vertical vs. Horizontal



3. Adlerian Film Analysis

The Social Network

The Talented Mr. Ripley

Talladega Nights: The Ballad of Ricky Bobby

4. Politics, culture, technology, global events

5. The rationale for simplifying Adlerian Psychology: "keeping the main thing the main thing"

6. The Precise Opposite Emotion: Simplicity in Identifying Movement (demo)

7. Remembering Adler's trustworthy approaches to lifestyle investigation

- 1.
- 2.
- 3.
- 4.
- 5.

8. Demonstrations

LIFESTYLE INVESTIGATION STARTERS

1. Family Constellation

- Siblings: age/ gender/ name, role/“title” in the family, brief descriptions of each
 - * What was it like being the [*order of birth + gender*] in the family?
 - * Who got along with whom? Who did you have the most conflict with and why?
 - * Who was the favorite? Least favorite?
 - * What were the best and worst parts of having siblings (or not, for only children)
 - * Complete this sentence: “Growing up, I was the kid who always....” (also can be asked of siblings)
- Parents: age/ name/ occupation, role/“title,” and brief description of each. *Be sure to ask about step-parents, grandparents, aunts, or uncles who may have been in parental roles.*
 - * What was the most sure-fire way to get in trouble/ receive praise from parents?
 - * Who had the most power, and how did they earn/keep it?
 - * How would you describe the parenting style of each parent?
 - * What did dad/ mom show you about what it means to be a man/ woman?
 - * What was best/ worst about mom/ dad?
- Most Memorable Observation (*from Walton, F. X.*): “Around the age of 11 or 12, we start to make ‘big picture’ observations about our family; something like ‘My family works such-and-such a way; I love/hate it! When I have a family we will always/never do it like that. What’s the most memorable observation you made about your family?’”
- Which statement best fits your experience growing up?
 - * *I didn’t get enough attention.*
 - * *I didn’t have enough “say” in family life.*
 - * *I wasn’t treated fairly.*
 - * *I had unreasonable responsibilities put on me too often.*
- Describe a typical day in your family while growing up.

2/3. Early Recollections/Recurring Dreams

- Recollection = Scene, NOT a Snapshot!
- Be unconcerned with the scientific truthfulness of the recollection; it *only* matters that the client remembers it!
- Collect the memory/ dream in the present tense and write it down; repeat it back to the client to ensure accuracy
- What is the most vivid/ clear element in the memory or dream? Gather more detail on this element.
- What is the emotion that sticks out? What is the *precise opposite* of this emotion (no right/ wrong answers)
- Have the client imagine that the memory/ dream is one of Aesop’s Fables. What is the “moral of the story?”

Developed by Calvin Armerding, MA, LPC
Travelers Rest Counseling Associates
Travelers Rest, SC

4. Exogenous Factors

- Think back on your life, especially your childhood. What were the things that happened that you weren't prepared for, either good or bad? (*Collect 5-8*)
- When X happened, what did you do? Who helped, or didn't help?
- What is the emotion that sticks out? What is the *precise opposite* of this emotion?
- What did you learn from this experience, even if the lesson you learned wasn't the best?
- Are there any themes or common elements in the different exogenous factors reported?

5. Childhood Mistakes

- Which mistakes from childhood are most memorable? Note: this is *not* the same thing as the *worst* mistakes that were made in childhood. (*Collect 4-6*)
- What – in essence – was the mistake that you made, as you understood it at the time?
- How did you become aware that you had made a mistake? (*There may be more than one way*).
- What was the “moral of the story?”
- What is the emotion that sticks out from the experience? What is the *precise opposite* of this emotion?

Synthesis: Thoughts for the Therapist

What do they feel inferior/superior about?

What does my client most fear/desire?

How did my client avoid difficulty? How did they help things to go well?

Was my client neglected (not receiving enough help/attention) or pampered (receiving too much help/attention?)

Do they focus on themselves more, or others?

Do they cooperate with others, or compete?

Do they press into challenges, or withdraw?

What psychological/real threats were most present in childhood?

What promises has the client made to himself?

What rules has the client written for himself?

