



## PRE-CONGRESS WORKING GROUPS INFORMATION FORM

**Working Group Name:** Mental Health/Trauma Informed Care

**Description of Working Group:**

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**Room Set Up:**

**AV Requirements:**

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### **Draft Schedule:**

| Time        | Activity                                                                                                                                                                       |
|-------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 8:30-8:50   | Opening & Introductions – Shannon and Dan                                                                                                                                      |
|             | <b>Part 1:</b> Adapting treatments for childhood trauma across cultures                                                                                                        |
| 8:50-9:10   | Introduction to Trauma Treatments – Shannon                                                                                                                                    |
| 9:10-10:00  | Australia TF-CBT - Natalie and Gavin                                                                                                                                           |
| 10:00-10:15 | Small group facilitated discussions on disseminating treatments for trauma, including identifying goals, challenges, past successes and other participant experiences          |
| 10:15-10:30 | Large group share out and identification of next steps, including ideas for future ISPCAN programing and initiatives                                                           |
| 10:30-10:45 | Break                                                                                                                                                                          |
|             | <b>Part 2:</b> Educating Workforce in Secondary Traumatic Stress                                                                                                               |
| 10:45-11:00 | Introduction on topic of secondary traumatic stress in Australia - Dan                                                                                                         |
| 11:00-11:45 | CE-CERT for Burnout Secondary Trauma Prevention - Shannon                                                                                                                      |
| 11:45-12:00 | Small group facilitated discussion on the goals, challenges, past successes and other experiences that participants have had educating workforce on secondary traumatic stress |
| 12:00-12:15 | Large group share out and identification of next steps, including ideas for future ISPCAN programing and initiatives                                                           |
| 12:15-12:30 | Closing Remarks – Shannon                                                                                                                                                      |
| 12:30-1     | Lunch with broader discussion, future efforts, & networking                                                                                                                    |

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### **Short Introduction for Chairs:**

Shannon Chaplo, PhD is an Associate Professor of Pediatrics and Clinical Psychologist at the University of Utah and Dan Howell is an Accredited Mental Health Social Worker and the Assistant Director, Education, Parenting and Training at the Australian Childhood Foundation, within the Knowledge Mobilisation & Practice division.

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**Name of Lead Organiser:** Brooks Keeshin and Jessica Griffin

**WhatsApp of Lead Organiser:** on thread

**Email Address of Lead Organiser:** [brooks.keeshin@hsc.utah.edu](mailto:brooks.keeshin@hsc.utah.edu), [Jessica.Griffin@umassmed.edu](mailto:Jessica.Griffin@umassmed.edu)

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**Presenter 1 Title/Name:** Natalie Cabrera

**Presenter 1 Position/Organisation:** TFCBT Australia

**Presenter 1 State/Country:**

**Presenter 1 Email Address:** [natalie@psychologytrainingandsupervision.com.au](mailto:natalie@psychologytrainingandsupervision.com.au)

**Presenter 2 Title/Name:** Gavin Moffitt

**Presenter 2 Position/Organisation:** TFCBT Australia

**Presenter 2 State/Country:**

**Presenter 2 Email Address:** [gavin@psychologytrainingandsupervision.com.au](mailto:gavin@psychologytrainingandsupervision.com.au)

**Presenter 3 Title/Name:** Dan Howell

**Presenter 3 Position/Organisation:** Australian Childhood Foundation

**Presenter 3 State/Country:**

**Presenter 3 Email Address:** [dhowell@childhood.org.au](mailto:dhowell@childhood.org.au)

**Presenter 4 Title/Name:** Shannon Chaplo

**Presenter 4 Position/Organisation:** University of Utah

**Presenter 4 State/Country:**

**Presenter 4 Email Address:** [Shannon.Chaplo@hsc.utah.edu](mailto:Shannon.Chaplo@hsc.utah.edu)

**Presenter 5 Title/Name:**

**Presenter 5 Position/Organisation:**

**Presenter 5 State/Country:**

**Presenter 5 Email Address:**

*\*Please add as many Presenters as necessary.*

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*\*\*Please note AV requirements and room set up requests are not guaranteed*