



THE CANADIAN CLINICAL PSYCHOLOGIST

NEWSLETTER OF THE CLINICAL SECTION OF THE CANADIAN PSYCHOLOGICAL ASSOCIATION

Message from the Chair

Maxine Holmqvist, C. Psych.

At the time of writing, spring is in the air- at least in some parts of the country!- and many of us are beginning to eagerly anticipate CPA's annual convention, which this year will be held in Toronto from June 8-10th, 2017. The preliminary program is now available online, <http://convention.cpa.ca/learn-grow/2017-convention-program/>, and you can easily find the clinical section's offerings by using the search term "clinical psychology." However, don't forget that the section's line up actually starts with **two**

preconvention workshops offered on Wednesday, June 7th:

Dr. Candice Monson's *Maximizing PTSD Assessment and Treatment by Incorporating Significant Others* and Dr. Noah Lazar and Dr. Eilenna Denisoff's *Cognitive-Behavioural Therapy for Psychosis*. Both workshops promise a hands-on approach to learning new skills and strategies (for more details about these workshops, and to register, see here:

<http://convention.cpa.ca/learn-grow/pre-convention-program/>).

We will be kicking off the regular convention program with our student symposium, *Innovative Ideas and Approaches to Understanding and Treating Social Anxiety*, at 10:45 on **Thursday, June 8th**. There will be 3 clinical symposia Thursday afternoon, and don't forget to check out the wide range of posters on display from 4:15-5:45! This year, we are also reviving our section's **public talk** on Thursday evening. In partnership with the Centre for Addiction and Mental Health in Toronto, we will be hosting a presentation and panel discussion with Dr. Stephen Lewis, who will speak about his research and personal experience with Non-Suicidal Self-Injury (for more about Dr. Lewis, see here: <https://mindyourmind.ca/interview/dr-stephen-lewis>). This dynamic and interactive session is not to be missed- more details will follow in the coming weeks.

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Chair (Pictured Above)

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On **Friday, June 9th**, we have our second poster session and the first of our **3 master clinician workshops**, *Cognitive Behavioral Therapy for Menopausal Symptoms*, offered by Dr. Sheryl Green, Dr. Randi McCabe and Dr. Eleanor Donegan. Participants will learn specific cognitive and behavioral strategies that target menopausal symptoms and will be introduced to a protocol that offers a safe and effective alternative to Hormone Therapy (HT). In the afternoon, come see our **invited section speaker**, and winner of last year's Scientist-Practitioner Early Career Award, Dr. David Moscovitch, speaking about his research and clinical work on social anxiety, *Understanding and Treating Social Anxiety Disorder: Fresh Insights Bring New Challenges*. Stay for our **Section Annual Meeting**, where we will report on our activities for the year, and for the reception that follows. This year, among other business, we will be providing updates on our ongoing work related to Clinical Practice Guidelines (see also the symposium we are sponsoring on Thursday afternoon "Clinical Practice Guidelines: What Psychologists Need to Know").

But don't leave early! **Saturday, June 10th**, is our busiest day of the convention. We have two master clinician workshops: *Cognitive-Behavioural Therapy for Perfectionism* offered by Dr. Martin Antony from 10:15-12:15 will focus on evidence-based strategies for assessing and especially treating perfectionism, illustrated using video-recorded vignettes. *Mindfulness-Based Cognitive Therapy*, by Dr. Zindel Segal, from 1:30-3:30 will teach the key aspects of Mindfulness-Based Cognitive Therapy, and will also cover newer developments in both the theory and practice of MBCT. In addition to this, there will be 3 more symposia and several GIMME-5 presentations. New to the convention this year, GIMME-5 presentations are 5 minutes in length and include a maximum of 3 slides. These engaging presentations will be offered at different times during the convention, and with more than 20 from clinical psychology, there is bound to be something to interest everyone.

I would like to conclude with a request. It has come to my attention that membership numbers for the section have been declining, and recent data suggests that our numbers are lower this year than we would have expected at this time. We have also seen less interest in section activities in recent years, including nominations for awards, interest in executive positions and so on. We would like to understand this trend better, and would welcome feedback from our members- what could we be doing to make the section more appealing, and to increase membership and engagement? Please feel free to contact me directly or to contact other members of the executive if you have thoughts about this.

I hope to see many of you in Toronto in a few weeks.

Maxine Holmqvist



Registration is now open for the 78th annual CPA convention which runs from June 8th to June 10th. The clinical section has a range of exciting presentations with special guest speakers. Visit the website for more information at <http://www.cpa.ca/Convention/>.