What does my client's behavior (present and past) say about what life means to them?

How would my client have fared if they hadn't learned the lessons that they did?

FILMS FOR ADLERIAN ANALYSIS: (A STARTER PACK)

Lars & the Real Girl	Belonging/social interest, the purpose of symptoms, adaptation, safeguarding
Darkon	Striving for significance, belonging, creative self
King of Kong: Fistful of Quarters	Horizontal vs. vertical striving
Toy Story	Family constellation, birth order and "dethroning," competition vs. cooperation
Talladega Nights: The Ballad of Ricky Bobby	Fictional Finalisms/guiding ideals, exogenous factors, striving for significance, competition, the "neurotic excuse", early recollections
Indiana Jones & The Last Crusade	Acting as if, striving for superiority/significance
Gattaca	Family constellation, birth order, striving for significance, psychology of possession vs. psychology of use
The Talented Mr. Ripley	Vertical striving, creative self, fictional finalisms/guiding ideals,
The King's Speech	The purpose of symptoms, early recollections, "neurotic excuse," psychology of possession vs. use
The Social Network	Striving for significance, belonging, compensation, safeguarding, fictional finalisms/guiding ideal
Good Will Hunting	Psychology of possession vs. use, "neurotic excuse," courage to be imperfect
There Will Be Blood	Fictional Finalisms/guiding ideals, exogenous factors, striving for significance, competition, sibling/family competition, psychology of use
Catch Me if You Can	Early recollections, exogenous factors, belonging, striving for significance, psychology of possession vs. use
Man on Wire	Striving for superiority/significance, lifestyle, psychology of possession vs. use

- Journeys Adolescent Program
- Adult Psychiatric Intensive Care Services
- Adult Psychiatric Services
- Generations Program
- New Start Center for Recovery
- Outpatient Services - PHP & IOP



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Ethics Presentation: A Change of Scenery: Navigating Professional Ethics Amidst Increasing Legal Directives and Mental Health Needs

Veronica Timbers,
PhD, LCSW, MDIV

Veronica (she/her) completed her Ph.D. at the Diana R. Garland School of Social Work at Baylor University with a focus in social work and clinical practice with trans and gender expansive clients. Veronica has taught social work in higher education for a total of 10 years at Appalachian State University, Baylor University, Boise State University, and recently joined the University of Utah, College of Social Work. Her research and teaching are informed by her 15 years of clinical mental health practice and community advocacy. Her clinical practice included specialized mental health assessment, intervention, and crisis response in prisons, hospitals, schools, and community mental health centers. In addition to her social work education, Veronica also has a Master of Divinity degree, which she uses in research, teaching, and advocacy to support the ethical integration of religion and spirituality in clinical practice and policy change. Outside of work, Veronica is an avid rock climber, hiker, skier/snowboarder, and mom. The combination of physical and intellectual activities keeps her in balance for the important work of teaching and scholarship.



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https://faculty.utah.edu/u6052879-DR._VERONICA_LEE_TIMBERS,_LCSW,_MDIV,_Ph.D./hm/index.html

Session Description:

We are seeing an increase in mental health needs across all age groups, and mental health resources (including ourselves) are being stretched thin to keep up with the needs. Clinicians and mental health systems are seeing increased severity of symptoms, long waitlists, and continued barriers related to insurance coverage and finances. In addition to these needs, schools boards, local governments, and state legislatures are passing policies that impact how clinicians can provide services or resources to clients who need and want services such as gender affirming care, reproductive and family planning options, and even access to books or resources that may reflect the client's own story. Our practice has to be flexible to respond to the

changing nature of these policies and the court rulings that impact the timing of implementation of such policies. These changes require us to look at our professional codes of ethics from a new socio-cultural lens so we can best support client self-determination, maintain confidentiality (when it may be at risk), and protect ourselves as professionals and representatives of the profession. The first session (1 hr) will review ethical conflicts and considerations related to navigating these developing demands. The second session (2 hrs) will go into more depth and participatory discussion on the topics covered in the first hour, and then discuss the ethics of community care as a form of self care for ourselves and for our clients amidst the increased needs and challenges of mental health service delivery.



