Anxiety disorders are among the most common mental health problems plaguing emerging adults (EAs), with social anxiety disorder (SAD) being especially prominent (Auerbach et al., 2016). SAD in adolescence persists into young adulthood and often becomes comorbid with depression and substance abuse. Although CBT and medication are effective treatments for anxiety in youth (Walkup, et al., 2008), nearly half of effectively treated youth relapse (Ginsburg et al., 2014). Consequently, engaging in college or the workforce and establishing long term romantic and social outlets is hampered by ongoing anxiety that solidifies extended dependence on family and impedes independent functioning. We developed the Launching Emerging Adults Program (LEAP) model, combining both group and individual CBT for anxiety with developmentally informed interventions aimed at decreasing parent accommodation and improving age-appropriate family relationships. Although CBT is the gold standard treatment for SAD (APA Clinical Practice Guidelines, 2011), exposure therapy is not used enough (Deacon & Farrell, 2013). Barriers to using exposure therapy include difficulty of creating exposures in the clinic (Kendall, et al, 2012), negative beliefs held about exposures (Deacon & Farrell, 2013), and therapist focus on outcome instead of protocol; the exposures that are completed are often diminished in intensity (Shafran et al., 2009). This institute presents the benefits of enhancing exposures to include in vivo, contextually rich experiences typical of the real world for EAs, with a focus on how to make use of available technologies. Dr. Albano and her team, collaborating with a technology start up Headset Health, are implementing novel virtual reality exposures for the EA
population. Dr. Bennett, working with HealthRhythms, is utilizing passive sensing assessment technology to measure behavioral and physical manifestations of anxiety disorders in day-to-day life. We will present our model and program components, and explain how to enhance exposures. Outcome data, case examples and video presentation will be presented. Attendees will gain a deeper understanding of how to treat EAs, as well as the ability to use salient contextual clues and technology to enhance treatment.

You will learn:

- Describe the tasks of development necessary for adolescents and young adults to attain independence;
- Strategize with attendees for addressing parental over involvement and adolescent dependency, including family communication and problem-solving strategies that are conducted during transition sessions;
- Develop, with other attendees, realistic, developmentally appropriate exposures to enhance the ecological validity of treatment and help emerging adults reduce or develop tolerance for anxiety;
- Explain how to incorporate technology into the treatment of the emerging adult population;
- Develop an initial bank of exposure activities involving age-appropriate situations and challenges to engage the young adult patient.

1:00 p.m. – 6:00 p.m. (TICKETED)
Earn 5 continuing education credits
Wilson B, Mezzanine Level

Institute 5
Evidence-Based Assessment and Treatment of Bipolar Disorder and Mood Dysregulation in Youth and Early Adulthood

Eric A. Youngstrom, Ph.D., University of North Carolina at Chapel Hill
Mary Fristad, Ph.D., The Ohio State University Wexner Medical Center

Moderate level of familiarity with the material
Primary Category: Bipolar Disorder, Assessment
Key Words: Assessment, Treatment Development, Bipolar Disorder

Mood dysregulation is one of the biggest problems in childhood, and it often worsens in adolescence and early adulthood. Yet there has been much uncertainty about how to conceptualize these problems diagnostically. DSM-5 added a new diagnosis, creating another label, but without an evidence base about course or treatment. Fortunately, there has been a surge of evidence about the validity of carefully diagnosed mood disorders in youth, along with better evidence-based tools for assessment and treatment. This Institute discusses key assessment and therapy issues, including: how bipolar and other mood disorders manifest clinically, presentation similarities and differences in children versus adults, how to use self-report and parent-report measures to aid diagnosis and treatment, and specific treatment strategies. We summarize the available biological interventions, emphasizing what nonprescribing clinicians need to know about these
treatments. We then concentrate on how to implement therapeutic techniques used in individual-family and multifamily psychoeducational psychotherapy (PEP), one of the most promising evidence-based approaches to managing mood dysregulation in youth. This program will utilize lecture format, case presentations, demonstrations, role-plays, and question-and-answer periods. Often challenging conventional wisdom, the Institute presents new evidence from NIMH grants that can be applied immediately in practice.

You will learn:

- Describe the use of evidence-based assessment methods that aid in differential diagnosis and measuring treatment response;
- Recognize which symptoms and risk factors are helpful in recognizing bipolar disorder, and which may be red herrings" that are common to other conditions;
- Explain how to adapt specific therapeutic techniques to treat youth with bipolar disorder and other mood dysregulation;
- Identify how to apply specific therapeutic techniques to address family concerns about mood dysregulation and treatment;
- Explain how to integrate a conceptual model for working within systems-of-care into your practice with cases dealing with mood dysregulation.

1:00 p.m. – 6:00 p.m. (TICKETED)
Earn 5 continuing education credits
Washington 3, Exhibition Level

Institute 7
Behavioral Activation Treatment for Adolescents

*Sona Dimidjian, Ph.D.*, University of Colorado Boulder
*Kelly Schloredt, Ph.D.*, Seattle Children’s Hospital
*Christopher Martell, Ph.D.*, University of Massachusetts Amherst
*Gretchen Gudmundsen, Ph.D.*, St. Luke’s Children’s Hospital
*Elizabeth McCauley, Ph.D., ABPP, Seattle Children's Hospital*

Basic to Moderate level of familiarity with the material
Primary Category: Child / Adolescent - Depression, Treatment-Other
Key Words: Behavioral Activation, Adolescent Depression, Treatment Development

Behavioral Activation (BA) is a brief treatment for depression that emphasizes the importance of activation and overcoming avoidance as a way to manage and recover from depression. Over the course of the last several years, Behavioral Activation Therapy has proven to be as effective as CBT and medication management in the treatment of moderately to severely depressed adults. More recently, this treatment approach has been increasingly used and studied in youth with depressive disorders. In the treatment of youth with depressive disorders, Behavioral Activation (BA) can be used in two different ways - as a stand-alone
treatment and as a component in modular approaches to care. In this workshop, participants will be introduced to the BA model. The key strategies used in BA (e.g., mood monitoring, guided activation, goal setting, overcoming avoidance) related to helping adolescents increase activity and maximize reward in their lives will be introduced. Implementation of these strategies will be modeled via training videos and role-plays and participants will have the opportunity to practice these strategies and debrief their use with the facilitators. Time will also be devoted to conversation/discussion between participants and presenters about using this structured treatment in a flexible fashion based on individualized case conceptualization and with adolescents with co-occurring problems.

You will learn:

- Discuss the basic theory, model and techniques of behavioral activation;
- Explain how to conduct behavioral activation with adolescents and parents;
- Describe how to implement key BA skills;
- Explain how BA may be extended to address concerns in youth presenting with challenges other than depression.

Friday

8:30 a.m. – 10:00 a.m.
Earn 1.5 continuing education credits
Harding, Mezzanine Level

Clinical Roundtable 1
Do They "Like" Me or Just Want Me to #Follow Them? The Relevance of Social Media to Clinical Issues and Treatment

MODERATOR:
*Amanda McGovern, Ph.D.*, University Hospitals, Cleveland Medical Center

PANELISTS:
*Erin K. Engle, Psy.D.*, Columbia University Medical Center
*Rachel E. Ginsberg, Ph.D.*, Columbia University Medical Center
*Jeneane Solz, Ph.D.*, Columbia University Clinic for Anxiety and Related Disorders (CUCARD)
*Caitlin B. Shepherd, Ph.D.*, Wesleyan University
*Sarah Anolik Katz, M.A.*, James Madison University

Primary Category: Technology
Key Words: Technology, CBT, Anxiety
With over 65% of American adults, 90% of young adults, and 94% of adolescents connected to social networking sites (SNSs), social media offers opportunities to initiate and enhance communication, to stay connected with others, to exchange and develop ideas, and to learn new information. However, it is also a platform for individuals to continually monitor others’ social lives, compare friendship networks, and directly quantify their own friendships. It is no surprise that social media usage has been associated with high rates of anxiety, depressive symptoms, and preoccupations with body image and self-presentation. Further, it has been shown to contribute to feelings of inadequacy, disconnection, and loneliness, often in the form of “fear of missing out” (FOMO). Thus, in our work as clinicians, we are called upon to help individuals establish healthier relationships with social media.

Although our field has embraced and benefited from advances in technology, this clinical roundtable is geared towards understanding the psychological impact of social media on mental and behavioral health. It will address how to apply CBT and third-wave-informed (i.e., DBT and ACT) interventions to clinical issues that may be exacerbated by social media usage. Panelists specializing in the delivery of evidence-based treatments within diverse clinical settings will review recent research on the effects of social media on mental and behavioral health in childhood, adolescence, young adulthood, and adulthood. Panelists will share insights into how to effectively assess social media usage and its effects on mental and behavioral health as well as demonstrate how targeted interventions can be applied to decrease anxiety related to negative self-perceptions, feeling of inadequacy, and obsessive thinking about social media presence. Discussion will also focus on how to help reduce compulsive checking, constant comparison-making, and reassurance seeking behavior. Clinicians will engage in discussion using case examples to highlight relevant issues and interventions, including diverse uses of SNS among different populations, the role of parents in guiding children’s SNS usage, and challenges associated with managing usage.

8:30 a.m. – 10:00 a.m.
Earn 1.5 continuing education credits
Thurgood Marshall South, Mezzanine Level

Symposium 4
Innovative Training Regimes in Psychopathology in Childhood, Adolescence and Adulthood

CHAIRS:
Ellen Greimel, Ph.D., Department of Child and Adolescent Psychiatry and Psychotherapy Medical center of the university of Munich, Germany
Charlotte E. Wittekind, Ph.D., Clinical Psychology and Psychotherapy, LMU Munich, Germany

DISCUSSANT:
Eni Becker, Ph.D., Radboud University, Nijmegen, The Netherlands

Primary Category: Translational
Key Words: Cognitive Biases / Distortions, Information Processing, Translational Research

Modification Training Reduces Social Anxiety in Clinically Anxious Children
Mike Rinck, Ph.D., Radboud University Nijmegen
Anke Klein, Radboud University Nijmegen
Ron Rapee, Macquarie University
Jennifer Hudson, Macquarie University

Interpretation Bias Modification Effects on Anxiety Using a Mobile VR Tool
Elske Salemink, Ph.D., University of Amsterdam, the Netherlands
Boris Otkhmezuri, University of Kent, UK
Marilisa Boffo, University of Amsterdam, the Netherlands
Panote Siriaraya, Kyoto Sangyo University, Japan
Bundy Mackintosh, University of Essex, UK
Chee Siang Ang, University of Kent, UK

Reappraisal Training in Adolescents With Major Depression Using Eye Tracking
Ellen Greimel, Ph.D., Department of Child and Adolescent Psychiatry and Psychotherapy Medical center of the university of Munich, Germany
Charlotte Piechaczek, Department of Child and Adolescent Psychiatry and Psychotherapy Medical center of the university of Munich, Germany
Lisa Feldmann, Department of Child and Adolescent Psychiatry and Psychotherapy Medical center of the university of Munich, Germany
Verena Pehl, Department of Child and Adolescent Psychiatry and Psychotherapy Medical center of the university of Munich, Germany
Gerd Schulte-Koerne, Department of Child and Adolescent Psychiatry and Psychotherapy Medical center of the university of Munich, Germany

Web-Based Avoidance Training in Smoking: A Replication Study
Charlotte E. Wittekind, Ph.D., Clinical Psychology and Psychotherapy, LMU Munich, Germany
Daniel Luedecke, University Medical Center Hamburg-Eppendorf; Institute of Medical Sociology
Thomas Ehring, LMU Munich
Barbara Cludius, LMU Munich

Transfer After a Cognitive Control Training: Evidence From a Healthy Sample
Jasmien Vervaeke, Ph.D. – Ghent University & imec-mict-UGent

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8:30 a.m. – 10:00 a.m.
Earn 1.5 continuing education credits
Virginia B, Lobby Level

Symposium 6
To Accommodate or Not to Accommodate? Improving Academic Success for Children and Adolescents with Externalizing Problems

CHAIR:
Fiona L. Macphee, M.S., Florida International University

DISCUSSANT:
George J. DuPaul, Ph.D., Lehigh University

Primary Category: Child / Adolescent - School-Related Issues
Key Words: School, Child Externalizing

Occupational Therapy Classroom: Student Behavior and Academic Productivity
Fiona L. Macphee, M.S., Florida International University
Natasha Olson, Minnesota State University
Carlos Panahon, Minnesota State University
Elizabeth Gnagy, Florida International University
Andrew Greiner, Florida International University
Erika Coles, Florida International University
Joseph Raiker, Florida International University
William Pelham, Florida International University

