Objectives:
At the conclusion of the workshop, the participant will be able to:

• **Describe** the limitations of evidence-based practice.
• **Identify** key components of cultural humility.
• **Recognize** cultural misconceptions and clinician biases.
• **Demonstrate** ways in which societal context influences treatment-seeking behaviors.
• **Articulate** population-specific diagnostic considerations for depression, anxiety, and attention deficit hyperactivity disorder.

Who Should Attend:
This intermediate level workshop is appropriate for mental health care providers as well as administrators and front-line staff.

Schedule:
8:00 – 8:30 (ET)
8:30 – 10:00
10:00 – 10:10
10:10 – Noon
Noon – 1:10
1:10 – 2:15
2:15 – 2:25
2:25 – 4:00

Questions and Auxiliary Aids
To register: contact Fran Howard, Workshop Registrar at (260) 482-9125, ext. 2019
For workshop questions: contact Emily Liechty at (260) 482-9125, ext. 2148
E-mail address: fhoward@parkcenter.org

Sponsor
Park Center, Inc. is a private, non-profit, counseling and psychiatric center for adults, adolescents, children and families.
Mental Health Care Guidelines for Treatment with African American Populations

Featuring: Sarah Vinson, M.D. October 26, 2018

REGISTRATION FEE: $110.00 / $90.00 per person for four or more registrations submitted together from the same organization for any of the workshops listed in the 2018 Park Center Professional Training Series workshops. Continental breakfast, break refreshments, and training materials are all included. Lunch is on your own.

CANCELLATION: Up to 5 days prior, $10.00 administrative fee; less than 5 days, non-refundable.

LOCATION: Grand Wayne Center ~ 120 W. Jefferson Blvd. ~ Fort Wayne, Indiana 46802 ~ (260) 426-4100.

LODGING: The Hilton Hotel is located in the Grand Wayne Center complex. Make your reservations by calling (260) 420-1100, ext. 7205. If you need assistance with obtaining room reservations, please call Fran Howard at toll free (866) 481-2700, ext. 2019.

PARKING: Parking is available for a fee within a two-block radius of the workshop location.

FACILITY ACCESSIBILITY: The Grand Wayne Center and Hilton Hotel are handicap accessible facilities. Please contact Fran Howard, Workshop Registrar, toll free (866) 481-2700, ext. 2019 if special accommodations are needed.

QUESTIONS OR CONCERNS: Contact Emily Liechty at (260) 482-9125, ext. 2148 or Fran Howard at ext. 2019

Workshop rooms are typically cool, please dress appropriately.

Continuing Education Credits

American Psychological Association ↔ Park Center is approved by the American Psychological Association to sponsor continuing education for psychologists. Park Center maintains responsibility for this program and its content. Credit: 6 Continuing Education Hours.

Indiana Behavioral Health Board ↔ Approved provider of Category I continuing education for LSW, LCSW, LMFT, LMFTA, LMHC, LMHCA LCAC and LAC. However, licensees must judge the program’s relevance to their professional practice. Credit: 6 Continuing Education Hours.

Indiana State Psychology Board ↔ Approved sponsor of continuing education programs for psychologists. Credit: 6 Hours.

Indiana Law Enforcement Training Board ↔ Approved provider for training of Indiana law enforcement officer and support personnel. Credit: 6 Continuing Education Hours.

National Board for Certified Counselors ↔ Park Center is an NBCC-Approved Continuing Education Provider (ACEP®) and may offer NBCC-approved clock hours for events that meet NBCC requirements. The ACEP solely is responsible for all aspects of the program. Credit: 6 Continuing Education Hours.

NAADAC - The Association of Addiction Professionals ↔ Approved NAADAC education provider. Credit: 6 Continuing Education Hours.

Ohio Counselor, Social Work, Marriage & Family Therapist Board ↔ Approved sponsor of continuing education programs. Approved for counselors and social workers only. Provider number: RCS038704 Credit: 6 Hours.

Mental Health Care Guidelines for Treatment October 26, 2018
With African American Populations Registration Deadline: 10/19

Name: ________________________________________________
Degree: _______________________________________________
Organization: __________________________________________
Mailing Address: _______________________________________
City: ___________________ State: ______ Zip: ____________
Day Phone: ___________________ Evening Phone: ___________
E-mail: ______________________________________________

Indicate Continuing Education Credit Requested

☐ APA ☐ NAADAC ☐ LCSW ☐ LMFT/LMFTA ☐ LMHC/LMHCA ☐ LSW
☐ LAC/LCAC ☐ ISPB/HSPP ☐ ILETB ☐ NBCC ☐ Ohio CSWMFTB

Method of Payment
Check enclosed (payable to Park Center, Inc.)
Amount Enclosed $________
Charge my ☐ Mastercard ☐ VISA ☐ Discover
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Cardholder Address (include zip code*): ________________
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Signature: ________________________________

Mail Checks & Registration Form To:
Fran Howard, Workshop Registrar, Park Center, Inc.,
909. E. State Blvd., Fort Wayne, Indiana, 46805