



*Building Youth Wellness & Resilience*

## **21st Children's Interagency Conference Presentation Proposals**

The PA Office of Mental Health and Substance Abuse Services and the PA Care Partnership are excited to offer this opportunity to present a session at the 2024 21st Children's Interagency Conference being held April 22-25, 2024, at the Penn Stater Hotel, State College, PA.

The 21st Children's Interagency Conference brings together Pennsylvania's Child and Adolescent Service System Program (CASSP) and System of Care (SOC) partners providing behavioral health.

**The conference will provide an excellent opportunity for providers, county administrators, youth, family members, practitioners, and educators to learn about changing trends, promising and best practices, resources, and various systems of care activities across Pennsylvania.** The conference will also add a national perspective on a variety of issues, including government, family peer, early childhood, leadership, school-based mental health, and more.

Submissions are due by November 30, 2023, and we will notify you in December if your presentation or poster has been accepted.

If you have any questions, please get in touch with our conference planning contractor, Katrina Harris, at [kharris@bridgeconsultingcorp.com](mailto:kharris@bridgeconsultingcorp.com), 610.494.8044.

### **Submission Guidelines for Presenters:**

Please submit this application containing the following information:

- Name and contact information for all presenters.
- Short bios for all presenters; advise if any presenters are youth or family members; acknowledge awareness that CEUs will be sought for the conference and a willingness to promptly provide any needed information to organizers.
- Session title and description, including how the session will be structured and the desired session length (75 minutes or 150 minutes).
- For Clinical Presentations, reference at least two supporting information sources you will cite in the presentation.
- All presenters' availability for April 22, 23, 24, and 25, 2024

**Email your completed PDF Application to the attention of Katrina Harris at [kharris@bridgeconsultingcorp.com](mailto:kharris@bridgeconsultingcorp.com).**

**Please submit your proposal no later than November 30, 2023.**

**(Required) Leader Presenter/Contact Person**  
**(please list as desired in the conference program.)**

Name/Credentials

Title/position

Agency

Address

City/State/Zip

Home/work phone

Email address

Please select your role in the presentation:

- System Partner
- Provider Partner
- Community Partner
- Family Partner
- Youth with lived experience in behavioral health

**Lead Presenter #1:** Please provide a short biography in no more than 100 words.

## **Required) Presentation Title (please limit to 10 words or less)**

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## **(Required) Workshop Description**

Presentations should demonstrate efforts in the following: youth-driven practice, family-driven practice, systems of care partnerships, cultural competence, clinical knowledge, skill development, or program replicability. Some definitions are below.

Youth-driven is having youth included in decisions that affect their care and well-being. Youth are supported in various ways as they share their experiences and opinions to be leaders at the county and state levels.

Family-driven means families have a primary decision-making role in the care of their children, and opportunities are provided for positions of leadership at the county and state levels.

A System of Care is a collaborative network of community-based services designed to address the needs of children and youth with serious mental health issues and their families. It involves partnerships between families, youth, and public/private organizations to create culturally sensitive, effective services that leverage individual strengths. The aim is to enhance functioning in various life domains, including home, school, and the community, promoting well-being throughout life.

Effective presentations should prioritize skill development over program descriptions. We strongly encourage comprehensive presentations that offer practical tools for enhancing services and treatment for children and families, focusing on evidence-based practices. We welcome contributions from seasoned clinicians who delve into family-related issues and push the boundaries of clinical practice. We are especially interested in intermediate and advanced-level presentations that skillfully integrate a thorough review and application of relevant literature and research.

Furthermore, presenters should explore the adaptability and replicability of their programs and practices, highlighting their potential for implementation in diverse settings.

***Wherever possible, presentations are expected to include a parent/family member and/or youth member as a co-presenter, and presentations by youth and families are encouraged to have a provider or ally as a co-presenter.***

**(Required)** Please describe your presentation in under 500 words.

**(Required)** Please indicate specifically how your presentation will demonstrate efforts to build Youth Wellness and Resilience.

### **(Required) Preferred Day of Presentation**

We will make an effort to accommodate your preferences within the limits of the conference schedule and room availability.

- I am available on Monday, April 22, 2024.
- I am available on Tuesday, April 23, 2024.
- I am available on Wednesday, April 24, 2024.
- I am available on Thursday, April 25, 2024.

### **(Required) Length of Presentation**

- Workshop (75 minutes; more informational in nature)
- Institute (150 Minutes; skill or knowledge building)

### **Clinical Presentations, provide Two (2) References.**

Current (within the past ten (10) years) peer-reviewed publications that support the evidence base for the presentation's content.

Publications must be listed in American Psychological Association (APA) Style (see [www.apastyle.org](http://www.apastyle.org) for more information)

Author last name, Author First Initial. Author Second Initial. (Publication Year). Title of article. Title of Journal. Volume (issue) (if issue numbered), pages.

Publication 1:

Publication 2:

## Additional Presenter Information

### Name and contact information for all presenters

For the additional presenters, please complete the sections below for up to four additional presenters.

**We request that each presentation include at least one youth or family member as part of the presentation team wherever possible.**

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**Co-Presenter #1** (please list as desired in the conference program):

Name/Credentials

Title/position

Agency

Address

City/State/Zip

Home/work phone

Email address

Please select your role in the presentation:

- System Partner
- Provider Partner
- Community Partner
- Family Partner
- Youth with lived experience in behavioral health.

**Co-Presenter #1:** Please provide a short biography in no more than 100 words.

**Co-Presenter #2** (please list as desired in the conference program):

Name/Credentials

Title/position

Agency

Address

City/State/Zip

Home/work phone

Email address

Please select your role in the presentation:

- System Partner
- Provider Partner
- Community Partner
- Family Partner
- Youth with lived experience in behavioral health

**Co-Presenter #2:** Please provide a short biography in no more than 100 words.

**Co-Presenter #3** (please list as desired in the conference program):

Name/Credentials

Title/position

Agency

Address

City/State/Zip

Home/work phone and fax

Email address

Please select your role in the presentation:

- System Partner
- Provider Partner
- Community Partner
- Family Partner
- Youth with lived experience in behavioral health.

**Co-Presenter #3:** Please provide a short biography in no more than 100 words.



**Co-Presenter #4** (please list as desired in the conference program):

Name/Credentials

Title/position

Agency

Address

City/State/Zip

Home/work phone and fax

Email address

Please select your role in the presentation:

- System Partner
- Provider Partner
- Community Partner
- Family Partner
- Youth with lived experience in behavioral health.

**Co-Presenter #4:** Please provide a short biography in no more than 100 words.

Will any of the presenters require an honorarium or travel expenses?

Yes

No

If so, what is the proposed honorarium, and who is this for?