Activity Breaks as Classroom Accommodation for Students With ADHD
Erika Coles, Ph.D., Florida International University
Brittany Merill, Florida International University
Fiona Macphee, Florida International University
Elizabeth Gnagy, Florida International University
Andrew Greiner, Florida International University
Joseph Raiker, Florida International University
William Pelham, Florida International University

Daily Report Card Intervention: History, Challenges, and Future Directions
Kellina Pyle, B.S., University at Buffalo, SUNY
Gregory Fabiano, University of Buffalo

School Services for Youth With Emotional and Behavioral Problems
Steven W. Evans, Ph.D., Ohio University
Julie Owens, Ohio University
Chelsea Hustus, Ohio University
Judy Harrison, Rutgers University

8:30 a.m. – 10:00 a.m.
Earn 1.5 continuing education credits
Roosevelt 5, Exhibition Level

Symposium 10
Optimizing The Clinical Care of Youth With Tourette's Disorder

CHAIR:
Joseph McGuire, Ph.D., Johns Hopkins University

DISCUSSANT:
Douglas Woods, Ph.D., Marquette University

Primary Category: Tic and Impulse Control Disorders
Key Words: Tic Disorders, Tourette Syndrome, Habit Reversal

Enhancing Behavior Therapy for Youth With Tourette's Syndrome
Joseph McGuire, Ph.D., Johns Hopkins University
Nathaniel Ginder, M.D., University of California Los Angeles
James McCracken, M.D., University of California Los Angeles
John Piacentini, Ph.D., University of California Los Angeles

Testing Tic Suppression: What We’ve Learned and Where We’re Going
Christine Conelea, Ph.D., University of Minnesota
Brianna Wellen, B.A., University of Utah
Douglas Woods, Ph.D., Marquette University
Deanna Greene, Ph.D., Washington University In St. Louis
Kevin Black, M.D., Washington University In St. Louis
Matthew Specht, Ph.D., Weill Cornell Medical College
Michael Himle, Ph.D., University of Utah
Hanjoo Lee, Ph.D., University of Wisconsin-Milwaukee
Matthew Capriotti, Ph.D., San Jose State University

Randomized Controlled Trial Evaluating the Efficacy of TicHelper.Com
Michael Himle, Ph.D., University of Utah
8:30 a.m. – 11:30 a.m. (TICKETED)
Earn 3 continuing education credits
Washington 6, Exhibition Level

Workshop 2
Developing a Trauma-Informed Treatment in Primary Care: The embarACE Model for Patients With Adverse Childhood Experiences (ACEs)

Dennis Pusch, Ph.D., Southport Psychological Services
Chantelle Klassen, M.A., Alberta Heath Services
Keith S. Dobson, Ph.D., Fellow (ABCT), Founding Fellow (Academy of Cognitive Therapy); Fellow (Canadian Ass’n of CBT), University of Calgary

Moderate level of familiarity with the material
Primary Category: Trauma and Stressor Related Disorders and Disasters, Primary Care
Key Words: Trauma, Primary Care, Treatment-CBT

The combined burden of chronic disease, addictions, and mental illness in primary care settings is staggering. Adverse childhood experiences (ACEs) have been found to be the most potent cumulative predictors of these problems in adults. Effective screening of patients can help physicians identify which patients have experienced ACEs, and are thus most likely to develop physical and mental health problems. Moreover, a trauma-informed approach to the care of these patients could reduce their chance of developing health problems. In this presentation, we briefly review recent data that shows how ACEs are significantly related to adult health risk behaviors, and a wide range of specific conditions and symptoms. The results showed that the association between ACEs and later outcomes was especially strong for adults who displayed low resilience, and that the relationship between ACEs and health outcomes was significantly mediated by
emotional dysregulation and interpersonal problems. Based on these findings, combined with a published literature review and consultation with experts in the field of trauma, a 6-session treatment entitled the embrACE program was developed for adults who have experienced traumatic childhoods. The treatment uses CBT, mindfulness and ACT techniques, with an emphasis on increasing resilience, improving emotional regulation, and strengthening interpersonal connections. The process and rationale underlying the treatment development will be discussed, and the treatment model will be presented in detail. A thorough description of the skills-based program will be provided, coupled with experiential exercises so that participants can understand how the issue of ACEs can be meaningfully addressed in both primary care and mental health settings. Participants will understand the logic and content of the embrACE program, and the linkage between the science of trauma and its long-term effects. The workshop promotes knowledge mobilization and the transfer of science to practice. As ACEs are potent predictors of adult health problems, behavioral healthcare treatments that increase resilience, emotional regulation, and interpersonal functioning in primary care patients are a unique opportunity for hope.

You will learn:

- Recognize the long-term effects of childhood adversity (ACEs) on adult health;
- Examine the modifiable risk factors that result from ACEs;
- Describe a novel treatment program, designed to change risks factors associated with ACEs in adults in primary care settings.

9:00 a.m. – 10:00 a.m.
Delaware A, Lobby Level
Symposium 13

Parent-Child Relationships and Sexual-Minority Peoples' Mental Health

CHAIR: 
Audrey Harkness, Ph.D., Department of Psychology, University of Miami

DISCUSSANT: 
John E. Pachankis, Ph.D., Department of Social and Behavioral Sciences, Yale School of Public Health

Primary Category: Gay / Lesbian / Bisexual / Transgender Issues
Key Words: LGBTQ+, Parenting, Families

Parenting and Heterosexual Youth Attitudes Toward Sexual-Minority People

Audrey Harkness, Ph.D., Department of Psychology, University of Miami

Study of Sexual-Minority Young Mens' Parental Relationships and Mental Health

Timothy J. Sullivan, B.A., Department of Social and Behavioral Sciences, Yale School of Public Health

John E. Pachankis, Ph.D., Yale School of Public Health
Dialectical behavior therapy (DBT) is an empirically-supported treatment for suicide and self-injury among adults with emotion dysregulation (Linehan et al., 2015; Koons et al., 2001). DBT has been adapted for use with suicidal, multi-problem adolescents (Miller et al., 2007) and shown to be similarly effective in this population (Mehlum et al., 2014). While DBT is a well-known treatment, the nuances of implementing it moment to moment can be difficult for novices to learn and even more difficult to master (Koerner, 2011). Indeed, our collective experience implementing DBT in respected training hospitals has highlighted this as a challenging task for trainees from many disciplines. In this mini-workshop, we will do a live role-play demonstration of an individual DBT session with an adolescent while simultaneously “tweeting” key treatment strategies.

In three parts, we will offer an optimal environment to learn about and distinguish dialectical (e.g., extending, use of metaphor) and stylistic (movement, speed, and flow, reciprocal warmth, and irreverence) strategies in DBT. We will start with a brief overview of the DBT treatment frame and strategies, followed by a clinical vignette of an adolescent mid-treatment in DBT. We will then do a role-play of a DBT session. During the session, we will project a text scroll being entered in real time highlighting the specific strategies used (both the name of the strategy and a brief label describing its function/rationale). After the therapy demonstration, we will facilitate a discussion and answer questions.

While therapy demonstrations are interesting to learners at most levels, they often suffer from some weaknesses. They may be too scripted, ruining the spontaneity that is present in actual therapy. They can also lack context, so that the observer is left unclear as to why the clinician made the decisions they made. Because DBT is a principles-based treatment (Linehan, 1993), we hope to keep our role play loose and fresh,
while still remaining clinically relevant. Through framing ahead of time and annotating throughout, we hope to deepen the experience of the workshop participant, so that they leave confident they could begin to use the dialectical and stylistic strategies immediately.

You will learn:

- Accurately identify the stylistic and dialectical strategies used in dialectical behavior therapy.
- Describe the ways in which stylistic and dialectical strategies can be used with adolescents.
- Prepare to use dialectical behavior therapy strategies with difficult-to-treat adolescent patients.

10:15 a.m. – 11:45 a.m.
Earn 1.5 continuing education credits
Madison B, Mezzanine Level

Symposium 14
Leveraging Technology to Improve Autism Acceptance and Treatment

CHAIR:
Lauren Kenworthy, Ph.D., Children's National Health System

DISCUSSANT:
Sharon daVanport, Autism Women's Network

Primary Category: Technology
Key Words: Autism Spectrum Disorders, Parent Training, Randomized Controlled Trial

Online Parent Training Modules: Executive Function in Autistic Children
Lauren Kenworthy, Ph.D., Children's National Health System
Deb Childress, Ph.D., 3C Institute
Alyssa Verbalis, Ph.D., Center for Autism Spectrum Disorders, Children's National
Anna Armour, M.A., Center for Autism Spectrum Disorders, Children's National
Monica Adler Werner, M.A., Ivymount School and Programs
Kelly Kocher, 3C Institute
Mary Troxel, B.A., University of Colorado School of Medicine, Department of Psychiatry

Results of Sesame Street's See Amazing in All Children Online Initiative
Laura Anthony, Ph.D., University of Colorado, School of Medicine
Hillary Robertson, MPh, Department of Psychiatry, Georgetown University
Alyssa Verbalis, Ph.D., Children's National
Sydney Seese, B.A., Children's National
Celene Domitrovich, Ph.D., Georgetown University
Cheryl Dickter, Ph.D., College of William & Mary
Joshua Burk, Ph.D., Department of Psychology, College of William & Mary
Mary Troxel, B.A., University of Colorado School of Medicine, Department of Psychiatry
Bruno Anthony, Ph.D., University of Colorado School of Medicine, Children’s Hospital of Colorado
Pediatric Mental Health Institute

Parent-Mediated Sexual Education Curriculum for Youth With ASD
Cara Pugliese, Ph.D., Children's National Health System and The George Washington University School of Medicine
Allison Ratto, Ph.D., Center for Autism Spectrum Disorders, Children's National
• Katerina Dudley, B.A., UNC Chapel Hill
Yael Granader, Ph.D., Center for Autism Spectrum Disorders, Children's National
Laura Anthony, Ph.D., University of Colorado Anschutz Medical Center, School of Medicine, Children's Hospital of Colorado

Developing Computer Games That Target Social Information Processing in ASD
John Herrington, Ph.D., Children's Hospital of Philadelphia
Lucero Cordero, B.A., The Children's Hospital of Philadelphia
Dravis Zachary, B.A., The Children's Hospital of Philadelphia
Benjamin Farber, B.A., BioStream Technologies LLC
Luc Robinson, B.A., BioStream Technologies LLC
Mary Jane Weiss, Ph.D., BioStream Technologies LLC
Michael Farber, B.A., BioStream Technologies LLC

10:45 a.m. – 12:45 p.m. (TICKETED)
Earn 2 continuing education credits
Roosevelt 1, Exhibition Level

Master Clinician Seminar 1
Challenges to the Achievement of Optimal CBT Outcomes in Pediatric OCD Treatment

Martin Franklin, Ph.D., University of Pennsylvania

Basic to moderate level of familiarity with the material
Primary Category: OCD (Obsessive Compulsive Disorder), Treatment - CBT
In the last 20 years, the evidence base for CBT involving exposure plus response prevention for treating youth with OCD has grown considerably. Treatment typically involves a combination of in vivo and imaginal exposure to situations and thoughts that provoke obsessional anxiety, along with response prevention, which is aimed at reducing and ultimately eliminating compulsions and other passive forms of avoidance. Randomized controlled trials conducted around the world support the efficacy of exposure-based interventions, and effectiveness trials have since provided evidence that robust and durable outcomes can be achieved outside the academic medical contexts in which these treatments were developed and validated. These substantive advances notwithstanding, response to treatment is still neither universal nor complete. This Master Clinician Seminar will focus on common challenges presented in treatment and clinical strategies to address these challenges. Psychiatric comorbidity, family accommodation, motivational readiness, and other challenges to within- and between-session protocol adherence will be addressed in turn, and ample time will be available for discussion of clinical cases in which optimal outcomes are proving difficult to achieve.

You will learn:

- Explain the expected trajectories of response to CBT for pediatric OCD, which serve as a guide for treatment;
- Describe the common clinical challenges to achievement of optimal outcomes, including psychiatric comorbidity, family accommodation, and motivational readiness;
- Discover clinical strategies to address these common clinical challenges.