We hope to see many of you there!

PLEASE COMPLETE THE END OF LIFE SURVEY!!

The End of Life study is an unfunded survey of members of the CPA and/or Provincial Psychological Associations in order to assess their attitudes toward, familiarity with, and thoughts and experiences regarding the new Canadian Medical Assistance in Dying (MAID) legislation. The results of the survey are critical to the work of the Task Force and the final report, and will serve to shape the Association's understanding of the psychology community on this issue (e.g., providing continuing education opportunities, training at the graduate and internship level, or development of practice guidelines, etc.). The survey response rate to date has been quite low, so please consider contributing your perspective to ensure the views of psychologists are heard and represented.

For more information about the study and to complete the survey, click [here](#). On behalf of the Task Force, your participation is very much appreciated.

From the Editors' Desk



Greetings Clinical Section Members,

We hope that you are all enjoying the start of warm summer weather. We can't believe how fast this year has flown by, and that we are moving into our *seventh* year as co-editors of the *Canadian Clinical Psychologist*. Wow! When we started this adventure in 2011, we did not anticipate this longevity. We are so pleased to continue working alongside wonderful colleagues on the Clinical Section's executive committee, and communicating with active section members. Each one of you helps to keep this newsletter going – thank you for your contributions.

Over the past few months, important media coverage has surfaced regarding the Ontario Government's plan to boost funding for mental health programs and services. The province is investing in a provincial structured psychotherapy program, mental health hubs for youth (ages 12-25), and more supportive housing units. Increased support for mental health services at Ontario's colleges and universities is also a focus. Overall, these initiatives aim to provide faster access to mental health and addictions services for thousands of people. The numbers: In addition to the 3.7 billion that Ontario invested in mental health and addictions services in 2015/2016, the province will invest \$140 million over three years to support the abovementioned initiatives, which will be followed by a sustained increase in funding of \$50 million annually.

Do you have information/opinions about mental health care funding in your province? Would you like to share this with your fellow section members?

National campaigns, such as Bell Let's Talk, have also received vast media coverage. Since 2010, Bell Let's Talk has raised more than \$6.5 million, with donations made to organizations across Canada that support mental health care, science and outreach. This campaign is recognized as the largest corporate commitment to mental health in Canada. If mental health funding is on the radar for more conglomerates, and the government continues to enhance support for mental health needs, we are on the right track!

We want to remind you to consider whether you can contribute to the next newsletter, which will be published in November 2017. We hope to hear from you about new and exciting clinical research and practice. Since the next newsletter seems so far away, we will be sure to remind you of this with our next call for submissions! As always, please don't hesitate to contact us with any questions or comments.

Are you attending CPA's 2017 convention in Toronto? We hope to see you there!

Best wishes to all our readers for a relaxing and enjoyable summer.

Elizabeth & Andrea

Special thanks to Alexandra Smith, MA Applied Psychology Candidate from Laurentian University for her assistance in design, layout and putting this newsletter together.

Profile of a New Mental Health Clinic in Surrey, BC: Lifebalance Groups

By: S.S. Thinda

In my day job I am a front-line Registered Psychologist in Surrey BC, where I have worked since 2004 (treatment and assessment in clinical/rehabilitation psychology). I have also been an adjunct instructor at the local University for well over a decade. Both roles have made me keenly aware of two major needs we have in current mental health treatment: 1) the need for academic/research based information to actually make its way into the 'real' world as treatment practice; and 2) the need to tailor psychological treatment to specific topics and populations – for example Punjabi and Hindi options for the large South Asian population here in Metro Vancouver.

Research informed us years ago about three fundamental concepts in improving mental health; yet these basic clinical psychology findings are unfortunately not available or emphasized enough in most frontline psychological treatments. These are A) the importance of physiological control over the stress-response system; B) the importance of aerobic/cardiac physical activity to increase biochemical production and assist in regulating emotional functioning; and C) the most important factor in successful psychological treatment is the strength of the therapeutic relationship (client-centered approach).

In cognitive behavioural therapy (CBT) we provide therapy specific homework tasks, including the ongoing homework of daily diaphragmatic breathing and adding/increasing physical activity. However we also know that for most clients, motivation and interest levels are often at their lowest, and fear and anxiety are high. Unless extra supports are available, many clients go home treatment session after session continuing their sedentary lifestyles, social withdrawal/isolation, and avoidance behaviours.