NO EXPERIENCE IS A CAUSE OF SUCCESS OR FAILURE. WE DO NOT SUFFER FROM THE SHOCK OF OUR EXPERIENCES, SO-CALLED TRAUMA – BUT WE MAKE OUT OF THEM JUST WHAT SUITS OUR PURPOSES. *Alfred Adler*

COMING SOON

2024 ISIP Trainings!

- Advanced Workshop April 12-13 in Boise and online Through Zoom
- Workshop 3 “Family Therapy” on April 26th-27th in Idaho Falls and on Zoom
- Workshop 1 “Adlerian Theory of Personality Development & Family Functioning in Coeur d’Alene & online through Zoom in July date TBD
- Workshop 2 “Adlerian Psychotherapy” in Boise & online through Zoom Fall of 2024 date TBD
- Advanced Workshop with Wes Wingett in Boise & online through Zoom October 2024

Go to www.AdlerIdaho.com to get the most up to date information on future trainings.

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A Change of Scenery: Navigating Professional Ethics Amidst Increasing Legal Directives and Mental Health Need

Veronica Timbers, PhD, LCSW, MDIV
Assistant Professor
College of Social Work, University of Utah

Agenda



- 01. The State of Mental Health**
A brief overview of how mental health in changing as needs continue to increase.
- 02. Ethical Guidance for the Changing Scenery**
Discussion of ethical code related to the intersection of caring for ourselves to ensure safety and quality care for clients.
- 03. The State in Mental Health**
Understanding the intersection of law and ethics and managing gray spaces.
- 04. Community Care as Self Care**
Staying healthy as providers and considering community building as part of our ethical call to promote individual dignity, well-being and justice.
- 05. Closing**
Name two actionable steps and practices to increase community care for our clients and selves in this new landscape.

2


Objectives



- Understand and apply professional ethics related to increasing demands in mental health practice.
- Understand the intersection of law and ethics. Increase capacity to support clients in gray spaces.
- Define community care as it relates to self care and understand how these relate to professional ethics.
- Set 2 action goals related to increasing community care for yourself and your clients.

3

The State of Mental Health



4


The State of Mental Health

APA's 2022 Practitioner Survey

- 60% of practitioners reported being at capacity and not taking new clients
- 72% of practitioners have longer waitlists than before the pandemic.
- Practitioners reported being contacted by an average of 15 potential clients seeking care a month.

SAMHSA 2022 Brief on Behavioral Health Workforce Burnout

- 50% of behavioral health providers reported burnout due to high level of work-related stress



5


The State of Mental Health

Based on increasing demands and workload, APA found 46% of psychologists said they could not meet the demand for treatment, up from 30% in 2020. Moreover, 45% of psychologist reported feeling burned out in 2022.

"These findings highlight the continued need to support psychologists as they care for their patients. Both individual-level and organization-level interventions targeting key contributing factors to burnout can serve as potential treatment and prevention strategies" (Lin et al., 2023)

<https://www.apa.org/monitor/2023/01/psychologist-burnout>

How we are told to manage it.



6

Specific Codes

□ National Association of Social Workers

- Purpose Statement

"Professional self-care is paramount for competent and ethical social work practice. Professional demands, challenging workplace climates, and exposure to trauma warrant that social workers maintain personal and professional health, safety, and integrity. Social work organizations, agencies, and educational institutions are encouraged to promote organizational policies, practices, and materials to support social workers' self-care."

- Value: Integrity

"Social workers are continually aware of the profession's mission, values, ethical principles, and ethical standards and practice in a manner consistent with them. Social workers should take measures to care for themselves professionally and personally. Social workers act honestly and responsibly and promote ethical practices on the part of the organizations with which they are affiliated."

