



PSYCHOLOGY UNBOUND

THINKING FREELY, ACTING BOLDLY, SHAPING LEADERS.

CELEBRATING 90 YEARS OF PSYCHOLOGY IN ILLINOIS:
A LEGACY OF IMPACT, A FUTURE OF POSSIBILITY

2026 ILLINOIS PSYCHOLOGICAL ASSOCIATION CONVENTION

OCTOBER 22-23, 2026

Sheraton Lisle Naperville Hotel, 3000 Warrenville Road, Lisle Illinois

CONVENTION AT A GLANCE

Thursday, October 22, 2026

7:30 AM–8:00 AM

REGISTRATION/COFFEE

8:00 AM–8:30 AM

ALL ASSOCIATION MEETING (All Attendees)

8:45 AM–9:45 AM

PROGRAM 1

Leadership Development: A Bridge to the Future

PROGRAM 2

Restorative Justice Heals the Hurt People that Hurt People

8:45 AM–10:15 AM

PROGRAM 3

Knowledge is Power: HCRC

10:30 AM–12:00 PM

PROGRAM 4

Navigating Cultural Ruptures in the Supervisory Relationship: Reflective Practices for Supervisors

PROGRAM 5

How Patients Suffer From Their Feelings and What To Do

11:00 AM–12:00 PM

PROGRAM 6

Psychology and Improv: Building Cognitive Flexibility, Connection, and Resilience

1:30 PM–2:30 PM

PROGRAM 7

Colorism: Understanding the Psychological Impact and Implications for Clinical Practice

PROGRAM 8

Ketamine-Assisted Psychotherapy: Expanding the Role of Psychologists in Innovative Mental Health Care

PROGRAM 9

It's a Journey, Not a Destination: Exploring Retirement Begins at the Starting Line, Not the Finish Line

2:45 PM–3:45 PM

PROGRAM 10

Maintaining Family Ties: Women's Kinkeeping Across the Adult Lifespan

PROGRAM 11

Considering the Psychologist's Role in the Prevention of Violence

2:45 PM–4:15 PM

PROGRAM 12

PSYPACT

4:30 PM–5:30 PM

PROGRAM 13

Heal the Healers & Helpers: Embodied Approaches to Wellness

PROGRAM 14

From DSM to IEP: Supporting Students with Learning and Neurodevelopmental Challenges

PROGRAM 15

Psychotherapy at a Crossroads: The Algorithm Will See You Now

5:45 PM–6:45 PM

PROGRAM 16

Improving Cognition and Neuropsychiatric Symptoms in Parkinson's and Lewy Body Disease

PROGRAM 17

When Talking Isn't Enough: Psychodrama for Therapeutic Change

PROGRAM 18

Imposter Syndrome: An Integrative Approach to Healing through Supervision

Friday, October 23, 2026

7:30 AM–8:00 AM

CONTINENTAL BREAKFAST

8:00 AM–9:15 AM

KEYNOTE (All Attendees)

Can We Talk? Assumptions, Disruptions, and Directions in Unbound Practice with Marnie Shanbhag, PhD

9:30 AM–11:00 AM

PROGRAM 19

Role of Games in Fostering Post-Traumatic Growth

PROGRAM 20

Leadership and Team Building with the Power of Temperament

PROGRAM 21

Employment Law Tips for Mental Health Practice Owners

11:15 AM–12:15 PM

PROGRAM 22

Reproductive Deserts: Addressing Doctoral Training in Reproductive Health and Psychology

PROGRAM 23

Beyond Reconciliation: Reclaiming Family Estrangement for Psychology

PROGRAM 24

IPAGS Panel: Boldy Shaping Students

12:30 PM–1:50 PM

AWARDS LUNCHEON

2:00 PM–3:00 PM

PROGRAM 25

Leadership and Advocacy: Exploring Equitable Ways to Develop Leadership and Advocacy Skills in Clinical Psychology

PROGRAM 26

What Every Therapist Needs to Know about Video Games

2:00 PM–5:00 PM

PROGRAM 27

Psychology Unbound: Ethical Implications (Meets Ethics Requirement)

3:15 PM–4:15 PM

PROGRAM 28

Expanding One's Niche: Working within the Domestic Relations Court

PROGRAM 29

The Neurodynamic Navigator System: Integrating Dynamic Safety and Digital Tools in Clinical Practice

4:30 PM–5:30 PM

PROGRAM 30

Navigating Bereavement-Related Grief in Neurodivergent Individuals

PROGRAM 31

Beyond the Therapy Hour: Coordinated Care Models for Complex Anxiety and OCD Treatment

5:30 PM–7:00 PM

PRESIDENTS' RECEPTION: IPA'S 90TH ANNIVERSARY AND IPAGS POSTERS

WELCOME MESSAGE FROM THE PRESIDENT

Welcome to the Illinois Psychological Association's 90th Anniversary Convention!

Ninety years is something worth celebrating! For nine decades, psychologists have come together through IPA to learn, connect, challenge one another, support our profession, and help shape what psychology can become!

This year, as we honor that remarkable history, we are also looking forward. Looking forward, moving forward, all requires adaptability to change. How do we hold on to what is excellent in the field while making way for new and innovative ways of thinking? Hopefully the rich content planned for these two days will fill in some answers to that question.

Our theme, **PSYCHOLOGY UNBOUND: THINKING BOLDLY, ACTING FREELY, SHAPING LEADERS**, feels especially fitting at this moment. Psychology is changing, and so is the world around us. We all feel it. How do we meet our clients with the best psychology has to offer? The assumptions that have guided our profession are being challenged by new technologies, changing models of care, an evolving workforce, and the increasingly complex needs of the people and communities we serve.

Our keynote, *Can We Talk? Assumptions, Disruptions, and Directions in Unbound Practice with Marnie Shanbhag, PhD*, captures the heart of our theme: *What assumptions are we willing to leave behind, what disruptions are we prepared to face, and how will we help shape what psychology becomes next?*

For me, *Psychology Unbound* is also an invitation. An invitation to think beyond the familiar, to question what no longer serves us, to imagine new possibilities for our work, and to recognize that leadership in psychology can come from *any* of us.

This year's Convention will celebrate our rich, 90 year long history with what is now, what is to come. As we celebrate those who built IPA over the past 90 years, we also get to decide what we will build next. I hope these two days give us space to have conversations that matter, challenge our own thinking, learn from one another, and leave a little more willing to take chances on what psychology can become.

Please be sure to join us for this year's Presidents' Reception. I have invited all available past presidents to join us in a celebration of 90 years of IPA. Please come and meet them. Help me celebrate them! Let them celebrate you!



If you come to Convention every year or are new this time, I hope these two days are meaningful for you. The theme for me throughout this year is *you belong here*. You belong in IPA in that there is a professional home here for you. You also belong in that we need you! We need your ideas, your energy and your collegiality. So, introduce yourself to someone new. Reconnect with someone you've missed. Ask the difficult questions. Share the unexpected idea. **Think boldly.**

Thank you for being part of IPA's first 90 years—and, even more importantly, for helping shape what comes next.

I'm so glad you're here!

Margo M. Jacquot, PsyD
President
Illinois Psychological Association



NOT A MEMBER OF THE IPA? JOIN NOW.

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REGISTRATION INFORMATION

Deadline Dates

NEW! EARLY BIRD PRICING ENDS
SEPTEMBER 15, 2026

OCTOBER 8, 2026

Request for Special Arrangements for Persons with Disabilities. Contact the IPA office (312) 372-7610 x201.

OCTOBER 8, 2026

FINAL DAY FOR REFUNDS

No refunds will be given for non-attendance or cancellation after October 8. Contact the IPA Office (312) 372-7601, x201.

OCTOBER 18, 2026

Pre-Registration Discount Deadline



**TO REGISTER ONLINE
 CLICK HERE OR
 SCAN THE QR CODE**



CONVENTION TIMES

THURSDAY, OCTOBER 22, 2026

8:45 AM – 6:45 PM **WORKSHOPS**

8:30 AM – 4:45 PM **EXHIBITS**

FRIDAY, OCTOBER 23, 2026

8:00 AM – 5:30 PM **WORKSHOPS**

8:30 AM – 4:00 PM **EXHIBITS**

FRIDAY, OCTOBER 23, 2026

8:00 AM – 5:30 PM

**STUDENT POSTER PRESENTATION
 AND JUDGING** (open to all)

5:15 PM – 7:00 PM

PRESIDENTS' RECEPTION
 (open to all)

CONVENTION CHECK IN AND REGISTRATION DESK HOURS

Located Off Hotel Lobby

THURSDAY, OCTOBER 22, 2026

8:00 AM – 5:45 PM

FRIDAY, OCTOBER 23, 2026

8:00 AM – 5:15 PM

ILLINOIS PSYCHOLOGICAL ASSOCIATION ANNUAL CONVENTION

October 22 -23, 2026

REGISTRATION RECEIPT

Date Paid _____ Amount Paid _____

Method of Payment

☐ Check #: _____ ☐ Master Card ☐ Visa ☐ American Express

Please Note:

You will not receive confirmation of registration before the conference. However, if there is a discrepancy when you arrive for the program, someone will be available to ensure you are able to attend and that the discrepancy is resolved.

Thank you for helping us keep our costs down by not requiring a confirmation of registration.

SAVE THIS AS YOUR RECORD OF PAYMENT.

2026 IPA CONVENTION **REGISTRATION FORM** OCTOBER 22-23, 2026

Please click here to [register on-line](#) or you may copy this form scan and email to vhanserd@illinoispsychology.org.
(Please print the following information if emailing.)