11:45 a.m. – 1:45 p.m. (TICKETED)
Earn 2 continuing education credits
Marriott Balcony B, Mezzanine Level

Master Clinician Seminar 2
Parent-Child Interaction Therapy

Cheryl B. McNeil, Ph.D., West Virginia University

Basic to Moderate level of familiarity with the material
Primary Category: Child / Adolescent - Externalizing
Key Words: PCIT (Parent Child Interaction Therapy), Parent Training, Child Externalizing

This Master Clinician Seminar describes Parent Child Interaction Therapy (PCIT), an evidence-based behavioral treatment for families of young children with disruptive behavior disorders. PCIT is based on Baumrind’s developmental theory, which holds that authoritative parenting - a combination of nurturance, good communication, and firm limits - produces optimal child mental health outcomes. In PCIT, parents learn authoritative parenting skills through direct therapist coaching of parent child interactions, guided by observational data collected in each session. Parents receive immediate guidance and feedback on their use of techniques such as differential social attention and consistency as they practice new relationship
enhancement and behavioral management skills. Videotape review, slides, handouts, and experiential exercises will be used to teach participants the basic interaction skills and therapist coding and coaching skills used during treatment sessions. Applications of PCIT within physically abusive families and other special populations will be discussed.

You will learn:

- Articulate the theoretical background underlying PCIT;
- Explain how to employ the PRIDE skills that are used for relationship-enhancement component of PCIT;
- Practice coding parent-child interactions as a mechanism for assisting caregivers in mastering skills;
- Describe the basic skills of discipline in PCIT;
- Delineate how to draw on the research base for PCIT.

12:00 p.m. – 1:30 p.m.
Earn 1.5 continuing education credits
Virginia B, Lobby Level

Symposium 22
The Identification and Treatment of Behavioral Health Problems in Pediatric Primary Care

CHAIRS:
Jami F. Young, Ph.D., Children's Hospital of Philadelphia, Perelman School of Medicine, University of Pennsylvania
Jennifer Mautone, Ph.D., Children’s Hospital of Philadelphia

DISCUSSANT:
Eric Lewandowski, Ph.D., New York University School of Medicine

Primary Category: Primary Care
Key Words: Primary Care, Child, Community-Based Assessment / Intervention

Predicting and Improving Show Rates in Integrated Primary Care
Billie Schwartz, Ph.D., Children’s Hospital of Philadelphia
Stephanie Brennan, MHA, Children's Hospital of Philadelphia
Andrew Orapallo, B.A., Children's Hospital of Philadelphia
Jennifer Mautone, Ph.D., Children's Hospital of Philadelphia

Insomnia Symptoms, Poor Sleep, Behavioral Concerns in Preschoolers
Ariel Williamson, Ph.D., Children’s Hospital of Philadelphia
Kristen Lanzilotta, B.S., St. Joseph's University
Nicholas Ambrulavage, B.S., St. Joseph's University
Julia Krasny, B.S., St. Joseph's University
Jodi Mindell, Ph.D., Children's Hospital of Philadelphia

Screening for Adolescent Depression in Large Pediatric Care Network
Alyssa McCarthy, M.S., Rutgers University
Morgan Bush, B.A., Children's Hospital of Philadelphia
Jami Young, Ph.D., Children's Hospital of Philadelphia

Integrated Behavioral Health Services in Pediatric Primary Care
Courtney B. Wolk, Ph.D., University of Pennsylvania School of Medicine
Cidav Zuleyha, Ph.D., University of Pennsylvania School of Medicine
Mautone Jennifer, Ph.D., Children's Hospital of Philadelphia
Jami Young, Ph.D., Children's Hospital of Philadelphia
Rinad Beidas, Ph.D., University of Pennsylvania School of Medicine
David Mandell, Sc.D., University of Pennsylvania School of Medicine

12:00 p.m. – 1:30 p.m.
Earn 1.5 continuing education credits
Delaware B, Lobby Level

Symposium 24
Enhancing Evidence-Based Treatments for Youth Depression: Implications for the Use of Biological and Behavioral Tools in Identifying Candidate Mechanisms of Change

CHAIRS:
Rachel A. Vaughn-Coaxum, M.A., Harvard University
Dikla Eckshtain, Ph.D., Massachusetts General Hospital, Harvard Medical School

DISCUSSANT:
V. Robin Weersing, Ph.D., SDSU-UC San Diego JDP in Clinical Psychology

Primary Category: Child / Adolescent - Depression
Key Words: Depression, Change Process / Mechanisms, Evidence-Based Practice

Self-Regulatory Function and Depression Symptomatology in Adolescents
Rachel A. Vaughn-Coaxum, M.A., Harvard University
Cognitive Control of Depression in Adolescents and Young Adults
*Meredith Gunlicks-Stoessel, Ph.D.*, University of Minnesota,
*Nicole Morrell, M.A.*, University of Minnesota
*Julie Nguyen, M.A.*, University of Minnesota
*Anna Wagner, B.A.*, University of Minnesota
*Lizzy Egbert, M.A.*, University of Minnesota

Development of Personalized Treatment for Child Depression
*Dikla Eckshtain, Ph.D.*, Massachusetts General Hospital, Harvard Medical School
*John Weisz, Ph.D.*, Harvard University

Inpatient Psychiatric Hospitalization Readmission of Family-Based Treatment
*Jarrod M. Leffler, ABPP, Ph.D.*, Mayo Clinic

Neural Response to Reward as Treatment Response in Adolescent Depression
*Erika Forbes, Ph.D.*, University of Pittsburgh

12:00 p.m. – 1:30 p.m.
Earn 1.5 continuing education credits

Washington 3, Exhibition Level

Symposium 27
Data-Informed Approaches to Pediatric OCD: New Directions for Research and Clinical Practice

Primary Category: Obsessive Compulsive and Related Disorders
Key Words: OCD (Obsessive Compulsive Disorder); Child

Outcomes in Pediatric OCD Using a Self-Report Scale
*Joseph McGuire, Ph.D.*, Johns Hopkins University
*Daniel Geller*, Massachusetts General Hospital and Harvard Medical School
*Tanya Murphy*, University of South Florida
*Brent Small*, University of South Florida
*Arianna Unger*, Brandeis University
*Sabine Wilhelm*, Massachusetts General Hospital and Harvard Medical School
**Neurocognitive Function in Pediatric OCD: A Large Family Study**

*Eric Storch, Baylor College of Medicine*

*Amitai Abramovitch, Ph.D., Texas State University*
*Alessandro De Nadai, Texas State University*
*Daniel Geller, Massachusetts General Hospital and Harvard Medical School*

**Symptom Measurement in Pediatric OCD**

*Alessandro De Nadai, Ph.D., Texas State University*
*Daniel Geller, Massachusetts General Hospital and Harvard Medical School*
*Sabine Wilhelm, Massachusetts General Hospital and Harvard Medical School*
*Brent Small, University of South Florida*
*Joseph McGuire, Johns Hopkins University*
*Tanya Murphy, University of South Florida*
*Eric Storch, Baylor College of Medicine*

**Development and Evaluation of Children’s Yale-Brown OC Scale**

*Amitai Abramovitch, Ph.D., Texas State University*
*Alessandro De Nadai, Ph.D., Texas State University*
*Eric A. Storch, Ph.D., Baylor College of Medicine*
*Monica Wu, Ph.D., UCLA School of Medicine*
*Joseph McGuire, Ph.D., Johns Hopkins University*
*Amitai Abramovitch, Ph.D., Texas State University*
*Alessandro De Nadai, Ph.D., Texas State University*

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1:45 p.m.– 3:15 p.m.
Earn 1.5 continuing education credits

**Symposium 104**

**Innovative Technology to Assess and Treat Core and Co-Occurring Problems in Autism**

**CHAIR:**
*Daniel L. Hoffman, ABPP, Ph.D., Long Island Jewish Medical Center of Northwell Health & Private Practice*
DISCUSSANT:
Judith Reaven, Ph.D., Associate Professor in Psychiatry & Associate Director of JFK

Primary Category: Autism Spectrum and Developmental Disorders
Key Words: Technology, Autism Spectrum Disorders, PTSD (Posttraumatic Stress Disorder)

Training System to Address Facial Emotion Recognition and Expression in Autism
Susan W. White, Ph.D., ABPP, University of Alabama

EMA for Evaluation of and In-Vivo Intervention for Social Competence in ASD
Matthew Lerner, Ph.D., Stony Brook University
Erin Kang, M.A., Stony Brook University
Alan Gerber, M.A., Stony Brook University

A Web-Based Interactive Trauma Scale for ASD
Daniel Hoover, ABPP, Kennedy Krieger Institute
Elizabeth Romero, Ph.D., ASD

A Systematic Review of High- and Low-Tech CBT for Anxiety in Youths With ASD
Daniel L. Hoffman, ABPP, Ph.D., Long Island Jewish Medical Center of Northwell Health & Private Practice

1:45 p.m. – 3:15 p.m.
Earn 1.5 continuing education credits
Hoover, Mezzanine Level

Symposium 31
Putative Mechanisms of Response to CBT in Youth with Transdiagnostic Mood Symptoms

CHAIRS:
Amy West, Ph.D., Children's Hospital of Los Angeles
Victoria Cosgrove, Ph.D., Stanford University School of Medicine

DISCUSSANT:
Edward Craighead, Ph.D., Department of Psychiatry and Behavioral Sciences, Emory University

Primary Category: Bipolar Disorders
Key Words: Mood, Treatment-CBT, Change Process / Mechanisms
Executive Control Stress and Association With Physiological Arousal
Meghan Quinn, Ph.D., Department of Psychology and Human Development, Vanderbilt University

Role of Arousal in Emotion-Related Impulsivity: Potential Treatment Target?
Jennifer Pearlstein, B.A., University of California at Berkeley
Sheri Johnson, Ph.D., University of California at Berkeley
James Madole, B.A., University of Texas at Austin

Child- and Family-Focused CBT for Pediatric Bipolar Disorder
Amy West, Ph.D., Children's Hospital of Los Angeles
Heather McPherson, Ph.D., Warren Alpert Medical School of Brown University
Sally Weinstein, Ph.D., University of Illinois at Chicago

Does CBT Alter Stress-Induced Inflammatory Response in Pediatric Mood?
Victoria Cosgrove, Ph.D., Stanford University School of Medicine
Jennifer Pearlstein, B.A., University of California at Berkeley
Yael Rosenberg-Hasson, Ph.D., Human Immune Monitoring Core, Stanford University School of Medicine

Neural Mechanisms as Targets in Family-Based Treatment
Patricia Walshaw, Ph.D., UCLA Department of Psychiatry and Biobehavioral Sciences
Casey Armstrong, B.A., Northwestern University
Amy Garrett, Ph.D., UT Health Science Center San Antonio
Susan Bookheimer, Ph.D., University of California, Los Angeles
Kiki Chang, Ph.D., Private Practice
David Miklowitz, Ph.D., UCLA Semel Institute for Neuroscience and Human Behavior

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1:45 p.m. – 3:15 p.m.
Earn 1.5 continuing education credits

Thurgood Marshall North, Mezzanine Level

Symposium 32
Using Technology in the Treatment of Youth Anxiety Disorders

CHAIR:
Caroline Donovan, Ph.D., School of Applied Psychology, Griffith University

DISCUSSANT:
Thomas H. Ollendick, Ph.D., Virginia Polytechnic Institute and State University
Primary Category: Child / Adolescent - Anxiety
Key Words: Child Anxiety, CBT, Technology

**Computer-Assisted CBT for Childhood Anxiety: Mental Health Centers**
*Eric A. Storch, Ph.D.*, Baylor College of Medicine
*Alison Salloum, Ph.D.*, School of Social Work and Department of Pediatrics, University of South Florida
*Adam Lewin, Ph.D.*, Psychiatry and Behavioural Neurosciences, University of South Florida
*Erika Crawford, Ph.D.*, Department of Psychology, Temple University, Philadelphia, USA
*Nicole McBride, Ph.D.*, Psychiatry and Behavioural Neurosciences, University of South Florida

**Unassisted BRAVE-ONLINE: Lessons Learned and Solutions Found**
*Caroline Donovan, Ph.D.*, School of Applied Psychology, Griffith University
*Jade Booth, MPsych*, Queensland Health
*Sonja March, Ph.D.*, University of Southern Queensland
*Sue Spence, Ph.D.*, Griffith University

**CBT for Pediatric OCD: D-Cycloserine Three-Session CBT Webcam**
*Lara Farrell, Ph.D.*, School of Applied Psychology, Griffith University
*Allison Waters, Ph.D.*, Griffith University
*Evelin Tiralongo, Ph.D.*, Griffith University
*Vinay Garbharran, M.D.*, Gold Coast University Hospital
*Ella Oar, Ph.D.*, Macquarie University
*Harry McConnell, Ph.D.*, Griffith University
*Thomas Ollendick, Ph.D.*, Virginia Tech
*Eric Storch, Ph.D.*, Baylor College of Medicine