<https://www.socialworkers.org/About/Ethics/Code-of-Ethics/Code-of-Ethics-English>

Specific Codes

□ National Board of Certified Counselors (<https://www.nbcc.org/assets/ethics/nbcccodeofethics.pdf>)

- Core Values and Beliefs

"Counselors strive to enhance the social and mental well-being of their clients while supporting the overall physical health of each client. Counselors must engage in self-care and self-reflection." (p. 1)

- Professional Responsibilities

"Counselors shall seek professional assistance or withdraw from the practice of counseling if their mental or physical condition makes it so that they are unable to provide appropriate services." (p.2)

□ American Mental Health Counselors Association (<https://www.ahca.org/videodocument/2020-ahca-code-of-ethics?communitykey=88f9f7-8724-4747-9a7c-4cf3ce0393e9>)

- Counselor Responsibility and Integrity

Competence (h): Recognize that their effectiveness is dependent on their own mental and physical health. Should their professional judgment or competency be compromised for any reason, they seek capable professional assistance to determine whether to limit, suspend, or terminate services to their clients.

Specific Codes


□ American Association for Marriage and Family Therapy (https://www.aamft.org/Legal_Ethics/Codes_of_Ethics.aspx)

- Professional Competence and Integrity (3.3 Seek Assistance)

"Marriage and family therapists seek appropriate professional assistance for issues that may impair work performance or clinical judgment."

- Professional Competence and Integrity (3.12 Professional Misconduct)

"Marriage and family therapists may be in violation of this Code and subject to termination of membership or other appropriate action if they: (a) are convicted of any felony; (b) are convicted of a misdemeanor related to their qualifications or functions; (c) engage in conduct which could lead to conviction of a felony, or a misdemeanor related to their qualifications or functions; (d) are expelled from or disciplined by other professional organizations; (e) have their licenses or certificates suspended or revoked or are otherwise disciplined by regulatory bodies; (f) continue to practice marriage and family therapy while no longer competent to do so because they are impaired by physical or mental causes or the abuse of alcohol or other substances; or (g) fail to cooperate with the Association at any point from the inception of an ethical complaint through the completion of all proceedings regarding that complaint."



think


pair

share

Participation Moment

Review the brief list of burnout symptoms. With 1-2 other people, share which one you notice in yourself when burned out. Be a human/social being for a moment.

Now, review your particular Code of Ethics on this topic. What stands out to you? What do you wish it included? What is it making you consider based on this conversation?



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<https://www.mentimeter.com/app/representative/abem-af52hcmomomx4dennn3de3wut>

The State In Mental Health



15

The Intersection of Laws and Our Professional Ethics

Long Standing Examples for Confidentiality

- Mandatory reporting
- HIPPA
- SA and HIV confidentiality rules
- Involuntary commitments and safety of self and others
- Least restrictive environment and IEPs in school setting

Newer Laws Impacting Referrals, Service Provision, and Confidentiality

- Abortion and reproductive-related laws
- Access to transgender healthcare
- LGBTQ+ minors and confidentiality (having to share with guardian)

Client Needs and Practice Changes Based on New Laws

- Loss of clients/specialization
- Fear/increased anxiety
- Family decision-making and/or addressing family conflict
- Understanding and explaining legal or policy changes (protections or consequences)
- Long-term symptom management
- New thinking about safety assessment and risk

16

The Intersection of Laws and Ethics: What happens when there is tension?

Example from "Direct Social Work Practices: Theory and Skills" (Hepworth et al., 2017, Fig 4-1)

Laws and regulations
Ex. Driving while under the influence

Common principles for ethical involvement with a client

Ethical obligations
Ex. Our relationships with the client system

Laws and Regulations
Ex. No law against conversion therapy

Gray Space

Ethical Obligations
Ex. SOCE and conversions statements by all professional orgs but not explicitly forbidden in the ethical codes

Personal Reflection: Ohio CSWMTF Board voted on a statement against conversion therapy and said clinicians could be disciplined, including having their licenses revoked. There is no state law banning it.

Which is higher ranking? Can ethical codes and and/or professional boards ask for more protections than a state provides? What is the risk? What do you think would happen in Idaho?

If you said yes, ethical codes or professional boards can ask for more, then can an ethical codes ask for less or overrule law?

17

How do we care for ourselves and our clients in this socio-cultural moment?

Legal stipulations are increasing resulting in difficult tensions with ethics and increased stress for some client populations.

One way we can care for ourselves and help encourage clients to increase their sense of empowerment, agency, and reduce anxiety and hopelessness is to consciously expand self care to include more community care.