Name: _____ Highest Degree: _____

Pronouns you would like on your name badge: _____ Organization/Affiliation: _____

Address: _____ Phone: _____

City: _____ State: _____ Zip Code: _____

Email Address _____

☐ I am presenting on Thursday ☐ I am presenting on Friday

CIRCLE REGISTRATION CHOICES

	EARLY BIRD Registration received by: September 15	Registration received by: October 18	Registration after October 18, or on-site
THURSDAY AND FRIDAY PROGRAM PACKAGE			
IPA Members or Affiliates.....	\$355.....	\$375	\$390
Non-members.....	\$390.....	\$410	\$425
THURSDAY PROGRAMS ONLY (Includes Lunch)			
IPA Members or Affiliates.....	\$200.....	\$220	\$225
Student Members	\$35.....	\$35	\$35
Non-Members	\$250.....	\$275	\$300
Non-Student Members.....	\$45.....	\$55	\$65
FRIDAY PROGRAMS ONLY (Includes Lunch)			
IPA Members or Affiliates.....	\$210.....	\$225	\$240
Student Members	\$45.....	\$35	\$35
Non-Members	\$250.....	\$275	\$300
Non-Student Members	\$50.....	\$55	\$65

TOTAL CONFERENCE FEES:

☐ I prefer a vegetarian lunch ☐ I am a new IPA member (joined after 1/1/2026)

VISA/MASTER CARD/AMEX CARD # _____ Expiration Date: _____ Billing Zip Code: _____

Name on Card: _____ Signature: _____

YOUR PROGRAM CHOICES:

Check the number of programs you plan to attend on Thursday and Friday.

This information will help determine meeting room size.

Refer to program numbers listed with program titles.

THURSDAY AM ☐1 ☐2 ☐3 ☐4 ☐5 ☐6 ☐7 ☐8
 THURSDAY PM ☐9 ☐10 ☐11 ☐12 ☐13 ☐14
☐15 ☐16 ☐17 ☐18 ☐19 ☐20
 FRIDAY AM ☐21 ☐22 ☐23 ☐24 ☐25 ☐26
 FRIDAY PM ☐27 ☐28 ☐29 ☐30 ☐31 ☐32 ☐33

If paying by check, make check payable to:

Illinois Psychological Association
Convention and mail with this form to:

Valerie Hanserd C/O Illinois
Psychological Association
5962 Fox Basin Rd., Rockford, IL 61108
Phone: (312) 372-7610 x201

Arrangements for Persons with Disabilities

The Illinois Psychological Association is committed to accessibility and non-discrimination in continuing education activities. Presenters and attendees are asked to be aware of the need for privacy and confidentiality during and after the program. Additionally, if a participant has special needs, please contact Valerie Hanserd, (312) 372-7610, x201, to discuss what accommodations can be provided by October 8, 2026.

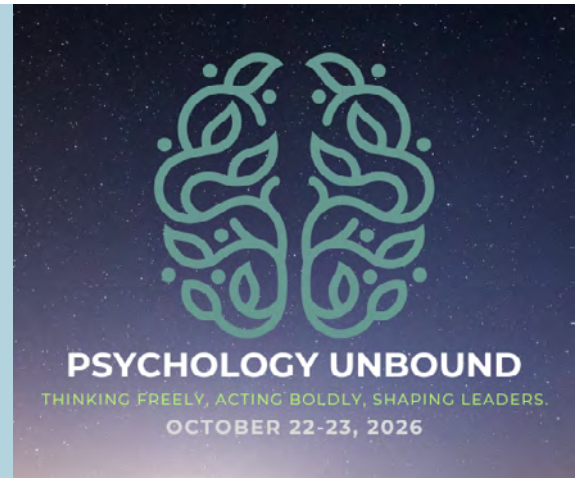
All questions, concerns, or complaints should be directed to Valerie Hanserd.

Program Responsibility

There is no commercial support for this program, nor are there any relationships between IPA, CE Sponsor, presenting organization, presenter, program content, research, grants or other funding that could reasonably be construed as conflicts of interest.

Continuing Education Criteria

These sessions are sponsored by the Illinois Psychological Association. The Illinois Psychological Association is approved by the American Psychological Association to sponsor continuing education for psychologists. The Illinois Psychological Association maintains responsibility for this program and its content.



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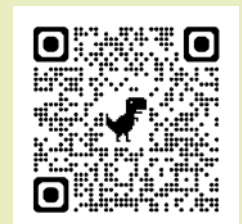
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EXHIBITOR INFORMATION

The exhibits of the IPA convention represent a diverse range of ideas, techniques, and equipment. The use of these products should be guided by the APA ethical principles of psychologists. IPA is not responsible for the products and services displayed.

Visit the Exhibit Booths

THURSDAY: 8:30 AM–4:45 PM

FRIDAY: 8:30 AM–4:00 PM

The following are the exhibitors as of September 1, 2026.

There will be additional exhibitors that joined the convention after the brochure was produced.

Please extend your gratitude to these supporters of the Illinois Psychological Association by visiting their booths.

MEET OUR FEATURED EXHIBITORS

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Vilago Psychological Services/
PsychCoworking

And be sure to visit your colleagues at their Section tables

Organizational & Business
Consulting Section
Clinical Section &
New Member Committee
Early Career Psychologists Section

Don't miss the opportunity to connect with a diverse range of industry leaders, discover new products and services, and gain valuable insights. Exhibit tables will be situated conveniently near Convention workshop rooms.

CONVENTION LOCATION AND HOTEL INFORMATION

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PROGRAM SCHEDULE

Thursday, October 22, 2026

7:30 AM–8:00 AM

REGISTRATION/COFFEE

8:00 AM–8:30 AM

ALL ASSOCIATION MEETING

All attendees are welcome to join the IPA's Executive Committee and Council of Representatives for an update on Association business and finances.

8:45 AM–9:45 AM

Program 1 1 CONTINUING EDUCATION CREDIT

Leadership Development: A Bridge to the Future ●

Wendy Baker, PsyD
Samantha Chiariello, PsyD
Laura Faynor-Ciha, PhD
Theresa Schultz, PhD
Natalie Dille, PsyD, moderator

Learn about the importance of leadership development and what makes an effective leader. The link between leadership development and SPTA membership strength will be discussed.

Program 2 1 CONTINUING EDUCATION CREDIT

Restorative Justice Heals the Hurt People that Hurt People ●

Bruce Bonecutter, PhD
Cliff Nellis, MDiv, JD, MBA

Dr. Bonecutter retired from Public Health Psychology after 45 years. A key ongoing project of his is Lawndale Christian Legal Center's, LCLC, application of Restorative Justice to treatment of court involved 18-25 year-olds in the North Lawndale Area of Chicago. Dr. Bonecutter will moderate a presentation detailing LCLC's model and outcome data as it has evolved. LCLC has a high success rate of turning "criminals" into citizens using wrap-around systems, lawyers, case-managers, counseling, academic & employment skill development and community violence & outreach specialists. LCLC is key to applying the "Peace Circle" approach to Illinois Courts where Judicial, Police, Victim, Perpetrator and Community Representatives build and monitor a recovery plan.

8:45 AM–10:15 AM

Program 3 1.5 CONTINUING EDUCATION CREDITS

Knowledge is Power: HCRC ●

Heidi Shikora, PsyD [HCRC Chair]
Lynda Behrendt PsyD, RN
Abby Brown, PsyD, PMH-C
Blair Brown, PsyD
Margo Jacquot, PsyD, CSADC, BCETS
Susan O'Grady, PsyD
Theresa M. Schultz, PhD, MBA

Best Practices for Benefit Verification: Emphasizing the importance of verifying benefits with new patients prior to the start of treatment and with existing patients at the start of each year. Medicare Updates: The latest information on Medicare policies as they apply to mental health treatment, billing and reimbursement. Navigating Record Requests from Insurance Companies: Understanding the processes and considerations surrounding record requests from insurance companies (risk adjustment reviews vs. claims payment audits) CPT Codes: Defining and differentiating various psychotherapy CPT codes, including when it is appropriate to use each code and what documentation is required to support the codes. Member Concerns: Recognizing the importance of addressing specific member concerns, this session will incorporate dedicated time for responding to questions from IPA members received prior to the convention. Attendees will have the opportunity to submit their reimbursement-related inquiries in advance. These questions will be compiled and addressed by committee members during interactive Q&A sessions.

10:30 AM–12:00 PM

Program 4 1.5 CONTINUING EDUCATION CREDITS

Navigating Cultural Ruptures in the Supervisory Relationship: Reflective Practices for Supervisors ●

Anmol Satiani, PhD
Elissa Sarno, PhD

Clinical supervision is a critical and complex activity in the field of psychology and the supervisory alliance is one of the most significant aspects of supervision (Bernard & Goodyear, 2019; McWilliams, 2021). Research has examined cultural ruptures and the impact on therapy and highlighted the need for strategies for repair. Similarly, cultural ruptures have the potential to negatively effect the supervisory relationship (Yeo & Torres-Harding, 2021). This presentation will integrate work on microaggressions and cultural ruptures in supervision and ways to address them. The APA Multicultural Guidelines and the APA Guidelines for Clinical Supervision ask us to center cultural factors in our work with supervisees and clients (APA, 2017; APA, 2025). Further, cultural ruptures can be considered ethical violations as the APA Ethics code asks us to ensure that our biases do not lead to a misuse

of influence in Principle E (APA, 2017). Theorists have emphasized the importance of attending to cultural issues in supervision (Falender, Shafranske, & Falicov, 2014). However, despite these recommendations, literature indicates that some supervisors are perpetuating harm and not adhering to these standards (Hutman & Ellis, 2020; Hutman et al, 2023). Many supervisors have not received adequate, formal training in supervision and/or multicultural psychology, making the task of supervising a diverse group of trainees more challenging. The supervision literature reveals that many supervisees from marginalized backgrounds are reporting microaggressions and cultural ruptures in supervision (Hutman et al., 2023; Wilcox, Winklejohn Black, Farra, 2023). Ruptures or tensions in the supervisory relationship can evoke feelings of frustration, confusion, and helplessness in both supervisors and supervisees. These dynamics may leave supervisors struggling to understand the supervisee's experiences and may lead to disengagement of both the supervisor and supervisee from the supervision process. Scholars have written about repair of such ruptures and strategies to address them (Chang, Dunn, & Omid, 2020); this presentation will review such strategies. This presentation will review relevant theories and research on cultural ruptures in supervision and explore practical strategies for proactively promoting dialogue before ruptures occur, navigating ruptures, and moving toward repair in supervision. Participants will engage in experiential activities, such as vignettes, small group discussion, and role plays, to deepen knowledge

and skills to address these critical issues in supervision. Doing this work in supervision will help future clinicians develop stronger supervisory skills and indirectly help them to navigate similar themes with their clients, colleagues, and others in their lives. This relational, complex, difficult work within supervision is critical to the development of the next generation of clinicians.