**Integrating ABM and EMA During CBT**
*Krystal Lewis, Ph.D.*, Emotion and Development Branch, NIMH
*Ashley Smith, Ph.D.*, Emotion and Development Branch, NIMH
*Katharina Kircanski, Ph.D.*, Emotion and Development Branch, NIMH
*Melissa Brotman, Ph.D.*, Emotion and Development Branch, NIMH
*Daniel Pine, M.D.*, Emotion and Development Branch, NIMH

**Attention Control and CBT in Reducing Anxiety Symptoms in Children**
*Allison Waters, Ph.D.*, School of Applied Psychology, Griffith University
*Steven Candy, Ph.D.*, Scandy Consultants
*Melanie Zimmer-Gembeck, Ph.D.*, Griffith University
3:00 p.m. – 6:00 p.m.  (TICKETED)
Earn 3 continuing education credits

Marriott Balcony B, Mezzanine Level

Workshop 6
Coordinated Interventions for School Avoidance: Family, Schools, and Clinicians

Laura C. Skriner, Ph.D., Evidence Based Practitioners of New Jersey
Brian C. Chu, Ph.D., Rutgers University

Basic to Moderate level of familiarity with the material
Primary Category: Child / Adolescent - School-Related Issues, Child/Adolescent - Anxiety
Key Words: School, Child Anxiety, Child Depression

School attendance problems are one of the most vexing and impairing problem behaviors that affect childhood. An acute episode of school refusal can quickly become chronic and interfere in multiple domains of the youth and family’s lives. Anxiety, depressed mood, and intolerance of negative affect are often at the root of school refusal. Successful intervention requires a concerted, coordinated effort involving the child, family, school and therapist/mental health professional. Early detection and direct, goal-oriented solutions are needed to prevent acute events from becoming prolonged episodes. Attendees of the workshop will become familiar with the scope of the problem, a mood-based conceptualization of school avoidance, and its associated strategies, including an emphasis on including families and schools in collaborative interventions. Attendees will also be exposed to, and gain practice in, easily implementable assessment tools and behavioral intervention strategies. Experiential exercises and case examples will be utilized to bring the strategies to life. This workshop is designed for clinicians with some direct clinical experience conducting CBT with school-aged youth.

You will learn:

- Explain how to use a mood-based conceptualization of school refusal behaviors and learn to use a brief functional assessment tool to identify four key functions that maintain school refusal.
- Describe how to apply a cognitive behavioral framework to school refusal and to implement basic treatment strategies, focusing on behavioral experiments and exposures and building challenge hierarchies;
- Specify roles for child, family, school, and clinic to play in addressing school refusal, including understanding common parent-child interactions that maintain school refusal and engaging school personnel in collaborative planning.
3:30 p.m. – 5:00 p.m.  
Earn 1.5 continuing education credits  

Roosevelt 5, Exhibition Level  

Panel Discussion 12  

Bringing Evidence-Based Treatments for Youth Depression into Community Settings: Opportunities and Challenges  

MODERATOR:  
Jami F. Young, Ph.D., Children's Hospital of Philadelphia, Perelman School of Medicine, University of Pennsylvania  

PANELISTS:  
Elizabeth McCauley, Ph.D., University of Washington  
Laura Mufson, Ph.D., Columbia University  
V. Robin Weersing, Ph.D., SDSU-UC San Diego JDP in Clinical Psychology  
Anat Brunstein-Klomek, Ph.D., Interdisciplinary Center of Herzilya, Israel  

Primary Category: Child / Adolescent - Depression  

Key Words: Adolescent Depression, Implementation, Evidence-Based Practice  

Depression in adolescence is prevalent and associated with lifelong impairment. Although there have been advances in psychological treatments for youth depression, implementation of empirically validated treatments in community settings has not yielded the same response and remission rates as when delivered in research settings. While both cognitive behavior therapy (CBT) and interpersonal psychotherapy (IPT-A) are well-established empirically supported therapies (EST) for adolescent depression, a significant number of adolescents do not have access to them. To improve access, treatments are being taken to schools and primary care clinics. It is essential to understand how to successfully implement these treatments in community settings.  

Panelists will summarize efforts to implement ESTs in community settings and will present issues/challenges they have encountered in taking treatments out of the ivory tower. Dr. McCauley will review findings and lessons learned from a series of projects designed to enhance the integration of evidence-based practices into school based mental health services, focusing on her experiences developing and implementing Brief Intervention for School Clinicians (BRISC). Dr. Mufson will discuss her work implementing IPT-A in school-based health clinics and primary care. Dr. Weersing will discuss her work bringing cognitive and behavioral interventions to primary care and the pros and cons of transdiagnostic behavioral interventions for depression and anxiety. Dr. Brunstein-Klomek will discuss training of school psychologists in IPT-A and implementation of training as part of Israel’s National Suicide Prevention program. All panelists will speak to the role of community settings in reducing ethnic disparities in access and outcomes. Lastly, Dr. Young will facilitate a group discussion about how to promote successful implementation of depression ESTs, as
well as opportunities to leverage technology as a method for extending treatments and facilitating fidelity in community settings.

3:30 p.m. – 5:00 p.m.

Earn 1.5 continuing education credits

Madison B, Mezzanine Level

Symposium 42

Digital Platforms for Youth With Psychosis: A Focus on Engagement and Treatment

CHAIR:
Michelle H. Lim, Ph.D., Swinburne University of Technology

DISCUSSANT:
David Penn, Ph.D., University of North Carolina at Chapel Hill

Primary Category: Schizophrenia / Psychotic Disorders

Key Words: Technology, Psychosis / Psychotic Disorders, Schizophrenia

Using Digital Media Advertising in Early Psychosis Intervention

Michael L. Birnbaum, M.D., Zucker Hillside Hospital, Psychiatry Research
Chantel Garett, B.S., Strong 365
Asra F Rizvi, Zucker Hillside Hospital, Psychiatry Research
Amit Baumel, Ph.D., Zucker Hillside Hospital, Psychiatry Research
Whitney Muscat, Zucker Hillside Hospital, Psychiatry Research
John M Kane, M.D, Zucker Hillside Hospital, Psychiatry Research

Developing a Novel Peer LED Digital Intervention for Youth With Psychosis

Claire Peck, B.A., Centre for Mental Health, Swinburne University of Technology
Michelle H Lim, Ph.D., Swinburne University of Technology
Fiona Foley, BSC (Hons), Swinburne University of Technology
Neil Thomas, DPsych, Swinburne University of Technology

Feasibility of +Connect: Pilot Digital Intervention: Loneliness in Youth With Psychosis

Michelle H. Lim, Ph.D., Swinburne University of Technology
John Gleeson, Ph.D., Australian Catholic University
Thomas Rodebaugh, Ph.D., Washington University in St Louis
Horyzons USA: Moderated Online Social Therapy for First-Episode Psychosis

Kelsey Ludwig, M.A., University of North Carolina at Chapel Hill
Halverson T, B.S., University of North Carolina Chapel Hill
Mario Alvarez-Jimenez, Ph.D., Orygen, The National Centre of Excellence in Youth Mental Health
John Gleeson, Ph.D., Australian Catholic University
David L Penn, Ph.D., University of North Carolina Chapel Hill

3:30 p.m. – 5:00 p.m.
Earn 1.5 continuing education credits

Thurgood Marshall East, Mezzanine Level

Symposium 46
Transdiagnostic Group Psychotherapy for Children and Adolescents

CHAIR:
Nina Shiffrin, Ph.D., Alvord Baker & Associates

DISCUSSANT:
Mary Alvord, Ph.D., Alvord Baker & Associates

Primary Category: Transdiagnostic
Key Words: Transdiagnostic, Group Therapy, Child

UP for Transdiagnostic Treatment of Emotional Disorders in Children

Jill Ehrenreich-May, Ph.D., University of Miami
Sarah Kennedy, Ph.D., Children's Hospital Colorado
Emily Bilek, Ph.D., University of Michigan
Niza Tonarely, M.S., University of Miami
Jamie Sherman, M.S., University of Miami

Dialectical Behavior Therapy for Multiproblem Adolescents

Kelly Graling, Ph.D., Cognitive Behavioral Consultants
Chad Brice, Ph.D., Cognitive and Behavioral Consultants
Alec Miller, Psy.D., Cognitive and Behavioral Consultants, LLC

**Transdiagnostic Group Behavioral Activation and ET for Youth Anxiety and Depression**

Brian C. Chu, Ph.D., Rutgers University
Sofia Crocco, Psy.M., Department of Clinical Psychology, Graduate School of Applied and Professional Psychology, Rutgers University
Petra Esseling, M.A., Department of Clinical Psychology, Graduate School of Applied and Professional Psychology, Rutgers University
Margaret J Areizaga, Psy.D, Manhattan Psychology Group, PC
Alison Lindner, Ph.D., UW-Madison Wisconsin Center for Education Research
Laura Skriner, Ph.D., Rutgers Graduate School of Applied and Professional Psychology

**Transdiagnostic Group Therapy for Disadvantaged Minority Youth in School Settings**

Brendan A. Rich, Ph.D., Catholic University of America
Colleen Cummings, Ph.D., Alvord Baker & Associates
Nina Shiffrin, Ph.D., Alvord Baker & Associates
Anaí Collado, Ph.D., Alvord Baker & Associates
Melissa Zarger, M.A., Alvord Baker & Associates
Kristyn N. Donohue, B.S., Catholic University of America
Christopher J Senior, B.A., Catholic University of America
Sheina A Godovich, B.A., Alvord Baker & Associates
Mary K Alvord, Ph.D., Alvord Baker & Associates

**SATURDAY**

8:00 a.m. – 11:00 a.m. (TICKETED)
Earn 3 continuing education credits

Roosevelt 1, Exhibition Level

Workshop 9

**Addressing Functional and Executive Deficits in Youth With ADHD: Evidence-Based Treatments With Individual, School, and Family Benefits**

Jenelle Nissley-Tsiopinis, Ph.D., Children's Hospital of Philadelphia, Perelman School of Medicine, University of Pennsylvania
Richard Gallagher, Ph.D. in Clinical Psychology, The Child Study Center of Hassenfeld Children's Hospital, NYU Langone Health
Recent major advances have been made in the psychosocial treatment of children and adolescents with ADHD. Challenges in organization, time management, and planning are one of the most prominent problems that impact individual, family, and school adjustment for youth with ADHD. Various forms of Organizational Skills Training (OST) are well-established treatments for children with ADHD (Evans et al., 2014). OST with elementary school children has wide impact in improving organization, time management, and planning which in turn contributes to improved achievement and to reduced homework problems and family conflict (Abikoff et al., 2013). OST has been fully tested for elementary school children in clinical settings with promising results being shown for adaptations for adolescents and in school settings. The manualized treatment is provided two times per week in 20 sessions to intensely alter the ways children respond to school and home demands. Conceptually, OST recognizes how the symptoms of ADHD interfere with practical execution of steps needed during school days and at home. Parents and teachers see these practical executive function deficits as a critical concern. This presentation will review the full protocol (Gallagher et al., 2014) with emphasis on child, parent, and teacher orientation and skills building in five areas: supportive parent behavior management, tracking assignments, managing materials, time management, and planning. In addition to didactics, specific exercises and role plays will be used similar to those used to train over 25 research therapists and other clinicians. Participants will learn how to collaboratively engage children so that they feel empowered and how to incorporate positive responses from parents and teachers to effectively motivate children. A substantial portion of the program will review the components of other empirically supported programs for middle school students and empirically supported and promising programs provided by school personnel. The presenters are two of the authors of the clinical intervention, the extension for middle school groups, and an adaptation of the elementary school program currently being evaluated in a randomized clinical trial.

You will learn:

- Describe the main skills deficits that over half of children with ADHD demonstrate in organization, time management, and planning;
- Explain how to evaluate candidates for treatment and how to implement all of the components of organizational skills training for children and adolescents;
- Describe how to implement treatments for children and adolescents in clinical settings and how to adapt treatment for school settings.

