

Rural Provider Support Network Conference

Registration Now Open!



BHECN | BEHAVIORAL HEALTH
EDUCATION CENTER
OF NEBRASKA

May 17, 2019 | 8:45 a.m. – 3:00 p.m.

Chadron, NE

Networking reception to follow conference.

This conference offers
2 hours of continuing education
for psychologists.

Registration **\$15.00**

Registration closes **May 10**

**Last day to receive cancellation
refund of \$15 is May 10.**

Register at:

**[https://www.unmc.edu/bhecn/
education/rural-provider-
conference-2019](https://www.unmc.edu/bhecn/education/rural-provider-conference-2019)**

Schedule

8:45 – 9:15 a.m.	Check-in and social networking
9:15 – 9:30	Welcome & presentation of the BHECN Ambassador Award Marley Doyle, M.D., Director, Behavioral Health Education Center of Nebraska Catherine “Dr. Cate” Jones-Hazledine, Ph.D., Psychologist and Owner, Western Nebraska Behavioral Health
9:30 – 10:30	Bullying Involvement and Mental Health Correlates and Consequences (1 hour continuing education) Susan M. Swearer, Ph.D.
10:30 – 10:40	break
10:40 – 11:10	Panel Discussion: School-Based Mental Health (no continuing education credit for psychologists) Moderated by: Catherine “Dr. Cate” Jones-Hazledine, Ph.D.
11:15 – 12:15	Developing Resilience: Skills for Personal and Professional Effectiveness (no continuing education credit for psychologists) Brent Khan, Ed.D.
12:15 - 12:50	Lunch With a brief overview of the Mental Health Technology and Training Center (MHTTC)
12:50 – 1:50	Native American Communities and Historical Trauma (no continuing education credit for psychologists) Grace Johnson, M.S., LIMHP, LADC
1:50 – 2:00	break
2:00 – 3:00	Adapting Clinical Approaches When Working with Native Americans (1 hour continuing education)

This program is co-sponsored by the Behavioral Health Education Center of Nebraska (BHECN) and the University of Nebraska-Lincoln Department of Psychology. The UNL Department of Psychology is approved by the American Psychological Association to sponsor continuing education for psychologists. The department maintains responsibility for this program and its content. Participants attending this program can receive 2 CEs.

If you have questions, contact Ann Kraft at akraft@unmc.edu or 402-552-7638.

See attached page for details about presenters and learning objectives.

The majority of the state of Nebraska is considered a shortage area for behavioral health providers of all types. Particularly hit by this are our rural areas. Research indicates that this problem is furthered by difficulties with recruitment and retention of providers to our most isolated areas. The Rural Provider Support Network is intended to develop support systems for providers in rural practice, in order to increase our ability to retain providers in these most needed areas.

This second annual conference will provide information for rural mental health providers on a variety of relevant topics: bullying, building resiliency for the behavioral health professional, understanding intergenerational trauma, and working with Native American populations. There will also be opportunities to get to know other nearby providers and discussion of ways to network in an effective way.

Bullying Involvement and Mental Health Correlates and Consequences

Presenter:

Susan M. Swearer, Ph.D.

Narrative:

Bullying is a ubiquitous problem that occurs across the lifespan, affecting all genders, sexual orientation, ages, race, ethnicity, and other demographics. While many bullying prevention and intervention programs exist, those that do not address mental health correlates and consequences will be ineffective. Four decades of research on bullying involvement confirms that for many individuals involved in bullying there are also concomitant mental health problems ranging from mild symptoms to diagnosable mental health disorders. This presentation will review the relations between mental health disorders and involvement in bullying. Two decades of research from the Nebraska Bullying Prevention and Intervention Initiative and an individualized intervention for intervening with youth involved in bullying will also be presented.

Learning Objectives:

1. To frame bullying involvement from a mental health perspective
2. To explain the relations between depression, anxiety, and conduct disorder and bullying involvement
3. To review outcomes from an individualized cognitive-behavioral intervention for bullying involvement

References:

1. Espelage, D. L. & Swearer, S. M. (Eds.). (2011). *Bullying in North American schools: A social-ecological perspective on prevention and intervention, 2nd edition*. New York, NY: Routledge.
2. Hymel, S., & Swearer, S.M. (2015). Four decades of research on school bullying: An introduction. *American Psychologist, 70*, 293-299. <http://dx.doi.org/10.1037/a0038928>
3. Jimerson, S. R., Swearer, S. M., & Espelage, D. L., (Eds.). (2010). *Handbook of Bullying in Schools: An International Perspective*. New York, NY: Routledge.
4. Radliff, K. M., Wang, C., & Swearer, S.M. (2015). Bullying and peer victimization: An examination of cognitive and psychosocial constructs. *Journal of Interpersonal Violence*.
5. Swearer, S. M., Espelage, D. L., & Napolitano, S. A. (2009). *Bullying prevention and intervention: Realistic strategies for schools*. New York, NY: Guilford Press.
6. Swearer, S.M., & Hymel, S. (2015). Understanding the psychology of bullying: Moving toward a social-ecological diathesis-stress model. *American Psychologist, 70*, 344-353. <http://dx.doi.org/10.1037/a0038929>
7. Werth, J.M., Nickerson, A.B., Aloe, A.M., & Swearer, S.M., (2015). Bullying victimization and the social and emotional maladjustment of bystanders: A propensity score analysis. *Journal of School Psychology, 15*, 295-308.

Adapting Clinical Approaches When Working with Native Americans

Presenters:

Anitra Warrior, Ph.D.

Narrative:

There are evidenced based practices that have been adapted to the Native American population. Therapeutic interventions from these practices can be understood through a cultural lens and applied to common traditional practices across tribal nations. Practical implications for the establishment of rapport, treatment, and retention can be addressed by modifications in the delivery of service as well as inclusion of culture in environment.

Knowledge, awareness, and skills for clinicians who work with Native American populations is especially important in rural and urban areas of Nebraska due to the lack of accessibility, availability, and acceptability of providers. This presentation will help identify practical strategies for adaptation of therapeutic models and best practices in counseling Native American clients.

Learning Objectives:

1. Describe challenges to establishing rapport and adapting treatment to the Native American population.
2. Identify practical approaches to providing culturally competent clinical care for Native Americans.
3. Discuss strategies for outreach and retention of Native American clients.

References:

APA (2010). Mental Health Disparities: American Indians and Alaska Natives. Retrieved 04/16/2019 from https://www.integration.samhsa.gov/workforce/mental_health_disparities_american_indian_and_alaskan_natives.pdf

Subia BigFoot, D. & Schmidt, S. R. (2010). Honoring children, mending the circle: cultural adaptation of trauma-focused cognitive-behavioral Therapy for American Indian and Alaska Native Children. *Journal of Clinical Psychology: In Session*, Vol. 66 (8), 847-856.

Thomason, T. (2011). Best practices in counseling Native Americans. *Journal of Indigenous Research: Vol. 1: ISS 1*, Article 3. Available at: <https://digitalcommons.usu.edu/kicjir/vol1/iss1/3>