Program 5 1.5 CONTINUING EDUCATION CREDITS

How Patients Suffer From Their Feelings and What To Do ●

Virginia C. Barry, MD
Alice Bernstein, PhD

Patients suffer not only from what they remember, but from what they cannot consciously remember. Drawing on affective neuroscience, developmental theory, memory research, and computational neuroscience, this presentation explores how early emotional experiences, both functional and dysfunctional, become embedded in the nervous system and continue to shape the self. Understanding that "cure" requires more than intellectual insight, we will explore how innate predictions function in our attempts to maintain emotional homeostasis. Through clinical examples, we will consider why insight alone cannot undo these implicit predictions, and how the exemplary work of Jaak Panksepp and Mark Solms helps us understand and transform the emotional systems that drive suffering.

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11:00 AM–12:00 PM

Program 6 1 CONTINUING EDUCATION CREDIT**Psychology and Improv: Building Cognitive Flexibility, Connection, and Resilience** ●

Marie Eddy
 Aliya Persaud, MA
 Joyce Mojica, PsyD, CADC

This interactive presentation explores the intersection of psychology and improvisation, highlighting how principles commonly used in improvisational theater can foster psychological well-being, enhance interpersonal effectiveness, and strengthen resilience. While improv is often associated with comedy and performance, its core principles align closely with established psychological theories and evidence-based therapeutic approaches. Through discussion, experiential exercises, and reflection, participants will gain a deeper understanding of how improvisation can be used to promote flexibility, creativity, connection, and adaptive coping in both personal and professional contexts. A central theme of the presentation is psychological flexibility—the ability to remain present, adapt to changing circumstances, and engage in behaviors that align with personal values despite discomfort or uncertainty. Psychological flexibility is a key component of mental health and is strongly associated with resilience, emotional regulation, and overall well-being. Conversely, psychological rigidity is linked to many common psychological concerns, including anxiety, depression, perfectionism, and difficulties tolerating uncertainty. Improvisation provides a unique and engaging framework for practicing flexibility in real time by encouraging individuals to respond to unexpected situations without relying on predetermined scripts or outcomes. The presentation will examine several foundational principles of improvisation, including interactive activities, embracing mistakes, active listening, collaboration, and present-moment awareness. These principles closely parallel concepts found in evidence-based psychological treatments such as Acceptance and Commitment Therapy (ACT), Cognitive Behavioral Therapy (CBT), Dialectical Behavior Therapy (DBT), and person-centered approaches. Participants will explore how improv encourages acceptance rather than avoidance, promotes cognitive flexibility, reduces fear of failure, and strengthens interpersonal connection through validation and responsiveness. Through experiential activities, attendees will have opportunities to directly engage with improv techniques and reflect on their psychological significance. Activities are designed to illustrate how individuals can develop greater comfort with uncertainty, challenge perfectionistic tendencies, improve communication skills, and cultivate a growth-oriented mindset. Participants will experience firsthand how improvisation creates a safe environment for experimentation, learning, and resilience-building. This topic is particularly relevant in contemporary psychological practice, as individuals increasingly face social, academic, occupational, and personal stressors

that require adaptability and effective coping. Mental health professionals, educators, students, and community members can all benefit from learning practical strategies that enhance flexibility, emotional awareness, and interpersonal effectiveness. By integrating psychological theory with experiential learning, this presentation demonstrates how improv can serve as a valuable tool for promoting well-being and fostering meaningful human connection. Ultimately, this program contributes to the application of psychological thought and practice by translating complex psychological concepts into accessible, engaging, and actionable experiences. Participants will leave with a greater understanding of the psychological mechanisms underlying improvisation and practical skills that can be applied to clinical work, professional settings, and everyday life. Through the lens of improv, attendees will discover how embracing uncertainty, collaboration, and imperfection can support growth, resilience, and psychological health.

1:30 PM–2:30 PM

Program 7 1 CONTINUING EDUCATION CREDIT**Colorism: Understanding the Psychological Impact and Implications for Clinical Practice** ● ● ●

Connie Natvig, PhD
 Holly Houston, PhD
 Saniya Khan, MA
 Dheeksha Ranginani, MA

Colorism, the differential treatment and valuation of individuals based on skin tone within and across racial and ethnic groups, remains a pervasive yet often overlooked form of discrimination. Rooted in historical systems of colonialism, enslavement, and racial hierarchy, colorism influences educational attainment, employment opportunities, social relationships, physical health, and psychological well-being. Although psychologists increasingly recognize the mental health consequences of racism, colorism frequently receives less attention in research, assessment, and clinical training. This presentation will provide an overview of colorism as a distinct psychosocial phenomenon, review current empirical research on its prevalence and psychological effects, and examine its implications for clinical practice. Participants will explore how colorism contributes to identity development, self-esteem, body image concerns, depressive symptoms, anxiety, trauma responses, and interpersonal functioning. Special attention will be given to the experiences of Black, Latinx, Asian, Indigenous, and multiracial populations, as well as intersections with gender and other marginalized identities. The presentation will conclude with evidence-informed recommendations for psychologists seeking to incorporate colorism awareness into assessment, case conceptualization, treatment planning, and culturally responsive clinical interventions. Description Colorism is a global phenomenon that shapes individuals' lived experiences both within and across racialized groups.

TRACKS: ● Academic / Student ● Clinical ● Business / Leadership

Research demonstrates that lighter skin tones are often associated with social privilege, while darker skin tones may be linked to discrimination, stigma, and adverse mental health outcomes. Despite its significance, many clinicians receive limited formal training regarding the impact of colorism on psychological functioning. This presentation will: 1. Define colorism and distinguish it from racism and other forms of prejudice. 2. Review contemporary research examining the psychological and social consequences of colorism. 3. Discuss clinical implications and culturally responsive practices for psychologists working with diverse populations. Through case examples and discussion of emerging research, participants will gain practical tools for recognizing and addressing colorism-related concerns in clinical settings.

Program 8 1 CONTINUING EDUCATION CREDIT

**Ketamine-Assisted Psychotherapy:
Expanding the Role of Psychologists in
Innovative Mental Health Care ●**

Jessica Punzo, PsyD

Ketamine-assisted psychotherapy (KAP) represents one of the most significant developments in mental health treatment in recent decades. As rates of depression, PTSD, anxiety, and treatment-resistant conditions continue to rise, psychologists are increasingly encountering clients who are seeking information about ketamine and other emerging psychedelic-assisted therapies. Despite growing public interest and expanding clinical availability, many psychologists have received little formal education regarding ketamine-assisted psychotherapy, leaving them uncertain about its effectiveness, ethical considerations, practical applications, and the role psychology plays within this evolving treatment landscape. This presentation will provide an evidence-informed overview of ketamine-assisted psychotherapy and explore how psychologists can thoughtfully engage with innovative treatment approaches while remaining grounded in science, ethics, and clinical best practices. Participants will review current research supporting ketamine-assisted interventions for depression, PTSD, anxiety, and related conditions, including proposed mechanisms of action and emerging findings regarding neuroplasticity and therapeutic change. The presentation will clarify the distinction between ketamine administration alone and psychotherapy-

enhanced treatment models, highlighting the unique contributions psychologists bring to preparation, therapeutic support, and integration. Beyond reviewing the evidence base, the program will focus on practical application. Participants will learn about screening and assessment considerations, contraindications, risk management, treatment planning, preparation and integration processes, and interdisciplinary collaboration. Through case examples and discussion, attendees will have opportunities to consider how KAP may fit within their existing clinical work, whether through direct practice, consultation, referral, or client education. Consistent with the convention theme of "Thinking Freely, Acting Boldly, Shaping Leaders," this presentation will encourage psychologists to critically examine how emerging interventions are reshaping mental health care and to consider the profession's leadership role in ensuring these treatments are implemented responsibly, ethically, and effectively. Participants will explore how psychologists can remain clinically relevant and ethically engaged as novel treatments reshape the mental health landscape, including opportunities for leadership in education, research, advocacy, and interdisciplinary collaboration. Particular attention will be given to issues of equity, diversity, and inclusion, including disparities in access to innovative treatments, financial barriers, cultural considerations, and the importance of delivering care that is responsive to diverse populations and experiences. This work contributes to the application of psychological thought and practice by emphasizing the central role of psychotherapy within ketamine-assisted treatment. While ketamine has often been viewed through a medical lens, psychologists possess unique expertise in assessment, therapeutic relationship building, trauma-informed care, meaning-making, and behavioral change. As innovative treatments continue to emerge, psychologists have an opportunity to help shape standards of care, contribute to research and education, advocate for equitable access, and ensure that advances in treatment remain grounded in psychological science and ethical practice. Interactive case discussions and audience engagement activities will provide opportunities for participants to apply concepts to real-world clinical scenarios.

Attendees will leave with practical tools for evaluating, discussing, and potentially integrating ketamine-assisted psychotherapy into their professional work.

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Program 9 1 CONTINUING EDUCATION CREDIT**It's a Journey, Not a Destination:
Exploring Retirement Begins at the
Starting Line, Not the Finish Line** ●

Wendell Carpenter, PhD, ABPP
Joan Hakimi, PsyD
Alice Bernstein, PhD
Joseph Comaty, PhD, ABPP
Clifton Saper, PhD

Determining when to retire and the legal, clinical/ethical, financial, and personal issues related to retirement can occur at the start of one's professional career. It is important for the elders in the profession to share their journeys with those just starting out. It is just as important for young psychologists to learn of the trials and tribulations of those journeys and share their own concerns as they enter the field. Panel of retiring/retired psychologists will discuss their decision making strategies and their concerns about moving forward. ECP's/Students will have "speed conversations with the late career psychologists and share their journeys, their dreams, and their concerns.