At Lifebalance Groups, psychological therapy is augmented by the active and practical components of yoga, and fitness sessions. For every session of group therapy, clients must also attend two yoga and two fitness sessions in-house (per week, alternating days). We have also created a unique 'Driving Anxiety' group which includes on-the-road training/exposure with our team driving instructor. Vocation specific PTSD groups are also available. All programs are closed groups of 8 people (same clients and treatment team) and run 6 or 8 weeks. We are a clinical program and a professional referral is required. We emphasize our client-centered approach and the independent/objective stance of our clinic. For more information please visit <http://www.lifebalancegroups.com/>.

Check out the Canadian Mental Health Associations Launch of Lifebalance Groups [here!](http://www.lifebalancegroups.com/)

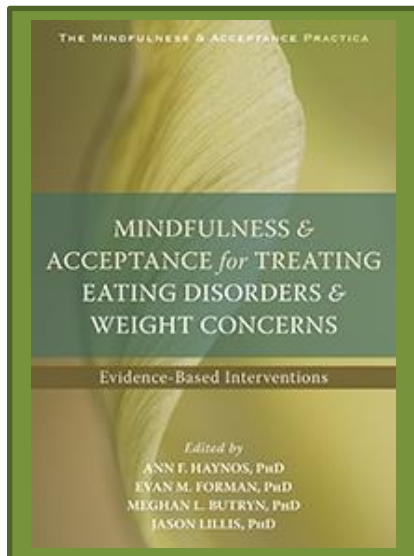


Book Review

Mindfulness & Acceptance for Treating Eating Disorders & Weight Concerns

Edited by: Ann F. Haynos, Evan M. Forman, Meghan L. Butryn, & Jason Lillis

Reviewed By: Paige Smith, M.A. Candidate, Laurentian University



This book discusses clinical treatment practices for individuals with weight concerns or eating disorders, such as anorexia nervosa, bulimia nervosa, and binge eating disorder. The book is based on the principles of mindfulness practices as well as working toward individual acceptance of events out of your own control. This book also works toward discussing the background problems and influences that one may experience and how mindfulness and acceptance based approaches are suited to address them.

The book highlights that the third wave or generation of eating disorder treatment and therapies include acceptance and commitment therapy (ACT), emotion acceptance behaviour therapy (EABT), dialectical behaviour therapy (DBT), appetite awareness training (AAT), and acceptance based behavioural therapy. Therapies that utilize a mindfulness based approach are focused on the environment or situation surrounding an individual, and how behaviours develop based on that context. The third generation also focuses more on the function or group of behaviours, rather than the form of the behaviour, and treat the behaviours as a whole.

The editors thoroughly present information on a range of approaches that incorporate mindfulness and acceptance in the treatment of eating disorders. The first section of the book includes the theoretical overview, background information, principles, and evidence supporting the treatment for each type of mindfulness based treatment. This is a very effective design for the reader because it contains all of the information regarding the therapy type in one chapter, as well as compares the therapy to other types. Part I of the book provides an accurate, structured, and detailed summary of the treatment/therapy, which also includes tools and step by step instructions for clinicians or individuals struggling with an eating disorder to follow or use. There are structured guides to the treatment plans, as well as graphs and worksheet examples included that clinicians can use with their clients.

Part II of the book includes a very empowering and insightful statement; “Control what you can and accept what you can’t”. This is very relatable to acceptance based treatments that focus on the individual coming to accept external events out of their control. This statement also relates to the acceptance of internal experiences including difficult thoughts and feelings that are connected to disordered eating. This book explains to readers that it is important to maximize an individual’s control in areas that it is possible, such as voluntary behaviours and their personal environment. However, it also mentions that at the same time, individuals must be assisted in learning to appreciate that some features of life are not controllable.

The final chapter of the book looks at the relationship between mindfulness and several key processes underlying weight loss and their efficacy. It is noted that the important factors may include regulation of food intake and food cravings, as well as emotional regulation; which are all aspects that mindfulness and acceptance based therapy/treatments focus on. Also within the final chapter of the novel, the authors acknowledge and explain the limitations and critiques of the mindfulness and acceptance based treatment. This is important as well as educational for the reader because they are also fully informed of any issues or limitations with the treatment, rather than only the benefits. Findings and research in the area of mindfulness and acceptance treatments and therapies are very preliminary, which is stated in the final chapter as well. The authors discuss that the long term consequences or effects of mindfulness treatment are unknown and it is unclear as to which measures are necessary to maintain treatment or home therapy.