8:30 a.m. – 10:00 a.m.
Earn 1.5 continuing education credits
Virginia A, Lobby Level
Clinical Roundtable 5
Addressing the Impact of Trauma on Youth with Autistic Spectrum Disorder and Other Developmental Disabilities

MODERATOR:
Juliet Vogel, Ph.D., Zucker School of Medicine @ Hofstra/Northwell

PANELISTS:
Peter J. D'Amico, ABPP, LIJ Medical Center
Connor M. Kerns, Ph.D., Drexel University
Daniel Hoover, ABPP, Kennedy Krieger Institute
Michael Gomez, Ph.D., Texas Tech University Health Sciences Center

Primary Category: Autism Spectrum and Developmental Disorders
Key Words: Child Trauma / Maltreatment, Autism Spectrum Disorders, Developmental Disabilities

While there has been growing interest in application of CBT treatments for anxiety in youth with Autism Spectrum (Kerns et al, 2016) and Developmental Disorders (AS/DD), little has been offered regarding the appropriate screening, assessment and treatment of trauma in this unique population. Some evidence suggests higher rates of some forms of trauma in youth with AS/DD (Ko, Pynoos, & Griffin, et al., 2015; Thompson, 2014), yet diagnostic overshadowing and low yield on self-report measures complicate accurate detection and proper evaluation. Further, traditional treatment approaches for youth with AS/DD are primarily focused on functional skills training from an applied behavioral analytic framework, which constrains efforts in recognition of trauma and in consideration of trauma informed intervention (Dymond & Roche, 2009). Five experienced panelists have been assembled to offer strategic recommendations to CBT and ABA clinicians working with youth with AS/DD experiencing the impact of trauma. Connor Kerns will discuss the presentation of trauma symptoms in youth with ASD, issues in assessment and the impact of diagnostic overshadowing on treatment. Dan Hoover will further the discussion on the symptom profile (deficits and strengths) of ASD and how that maps onto a "matrix" of adaptations for Trauma-Focused Cognitive Behavior Therapy (TF-CBT). He will also detail the use of a technological phone application he is piloting to assist with self-report of trauma history and current symptom expression. Michael Gomez will offer specific technological applications for each of the treatment components of TF-CBT and will present on trauma based treatment (TF-CBT) of youth with developmental disabilities in foster care. Peter D'Amico will address the challenge of working with youth with more severe intellectual and developmental disabilities and the application of trauma informed behavioral interventions from Applied Behavior Analysis to Positive Behavioral Supports. Juliet Vogel will moderate and facilitate discussion on current advances and future directions, including the efforts occurring in the National Child Traumatic Stress Network (NCTSN).

8:30 a.m. – 10:00 a.m.
Earn 1.5 continuing education credits
Delaware A, Lobby Level
Panel Discussion 17

Difficult-to-Treat Child Anxiety? Don’t Fear: Innovative Formats and Strategies for Optimizing Treatment Delivery

MODERATORS:
Danielle Cornacchio, M.S., Mental Health Interventions and Technology (MINT) Program, Florida International University
Natalie Hong, B.Sc., Florida International University

PANELISTS:
Anne Marie Albano, Ph.D., ABPP, Columbia University Medical Center
Martin Franklin, Ph.D., University of Pennsylvania
Jennifer Freeman, Ph.D., Department of Psychiatry and Human Behavior, Alpert Medical School of Brown University, Bradley Hospital
Jonathan Comer, Ph.D., Mental Health Interventions and Technology (MINT) Program, Florida International University

Primary Category: Child / Adolescent - Anxiety
Key Words: Child Anxiety, Treatment-Other, Exposure

Anxiety and related disorders are among the most commonly reported mental health problems in children and adolescents. Although recent decades have witnessed considerable scientific advances aimed at clarifying how best to treat youth with anxiety and related problems, rates of treatment non-response and insufficient response among affected youth remain high. For example, roughly 40% of anxious youth do not exhibit adequate symptom reduction or diagnostic remission following participation in our field’s most well supported treatments. Importantly, many of these “difficult-to-treat” youth are those presenting with the most severe and/or complex symptom profiles, or who experience logistical barriers to care, underscoring the need for innovative treatment strategies and formats that transcend the constraints of traditional care models. A growing body of work has begun to focus on adapting supported treatment strategies to better meet the specific needs of such “difficult-to-treat” anxious youth. In this panel, leading experts in the treatment of child anxiety and related problems will share assessment strategies for identifying “difficult-to-treat” anxious youth, as well as state-of-the-science approaches to optimizing gains and outcomes for the most challenging anxiety cases. Particular emphasis will be placed on home-based exposure methods, intensive treatment formats, and Internet-delivered care models that simultaneously optimize the accessibility and ecological validity of supported treatments. Issues in the clinical implementation of these innovative treatment formats, as well as future clinical and research directions will be discussed.

8:30 a.m. – 10:00 a.m.
Earn 1.5 continuing education credits

Harding, Mezzanine Level

Symposium 58
Diagnosing and Treating Callous-Unemotional Type Conduct Problems in Preschoolers: How Can We Do Better?

CHAIR:
Georgette E. Fleming, B.A., University of New South Wales

DISCUSSANT:
Cheryl B. McNeil, Ph.D., West Virginia University

Primary Category: Child / Adolescent - Externalizing
Key Words: Aggression / Disruptive Behaviors / Conduct Problems, Assessment, Evidence-Based Practice

Interview Tool for Assessing Callous-Unemotional Traits in Preschoolers With DB
Bryan Neo, B.S., University of New South Wales
Eva R. Kimonis, Ph.D., University of New South Wales
David Hawes, Ph.D., University of Sydney
Valsamma Eapen, MBBS, DPM, DFT, PhD, FRCPsych, FRANZCP, Chair of Infant, Child and Adolescent Psychiatry at University of New South Wales

Do Callous-Unemotional Traits Moderate the Efficacy of Internet-Delivered PCIT?
Georgette E. Fleming, B.A., University of New South Wales
Eva R. Kimonis, Ph.D., University of New South Wales
Jonathan S. Comer, Ph.D., Florida International University

Callous-Unemotional Traits: Conduct Problem Outcomes in Early Childhood Settings
Naomi M. Cameron, B.S., University of New South Wales
Eva R. Kimonis, Ph.D., University of New South Wales
Sue Morgan, RN, RM, MMH (PerinatInf), Karitane Toddler Clinic, Sydney

School-Based Parent-Child Interaction Therapy for Children With Conduct Problems
Ashneeta H. Prasad, B.S., University of New South Wales
Eva R. Kimonis, Ph.D., University of New South Wales
Mary Lundeen, Ph.D., Coon Rapids Family Place, Minnesota

PCIT for Preschoolers With Callous-Unemotional Type Conduct Problems
Eva R. Kimonis, Ph.D., University of New South Wales
Georgette E. Fleming, BA, University of New South Wales
Nancy Briggs, Ph.D., Mark Wainwright Analytical Centre, University of New South Wales
9:00 a.m. – 10:00 a.m.
Earn 1.5 continuing education credits

Madison A & B (Combined), Mezzanine Level

Symposium 66
As If Parenting Wasn’t Hard Enough: The Attenuating Role of Parental Psychopathology on Behavioral Parent Training

CHAIR:
Alexis M. Garcia, M.S., Florida International University

DISCUSSANT:
Andrea Chronis-Tuscano, Ph.D., University of Maryland- College Park

Primary Category: ADHD - Child
Key Words: ADHD - Child / Adolescent, ADHD - Adult, Parent Training

Parental ADHD: Additive Effects of Comorbidity and Parenting Stress
Rosmary Ros, M.S., Florida International University
Alexis Garcia, M.Sc., Florida International University
Paulo Graziano, Ph.D, Florida International University

Parental Psychopathology on BPT: ADHD and Emotion Dysregulation
Alexis M. Garcia, M.S., Florida International University
Paulo Graziano, Ph.D, Florida International University

Integrated Parenting Intervention for Mothers of Children With ADHD
Christina Danko, Ph.D., University of Maryland, College Park
Julia Felton, Ph.D, Michigan State University
Kelsey Woods, B.S., University of Maryland, College Park
Nicholas Wagner, Ph.D, University of Maryland, College Park
Andrea Chronis-Tuscao, Ph.D., University of Maryland, College Park

10:15 a.m. – 11:45 a.m.
Earn 1.5 continuing education credits

Wilson A, Mezzanine Level

Clinical Roundtable 8
Using Technology Before, During, and After Intensives for Tweens/Teens with Selective Mutism to Enhance Motivation and Generalization

MODERATOR:
Jami M. Furr, Ph.D., Florida International University

PANELISTS:
Shelley Avny, Ph.D., Kurtz Psychology Consulting PC
Laura Kirmayer, Ph.D., Milestones Psychology
Lauren Knickerbocker, Ph.D., NYU Langone Medical Center
Steven Kurtz, ABPP, Ph.D., Kurtz Psychology Consulting PC

Primary Category: Child / Adolescent - Anxiety
Key Words: Adolescent Anxiety, Technology

The primary goal of this clinical roundtable is to illustrate the use of technology to enhance motivation, engagement, and generalization in intensive group treatment for tweens and teens with selective mutism (SM). Growing recognition of the prevalence and impairments associated with older youth with SM (Carbone et al., 2010; Keeton & Crosby Budinger, 2012; Muris et al., 2005) led to the development of the first upward extension of the SM intensive model. Among the most critical developmental adaptations for this subset of the SM population has been the incorporation of technology across all phases of treatment, from the initial contact through maintenance and follow-up. This includes: 1) pre-intensive efforts to remotely foster a relationship, receive buy-in for the behavioral approach, and begin the process of eliciting verbalizations; 2) direct intervention efforts that involve videos, apps, and virtual games; and 3) post-intensive efforts involving video consultation with parents and schools, weekly peer video groups for ongoing practice, and goal-setting around the use of social media and texting with peers in the home environment. This experienced panel will outline the theoretical and empirical literature on SM group intensives, including the recent developments with older youth. Specifically, the panelists will discuss how the application of technology has paved the way for a successful adaptation of SM intensives to tweens/teens, and they will outline the specific techniques involving technology that have been particularly effective in enhancing motivation, engagement, and generalization. Through the presentation of data (e.g., motivation levels before and after the pre-intensive video sessions), case vignettes, and a conceptual framework, panelists will highlight the limitations of SM intensives that are currently being addressed through the incorporation of modern technology, along with the next steps in further optimizing intensive treatment for older youth with SM.

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10:15 a.m. – 11:45 a.m.

Earn 1.5 continuing education credits

Thurgood Marshall East, Mezzanine Level

Symposium 75
School-Based Treatment of High School Students with ADHD: Results of a Large Randomized Controlled Trial

CHAIR:
Steven W. Evans, Ph.D., Ohio University

DISCUSSANT:
Joshua Langberg, Ph.D., Virginia Commonwealth University

Primary Category: ADHD - Child
Key Words: ADHD - Child / Adolescent, Treatment-Other, School

School-Based Services Provided to High School Students With ADHD
Chelsea Hustus, M.S., Ohio University
Allyse Hetrick, M.Ed., Lehigh University
Steven Evans, Ph.D., Ohio University
George DuPaul, Ph.D., Lehigh University
Julie Owens, Ph.D., Ohio University

Bridges to (BEST) Program: Method, Design, and Intervention Integrity
Julie S. Owens, Ph.D., Ohio University
Steven Evans, Ph.D., Ohio University
George DuPaul, Ph.D., Lehigh University
Kari Benson, M.S., Ohio University
Georgia Belk, M.Ed., Lehigh University
Kristina Puzino, M.Ed., Lehigh University
John Monopoli, M.S., Ohio University
Elizabeth Wertz, Ohio University

Educational Success for Students: Effects on Social and Behavioral Functioning
Steven W. Evans, Ph.D., Ohio University
George DuPaul, Ph.D., Lehigh University
Julie Owens, Ph.D., Ohio University
Kari Benson, M.S., Ohio University
Raisa Ray, M.S., Ohio University

Bridges to (BEST) Program: Effects on Academic Functioning
George J. DuPaul, Ph.D., Lehigh University
Steven Evans, Ph.D., Ohio University
10:15 a.m. – 11:45 a.m.  
Earn 1.5 continuing education credits  

Delaware B, Lobby Level  

Symposium 82  
What’s Going on in The Therapy Room? Measuring in-Session Client and Provider Behaviors Within the Community Implementation of Evidence-Based Practices for Youth  
CHAIR: Bryce McLeod, Ph.D., Virginia Commonwealth University  
DISCUSSANT: Aaron Hogue, Ph.D., The National Center on Addiction and Substance Abuse  
Primary Category: Dissemination / Implementation  
Key Words: Psychotherapy Process, Implementation, Evidence-Based Practice  

Caregiver-Mediated EB Intervention for Children With ASD in Community Settings  
Teresa Lind, Ph.D., University of California, San Diego  
Anna Lau, Ph.D., University of California, Los Angeles  
Christopher Gomez, B.A., University of California, Los Angeles  
Adriana Rodriguez, Ph.D., University of California, Los Angeles  
Karen Guan, M.A., University of California, Los Angeles  
Colby Chlebowski, Ph.D., University of California, San Diego, CA; Child and Adolescent Services Research Center (CASRC)  
Bruce Chorpita, Ph.D., University of California, Los Angeles  
Lauren Brookman-Frazee, Ph.D., University of California, San Diego, CA; Child and Adolescent Services Research Center (CASRC)  
Aimee Zhang, B.A., N/A  