2:45 PM–3:45 PM**Program 10** 1 CONTINUING EDUCATION CREDIT**Maintaining Family Ties: Women's
Kinkeeping Across the Adult Lifespan** ●

Dr. Kim Dell'Angela
Hannah Rahman, MA

Kinkeeping, the often-invisible labor of sustaining family relationships, remains disproportionately carried by women despite growing societal emphasis on gender equality. This mixed-methods study explored the lived experiences of women who identify as family kinkeepers across three developmental stages—early, middle, and late adulthood—to better understand how gendered expectations, cultural influences, and life stage factors shape kinkeeping behaviors and meanings. Drawing upon social constructionism and Erikson's psychosocial development theory, the study examined how women construct and negotiate their roles as kinkeepers within shifting cultural and generational contexts. Quantitative data from 55 participants were analyzed using one-way ANOVA and correlation analyses to examine relationships among kinkeeping constructs of culture, lifestyle cost, and meaning/purpose. Qualitative data from semi-structured interviews were thematically analyzed to identify recurring patterns and generational nuances in women's kinkeeping experiences. Results indicated that while younger women emphasized cultural and social influences (e.g., technology and gender norms), women in middle adulthood reported heightened lifestyle costs,

including stress and reduced personal time, and women in late adulthood emphasized meaning and legacy. Findings revealed a moderate positive relationship between cultural expectations and perceived cost, and a negative association between cultural expectations and purpose. Together, these findings highlight the persistent gendered burden of family care labor and its psychological and economic implications across the lifespan. The study underscores the need for policy reforms, workplace flexibility, and cultural shifts that recognize and redistribute kinkeeping responsibilities, fostering more equitable familial and societal dynamics.

Program 11 1 CONTINUING EDUCATION CREDIT**Considering the Psychologist's Role
in the Prevention of Violence** ●

Mitchell Hicks, PhD, ABPP

While the Tarisoff case and the duty to warn it imposed is a staple of every psychologist's ethical education, few get training identifying the kinds of verbalizations and behaviors that may signal that a particular individual may be building toward an act of targeted violence. These acts are rarely the result of "snap decisions," but instead are usually the culmination of weeks, months, or even years of buildup. In this presentation, we will consider the pathway toward violence, hallmarks of each phase, and potential points of deescalation or intervention.

2:45 PM–4:15 PM**Program 12** 1.5 CONTINUING EDUCATION CREDITS**PSYPACT** ●

Janet P. Orwig, MBA, CAE
Samantha Chiariello, PsyD

In an era of rapidly evolving technology, telepsychology has become an indispensable tool for expanding access to behavioral health services. However, this transformative modality brings with it a complex web of legal, ethical, and regulatory considerations that demand careful attention. This presentation will provide an in-depth overview of the Psychology Interjurisdictional Compact (PSYPACT) and its implications for psychological practice in your state. Attendees will gain a comprehensive understanding of PSYPACT's structure, its benefits for practitioners and clients, and the regulatory considerations for cross-state telepsychology and temporary in-person practice. The session will highlight recent developments, practical steps for psychologists to participate in PSYPACT, and strategies to maximize the opportunities PSYPACT offers. Ample time will be allotted for discussion of common challenges, ethical considerations, and attendee questions.

4:30 PM–5:30 PM

Program 13 1 CONTINUING EDUCATION CREDIT

Heal the Healers & Helpers: Embodied Approaches to Wellness ●

Orson Morrison, PsyD
Rahul Sharma, PsyD

This talk introduces psychologists to an innovative, community-rooted model of embodied healing designed specifically for social impact makers (broadly defined as individuals engaged in any type of social justice, advocacy, and community healing work). Drawing from "The Embodied Healing Series," a 4-part highly regarded free series led by a diverse array of practitioners in 2025 and 2026, the presentation highlights how culturally grounded group experiences that draw on ancestral connection, rhythm and music, and somatically oriented energetic practices can help address the cumulative emotional, relational, and somatic burdens carried by social change makers in an era marked by polarization, burnout, and social disconnection. Social impact leaders often operate in environments of chronic stress and moral urgency, leaving little time for restoration or self-reflection. The Embodied Healing Series reframes healing not as an individual responsibility, but as a collective, relational practice. These events intentionally create protected time for rest, play, movement, reflection, and connection core components frequently absent from

traditional clinical or organizational wellness approaches. The talk will explore how this deliberate structuring of time and space serves as a therapeutic intervention in itself, challenging dominant norms of hyper-individualism, hierarchy, and productivity. Through examples such as Qi Gong sessions focused on energy flow and restoration, community drum circles that center joy as resilience, and ancestral journeying that connect us to the wisdom of lineage, the series demonstrates, through experiential learning, how diverse embodied practices can be integrated into psychologically meaningful group experiences. These modalities emphasize sensory awareness, collective rhythm, and traditional healing practices from various cultures as pathways to regulation, belonging, and renewal. These modalities, when structured within learning and growth environments, offer complementary approaches to more Western-derived therapeutic models. The Embodied Healing Series intentionally employs culturally rooted healing practices. Sessions such as those exploring ancestral connection and radical belonging underscore the importance of identity, lineage, and collective memory in psychological well-being. The talk will examine how these elements support resilience by fostering continuity, community coherence, and meaning making. Given the themes and approaches, the talk will highlight how these sessions are particularly meaningful for practitioners and leaders from, as well as those who serve, historically marginalized communities. For psychologists, this work invites a rethinking of our interventions and practices,



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moving beyond individual treatment frameworks toward community-based, participatory healing environments that prioritize relational safety, experiential engagement, and cultural relevance. It also illustrates how psychologists can collaborate with community organizations, grant funders, healers, artists, and movement practitioners to co-create multidisciplinary spaces of care, and how psychologists can play a critical role in sustaining those who are working to transform society.

Program 14 1 CONTINUING EDUCATION CREDIT

**From DSM to IEP:
Supporting Students with Learning and
Neurodevelopmental Challenges ●**

*Joseph Roszkowski, PsyD
Abbigail Pruitt, PhD*

This presentation emerged out of a year-long collaboration and conversation between school psychologist Abigail Pruitt, PhD, trained and immersed in special education delivery and procedures, and Dr. Joe Roszkowski, a clinical psychologist having spent over twenty years providing neuropsychological assessments and supporting children with learning disorders and neurodivergent challenges. Dr. Pruitt is a licensed school psychologist currently working in private practice providing PCIT, neuropsychological assessment, and school consultation while pursuing her clinical licensure. Dr. Roszkowski is the founder and director of Pathways

Psychology Services, a multi-speciality practice and training site in the western suburbs, and an allied staff psychologist at Northwestern Central DuPage Hospital. The focus will be on offering participants an updated model for guiding students and parents in the clinical setting presenting with school and learning difficulties including: eligibility criteria, legal protections, and procedural requirements of Section 504 plans versus IEPs under IDEIA and Section 504 of the Rehabilitation Act; the differences between school-based eligibility and DSM-5-TR based diagnosis, particularly as they relate to learning disorders, ADHD, autism, and Emotional Disorder eligibility; why these differences matter practically for clinicians working with kids and families in school systems; challenges in differentiating and addressing mild intellectual disability and learning disorder; neuropsychology-informed approaches to addressing learning and adaptation in consideration of alternative learning models and evolving AI approaches to learning. The presenters will offer contrasting views from inside and outside the school system. Dr. Pruitt brings the perspective of practical realities and the importance of inclusion, while Dr. Roszkowski brings an advocacy-based clinical lens. Redacted case examples will ground the discussion in the actual complexities that go into diagnosing, making recommendations, and supporting students with school-based and learning challenges. Question and answer will be included to tailor the presentation to the specific needs of the audience. The presenters will bring participants into the lively and at times conflictual discussions they have had about supporting students with unique learning challenges, discussions that get into the inherent tensions between clinical advocacy and educational policy, the economic pressures schools have faced, and the persistent upward trend in students presenting with learning challenges, mental health issues, and cognitive difficulties that the current educational system was not designed to manage. The discussion will provide context behind the variable models and differences between school districts' approach to special education identification and resource delivery and inherent inequalities within the current system. The presentation will provide practical guidance for critical analysis across disability categories including ADHD, Emotional Disorder, Autism Spectrum Disorder, and the increasingly common and complicated issue of school refusal. For example, in Illinois, schools require that a student has already received significant academic intervention and has still shown slower progress than expected before SLD eligibility is considered, an approach that can put families in a difficult position and one where clinical psychologists can play a meaningful role in guiding and supporting advocacy. The presentation will conclude with addressing bigger picture issues in a changing educational and occupational landscape in which the traditional school system as it stands is showing increasing need for adaptation. Exponential increases in school refusal, a growing migration toward homeschooling, and emerging neuropsychology-informed and AI-based learning approaches will require both schools and those



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who support students to pivot. The presenters will focus on limitations and considerations for how clinical psychologists and schools will need to evolve. The aim is to provide highly relevant and practical information for clinicians doing child neuropsychology assessment and supporting children and adolescent clients in what is already a rapidly changing educational environment.