Overall, this book demonstrates that the research surrounding mindfulness and acceptance based treatment is promising and it is anticipated that it will continue to contribute to the development of a more effective alternative treatment than other therapy modalities for individuals with eating disorders or weight concerns.



Ann F. Haynos, PhD, is a clinical psychologist and T32 postdoctoral research fellow funded by the National Institute of Mental Health through the department of psychiatry at the University of Minnesota Medical Center. Haynos's research interests pertain to identifying the underlying mechanisms associated with the development and maintenance of disordered eating, and developing and evaluating treatments for eating disorders and weight concerns. In a clinical capacity, Haynos has worked primarily with individuals with eating disorders using dialectical behavior therapy (DBT) and acceptance and commitment therapy (ACT) models.

Evan M. Forman, PhD, is professor and director of graduate studies for the department of psychology at Drexel University in Philadelphia, PA, as well co-director of the Laboratory for Innovations in Health-Related Behavior Change. His research, which is funded by the National Institutes of Health and the Obesity Society, focuses on using technology and new behavioral frameworks to enhance interventions for health behavior change, especially obesity.



Meghan L. Butryn, PhD, is a clinical psychologist and associate research professor in the department of psychology at Drexel University in Philadelphia, PA. Butryn's work focuses on the development and evaluation of behavioral treatments for obesity. Her research is funded by the National Institutes of Health, and she has published over sixty peer-reviewed papers.

Jason Lillis, PhD, is assistant professor of research at the Alpert Medical School of Brown University, and a clinical psychologist at the Miriam Hospital in Providence, RI. He is a leading ACT-for-weight-loss research scientist and coauthor of *Acceptance and Commitment Therapy* and *The Diet Trap*.



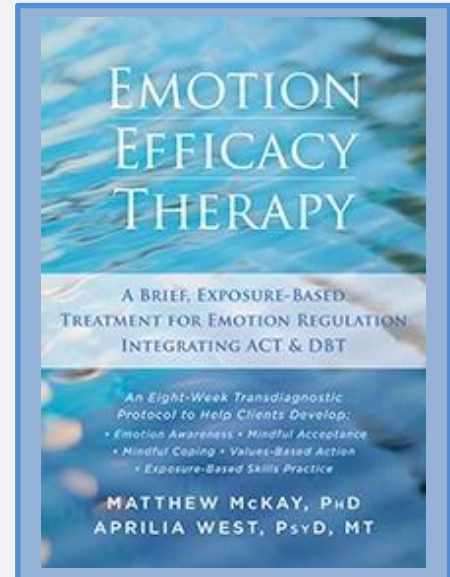
Book Review

Emotion Efficacy Therapy

By Matthew McKay, PhD, and Aprilia West, PsyD, MT

Reviewed by: Alexandra Smith, M.A. Candidate, Laurentian University

Emotions are a fundamental part of being human; yet many individuals believe they cannot tolerate aversive emotions, and avoid experiencing uncomfortable thoughts, feelings, and sensations. Unfortunately, these tendencies are known to be a significant factor in the onset and maintenance of various psychopathological processes. In *Emotion Efficacy Therapy* (EET), Dr. Matthew McKay and Dr. Aprilia West present a clinician's guide to their brief exposure-based treatment for emotionally dysregulated clients. This evidence-based treatment integrates components from acceptance and commitment therapy (ACT) and dialectical behaviour therapy (DBT), with the theoretical premise that although pain is unavoidable, suffering is not. The book provides a comprehensive step-by-step protocol to assist individuals with facing their painful emotions and responding in an adaptive and values-consistent manner.



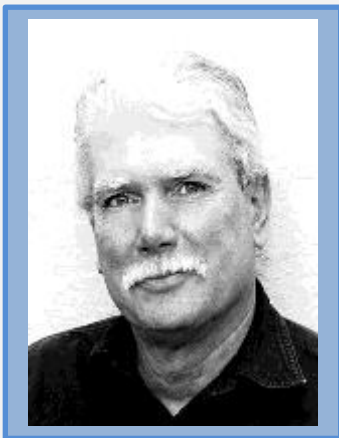
The book begins by discussing emotion efficacy and the vulnerabilities that may lead a person to have a poor relationship with his or her emotions, as well as the consequences of having low emotion efficacy. Following the recent trend of moving away from single-diagnosis approaches towards transdiagnostic approaches to treatment, McKay and West argue that rather than focusing on reducing clients symptoms, it is important to target the transdiagnostic mechanisms that are driving low emotion efficacy: distress intolerance and emotional avoidance. Readers will become acquainted with the five core components that are incorporated in EET treatment to increase distress intolerance and decrease emotional avoidance, in order to provide clients with resources to regulate emotions and reduce suffering. These components are emotion awareness, mindful acceptance, values-based actions, mindful coping, and exposure-based skills practice.