Dimensions of Treatment Engagement Using Structural Equation Modeling
Client Challenges and Community Therapists: EB Practices to Youth and Parents
Blanche Wright, M.A., University of California, Los Angeles
Tamar Kodish, M.A., University of California, Los Angeles
Joanna Kim, M.A., University of California, Los Angeles
Lauren Brookman-Frazee, Ph.D., University of California, San Diego
Anna Lau, Ph.D., University of California, Los Angeles

Engagement Barriers in System-Implementation of Multiple EB Practices
Joanna Kim, M.A., University of California, Los Angeles
Tamar Kodish, M.A., University of California, Los Angeles
Lauren Brookman-Frazee, Ph.D., University of California, San Diego
Anna Lau, Ph.D., University of California, Los Angeles

Youth-Therapist Alliance: EBT Manuals in Psychosocial Treatment for Youth Anxiety
Stephanie Violante, B.S., Virginia Commonwealth University
Julia R. Cox, M.S., Virginia Commonwealth University
Kristen Granger, Ph.D., Virginia Commonwealth University
Marieke de Gree, M.S., AN University of Applied Sciences; Radbound University
Vishnupriya Srivastava, B.A., Virginia Commonwealth University
Bryce McLeod, Ph.D., Virginia Commonwealth University
Michael A. Southam-Gerow, Ph.D., Virginia Commonwealth University
John Weisz, Ph.D., Harvard University
Bruce Chorpita, Ph.D., University of California, Los Angeles

11:15 a.m. – 2:15 p.m. (TICKETED)
Earn 3 continuing education credits

Roosevelt 2, Exhibition Level
Workshop 11
Parenting Through the Pressure: Using CBT to Work With Parents of Anxious Teens
Today’s teens are more stressed than ever. Compared to teens of earlier generations, today’s teens have higher rates of depression, anxiety, and other forms of psychopathology. Teens today are also more reliant on their parents, counting on them for emotional support well into early adulthood (see Lythcott-Haims, 2015). This leaves parents of teens with a great deal of uncertainty about how to help their kids navigate the challenges that they face. In this workshop, we will discuss various modalities for engaging parents of teens in the therapy process. Parents can learn plenty as an adjunct to their teen’s therapy; can secure their own individual treatment; and can engage in group sessions with other parents. Attention will be paid to how technology can be used to facilitate ease of treatment for busy families. Regardless of format, specific ingredients are helpful to parents of anxious teens. First, cognitive work must be used to help parents explore and then reframe their own beliefs that might be feeding their teen’s anxiety. These beliefs fall into two main (but related) categories: beliefs about the child’s future (e.g., “If he doesn’t go to an Ivy League school, he won’t get a job,” “If she doesn’t play a sport at the very highest level, she won’t get into college,” “My friends will think I’m a total failure if my child doesn’t go to a top college”) and beliefs about the child’s ability to cope (e.g., “If I don’t stay up with her when she’s doing her schoolwork, she’ll fall apart from the stress,” “If I don’t study for the exam with him, he’ll fail,” “If she goes into the city on her own, she’ll get lost”). Ample case examples will be used to show how we have accessed these beliefs in families and then worked to reframe them, leading to less anxiety and better functioning within the family. Second, we will demonstrate how to teach parents to carry out their own exposures in order to test out faulty beliefs in these areas (e.g., letting the child go into the city on her own, allowing the child to study for an important exam without help). Finally, we will discuss how to re-shape communication patterns within the family with the goal of nurturing independence while also helping teens to feel appropriately supported and empowered by their parents.

You will learn:

- Recognize possible factors driving high rates of teen anxiety, and how these factors and their concomitant anxiety impact the parent/child relationship.
- Examine various models for engaging parents of anxious teens in treatment, including ways that technology might be used to facilitate treatment.
- Delineate how to teach CBT skills to parents, aimed at reducing their own anxiety and being able to coach their teens within the home environment.

11:45 a.m. – 1:45 p.m. (TICKETED)
Earn 2 continuing education credits

Marriott Balcony B, Mezzanine Level
Interpersonal Psychotherapy for Depressed Adolescents: Principles and Techniques

Laura Mufson, Ph.D., Columbia University

Basic level of familiarity with the material

Primary Category: Child/Adolescent- Depression

Key Words: Child/Adolescent- Depression

Interpersonal Therapy for Depressed Adolescents (IPT-A) has been demonstrated to be an efficacious treatment for adolescent depression and is delineated in a published treatment manual (Mufson, Dorta, Moreau, & Weissman, 2004). IPT-A was adapted from the adult model of IPT and similarly is based on the premise that depression, regardless of its etiology, occurs in an interpersonal context. IPT-A is a 12-15 session treatment that focuses on improving depressive symptoms and interpersonal functioning. IPT-A meets the criteria of a "well-established treatment" for adolescent depression according to the American Psychological Association Task Force on the Promotion and Dissemination of Psychological Procedures. Most important, IPT-A is one of a few evidence-based psychotherapies that has been transported and implemented in community settings with demonstrated effectiveness when delivered by community therapists. IPT-A is considered to be an effective, evidence-based treatment for adolescent depression by the Society of Clinical Child and Adolescent Psychology (http://effectivechildtherapy.com/content/depression). This presentation will provide participants with an overview of IPT-A, examples of key IPT-A techniques, and a discussion of how IPT-A has been adapted for use in community settings.

You will learn:

- Describe how to apply the basic principles of Interpersonal Psychotherapy for Depressed Adolescents (IPT-A);
- Gain exposure to the key IPT-A techniques;
- Recognize how IPT-A has been implemented in community settings.

12:00 p.m. – 1:30 p.m.
Earn 1.5 continuing education credits

Washington 1, Exhibition Level

Symposium 89
Residential Dialectical Behavior Therapy for Adolescents: An Overview of Treatment Outcomes

CHAIR:
Luciana G. Payne, Ph.D., McLean Hospital/Harvard Medical School

DISCUSSANT:
Alec L. Miller, Psy.D., Cognitive & Behavioral Consultants
Primary Category: Treatment - DBT
Key Words: Adolescents, Emotion Regulation, DBT (Dialectical Behavior Therapy)

DBT in a Residential Setting: Adolescents With Multiple Comorbidities
Wendy Bamatter, Ph.D., McLean Hospital/Harvard Medical School
Lyndsey Moran, McLean Hospital/Harvard Medical School
Cynthia Kaplan, McLean Hospital/Harvard Medical School
Blaise Aguirre, McLean Hospital/harvard Medical School
Gillian Galen, McLean Hospital/Harvard Medical School
Naomi Tarlow, University of Miami
Jeremy Stewart, McLean Hospital/Harvard Medical School
Miriam Rowan, McLean Hospital/Harvard Medical School
Judy Mintz, McLean Hospital/Harvard Medical School
Randy Auerbach, McLean Hospital/Harvard Medical School

Outcomes for Adolescent Boys in DBT Residential Treatment Program
Alan Fruzzetti, Ph.D., McLean Hospital/Harvard Medical School
Caitlin McLean, Harvard Medical School
Luciana Payne, Harvard Medical School
Allison Ruork, University of Nevada Reno

Parent Skills Training in Residential DBT for Adolescents: Helping Families
Luciana G. Payne, Ph.D., McLean Hospital/Harvard Medical School
Alan Fruzzetti, McLean Hospital/Harvard Medical School

Type/Severity of Child Abuse on NSSI and Suicidality in Youth With BPD
Miriam Rowan, Psy.D., McLean Hospital/Harvard Medical School
Cynthia Kaplan, McLean Hospital/Harvard Medical School
Naomi Tarlow, University of Miami
Jeremy Stewart, McLean Hospital/Harvard Medical School
Blaise Aguirre, McLean Hospital/Harvard Medical School
Gillian Galen, McLean Hospital/Harvard Medical School
Wendy Bamatter, McLean Hospital/Harvard Medical School
Judy Mintz, McLean Hospital/Harvard Medical School
Randy Auerbach, McLean Hospital/Harvard Medical School

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12:30 p.m. – 1:30 p.m.
Earn 1.5 continuing education credits
Maryland A, Lobby Level

Symposium 90
Participant Observations: Considerations and Applications Across Home, Outpatient, and School Contexts

CHAIR:
Michelle Grimes, Ph.D., Southern Utah University

DISCUSSANT:
David Reitman, Ph.D., Nova Southeastern University

Primary Category: Assessment
Key Words: Measurement, Evidence-Based Practice, Child Externalizing

Teaching Parents to Observe Child Behavior: Comparison of Methods
Michelle Grimes, Ph.D., Southern Utah University
Stacy Forcino, Ph.D., California State University, San Bernardino
Cy Nadler, Ph.D., Children's Mercy Kansas City

Contingencies Reduce Child Impairment and Improve Parenting Efficacy
Carla C. Allan, Ph.D., Children's Mercy Kansas City
Emma Rogers, B.A., Ohio University
Greg Schutte, Ph.D., Briar Cliff University
Simone Moody, Ph.D., Children's Mercy Kansas City
Trista Perez Crawford, Ph.D., Children's Mercy Kansas City
Cy Nadler, Ph.D., Children's Mercy Kansas City
Vincent Staggs, Ph.D., Children's Mercy Kansas City

Direct Behavior Rating and Observational Methods in the Classroom
Kellina Pyle, B.S., University at Buffalo, SUNY
Gregory Fabiano, Ph.D., University at Buffalo, SUNY

1:45 p.m. – 3:15 p.m.
Earn 1.5 continuing education credits
Managing Disruptive Behaviors in Classrooms with Technology: Interventions, Implications, and Obstacles

MODERATOR:
Steven Kurtz, ABPP, Ph.D., Kurtz Psychology Consulting PC

PANELISTS:
Alexandra Barnett, PhD, Milestones Psychology
Karen Budd, Ph.D., DePaul University
Chelsey Rosen, Psy.D., Kurtz Psychology Consulting PC
Tasha Brown, Ph.D., Columbia University Medical Center

Primary Category: Child / Adolescent - School-Related Issues
Key Words: School, Telehealth & Internet Interventions, Child Externalizing

With increasing academic demands on teachers and students, there is a high prevalence of disruptive behaviors in schools and a mandate to help manage these behaviors. In-service workshops are the most common form of teacher professional development, despite evidence that workshops alone make an insignificant difference in practice (Yoon et al., 2007). The primary objectives of this clinical roundtable are to share practical innovative interventions and implications regarding the use of technological devices aimed at helping teachers prevent and manage student disruptive behavior. Emerging research supports the role of in-room coaching with ear-bugs of teachers to enhance their effective use of behavior management skills (Kretlow & Bartholomew, 2010; Reinke, Stormont, Webster-Stratton, Newcomer, & Herman, 2012; Schultz, Arora, & Mautone, 2015; Sutherland, Conroy, Vo, & Ladwig, 2015). Emerging work also documents the value of collaborative tele-communication between parents and teachers to improve students’ classroom behavior (Jones et al., 2013; Kraft, 2017). The panelists will describe the use of bug-in-the-ear technology during live coaching in Teacher-Child Interaction Training, and of team communication software to facilitate the use of parent-teacher collaborative problem-solving. They will also demonstrate preliminary findings regarding teacher, parent, and child receptivity to these techniques. Finally, they will discuss challenges in making technological innovations feasible, acceptable, and accessible for use in low-income school environments. The panel members will draw on their professional experiences providing teacher training and consultation in schools and their applied research on school-based interventions. Further, they will highlight research by others into the mechanisms of mental health technology in the classroom and identify research gaps where further work is needed.