Program 15 1 CONTINUING EDUCATION CREDIT

**Psychotherapy at a Crossroads:
The Algorithm Will See You Now** ●

Linda Michaels, PsyD, MBA

Psychotherapy is under pressure—and the forces driving that pressure are no longer peripheral to clinical practice. They are reshaping it. This presentation will examine the converging economic, technological, and institutional forces currently transforming the mental health landscape: the entry of venture capital and private equity into mental health platforms, the proliferation of AI-driven tools marketed as therapeutic, algorithmic insurance decision-making that displaces clinical judgment, and systemic misrepresentations of what constitutes evidence-based care. These are not abstract trends. They are actively influencing how the public understands therapy, how policymakers regulate it, how insurers reimburse it, how therapists manage their practices, and how training programs prepare the next generation of clinicians. This presentation will identify these forces clearly, trace their clinical and policy implications, and offer a framework for what therapists can do—individually and collectively—to protect the integrity of their work and advance its place in the broader mental health conversation.

neurodegenerative diseases and thus, approaches must be tailored to patients, their comorbidities, treatment regimen, and care needs. In this session we will provide a brief overview of neuropsychiatric symptoms and associated outcomes related to PD and LBD and provide an overview of multidisciplinary systems-based mental health models in neurological illness including individual psychotherapy, group therapy, patient and dyadic support groups, neuropsychological assessment, cognitive rehabilitation, multimodal brain health interventions, online educational didactics and social media outreach, and community events. We will then take a deeper dive into protocols and efficacy of four interventions that have been adapted for PD/LBD populations. First, we will describe an overview of the Rush PD and Movement disorders behavioral health programs and the unique presenting concerns we treat in our clinics. This includes, but is not limited to sleep disturbance caused by pain or REM sleep behavior disorder, apathy, impulse control disorders, mild cognitive impairment, hallucinations, psychosis, social anxiety, and grief. Dr. Gonzalez will describe the benefits of neuropsychological evaluation



5:45 PM–6:45 PM

Program 16 1 CONTINUING EDUCATION CREDIT

**Improving Cognition and Neuropsychiatric
Symptoms in Parkinson's and Lewy
Body Disease** ●

*Jessica Hemm, BS
Aimee Karstens, PhD
David Gonzalez, PhD ABPP
Samantha Patel
Sarah Mitchell Chen, LCSW APHSW-C
Jada Ross, BS*

Parkinson's Disease (PD) and Lewy Body Dementia (LBD) are common neurodegenerative diseases and leading causes of disability. It is estimated that 90,000 people are diagnosed with PD alone each year, and the incidence is greater for individuals living in the Midwest due to risk factors (e.g., pesticides, industrial manufacturing). Though they are characterized as movement disorders, common symptoms include depression, anxiety, apathy, cognitive decline, sleep disturbance, and other neuropsychiatric symptoms affecting the quality of life of patients and their care partners. Psychotherapy and pharmacological treatments are efficacious, but can be less reliably effective or have significant adverse effects in

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Your support has been invaluable, ensuring our attendees had the sustenance they needed to fully enjoy the occasion. We truly appreciate your commitment to our community and your role in making this event a resounding success.

and a group-based approach to cognitive rehabilitation that combines both psychoeducation and physical activity in patients with PD. Dr. Karstens and Ms. Ross will discuss considerations for providing individual therapy and review a protocol and preliminary findings from group therapy tailored for PD. Many of these topics will also be highly relevant to couples, including intimacy issues and adjusting to caregiver roles. Dr. Patel will provide an overview of key considerations for pharmacological treatments in this population (e.g., pros of cons for select pharmacotherapies to target symptoms in PD/LBD), including clinical cases to illustrate how she alters medication regimens as symptoms evolve. Finally, Ms. Chen will describe the unique benefits of support groups for patients and caregivers and approaches to facilitation (e.g., peer vs. professional-led, dyadic). Her presentation will also speak to the importance of supporting care partners and how this serves to benefit patients. The objective of this presentation is to provide insights into treatment of the progressive and complex symptom profiles in this common disease, and to provide tangible intervention approaches in one's practice. Future directions include development of intervention protocols to increase the capacity to treat individuals with PD/LBD and provide support to their care partners.

Program 17 1 CONTINUING EDUCATION CREDIT

When Talking Isn't Enough: Psychodrama for Therapeutic Change ●

Brittany Lakin-Starr, PhD, TEP

Kate Merkle, LCSW, TEP, RDN

Nikki Bishop, PsyD

Sometimes clients have significant insight into their patterns, can articulate what is getting in the way of change, and yet continue to feel stuck in their lives. Developed by Dr. Jacob Moreno, psychodrama uses guided dramatic action to move clients beyond talking about their experiences to actively engaging with them. This experiential approach allows clients to examine past or present challenges through therapeutic role play in the here and now. Together, therapist and client bring important relationships, moments, and internal conflicts into the room—creating opportunities to see oneself more clearly, express what has not been said, and experiment with new ways of being. Through these action methods, clients not only gain deeper insight, but also explore new perspectives, test potential solutions, and experience change in action. This experiential workshop will introduce participants to psychodramatic interventions that support clients in getting unstuck. Through demonstrations and exercises, participants will learn how the core principles and applications of psychodrama move clients beyond



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insight into action toward healing and growth. Particular attention will be given to role reversal, a foundational psychodramatic technique that invites clients to step into the perspective of another person, role, or aspect of self, often leading to clarity, conflict resolution, and movement toward change. Through role reversal and related techniques, participants will examine how psychodrama helps clients let go of unhelpful roles, experiment with new roles and responses, and cultivate more fulfilling ways of relating to themselves and others. This workshop makes a meaningful contribution to the application of psychological thought and practice by emphasizing action-based methodologies that extend beyond talk therapy. It highlights how psychodramatic techniques can be applied across diverse clinical settings to engage clients more deeply. Whether in individual or group psychotherapy, psychodrama provides an action-based framework in which clients enact internal experiences and relational dynamics in real time, accessing new emotional and behavioral options that support change. Participants will also receive a concise overview of psychodrama's historical and theoretical foundations. Both presenters are board certified in psychodrama and will collaboratively co-lead this presentation. Chicago Center for Psychodrama is an Illinois CE provider for Psychologists, Social Workers, and Counselors.

Program 18 1 CONTINUING EDUCATION CREDIT

Imposter Syndrome: An Integrative Approach to Healing through Supervision ●

Nessa Gulik, MA, PsyD

Despite imposter syndrome being a researched phenomenon dating back to the 1970s, it has only recently entered widespread nomenclature. The lived experience of imposter syndrome is more complex than its mainstream representation may suggest. While the impact of imposter syndrome is shaped in part by individual development, identity, and sociocultural context, it can yield a heavier weight for people from marginalized groups. Women and individuals who affiliate with racial, ethnic, sexual, gender, or religious

minority groups may experience imposter-related distress more intensely due to systemic inequities and repeated experiences of invalidation. Additionally, many individuals who experience the distressing symptoms of imposter syndrome often feel paralyzed, unable to make the next right move. These experiences are especially relevant within the field of psychology, where trainees and early-career clinicians are frequently placed in evaluative, supervisory, and high-responsibility roles while simultaneously managing risk and developing their professional identities. This presentation will provide an empirically grounded overview of the development and conceptualization of imposter syndrome, with attention to cognitive, emotional, and relational dimensions. Special emphasis will be placed on how experiences of being an imposter are shaped and maintained within systems of power, identity conceptualization, and professional training cultures. Because of the potential power of the supervisory relationship, there is growing interest in how the relationship itself can function as a corrective emotional safe-base through which individuals can process and resolve their experiences of being an imposter. Using an attachment-based and interpersonal neurobiological framework, we will explore how experiences of attunement, validation, and reflective functioning within supervision can support identity consolidation and reduce shame-based self-appraisal patterns commonly associated with imposter phenomena. Building on this theoretical knowledge and implementing a narrative therapy frame, participants will be guided through examination of a specific experience of imposter syndrome and consider alternative ways of telling their narrative. In summary, participants will leave this presentation with a more holistic understanding of imposter syndrome, as well as concrete integrative strategies for addressing it within supervision and clinical practice. This work contributes to the application of psychological science by bridging research on professional identity development, leadership, attachment, and neurobiology with real-world interventions and areas of growth within the supervisor relationship.

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Friday, October 23, 2026

7:30 AM-8:00 AM

CONTINENTAL BREAKFAST

8:00 AM-9:15 AM

KEYNOTE (All Attendees)

1.5 CONTINUING EDUCATION CREDITS



Can We Talk? Assumptions, Disruptions, and Directions in Unbound Practice with Marnie Shanbhag, PhD

As the Illinois Psychological Association marks its 90th anniversary, the profession of psychology and especially practicing psychologists stand at a pivotal moment. Long-held assumptions are being tested by technological advances, shifting demographics, changing care models, evolving workforce expectations, and new societal challenges. Join Dr. Shanbhag as we examine the assumptions we must leave behind, the disruptions we must face, and the directions that will shape the next era of psychology and practice. The question is not whether the world is changing around us, but whether we are prepared to change along with it.

9:30 AM-11:00 AM

Program 19 1.5 CONTINUING EDUCATION CREDITS

Role of Games in Fostering Post-Traumatic Growth ●

Anissa Rivers, PsyD

Breon Rose, PhD

Gustina Giordano, MEd, MACP

Tziporah Ladin-Edelman, MA,

A recent collective experience of a traumatic event occurred during the COVID-19 pandemic (Kaubisch et al., 2022). During this time, many individuals turned to

new ways of socializing to stay connected and mitigate stress. During the pandemic, research found that people turned to Tabletop Roleplaying Games (TTRPGs) as a coping tool, and sales increased 300% (Baker et al., 2023). Dungeons & Dragons (D&D) is one of the most popular and well-known tabletop role-playing games (TTRPGs). Online options for playing the game, combined with the pandemic, greatly increased its use and accessibility. TTRPGs are increasingly studied as a mental health intervention due to their accessibility, popularity, and conceptual similarities to other mental health treatments, such as group therapy, roleplay interventions, and play therapy (Arenas et al., 2022; Battles et al., 2025). TTRPGs have also been suggested and used alongside traditional interventions, such as CBT (Stubbs & Sorensen, 2025), or as a medium for implementing traditional therapeutic methods (Bowman & Lieberoth, 2024). A major study found that the main reason people gravitated towards watching people play D&D or playing online during the pandemic was a sense of belonging (Scriven, 2021). Many people who played Dungeons and Dragons during the pandemic noticed increased feelings of social connection and belonging, as it provided a place to connect, role-play, and engage in collective problem-solving (Abbott et al., 2022). This can especially be the case for those in the LGBT community. A recent study examined how video games can reflect distinct social needs and foster a sense of belonging, community, and authentic relationships, especially among culturally diverse groups. (Rose et al., 2026). A rapid evidence review of the literature found that individuals who play TTRPGs have increased levels of creativity, empathy, and moral development (Henrich & Worthington, 2023), key factors associated with the development of PTC (Elam et al., 2025; Orkibi & Ram-Vlasov, 2019). Perspective taking has also been studied in the context of TTRPGs, with individuals who play subjectively reporting a much higher level of comfort with perspective taking, as measured as one aspect of empathy by Davis (1980), than the average college population (Rivers, 2016). Research has recommended TTRPGs as a potential treatment for individuals who have experienced trauma (Stone et al., 2024). Some exploratory research indicates potential benefits of TTRPGs for helping individuals process and integrate trauma in a safe space (Sargent, 2014). However, recent research has noted that the use of TTRPGs in practice is outpacing research and highlighted the importance of further research in this area (McLaren et al., 2025). This led us to study D&D as a moderating factor in post-traumatic growth. Given the strong correlations among playing D&D, developing empathy and creativity, and improving social connections and belonging, and its potential to provide a safe space to process and integrate trauma with marginalized groups, it is beneficial to explore the relationship between TTRPGs and post-traumatic growth. By advancing understanding of TTRPGs and wellness, this work would extend the evidence base for their use in therapeutic settings.