The protocol incorporates the foundational ideas of transemotional learning to build neural pathways around new behaviours, as well as exposure-based skills training in sessions to help learned skills become more readily accessible for clients outside of therapy sessions. In chapters two through ten, the eight session protocol is broken down into easy to follow steps; from introducing EET to clients, to providing psychoeducation on the core skills to be learned and practiced by clients in sessions, as well as difficulties that may arise throughout treatment, and consolidating learning. Skill objectives for each session are clear and concise, and each chapter presents summary points of the content covered for quick reference points. Additionally, the protocol is infused with informative handouts and worksheets to help enhance therapy sessions with clients, as well as sample therapist-client dialogues and scripts for experiential exercises. Clinicians will also be satisfied to know that Appendix A provides measures of emotion efficacy that can be used throughout therapy to assess treatment progress. With all of these resources, the use of EET in clinical practice can be easily envisioned.

Overall, the book is well-structured and easy to follow, offering a rich outline of the principles and techniques of this psychotherapy, and making this protocol one which can be easily implemented. McKay and West have incorporated up to date research to support the rationale for their therapy and have justified their reasoning for the components that comprise EET. Furthermore, the results of a quantitative outcome trail are offered in Appendix B that suggest EET is an effective model for treating clients with emotion-regulation disorders. For clinician's convenience the protocol is also accessible as an ebook, and handouts and worksheets provided in the book can also be found at <http://www.newharbinger.com/34039>.

Emotion Efficacy Therapy is intended for clinicians who are treating individuals struggling with intense emotions. The protocol would be particularly useful for treating clients who present with a wide range of emotional problems, as it takes on a transdiagnostic approach, and therefore both novice and experienced therapists who acknowledge the importance of understanding and accepting emotion in their practice would benefit from reading this book. The book may also prove to be a valuable read for clinicians who offer short-term therapy with limited resources, or for those who are looking for an adjunct therapy to assist in providing clients with targeted skills training for emotion regulation.

In summary, EET is a very welcome contribution to the field of clinical psychology. McKay and West have fulfilled their purpose in providing an innovative and practical guide for emotion-regulation problems that can be adapted for individual or group therapy. Additionally, EET is a cost-effective choice that can be used with clients of all levels of emotional efficacy. As the protocol maintains a wide base of applicability, this book is a worthwhile clinical tool to possess. It would be of interest for clinicians to keep an eye open for workshops and further research evaluating EET in the years to come.



MATTHEW MCKAY, PhD is a professor at the Wright Institute in Berkeley, CA. He has authored and coauthored numerous books, including *The Relaxation and Stress Reduction Workbook*, *Self-Esteem, Thoughts and Feelings*, *When Anger Hurts*, and *ACT on Life Not on Anger*. McKay received his PhD in clinical psychology from the California School of Professional Psychology, and specializes in the cognitive behavioral treatment of anxiety and depression. He lives and works in the greater San Francisco Bay Area.

APRILIA WEST, PsyD, MT is a psychotherapist and emotion researcher based in the San Francisco Bay Area, where she specializes in treating anxiety disorders, mood disorders, and trauma. She became interested in the concept of emotion efficacy working as a former advisor, organizational consultant, mediator, and executive coach to members of Congress, Fortune 500 companies, entertainment industry professionals, and international advocacy campaigns. West holds a PsyD in clinical psychology from the Wright Institute in Berkeley, CA, and a master's degree in teaching from the University of Virginia.



Student Section

Letter from the Student Executive

Greetings clinical section members and happy spring!

I hope you all had a pleasant and productive winter. Now that spring is here we are busy preparing for the 78th Annual CPA Convention in beautiful Toronto, Ontario. Over the winter the clinical section executive members were hard at work preparing for the conference and we have several exciting clinical activities, workshops, symposia, and poster sessions planned for you. It will certainly be a convention to remember!