18



If people are social beings, then therapists are social beings; therefore, we must tend to ourselves as such.

Self Care AND Community Care

More on this in the second part...but to conclude, how do we navigate these increasing stressors and difficult tensions?

Community Care Defined

- an approach utilized by individuals to support one another and the broader community.
- is informed by its historical roots in BIPOC, queer, and rural communities for generations.
- relies on the collectivistic beliefs where the well-being of the individual is intrinsically tied to the well-being of the larger community.
- focuses on the connections, intentional actions, and efforts to mobilize individuals to support one another

Examples

- Informal peer support (intentionally connect with friends with similar experiences)
- Mutual aid (reciprocal exchange or resources or services)
- Informal or formal talking circles/healing circles/affinity groups (roots in collectivist cultural traditions)
- Community healing or response
- General community events (silent book clubs, community space times in your practice or notifications of community gatherings, death cafes, expressive arts session open to all)

Summarized from Mental Health America website (2024)
<https://www.mentalhealth.org/en/communities/definition/3AN/20A/20Q/practice/20where/20mindfulness/and/20healing/20to/20one/20month/>

20

Commitments to Action

What is one thing you can do to increase community care for yourself?

- Find one new community event to attend in the next couple weeks (and go!)
- Reach out to a colleague/s for a regular consultation space
- Reach out to a colleague/s to establish a group text for resource (and memo) sharing
- Connect with a previous mentor
- Write a note or send an special email to someone in your community each week over the next year
- Etc.

What is one thing you will do to increase or encourage community care for your clients?

- Access for community connections and support
- Provide 2 suggestions to each client related to community care or community building
- Open your space or find a space to host a community organizing event or open visiting time
- Find mutual aid groups in the state and your community/region

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Commitments to Action

Take 2-3 minutes to think and then share one of your action goals with someone near you. Now share at this link for reference and community hope building ☺ →

Your posts are anonymous to me and all participants, but feel free to share your name at the end of the post. You can also reply to others if you would like.




Link (as needed): <https://padlet.com/timbersjcsw/community-care-actions-bulletin-board-dfasuwx1j7hsk7o>

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References

Each slide showed all references with links provided throughout.


I am willing to share my slides or more resources if you email me at: timbersjcsw@gmail.com or reach out on [LinkedIn](#)



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Take a break!

We will move into the second part of the ethics training after a 10-minute break.



24

Jumping Back In



1

The Intersection of Laws and Our Professional Ethics

Client Needs and Practice Changes Based on New Laws

- Loss of clients/specialization
- Fear/increased anxiety
- Family decision-making and/or addressing family conflict
- Understanding and explaining legal or policy changes (protections or consequences)
- Long-term symptom management
- New thinking about safety assessment and risk

What examples do you have from these categories in your own practice, supervision role, or community?

If you have no examples, what ways can you imagine these coming up for you?

2

Examples and Discussion

Purposely not shared until presentation.

3

A Statement about Care in the Following Discussions

Because the following information is related to current laws, it is important to establish that the discussion is not about whether a law should be in place or not. In mental health treatment, our codes of ethics ask that we set aside our personal values and to prioritize client self-determination. The following information and discussion is related to what needs to be know and considered when laws and client self-determination may create tension or lead to ethical dilemmas.

APA Press Release (May 3, 2022)

"Rigorous, long-term psychological research demonstrates clearly that people who are denied abortions are more likely to experience higher levels of anxiety, lower life satisfaction and lower self-esteem compared with those who are able to obtain abortions," said APA President Frank C. Worrell, PhD. "In addition, there is no research to indicate that abortion is a cause for subsequent mental health diagnoses." (APA, 2022, link below)



Intersections of poverty, race, gender identity, and one's mental health prior to pregnancy can all be factors impacting reproductive choice. If a client wants an abortion but cannot receive one, mental health providers should consider tailoring assessment and intervention to address related mental health needs and supports.