TRACKS: ● Academic / Student ● Clinical ● Business / Leadership

Program 20 1.5 CONTINUING EDUCATION CREDITS

Leadership and Team Building with the Power of Temperament ●

*Ellen Astrachan-Fletcher, PhD, FAED, CEDS-C
Andrea Seefeldt, PsyD*

Leadership style and personality assessment has been utilized for decades, yet the results or product often gets lost in the massive amount of generalized information that the reports produce for each person. The experience is often described as informative and enjoyable but the information they learn does not often get applied to the workplace. In the use of The Power of Temperament, every individual can learn specific nuanced information about their temperament and how it shows up in the workplace. Traits can be expressed productively and destructively, and through The Power of Temperament we help people learn how to maximize the productive expressions. Participants will learn how to use this new information to improve communication, team cohesion, and productivity.

Program 21 1.5 CONTINUING EDUCATION CREDITS

Employment Law Tips for Mental Health Practice Owners ●

*Lori A. Goldstein, JD
Samantha Chiariello, PsyD*

Summary of key federal and IL employer compliance requirements with a focus on mental health practices. Topics to include W-2 employee vs. 1099 independent contractor classification, employment contracts, non-competes, compensation options, employee handbooks/policies, discipline and termination

11:15 AM–12:15 PM

Program 22 1 CONTINUING EDUCATION CREDIT

Reproductive Deserts: Addressing Doctoral Training in Reproductive Health and Psychology ●

*Christina Biedermann, PsyD
Julie Bindeman, PsyD
Maeve Garvey, MA
Abbre McClain, PsyD, LCPC*

Given the emergent legal, ethical, and practice dilemmas facing psychologists since the U.S. Supreme Court's ruling in Dobbs vs. Jackson Women's Health Organization (2022), teaching and training in reproductive health, development, and psychology are increasingly essential. However, to date, no study has examined the availability of such training in clinical psychology doctoral programs in the U.S. Moreover, little research exists on the content and development of such courses at the doctoral level, nor have the experiences of graduate students within them been examined. Investigations into each of these elements are vital to equipping clinical psychology doctoral students with the tools needed to provide ethical, competent, and effective care. In this program, we will: 1) present original research on what is taught about reproductive health, development, and psychology in

APA-accredited doctoral programs in clinical psychology, 2) describe a doctoral-level course developed to address the lack of training and outcome data about student learning in two iterations of the course, and 3) illustrate the impact of the course from a student's perspective. In the first presentation, we will describe the findings from a review of all 237 APA-accredited clinical psychology program websites (PhD and PsyD) and a provisional survey of a convenience sample of Training Directors (n=32). The review of websites suggests a lack of teaching and training in this area and that, if training is available, it is subsumed within broader frameworks of human development and sexuality. The preliminary survey data describes Training Directors' perceptions of the quality of existing training, its importance, and both incentives and barriers to offering more. The low response rate (13.9%) limits the generalizability of the survey findings; however, they may inform future efforts to assess teaching and training in this area. Using this context, we will then present an elective course in a clinical psychology doctoral program, along with outcome data on student learning in two iterations of the course. Findings include student reports on how much they learned about a list of topics (e.g., infertility, postpartum role transition, birth trauma, peri/menopause), as well as student perspectives about which topics they felt were most integral to their training as future health service providers. Third, a student who completed the first iteration of the course (in 2024) will discuss her experience in the class, her exposure to topics elsewhere in her training, and how she applied that learning to her dissertation and subsequent training. Finally, we will engage the audience in discussion about these findings and their implications for teaching in clinical psychology. This may include articulating opportunities to incorporate teaching into existing training, developing new opportunities and teaching networks, and reconsidering dominant frameworks that inform what is taught.

Program 23 1 CONTINUING EDUCATION CREDIT

Beyond Reconciliation: Reclaiming Family Estrangement for Psychology ●

Dana Baerger, JD PhD

This presentation introduces a paradigm-shifting framework for understanding family estrangement and argues that psychology must take a more central leadership role in a conversation that has, to date, been largely monopolized by sociology and cultural commentary. Consistent with the 2026 convention theme, Psychology Unbound, this session calls on psychologists to engage with family estrangement as an emerging domain of psychological theory, research, and clinical practice. The presentation offers three major contributions to the psychological understanding of estrangement: 1. A new research-informed typology of family estrangement This presentation introduces an innovative framework that differentiates forms of estrangement based on key relationship-process variables (including attunement, conflict, trauma history, and the presence or absence of repair). Rather than conceptualizing estrangement as a single phenomenon, this model identifies distinct pathways into family

distance, and examines why some estrangements resolve while others become permanent. The framework also offers practical clinical value by helping psychologists distinguish between relationships that may benefit from reconciliation efforts and those in which continued contact may perpetuate psychological harm.

Attendees will gain a structured, clinically applicable model for assessment, case conceptualization, and intervention planning. 2. The introduction of Posttraumatic Familial Estrangement (PTFE) The presentation also introduces the new concept of Posttraumatic Family Estrangement (PTFE), a form of estrangement rooted in unresolved intergenerational relational trauma. PTFE reframes estrangement not simply as social disconnection, but as a trauma-related relational outcome requiring psychological and clinical understanding. By explicitly linking estrangement to developmental and relational trauma, this framework addresses a significant blind spot in both clinical discourse and public understanding. It also positions psychology to take a more active leadership role in shaping the future clinical and ethical discourse surrounding estrangement. This perspective is particularly relevant to psychologists working in trauma treatment, family systems, and ethically complex clinical settings where power, identity, culture, and safety intersect. 3. Applying contemporary relationship science to fractured family systems Drawing from affective neuroscience, interpersonal neurobiology, attachment research, and developmental trauma theory, the presentation applies contemporary relationship science to understanding why some family relationships flourish while others fracture irreparably. The session emphasizes real-world application by translating emerging interdisciplinary research into concrete clinical insights. Participants will explore how chronic misattunement, emotional invalidation, coercive family dynamics, and unresolved trauma shape long-term relational outcomes across generations. Contribution to the field As estrangement becomes increasingly visible in both clinical practice and public discourse, psychology is uniquely positioned to help define the next phase of understanding, research, and intervention in this area. This presentation argues that estrangement should no longer remain primarily a sociological or cultural conversation, but should emerge as a legitimate and necessary area of psychological inquiry, clinical training, and professional leadership. By encouraging psychologists to think more flexibly about relational health, trauma, autonomy, and repair, this session advances a more ethically nuanced, scientifically grounded, and forward-looking approach to fractured family systems.

Program 24 1 CONTINUING EDUCATION CREDIT

IPAGS Panel: Boldy Shaping Students ●

Suvetha Ravichandran, MA
Clare E. McIntosh, PsyD

IPAGS leaders will discuss their own journeys within the IPA, ways that being active in IPA can set students up for success in their various career paths.

12:30 PM–1:50 PM

AWARDS LUNCHEON

2:00 PM–3:00 PM

Program 25 1 CONTINUING EDUCATION CREDIT

Leadership and Advocacy: Exploring Equitable Ways to Develop Leadership and Advocacy Skills in Clinical Psychology ●

Leah Horvath, PhD
Misty Mann, PsyD

As the landscape of professional psychology continues to evolve and APA expands to a multitiered profession model that includes master's level psychology professionals, it is important to prepare both students and faculty for these shifts. One way this can be done is by increasing clinical psychologists' ability to step into leadership and advocacy roles (Stringer, 2025; Abrams, Z., 2026,). In graduate school and beyond, leadership and advocacy skills are typically developed indirectly through training or involvement in clinical services, research, supervision, and consultation (Wong, T. S., Lohnberg, J. A., Wong, S. J., McQuaid, J. R., Hsu, J., & Lovett, S., 2024). To gain direct leadership and advocacy skills, students are encouraged to participate in professional or student organizations, continuing education, mentorship, collaboration, and committees (Kois, L., King, C., LaDuke, C., & Cook, A. 2016). However, these activities tend to require additional time outside of their requirements and financial resources. Being able to take on additional training or leadership or advocacy roles is then limited to those who can give additional time or have the financial means. This also leaves psychology as a profession at risk — we must train the future generation of psychologists for roles beyond the therapy room. Creating a more equitable approach to leadership and advocacy development calls on the profession to find ways to prepare psychologists for leadership and advocacy roles. This presentation answers the call, by exploring how leadership and advocacy skills can be integrated directly into the curriculum.

Program 26 1 CONTINUING EDUCATION CREDIT

What Every Therapist Needs to Know about Video Games ●

Andrew Fishman, LCSW
Margo M. Jacquot, PsyD, CSADC, BCETS

Video games are a wonderful, confusing, and constantly changing medium. Even people who grew up playing Nintendo can get confused when hearing their clients talk about modern games. But they're important parts of many clients' lives, so therapists need to keep up-to-date on the lingo, safety concerns, and potential for addiction. Andrew Fishman will discuss the positives and negatives of gaming, what parents can watch out for, and what you need to know to be a therapist for gamers.

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2:00 PM–5:00 PM

Program 27 3 CONTINUING EDUCATION CREDITS**Psychology Unbound:
Ethical Implications** (Meets Ethics Requirement) ●

Susan S. Zoline, PhD
Paul Cantz, PsyD, ABPP
Scott D. Hammer, J.D.
Margo Jacquot, PsyD
Peter Perrotta, PhD
Ashlee Reed, PsyD
Ann Sauer, PhD, ABPP
Abigail Sivan, PhD

In our complex world, increasingly psychologists are presented with new clinical issues and changing social norms, especially with the emergence of telehealth practice. Nonetheless, adherence to sound ethical decision-making needs to remain foundational. The Ethics Committee will take a “back to basics” approach, examining case scenarios that balance free thinking and the commitment to upholding professional ethics.