1:45 p.m. – 3:15 p.m.
Earn 1.5 continuing education credits
Symposium 91
Examination of Implementation Leadership and Climate on Implementation in Schools and Community Mental Health Services

CHAIR:
Kelsey S. Dickson, Ph.D., UCSD

DISCUSSANT:
Gregory S. Aarons, Ph.D., University of California, San Diego

Primary Category: Dissemination / Implementation
Key Words: Implementation, Evidence-Based Practice

Principal Involved in EB Practice Implementation in Schools
Nicole A. Stadnick, Ph.D., University of California, San Diego
Rosemary Meza, M.S., University of Washington
Jessica Suhrheinrich, Ph.D., San Diego State University
Gregory Aarons, Ph.D., University of California, San Diego
Lauren Brookman-Frazee, Ph.D., University of California, San Diego
Aaron Lyon, Ph.D., University of Washington
David Mandell, Ph.D., University of Pennsylvania
Jill Locke, Ph.D., University of Washington

Implementation of EB Practices in School-Based Services for ASD
Allison Nahmias, Ph.D., MIND Institute, University of California, Davis
Melina Melgraejo, Ph.D., San Diego State University
Patricia Schetter, M.A., BCBA, University of California, Davis
Aubyn Stahmer, Ph.D., University of California, Davis
Jessica Suhrheinrich, Ph.D., San Diego State University

Adoption of EB Interventions for Children With ASD
Allison S. Jobin, Ph.D., University of California, San Diego
Aubyn Stahmer, Ph.D., University of California, Davis
Kelsey Dickson, Ph.D., University of California, San Diego
Allison Nahmias, Ph.D., University of California, Davis
Colby Chlebowski, Ph.D., University of California, San Diego
Lauren Brookman-Frazee, Ph.D., University of California, San Diego

Leader Perspectives on Sustainment of Multiple Child EB Practices
Adriana Rodriguez, Ph.D., University of California, Los Angeles
Anna Lau, Ph.D., University of California, Los Angeles
Blanche Wright, M.A., University of California, Los Angeles
Jennifer Regan, Ph.D., Hathaway-Sycamores Child and Family Services
Lauren Brookman-Frazee, Ph.D., University of California, San Diego

1:45 p.m. – 3:15 p.m.
Earn 1.5 continuing education credits

Maryland A, Lobby Level

Symposium 94
Early Identification of Risk for Attention-Deficit/Hyperactivity Disorder in Infancy, Toddlerhood, and Preschool: A Series of Longitudinal Investigations

CHAIR:
Natalie Miller, Ph.D., University of Maryland - College Park

DISCUSSANT:
Andrea Chronis-Tuscano, Ph.D., University of Maryland - College Park

Primary Category: ADHD - Child
Key Words: ADHD - Child / Adolescent, Parenting, Assessment

Early Development of ADHD Symptoms
Hallie Brown, M.S., University of Massachusetts Amherst
Elizabeth Harvey, Ph.D., University of Massachusetts at Amherst

Does Maternal Parenting Buffer Risk for ADHD Behaviors?
Heather Joseph, D.O., University of Pittsburgh
Kirsten McKone, B.A., University of Pittsburgh
Brooke Molina, Ph.D., University of Pittsburgh Medical Center
Daniel Shaw, Ph.D., University of Pittsburgh

Infant Temperament Reactivity and Maternal Caregiving Link to ADHD
Natalie Miller, Ph.D., University of Maryland - College Park
Kathryn Degnan, Ph.D., Catholic University of America
Amie Hane, Ph.D., Williams College
Nathan Fox, Ph.D., University of Maryland
Andrea Chronis-Tuscano, Ph.D., University of Maryland
Treatment of Preschoolers With ADHD: Temperament and Parenting
Paulo Graziano, Ph.D., Florida International University
Rosmary Ros, M.S., Florida International University
Alexis Garcia, M.S., Florida International University
Katie Hart, Ph.D., Florida International University

1:45 p.m. – 3:15 p.m.
Washington 2, Exhibition Level

Symposium 97
Using Technology to Advance Methods in Treatment Development Research for Couples

CHAIR:
Julianne C. Flanagan, Ph.D., Medical University of South Carolina

DISCUSSANT:
Dominic J. Parrott, Ph.D., Georgia State University

Primary Category: Couples / Close Relationships
Key Words: Methods, Couples / Close Relationships, Translational Research

Smartphone App to Support Families Affected by DWI
Barbara McCrady, Ph.D., University of New Mexico
W. Gill Woodall, Ph.D., University of New Mexico
Randall Starling, Ph.D., University of New Mexico
Verner Westerberg, Ph.D., University of New Mexico
Julie Griffith, MSW, Klein Buendel, Inc
Sophia Burris, B.A., Klein Buendel, Inc

Couple and Parent-Child Coercion to Improve Health Behaviors
Richard Heyman, Ph.D., New York University
Amy Smith Slep, Ph.D., New York University
Danielle Mitnick, Ph.D., New York University

Central Autonomic Network Dysfunction in Alcohol-Related IPV
Brandi Fink, Ph.D., University of New Mexico
Neuroimaging to Examine Neural Correlates of Relationship Conflict

Julianne C. Flanagan, Ph.D., Medical University of South Carolina
Shayla Yonce, B.A., Medical University of South Carolina
Casey Calhoun, Ph.D., Medical University of South Carolina
Sudie Back, Ph.D., Medical University of South Carolina
Kathleen Brady, M.D., Ph.D., Medical University of South Carolina
Jane Joseph, Ph.D., Medical University of South Carolina

3:30 p.m. – 5:00 p.m.
Earn 1.5 continuing education credits

Lincoln 3, Exhibition Level

Clinical Roundtable 10
Developing a Life-Span Treatment Path for ADHD: Incorporating Recent Empirically-Supported Treatments from Preschool to Young Adulthood

MODERATOR:
Richard Gallagher, Ph.D. in Clinical Psychology, The Child Study Center of Hassenfeld Children's Hospital, NYU Langone Health

PANELISTS:
Richard Gallagher, Ph.D. in Clinical Psychology, The Child Study Center of Hassenfeld Children's Hospital, NYU Langone Health
Anil Chacko, Ph.D., New York University
Thomas Power, ABPP, Children’s Hospital of Philadelphia, Perelman School of Medicine at University of Pennsylvania
Margaret Sibley, Ph.D., Florida International University
Joshua Langberg, Ph.D., Virginia Commonwealth University

Primary Category: ADHD - Child
Key Words: Evidence-Based Practice, ADHD - Child / Adolescent, Treatment Development

ADHD is a neurodevelopmental disorder with a chronic trajectory for most individuals and effective psychosocial treatments for differing ages have been documented (Evans et al., 2014). As such, repeated evaluation and treatment for ADHD could be and should be offered to afflicted individuals and their families. This data-driven program will present summaries of psychosocial treatment studies to guide the creation of life-span treatment programs. Based upon their own randomized clinical trials and reviews of empirically-tested treatments, the roundtable will present clear choices for selecting treatments that improve functioning during each development period addressed. Content will incorporate reviews of programs
applied in clinical and school settings. Richard Gallagher will moderate and introduce the rationale for a life-span perspective. Anil Chacko will present data from several trials of evidence-based treatment approaches in preschool ADHD. Childhood programs for improved family functioning, organizational and school functioning, and social interactions will be reviewed by Tom Power. Margaret Sibley presents multi-component programs for adolescents that address the challenges of parent-teen interactions, limits in motivation, and the potential of deteriorating school performance. Treatments during the stormy transition from high school to post-secondary education for emerging adults with ADHD are reviewed by Joshua Langberg. Richard Gallagher will incorporate consolidation of individual presentations and propose guidelines on how clinicians can utilize information through a chronic impact model. A moderated question and discussion period is expected to spur clinicians to become a child’s case manager and treater throughout development and young adulthood. The discussion will also challenge researchers to create plans for testing the impact of multiple doses of developmentally-appropriate treatment on outcome.

3:30 p.m. – 5:00 p.m.

Earn 1.5 continuing education credits

Thurgood Marshall North, Mezzanine Level

Symposium 107
Predictors, Moderators, and Mediators in Youth Anxiety Disorders

CHAIR:
Dean McKay, ABPP, Ph.D., Fordham University

DISCUSSANT:
Thomas H. Ollendick, Ph.D., Virginia Polytechnic Institute and State University

Primary Category: Child / Adolescent - Anxiety

Key Words: Mediation / Mediators, CBT, Child Anxiety

Treatment Outcome in Youth Anxiety and Depressive Disorders

Emily Steinberg, M.A., Fordham University
Julia Phillips, Fordham University
Dean McKay, Fordham University

Impact of Treatment Expectations on Exposure Therapy Variables in Child Anxiety

Monica Wu, Ph.D., UCLA School of Medicine
Nicole Caporino, Ph.D., American University
Jocelyn Perez, M.A., UCLA
Hardian Thamrin, M.A., UCLA
Tara Peris, Ph.D., UCLA
John Piacentini, Ph.D., UCLA

**Evidence-Based Assessments in Clinical Practice for Child Anxiety Disorders**
Joseph McGuire, Ph.D., Johns Hopkins University
Sophie Palitz, M.A., Temple University
Nicole Caporino, Ph.D., American University
Phillip Kendall, Ph.D., Temple University
John Piacentini, Ph.D., UCLA

**Predictors of Outcome in CBT for Anxiety in Youth With ASD**
Katrina Rufino, Ph.D.
Sandra Cepeda, M.A., Baylor College of Medicine
Jill Ehrenreich, Ph.D., University of Miami
Jeffrey Wood, Ph.D., UCLA
Adam Lewin, Ph.D., University of South Florida

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3:30 p.m. – 5:00 p.m.
Earn 1.5 continuing education credits

**Washington 5, Exhibition Level**

**Symposium 113**

Capitalizing on Children and Teens’ Engagement with Technology to Improve Behavioral Health: Preliminary Progress and Pitfalls

**CHAIR:**
Jennifer S. Silk, Ph.D., University of Pittsburgh

**DISCUSSANT:**
Tina Goldstein, Ph.D., Western Psychiatric Institute and Clinic, University of Pittsburgh Medical Center

Primary Category: Technology
Key Words: mHealth (Mobile Health), Technology, Telehealth & Internet Interventions

**Child Anxiety: There’s an App for That, but Is It Evidence Based?**
Jonathan Comer, Ph.D., Mental Health Interventions and Technology (MINT) Program, Florida International University
Laura Bry, M.S., University of Maryland, College Park
Elizabeth Miguel, B.A., New York State Psychiatric Institute, Columbia University
Tommy Chou, FIU
Smartphone App Efficacy of Brief CBT for Childhood Anxiety Disorders
Jennifer S. Silk, Ph.D., University of Pittsburgh
Jonathan Comer, Ph.D., Florida International University
Laura Bry, M.S., University of Maryland, College Park
Elizabeth Miguel, New York State Psychiatric Institute, Columbia University
Tommy Chou, M.S., FIU

Digital Therapeutics for Childhood Disruptive Behavior Problems
Oliver Lindhiem, Ph.D., University of Pittsburgh
Jordan Harris, B.S., University of Pittsburgh Medical Center (UPMC)
David Kolko, Ph.D., UPMC
Bambang Parmanto, Ph.D., University of Pittsburgh
Gede Pramana, Ph.D., Pitt
Jennifer Silk, Ph.D., Pitt

Effects of Blogging in Adolescents With Depression or Anxiety
Ana Radovic, M.D., University of Pittsburgh School of Medicine, Children's Hospital of Pittsburgh of UPMC
Elizabeth Miller, M.D./Ph.D., University of Pittsburgh School of Medicine, Children's Hospital of Pittsburgh of UPMC

SUNDAY

8:30 a.m. – 10:00 a.m.
Earn 1.5 continuing education credits
Wilson C, Mezzanine Level

Clinical Roundtable 12
When Helping Is Hurting: The Role of Family Accommodation In Childhood Anxiety
MODERATOR:
Jami Socha, Ph.D., The Anxiety and OCD Treatment Center of Ann Arbor

PANELISTS:
Daniela Owen, San Francisco Bay Area Center for Cognitive Therapy
Emily Berner, MFT, San Francisco Bay Area Center for Cognitive Therapy
David A. Schuberth, M.A., Simon Fraser University
While many effective treatments exist for pediatric anxiety disorders and OCD (e.g., CBT), there has been comparatively less emphasis on treating family accommodation (Selles et al., 2017). This is unfortunate because family accommodation is strongly associated with more severe and disabling symptoms (Caporino et al., 2012; Wu et al., 2017), and is thought to directly counter the goals of most OCD treatments (Garcia et al., 2010; Storch et al., 2007). As such, reducing family accommodation has been identified as an important process variable in CBT for OCD (Merlo et al., 2009), and there has been a growing interest in designing family-based treatment components targeting the parent-child dynamics that increase parents’ risk for accommodating (Peris & Piacentini, 2014; Sukhodolsky et al., 2013). This clinical round table will examine the research on family accommodation, including child and family factors that predict increased rates of accommodation, as well as negative outcomes associated with higher levels of accommodation. As family accommodation can be both overt and covert, parents and families often struggle with how to avoid inadvertently accommodating OCD rituals and other anxious behaviors. In this round table, presenters will discuss both types of accommodation, as well as how to effectively respond to various requests for accommodation. Panelists in this workshop will provide guidelines on how clinicians can work with families to create systematic plans to reduce accommodation. Panelists will also discuss examples of how to reduce family accommodation based on actual case examples from both a research study and clinical practice.