5
<https://www.apa.org/news/press/releases/2022/05/restricting-abortion-mental-health-harms>

Idaho's Abortion Law, the Crane Letter, & Your Protection in Referrals Out of State

- *Planned Parenthood v. Labrador*, Case No. 1:23-cv-00142
- I.C. 18-622(2) said that any healthcare provider assisting in performing or attempting to perform an abortion could be criminally charged.
- The Crane Letter from AG Labrador stated that referrals was included in the definition of assisting.
- A lawsuit was filed based to free speech violations and AG Labrador withdrew the letter but never recanted the stance, leaving many worried about the interpretation.
- Federal District Court of Idaho Judge Winmill provided an injunction that paused the ban until more information could be presented.
- It went back and forth a bit in various courts but in late December 2023, the Supreme Court allowed the abortion ban to go into effect and agreed to hear the appeal case in April 2024.
- It remains unclear if referrals would be considered assisting and potentially charged (as of Jan 2024)

(ACLU Press Release, 2023, <https://www.aclu.org/press-releases/federal-court-blocks-enforcement-of-idaho-attorney-general-prohibition-out-of-state-abortion-referrals>); (NPR Law, Teterberg, 2024, <https://www.npr.com/2024/01/05/1210248890/supreme-court-calls-wednesday-abortion-ban-to-be-reversed>)

6

Discussion

In North Carolina there is a law SB49 (2023), Part 4—that requires schools to notify a parent “prior to any changes in the name or pronoun used for a student in school records or by school personnel,” among other provisions.

Negative Law: Forced Outing of Transgender Youth in Schools	---	---	NEGATIVE LAW	11.1
-------------------------------------------------------------	-----	-----	--------------	------

In Idaho there is no specific law about disclosing name or pronoun changes, but one that does increase risk for outing a student, HB163 (2023), says:

(2)(d). Schools “shall develop and adopt a policy” including: “The public school’s responsibility for notifying a student’s parent or legal guardian regarding known changes in the student’s mental, emotional, or physical health or well-being,” which could easily apply to a student’s gender identity.

(3): “A policy shall not prohibit parents or legal guardians from accessing any of their children’s education and health records...” which could easily contain information about a student’s gender identity.



Discussion

How would you talk with a youth who wanted to change the name they use at school but did not want to tell the parents?

What if the youth is experiencing distress in daily life related to LGBTQ+ identity but is not currently suicidal or at elevated risk?



Apply Your Code of Ethics

Links to Codes

- [APA](#)- American Psychological Association
- [NASW](#)- National Association of Social Workers
- [NABSW](#)- Nat. Assoc. of Black Social Workers
- [IFSW](#)- International Federation of Social Workers
- [AMFT](#)- Association of Marriage & Family Therapy
- [NBCCC](#)- National Board of Certified Counselors
- [ACA](#)- American Counseling Association
- [AMHCA](#)- American Mental Health Counselors Assoc.

Think-Pair-Share

- 10 minutes to skim – find 2 relevant statements that may support, guide, challenge, or inform your responses to clients who cannot access a healthcare intervention
- 15 minutes – in groups of 3-4 share what you found
- 10 minutes to report back to the larger group

Apply Wisdom from Another Code of Ethics

Links to Codes

- [APA](#)- American Psychological Association
- [NASW](#)- National Association of Social Workers
- [NABSW](#)- Nat. Assoc. of Black Social Workers
- [IFSW](#)- International Federation of Social Workers
- [AMFT](#)- Association of Marriage & Family Therapy
- [NBCC](#)- National Board of Certified Counselors
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Think-Pair-Share

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Overview of Ethical Codes at the Intersection of Law and Ethics: Online Reference

LINK TBD- This documents is still being drafted for a SAMHSA Center for Excellence and will be done by February for use in this presentation.

**MEANINGS ARE NOT DETERMINED BY SITUATIONS,
BUT WE DETERMINE OURSELVES BY THE MEANINGS
WE GIVE TO SITUATIONS. *Alfred Adler***

VOTE

To vote for next year's board members please scan the code to the right with the camera on your phone, then click the link to fill out the ballot. Voting will be open for 24 hours from when the nominees will be presented.



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BestNotes



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Pocatello, Idaho

Setting the bar for healthcare in Idaho

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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.