3:15 PM–4:15 PM

Program 28 1 CONTINUING EDUCATION CREDIT**Expanding One's Niche: Working within
the Domestic Relations Court** ●

Deborah Conley, LCSW
Sharon Z. Johnson, PhD
Carol Reid, PsyD
Beth I. Wilner, PhD

Psychologists and other mental health professionals are continuing to run into more cases involving the Domestic Relations Court, as families change their familial relationships. Our presentation will identify the different roles psychologists can play within the Domestic Relations Court, from evaluation to clinical treatment, as well as identify resources for furthering one's education in this area. Our panel will also discuss the legal and ethical considerations and why work within this area requires consultation, enhanced releases, strong boundaries and collaboration.

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 THERAPIES

Program 29 1 CONTINUING EDUCATION CREDIT

The Neurodynamic Navigator System: Integrating Dynamic Safety and Digital Tools in Clinical Practice ●

Jennifer I. Huffman, PhD, ABPdN

Traditional psychological models and standard behavioral paradigms frequently fail to accurately conceptualize the Pathological Demand Avoidance (PDA) profile. When a neurodivergent nervous system's innate threat response is misinterpreted as intentional non-compliance or oppositional behavior, standard treatments can inadvertently exacerbate the very dysregulation they aim to heal. To address this critical gap in neuropsychological evaluation and outpatient intervention, I developed the Neurodynamic Navigator System—a comprehensive framework that reframes demand avoidance through a neurobiologically affirming lens and provides actionable, low-demand tools for both clinicians and families. This presentation introduces the core mechanisms of the Neurodynamic Navigator System, an accessible, aviation-themed framework designed to destigmatize and operationalize complex executive functioning and self-regulation processes. Participants will learn how to utilize the distinct roles of the “Flight Deck,” the “Pilot,” and the “Navigator” to translate dense neurobiological data into a shared, empowering language during clinical feedback sessions. A central focus of the program is the introduction of the Neurodynamic Quotient (NDQ). I will deconstruct the underlying variables of the NDQ formula and demonstrate how to apply it in case conceptualization. Crucially, the presentation will highlight how Dynamic Safety (DS) functions as the primary multiplier within the NDQ—illustrating that without dynamic safety, therapeutic progress stalls. Furthermore, the session moves beyond theory by training clinicians on a scalable ecosystem of tools, including the Neurodynamic Navigator clinical manual, the children's book *Unlocking the Power of My Brain*, and the Neurodynamic Navigator CoPilot mobile app. This program is fundamentally important because the PDA profile remains one of the most underserved and misunderstood presentations in clinical psychology. Standard compliance-based interventions directly trigger the PDA nervous system's drive for autonomy, often leading to severe masking, family distress, or clinical burnout. By centering the NDQ formula around Dynamic Safety, this program shifts the therapeutic paradigm away from behavioral compliance and toward nervous system regulation and relational safety. It empowers psychologists to validate the family's lived experience while providing a highly accurate framework that recognizes demand avoidance as a protective physiological response. Ultimately, this work makes a profound difference to the application of psychological thought and practice by modernizing how we support neurodivergent individuals between sessions. By integrating digital tools like the CoPilot app with a unified clinical vocabulary, the Neurodynamic Navigator System extends the reach of psychological care far beyond the traditional 50-minute clinical

hour. It offers immediate, app-based scaffolding that respects client autonomy in their daily environments, equipping multidisciplinary teams with an innovative method to deliver neurodiversity-affirming care that drastically improves treatment trajectories.

4:30 PM–5:30 PM

Program 30 1 CONTINUING EDUCATION CREDIT

Navigating Bereavement-Related Grief in Neurodivergent Individuals ●

*Celia Zanayed, PsyD
Samen Nadeem, PsyD
Saba Mohiuddin, BS*

Although bereavement is a universal experience and innate response to the loss of a loved one or close attachment figure, the ways in which neurodivergent individuals cope with various grief-related symptoms may vary significantly, making it difficult for clinicians to effectively achieve therapeutic change, growth, and meaning making. This presentation explores several considerations for bereavement in the therapeutic space when working with neurodivergent clients as well as special topics related to the understanding of grief, including critical discussions of prolonged grief in the DSM-5-TR, current treatments for complicated or prolonged grief, including Prolonged Grief Therapy (PGT), and clinician self-care and the impact of their own experiences with bereavement by drawing from a clinical case study. The aim of this presentation is to strengthen competence and confidence in navigating this topic within the field.

Program 31 1 CONTINUING EDUCATION CREDIT

Beyond the Therapy Hour: Coordinated Care Models for Complex Anxiety and OCD Treatment ●

Debra Kissen, PhD

The traditional outpatient psychotherapy model was built around a simple assumption: one clinician, one client, one weekly session. Yet today's anxiety and OCD presentations increasingly involve clinical complexity that extends far beyond what can be effectively addressed within a 50-minute therapy hour. Many clients present with overlapping concerns including severe anxiety, OCD, school refusal, neurodevelopmental differences, family accommodation, treatment resistance, medication questions, academic impairment, and significant functional disruption. While these individuals often require more support than traditional outpatient therapy can provide, they may not meet criteria for or have the life bandwidth to attend intensive outpatient, partial hospitalization, or residential treatment programs. As a result, psychologists are frequently left attempting to coordinate fragmented care systems with little guidance, limited reimbursement, and few scalable models. This presentation introduces coordinated care approaches designed to bridge the gap between standard outpatient

treatment and higher levels of care. Through case examples drawn from anxiety and OCD treatment settings, participants will learn how psychologists can effectively integrate psychotherapy, psychiatric consultation, psychological assessment, parent coaching, school collaboration, and interdisciplinary care coordination into a cohesive treatment plan. The presentation will also examine systemic barriers to coordinated care, including reimbursement limitations, fragmented service delivery, and the often-uncompensated burden placed on clinicians to manage complex cases. Practical strategies will be offered to develop sustainable models that improve communication among providers, reduce service duplication, accelerate clinical progress, and enhance client outcomes. Attendees will leave with concrete frameworks for identifying clients who may benefit from enhanced outpatient coordination, implementing collaborative care approaches, and positioning psychologists as leaders in the development of innovative treatment models that better reflect the realities of modern clinical practice.

5:30 PM–7:00 PM

PRESIDENTS' RECEPTION: IPA'S 90TH ANNIVERSARY AND IPAGS POSTERS

Celebrating 90 Years of IPA— A Celebration for all!

Join us for a special President's Reception as we raise a glass to IPA's 90th anniversary! We've invited IPA's past presidents to come together for this milestone celebration. Meet them, reconnect with colleagues and friends, and celebrate the leaders who have helped shape IPA and psychology in Illinois.

Enjoy food and beverages—both spirited and spirit-free—as we toast 90 remarkable years of IPA and all that lies ahead.

Come celebrate our past, our future, and one another. And most importantly, let our past presidents celebrate you—the members who are carrying IPA forward into its next chapter.

**Here's to 90 years—and to what
we'll create together next!**

LEARNING OBJECTIVES

1 **Leadership Development: A Bridge to the Future**

- Name three ways leadership development enhances the future of an organization.
- Identify ethical considerations of a clinician leader vs an organizational leader.

2 **Restorative Justice Heals the Hurt People that Hurt People**

- Outline the Key Practices in LCLC's Restorative Justice Model.
- Explain the cost-effectiveness of the Restorative Justice Model to the Community, Victims and Perpetrators.

3 **Knowledge is Power: HCRC**

- Identify at least two times throughout the course of treatment that it is recommended to verify patient benefits.
- Name at least two psychotherapy CPT codes and when it is appropriate to use those codes.
- Describe at least one recent Medicare policy and its impact on mental health treatment.
- Identify and apply at least three documentation strategies that link evidence-based interventions to medical necessity, treatment goals, and measurable patient outcomes to support reimbursement in outpatient mental health settings.

4 **Navigating Cultural Ruptures in the Supervisory Relationship: Reflective Practices for Supervisors**

- Summarize the research related to supervisee experiences of cultural ruptures in supervision.
- Apply proactive tools to frame conversations with supervisees in a way that promotes healthy conversations about differing identities and power.
- Identify and practice using some tangible ways to address cultural ruptures and move toward repair in the supervisory relationship.

5 **How Patients Suffer From Their Feelings and What To Do**

- Identify the Emotional Command Systems and describe how they motivate behavior and shape subjective experience.
- Explain how automated emotional predictions develop and how they function in the regulation of affect and homeostasis.
- Use a patient's emotional states as clinical signals that reveal unmet needs and guide therapeutic intervention.

6 **Psychology and Improv: Building Cognitive Flexibility, Connection, and Resilience**

- Describe at least three psychological principles underlying improvisation, including psychological flexibility, growth mindset, and social connection, and explain their relevance to mental health and well-being.
- Apply core improvisational techniques, including interactive activities, present-moment awareness, and mistake acceptance, to enhance communication, resilience, and adaptability in clinical, professional, or personal settings.
- Analyze the relationship between improvisational practices and evidence-based psychological interventions, including Acceptance and Commitment Therapy (ACT), Cognitive Behavioral Therapy (CBT), and Dialectical Behavior Therapy (DBT), and identify potential applications in therapeutic settings.

7 **Colorism: Understanding the Psychological Impact and Implications for Clinical Practice**

- Define colorism and differentiate it from racism, prejudice, and discrimination.
- Describe at least three psychological and psychosocial consequences associated with experiences of colorism.
- Summarize current empirical findings regarding colorism and mental health outcomes across diverse populations.
- Identify ways colorism may emerge during assessment, diagnosis, and treatment.
- Apply culturally responsive clinical strategies to address colorism-related experiences in psychotherapy.

8 **Ketamine-Assisted Psychotherapy: Expanding the Role of Psychologists in Innovative Mental Health Care**

- Describe the current evidence base supporting ketamine-assisted psychotherapy for depression, PTSD, anxiety, and related mental health conditions.
- Differentiate ketamine-assisted psychotherapy from ketamine administration without psychotherapeutic support.
- Identify screening considerations, contraindications, and risk factors relevant to ketamine-assisted psychotherapy.
- Apply principles of preparation, therapeutic support, and integration to clinical case examples involving ketamine-assisted psychotherapy.
- Evaluate ethical, cultural, and equity-related considerations that may influence access to and implementation of ketamine-assisted psychotherapy.

