

CME

Interpersonal Psychotherapy

Summer Training Institute

August 9, 10, and 11, 2007

Interpersonal Psychotherapy (IPT) is a brief manual-based psychotherapy originally developed for treatment of major depression, and empirically supported by research that has demonstrated efficacy through a progression of trials over the past 30 years. Grounded in attachment and interpersonal theories that highlight the critical importance of relationships, IPT focuses on assisting patients to cope with life events related to interpersonal changes, losses, conflicts and isolation that are associated with the onset or perpetuation of psychiatric illness. The goals of IPT are to remit symptoms, improve functioning, alleviate interpersonal distress, and help patients to build or better utilize social supports.

This workshop qualifies to be applied towards one of two University of Toronto Faculty of Medicine accredited CE certificate programmes:

1) The **Primary Mental Health Care Certificate Program**, as the psychotherapy training requirement. Contact: sherene.tay@uhn.on.ca or at 416-603-5734.

2) The **Mount Sinai Psychotherapy Institute Psychotherapy Certificate** with Specialized Training in IPT. Contact: jwan@mtsina.on.ca

Further Training

This workshop fulfills international standards for the didactic foundation to support further training under clinical supervision. For more info, go to www.interpersonalpsychotherapy.org

FACULTY

Paula Ravitz MD FRCPC, Assistant Professor and Associate Head of the Psychotherapy Program at the University of Toronto Department of Psychiatry. Dr. Ravitz heads the CAMH IPT Clinic and is director of the Mount Sinai Psychotherapy Institute (MSPI). She has directed and taught numerous workshops on IPT at international conferences including the American Psychiatric Association, the Canadian Psychiatric Association, and the International Society of Interpersonal Psychotherapy Meetings. Dr. Ravitz is the recipient of several teaching awards including the 2005 Association of Academic Psychiatry's "Best Teacher in Canada" Award and the U of T 2005 Ivan Silver Award for Excellence in Continuing Mental Health Education.

Edward McAnanama, M. Ed., OT. Reg. (Ont.) formerly an Assistant Professor of Occupational Therapy at Rush University (Chicago) and currently a PhD Candidate at University of Toronto. He has participated as an IPT research therapist in numerous trials and is an IPT trainer at U of T.

~ WHO SHOULD ATTEND

Family Physicians, Psychiatrists, Psychologists, Social Workers, Nurses, Occupational Therapists and Mental Health professionals

~ FORMAT

Didactic and interactive, the workshop combines lectures, small group break-outs, role plays and **demonstrations with standardized patients.**

~ OBJECTIVES

At the conclusion of the Introductory Workshop, participants should have:

- Gained familiarity with the background, principles and therapeutic techniques of IPT
- Learned how to conceptualize an IPT case
- Understood the empirical support for IPT

~ DAY 1 Thursday, August 9th

08.30 - 09.00 Registration and breakfast
 09.00 - 10.30 Introduction to IPT, Efficacy, Suitability, Theoretical Foundations
 10.30 - 10.45 Refreshment break
 10.45 - 12.00 Beginning tasks of IPT
 12.00 - 13.00 Lunch (Provided)
 13.00 - 15.00 Groups: The Interpersonal Inventory (case)
 15.00 - 15.15 Nutrition break
 15.15 - 15.45 IPT Focal area of 'Role Transition' ~ Goals & Therapeutic Strategies
 15.45 - 16.30 Q & A, discussion and evaluation

~ DAY 2 Friday, August 10th

08.30 - 09.00 Registration and breakfast
 09.00 - 10.30 IPT Focal area of Depression-related Bereavement: Goals & Therapeutic Strategies; demonstration/modeling
 10.30 - 10.45 Refreshment break
 10.45 - 12.15 IPT Focal area of ' Role Disputes'; Small groups: role-play of communication Analysis Lunch (on your own)
 12.15 - 13.45 'Tag Team Therapy': demonstration; role-play
 13.45 - 15.15 Nutrition break
 15.15 - 15.30 Introduction to Focus of Deficits with review of Goals & Strategies
 15.30 - 15.45 Q & A, discussion and evaluation

~ DAY 3 Saturday, August 11th

08.30-09.00 Registration and breakfast
 09.00-10.30 Modeling, role-play w/ standardized patients: Interpersonal Formulation and application
 10.30 - 10.45 Refreshment break
 10.45 - 12.00 Tasks of Termination
 12.00 - 13.30 Lunch (on your own)
 13.30 - 15.00 Case Formulation & commonly encountered clinical challenges
 15.00 - 15.15 Nutrition break
 15.15 - 16.00 Summary, wrap-up, Q & A and evaluation

~ COURSE LOCATION

Centre for Addiction and Mental Health
Room 2029, 33 Russell Street, Toronto, Ontario
 (One street north of College, East of Spadina)

~ FEE & REGISTRATION

Professional Participant Fee: \$695 CAD.
 FULL PAYMENT MUST ACCOMPANY REGISTRATION
Fee includes all refreshment breaks and lunch on the first day only

~ MAIL OR FAX TO

Geneviève Poulin, CME Program
 Centre for Addiction and Mental Health
 33 Russell Street, Room 2017, Toronto, ON M5S 2S1
 Tel: 416-535-8501 Ext. 6017 or Fax 416-595-6644
 E-mail: cme@camh.net

~ CANCELLATION AND REFUNDS

A \$50.00 handling fee will be deducted upon cancellation. Refund requests must be received in writing by **July 26th, 2007**

NOTE: Due to the interactive training format of this workshop, registration is usually **restricted to 30 participants.**

~ ORGANIZING COMMITTEE

Paula Ravitz, MD, FRCPC, Course Director, Associate Head, University of Toronto, Department of Psychiatry Psychotherapy Program
Sagar Parikh, MD, FRCPC, Associate Professor of Psychiatry, University of Toronto; Director of Continuing Medical Education, CAMH
Zindel Segal, Ph. D., C. Psych., Professor and Firestone Chair of Psychotherapy Program, University of Toronto
Kim McNichol, MD, FRCPC, Staff Psychiatrist, Humber River Regional Hospital
Sharon Gazeley, MD, Family Practice
Tazyia Lakkotrypis, Education Associate at CAMH

~ ACCREDITATION

25% Interactivity as per Royal College rules is woven into sessions.

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REGISTRATION FORM

PLEASE PRINT CLEARLY

What is your level of training in this topic? Novice Intermediate Advance

Ms. Mr. _____ Degree(s): _____
 Last Name First Name

Private practice
 Organization: _____ Professional Title: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

E-mail: _____

Tel: Bus. (_____) _____ Ext. _____ Fax: (_____) _____

Payment Method:

Cheque Cheque Number: _____ (Make cheques payable to **Centre for Addiction & Mental Health**)

VISA MC AMEX Card Number: _____ Expiry Date: _____ / _____

Name on Card: _____ Authorized Signature: _____