8:30 a.m. – 10:00 a.m.
Earn 1.5 continuing education credits

Harding, Mezzanine Level
Symposium 121
Innovative Psychological Approaches to Assessing and Treating Pediatric Patients With Autonomic Dysfunction

CHAIR:
Jessica Malmberg, Ph.D., Children's Hospital Colorado/University of Colorado School of Medicine

DISCUSSANT:
Sally Tarbell, Ph.D., Ann & Robert H. Lurie Children's Hospital/Northwestern Feinberg School of Medicine

Primary Category: Health Psychology / Behavioral Medicine - Child
Key Words: Adolescents, Behavioral Medicine, Transdiagnostic

Postural Tachycardia and Orthostatic Intolerance in Adolescents: Pain Rehab Program
Gerard Banez, Ph.D., Cleveland Clinic Children's Hospital for Rehabilitation
Helen Gutin, CPNP, Cleveland Clinic Children's Hospital for Rehabilitation
Rachel Heines, DPT, Cleveland Clinic Children's Hospital for Rehabilitation
Biofeedback in the Treatment of Postural Orthostatic Tachycardia Syndrome
Ethan Benore, ABPP, Ph.D., Cleveland Clinic Children’s Hospital for Rehabilitation

Group-Based Intervention for Pediatric Autonomic Dysfunction and Comorbidities
Clio Pitula, Ph.D., University of Colorado, School of Medicine
Jessica Malmberg, Ph.D., Children's Hospital Colorado/University of Colorado School of Medicine
Sally Tarbell, Ph.D., Ann & Robert H. Lurie Children’s Hospital of Chicago/Northwestern University Feinberg School of Medicine

Rehabilitation for Youth With Dysautonomia/Postural Orthostatic Tachycardia Syndrome
Keith Slifer, Ph.D., Kennedy Krieger Institute & Johns Hopkins School of Medicine
Lindsay Cirincione, Psy.D., Kennedy Krieger Institute & Johns Hopkins School of Medicine
Margaret Tunney, Psy.D., Kennedy Krieger Institute & Johns Hopkins Hospital
Emily Wald, Ph.D., Kennedy Krieger Institute & Johns Hopkins School of Medicine
Samantha Kluger, Psy.D., Kennedy Krieger Institute & Johns Hopkins School of Medicine
Lauren Harrison, Ph.D., Kennedy Krieger Institute & Johns Hopkins School of Medicine

8:30 a.m. – 10:00 a.m.
Earn 1.5 continuing education credits

Coolidge, Mezzanine Level

Symposium 122
Using Technology and Diverse Measurement Methodologies to Examine the Influence of Community Context on Children’s Adjustment

CHAIR:
Francesca Kassing, M.A., The University of Alabama

DISCUSSANT:
John Lochman, Ph.D., The University of Alabama

Primary Category: Child / Adolescent - Externalizing
Key Words: Child Externalizing, Research Methods, Risk / Vulnerability Factors

Community Violence, Conduct, and Oppositional Behaviors Among Latino Adolescents
Neighborhood Problems and Proactive and Reactive Functions of Aggression

Paula Fite, Ph.D., University of Kansas
Jonathan Poquiz, M.A., University of Kansas
John Cooley, University of Kansas
Laura Stoppelbein, Ph.D., The University of Alabama at Birmingham & Glenwood Autism and Behavioral Health
Stephen Becker, Ph.D., Cincinnati Children’s Hospital Medical Center
Aaron Luebbe, Ph.D., Miami University
Leilani Greening, Ph.D., University of Mississippi Medical Center

Parenting as a Moderator in Community Violence and Aggression Within a Natural Disaster

Francesca Kassing, M.A., The University of Alabama
John Lochman, Ph.D., The University of Alabama
Matthew Hudnall, Ph.D., The University of Alabama

Parent-Child Agreement on Tornado-Related Traumatic Experiences

Matthew A. Jarrett, Ph.D., The University of Alabama
Eric Vernberg, Ph.D., University of Kansas
Madelaine Abel, M.A., University of Kansas
Bridget Cho, M.A., University of Kansas
Kathleen Diaz, University of Kansas
Francesca Kassing, M.A., The University of Alabama
John Lochman, Ph.D., The University of Alabama

10:15 a.m. – 11:45 a.m.
Earn 1.5 continuing education credits

Delaware A, Lobby Level

Clinical Roundtable 14
Trauma-Focused Cognitive Behavioral Therapy for Maltreated Youth: Technological Advances for Training and Treatment

MODERATOR:
Michael Gomez, Ph.D., Texas Tech University Health Sciences Center
The primary goals of this clinical roundtable are to discuss treatment, training, and implementation of Trauma-Focused Cognitive Behavioral Therapy (TF-CBT) with maltreated youth as well as with trainees at different levels of experience and backgrounds (e.g., LPC’s to fifth year clinical psychology doctoral students). The tools used to implement and train range the technological spectrum from use of applications on iPhones and Androids (e.g., the Psychological First Aid app post-shooting) to webinars and Skype for consultees. While there is strong empirical evidence supporting the success of TF-CBT with youth, specifically over 50 peer-reviewed articles and over 20 randomized controlled trials (Ramirez de Arellano et al., 2014), it is important for clinicians to gain strong theoretical understanding of how to execute TF-CBT with maltreated youth and of how diverse trainees can be supported at different stages of expertise. The panelists will begin with a review of the recent evidence of the efficacy and effectiveness of TF-CBT in maltreated youth and provide guidelines to address the challenges of working with this population, including the presence of comorbid symptoms, multiple types of traumatic events, and common challenges of partnering with challenging systems (e.g., foster care, juvenile justice). The TF-CBT trained panelists will then describe various adaptations and share their insights into the effectiveness of such adaptations with use of technology across trainee expertise as the central focus.
Based on the World Health Organization estimates, depression has risen by more than 18% since 2005 and is now the leading cause of disability and a major cause of morbidity worldwide. Given the seriousness of its consequences and limitations of treatments, the need to prevent depression is critical. Considerable progress has been made over the past few decades in the prevention of depression in youth. Panelists will briefly summarize outcome data, identify mediators and moderators, discuss unique obstacles, describe dissemination and implementation efforts, and make recommendations for future directions. Panel moderators will facilitate discussion among the panelists and audience.

In particular, the panelists will first summarize findings from randomized controlled trials. Recent meta-analyses suggest that depression prevention programs, particularly those using selective or indicated samples demonstrate a small but significant effect in preventing the onset of depressive disorders and reducing increases in depressive symptoms. Second, the panel will discuss moderators - for whom do the prevention programs work and not work? Can we do a better job matching people to programs (i.e., precision medicine)? Third, we will review mechanisms - how do the programs work, when they do work? How can existing programs be modified and improved? What risk processes associated with depression have not yet been targeted for prevention and how can these factors inform the construction of new interventions? Fourth, we will address practical obstacles in conducting research on depression prevention and in implementing programs in the real world (e.g., schools, primary care, pediatric clinics). Who should and can do the interventions? What are the challenges to dissemination and implementation? How do we maintain high quality implementation when disseminating widely? Finally, we will discuss future directions in depression prevention including the role of the internet, intervention dose, sustainability, developmental considerations, cost-effectiveness, and transfer of training.
The application of CBT methods to the core symptoms of autism spectrum disorders (ASD), such as idiosyncratic language use and social disengagement, is a new direction for cognitive behavioral therapy. This study, a large scale clinical trial using an active control group, was conducted over the course of 6 years, representing the culmination of a decade of development of CBT for ASD (e.g., Wood et al., 2014). Although some preliminary research has targeted emotion regulation in youth with ASD, there has been no established CBT-based treatment for the core social-communication and repetitive behavior symptoms of ASD. This study evaluated the first individual CBT intervention for youth with ASD specifically designed to reduce ASD symptom severity. Youth (N=107) aged 6-13 years old with a diagnosis of ASD were randomized to either personalized CBT or a social skills treatment for ASD. Both treatments entailed 32 90-minute sessions. Outcome measures entailed traditional school-based observations of ASD symptom severity performed by independent evaluators (IE) as well as a technology-mediated personalized symptom assessment measure integrating the Youth Top Problems (Weisz et al., 2012) scale, a personalized symptom measure, with home-based video recording mediated via cell phone video streaming; and a parent-report measure of psychiatric comorbidity. Children who received CBT exhibited greater improvement than children in the comparison group on all outcome measures (ps < .05). This is the first study to show that CBT is probably efficacious for treatment of core autism symptoms. A brief CBT treatment with the capacity to significantly improve functioning in youth with ASD could offer a feasible and effective intervention option for many affected children. The use of technology-assisted outcome measurement marks a departure in this field as well, highlighting the potential for more proximal and pragmatic outcome measures that may have particular clinical relevance, such as remote video taping of symptoms as exhibited on a daily basis at home.

You will learn:

- This session is designed to help you understand how CBT may be applied to autism symptoms.
- This session is designed to help you understand the use of technology-assisted assessment in CBT for autism symptoms.
- This session is designed to help you understand major outcome measures for clinical trials of CBT for autism symptoms.
- This session is designed to help you understand the magnitude of effect to be expected in CBT for autism symptoms.
- This session is designed to help you understand how to modify typical CBT practices within the autism population.

**10:15 a.m. – 11:45 a.m.**
**Earn 1.5 continuing education credits**

**Virginia C, Lobby Level**

**Symposium 147**
Innovative Interventions for Perinatal Mood Disorders: Developing and Evaluating Strategies to Improve Maternal and Child Outcomes

CHAIR:
*Cynthia L. Battle, Ph.D.,* Alpert Medical School of Brown University

DISCUSSANT:
*Robert Ammerman, Ph.D.,* Cincinnati Children's Hospital

Primary Category: Women's Issues / Gender

Key Words: *Pregnancy / Postpartum / Reproductive Issues, Treatment Development, Mood*

**Interpersonal and Social Rhythm Therapy for Perinatal Bipolar Disorder**

*Laurie Weinstock, Ph.D.,* Brown University

*Jennifer Johnson, Ph.D.,* Michigan State University

*Maya Krek, B.A.,* Alpert Medical School of Brown University

*Cintly Celis-deHoyos, M.A.,* Alpert Medical School of Brown University

*Neha Hudepohl, M.D.,* Alpert Medical School of Brown University

*Teri Pearlstein, M.D.,* Alpert Medical School of Brown University

*Cynthia Battle, Ph.D.,* Alpert Medical School of Brown University

**Psychological Interventions for Common Mental Disorders During Pregnancy**

*Marlies Brouwer, M.S.,* Academic Medical Center, University of Amsterdam

*Nina Molenaar, M.D.,* Erasmus Medical Center Rotterdam

*Alishia Williams, Ph.D.,* Utrecht University

*Huibert Burger, MD, Ph.D.,* University Medical Center Groningen

*Mijke Lambregts-van den Berg, M.D., Ph.D.,* Erasmus Medical Center Rotterdam

*Claudi Bockting, Ph.D.,* University of Amsterdam

**Good for the Baby? Effects of CBT on Mother and Child During Pregnancy**

*Claudi Bockting, Ph.D.,* University of Amsterdam

*T Verbeek, MD, Ph.D.,* University Medical Center Groningen

*JL Aris-Meijer, Ph.D.,* University Medical Center Groningen

*MG van Pampus, MD, Ph.D.,* University Medical Center Groningen

*H Burger, Ph.D.,* University Medical Center Groningen

**Structured Peer Mentoring Program for Depressed Perinatal Women**

*Sona Dimidjian, Ph.D.,* University of Colorado Boulder

*Arne Beck, Ph.D.,* Kaiser Permanente Colorado Institute for Health Research
Jennifer Boggs, MSW, Kaiser Permanente Colorado Institute for Health Research
Anahi Collado, Ph.D., Alvord Baker and Associates LLC
Robert Gallop, Ph.D., Department of Mathematics West Chester University
Marta Genovez, M.A., Department of Psychology and Neuroscience, University of Colorado at Boulder
Sherryl Goodman, Ph.D., Department of Psychology Emory University
Peggy Hill, M.S., MSEd, National Behavioral Health Innovation Center, University of Colorado
Sam Hubley, Ph.D., Department of Family Medicine, University of Colorado Anschutz Medical Campus
Anna Joseph, MPH, MSW, National Behavioral Health Innovation Center, University of Colorado
Elizabeth Lemon, M.A., Department of Psychology and Neuroscience, University of Colorado at Boulder
Caitlin McKimmy, MTS, Department of Psychology and Neuroscience, University of Colorado at Boulder
Rachel Vanderkruik, M.A., Department of Psychology and Neuroscience, University of Colorado at Boulder
Spencer Young, B.A., Department of Psychology and Neuroscience, University of Colorado at Boulder