9 **It's a Journey, Not a Destination: Exploring Retirement Begins at the Starting Line, Not the Finish Line**

- Identify three issues to consider when retiring.
- Develop three questions to decide when to retire.

10 **Maintaining Family Ties: Women's Kinkeeping Across the Adult Lifespan**

- Identify key characteristics and responsibilities associated with kinkeeping across different stages of adulthood.
- Analyze how gender roles, cultural expectations, and societal norms contribute to the unequal distribution of kinkeeping labor within families.
- Evaluate how developmental stage, generational cohort, and cultural context influence experiences of kinkeeping across the lifespan.

11 **Considering the Psychologist's Role in the Prevention of Violence**

- Describe a general framework to conceptualize the movement toward targeted violence.
- Identify at least three indicators that a person may be considering targeted violence.
- Analyze personal biases that might affect ability to hear clues about violence.

12 **PSYPACT**

- Discuss the implications of cross-jurisdictional practice, including what an interstate compact is (and one example of a compact).
- Describe PSYPACT and two things that it allows psychologists to do to ethically and legally practice according to regulations, and what the governing documents for PSYPACT are, and where to locate them.
- Explain the potential consequences of non-compliance with legal and ethical standards in telepsychology, including disciplinary actions, risk of enforcement, and other penalties (e.g., audits, investigations).

13 **Heal the Healers & Helpers: Embodied Approaches to Wellness**

- Describe key components of community-based, culturally rooted embodied healing approaches (e.g., movement, rhythm, ancestral practices, and collective reflection) and their relevance to psychological well-being.
- Practice embodied healing techniques (ancestral journeying, drumming & dialogue).
- Discuss potential benefits in a variety of contexts.
- Apply principles of embodied, relational, and culturally responsive care to design community-based interventions that support restoration and connection among social change makers.

14 **From DSM to IEP: Supporting Students with Learning and Neurodevelopmental Challenges**

- Differentiate eligibility criteria, legal protections, and procedural requirements of Section 504 plans versus IEPs under IDEA.
- Compare IDEA's school-based SLD eligibility criteria with DSM-5-TR diagnostic criteria for Specific Learning Disorder, and explain why a clinical diagnosis does not guarantee school services (and vice versa).
- Explore differences with school approach to LD assessment and intervention - schools (in Illinois) require that a student has been given significant academic intervention and has still shown slower progress than expected before they are eligible for SLD.
- Discuss how clinical psychologists can guide and support parents advocating for students with learning delays.
- Explore differences in how school districts identify and support children identified with ADHD, Emotional Disorder, Autism Spectrum Disorder, and school refusal behaviors.
- Provide a rubric for how clinical psychologists can support and guide recommendations for students, schools, and parents.
- An updated model of neuropsychology-informed approaches to addressing learning and occupational adaptation in consideration of alternative learning models and evolving AI approaches to learning.

15 **Psychotherapy at a Crossroads: The Algorithm Will See You Now**

- List new products and services marketed to the public and to therapists, and describe the ways they are influencing the mental health landscape.
- Summarize the impacts of new entrants to the mental health field, including venture capitalists and technology entrepreneurs.
- Compare the values of these entrants and their business models to the values of psychotherapy.

16 **Improving Cognition and Neuropsychiatric Symptoms in Parkinson's and Lewy Body Disease**

- Discuss the complexities of treating psychological and neuropsychiatric symptoms in alpha synucleinopathies (e.g., Parkinson's disease) and unique individual and systems level targets of treatment.
- Describe treatment adaptations and ways to improve practice when providing care to patients with Parkinson's disease/Lewy Body disease and their care partners.

17 **When Talking Isn't Enough: Psychodrama for Therapeutic Change**

- Describe psychodrama and identify who created it.
- List one way psychodramatic techniques can be used to help clients move beyond insight into action.
- Identify one way role reversal promotes perspective-taking or change.

18 **Imposter Syndrome: An Integrative Approach to Healing through Supervision**

- Describe the core features and psychological impacts of imposter syndrome.
- Identify how systemic inequities, identity-based marginalization, and professional training environments contribute to imposter-related distress.
- Explain the role of attachment processes, interpersonal neurobiology, and supervisory relationships in the maintenance and resolution of imposter experiences.

19 **Role of Games in Fostering Post-Traumatic Growth**

- Summarize current empirical and theoretical literature on tabletop role-playing games (TTRPGs) and their association with psychosocial outcomes, and describe theoretical mechanisms

by which TTRPG participation may facilitate PTG and trauma integration. o APA Domains: Scientific Knowledge & Methods; Intervention.

- Analyze the clinical utility of TTRPGs as structured, socially mediated interventions, with attention to their applicability for trauma-exposed and marginalized populations. o APA Domains: Intervention; Individual & Cultural Diversity.
- Evaluate methodological strengths, limitations, and gaps in the current evidence base regarding TTRPG-informed therapeutic approaches. o APA Domain: Scientific Knowledge & Methods.
- Identify and apply ethical, cultural, and scope-of-practice considerations when integrating TTRPG elements into clinical, group, or community-based interventions. o APA Domains: Ethical, Legal, and Professional Issues; Individual & Cultural Diversity; Intervention.

20 **Leadership and Team Building with the Power of Temperament**

- Understand temperament and neurobiology and how it impacts leadership, team building and work performance.
- Identify one's own trait profile and how traits can be expressed productively and/or destructively.
- Engage in experiential activity to understand how we can shift to more productive expression of our traits to improve work performance, communication and team cohesion.

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21 **Employment Law Tips for Mental Health Practice Owners**

- Explain key laws and employee rights.
- Identify strategies to reduce legal risk.

22 **Reproductive Deserts: Addressing Doctoral Training in Reproductive Health and Psychology**

- Describe gaps in doctoral-level training in clinical psychology regarding reproductive health, development, and psychology.
- Prepare an effective curriculum to address gaps in doctoral-level training in clinical psychology regarding reproductive health, development, and psychology.
- Illustrate a student's experience of the doctoral level course.

23 **Beyond Reconciliation: Reclaiming Family Estrangement for Psychology**

- List four types of family distance.
- Identify three major elements that contribute to family relationship breakdown.
- Describe the construct of Posttraumatic Family Estrangement (PTFE).

24 **IPAGS Panel: Boldy Shaping Students** ●

- Learn ways to get involved with leadership.
- Establish connections with other students in the field.
- Identify strategies to engage in professional development.

25 **Leadership and Advocacy: Exploring Equitable Ways to Develop Leadership and Advocacy Skills in Clinical Psychology**

- Explain the importance of leadership and advocacy skills for the profession.
- Identify two ways to integrate leadership skill development directly into the doctoral curriculum.
- Identify two ways to integrate advocacy skill development directly into the doctoral curriculum.

26 **What Every Therapist Needs to Know about Video Games**

- Distinguish between healthy and unhealthy use of video games.
- Diagnose and treat four main types of gaming disorder.
- Discover strategies to help gamers and their families reduce arguments and collaborate on screen time goals.

27 **Psychology Unbound: Ethical Implications** (Meets Ethics Requirement)

- Appraise effective strategies and best practices relevant to emerging issues in professional practice.
- Evaluate adherence to existing standards of care when novel situations challenge familiar boundaries and roles.

- Apply a systematic process of ethical decision making to situations where pulls or pressures for “free thinking” and unconventional practices arise.

28 **Expanding One's Niche: Working within the Domestic Relations Court**

- Identify four different ways a psychologist may be involved with the Domestic Relations Court.
- Identify characteristics and skills that can be developed to enhance the lives of families experiencing divorce and transitions.
- Identify the differences between traditional psychological practice and working within the forensic realm. Participants will become familiar with collaborative resources for building one's practice in the Domestic Relations Court.

29 **The Neurodynamic Navigator System: Integrating Dynamic Safety and Digital Tools in Clinical Practice**

- Describe how to utilize the Neurodynamic Navigator System's framework (Pilot, Navigator, Flight Deck) to reframe Pathological Demand Avoidance (PDA) as a neurobiological threat response rather than non-compliant behavior during clinical feedback.
- Apply the Neurodynamic Quotient (NDQ) formula to a clinical case conceptualization, specifically identifying how to manipulate Dynamic Safety (DS) as the primary multiplier to improve a client's regulatory baseline.
- Integrate the Neurodynamic Navigator CoPilot application and companion literature into a comprehensive treatment plan to provide low-demand, outpatient scaffolding for neurodivergent clients.

30 **Navigating Bereavement-Related Grief in Neurodivergent Individuals**

- Describe and understand how to support individuals experiencing bereavement across cultures and within neurodivergent populations utilizing Prolonged Grief Therapy (PGT).
- Develop strategies to practice self-care when personal grief experiences impact clinical work.

31 **Beyond the Therapy Hour: Coordinated Care Models for Complex Anxiety and OCD Treatment**

- Identify clinical presentations that may require coordinated care approaches beyond traditional weekly psychotherapy.
- Describe key components of integrated anxiety and OCD treatment models, including collaboration among therapists, psychiatrists, evaluators, schools, and family systems.
- Apply practical frameworks for implementing coordinated care strategies that improve treatment efficiency, reduce fragmentation, and enhance client outcomes.

THE ILLINOIS PSYCHOLOGICAL ASSOCIATION WORKS FOR YOU

- IPA is one of the largest state psychological associations in gaining broad legislative recognition for the practice of psychology.
- IPA speaks for psychology by advocating for the proper care and treatment of those with mental disorders.
- IPA's Regional Representatives to IPA Council assure input in policy development and implementation from all areas of Illinois.
- IPA is the only psychological organization in Illinois affiliated with the American Psychological Association.
- IPA has eleven special interest sections, including an Early Career Psychologist Section.
- IPA promotes participation of graduate students and interns in professional psychology activities at the state level.
- IPA provides liaison services for academic psychologists to facilitate promotion of dialogue on issues of student education and training in psychology.

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