One particularly exciting convention event in Toronto will be our annual Clinical Section student symposium. This year's symposium is called *Understanding and Treating Social Anxiety: Innovative Ideas and Approaches*. We are thrilled that Dr. David A. Moscovitch of the University of Waterloo will be joining us as discussant for this event. As is often the case with the student symposium, the competition was intense. However, in the end, we selected four particularly excellent applications among many fantastic submissions, and are confident that these students are going to highlight some of the most exciting research in the area of social anxiety. We are excited for a high turnout, and I look forward to seeing you there!

As with the symposium, there was a steep competition for the Clinical Section Educational Activity Student Grant, and picking a winner was no easy feat. We are excited to announce that Trista Friedrich from the University of Saskatchewan submitted the winning application for the event titled *Activating the Here-and-Now: Group Psychotherapy Workshop*. Congratulations Trista! This event looks like it will be a fantastic workshop. Look out for a summary of this workshop in the next edition of the newsletter! As well, please see the summary from one of the past Clinical Section Educational Activity Student Grant winners in this edition of the newsletter.

Finally, the Clinical Section would like to invite student members to become a "Convention Reporter". Students who are attending the annual convention are invited to act as convention reporters where they will submit brief summaries of events sponsored by the Clinical Section (i.e., workshops, symposia, invited speakers). The summaries will be featured in the Fall edition of the Clinical Section newsletter, *The Canadian Clinical Psychologist*. Please see the convention reporter advertisement in this edition of the newsletter for full details or contact me directly.

Please feel free to contact me with any questions, comments, or concerns regarding the Clinical Section.

See you in Toronto!

Carley Pope, M.A.
Clinical Section Student Representative
cpope@lakeheadu.ca

Clinical Section Educational Activity Student Grant 2016: Summary for the University of Toronto Scarborough

Prepared by: Sonya Dhillon and Minnie Kim

UTSC Clinical Psychology Summit: Modern Applications of Mindfulness Training in Clinical Practice

Award Recipient: Ms. Sonya Dhillon

On October 14th, 2016, clinical psychology students at the University of Toronto Scarborough (UTSC), in Toronto Ontario, hosted its third annual Clinical Psychology Summit. This event was generously funded by the Clinical Section of the Canadian Psychological Association via the Educational Activity Student Grant and the Graduate Department of Psychological Clinical Science at UTSC.

The UTSC Clinical Psychology Summit is an annual event hosted by Dr. Zindel Segal, a Distinguished Professor of Mood Disorders in Psychology at UTSC and co-founder of Mindfulness Based Cognitive Therapy (MBCT), and the first-year graduate students in UTSC's Clinical Psychology program. It is a full-day workshop that seeks to augment program-specific training for clinical psychology students across the Toronto area. This year's theme focused on the use of mindfulness and its application to the treatment of clinical disorders in adolescents and young adults. Dr. Segal presented the keynote address, and three clinicians and researchers led attendees through a series of talks and practical exercises providing the opportunity for experiential learning and open discussion.

Dr. Zindel Segal opened the summit with a discussion about using mindfulness meditation in the context of interventions with children and young adults. He provided a narrative surrounding the historical context of 3rd wave therapies and the applications of such interventions with younger populations. Next, Dr. Karen Milligan presented on attention and learning disorders in children. She and Mr. Jack Manchester discussed the use of martial arts and traditional interventions in this population.

The second speaker, Dr. Heather Wheeler presented on eating pathology and mindfulness based interventions. She discussed the use of mindfulness based interventions to treat various symptoms and disorders associated with eating pathology. Our final speaker, Dr. Tayyab Rashid, presented positive psychology and mindfulness-based interventions for young adults. He discussed the importance of discovering and identifying our signature strengths when we face challenges, through mindfulness based practices.

The event was our most successful to date! The number of registrants exceeded our maximum capacity. Students and clinicians came from across Ontario and even from the United States. The Clinical Psychology Summit was met with immense positive feedback from all attendees and presenters. Based on the post-event survey that was circulated to all attendees, the event was well-planned, informative, the food was excellent and all attendees would happily return the following year.

Each year, we continue to build upon the successes of past years to integrate new activities. This year, we created a “floating panel” where attendees and speakers were able to network and create discussion over coffee and snacks. This panel was a huge success and provided a more comfortable environment to facilitate discussion. In addition, this year’s event was live on social media (#UTSCSummit), which facilitated conversation before, during and after the event on online platforms (e.g., twitter, Instagram). Because of these efforts, the event’s success was picked up by the University of Toronto’s Boundless campaign: a transformational effort that embodies the University of Toronto’s bold vision for the future, bringing exceptional exposure to the CPA educational activity grant as well as to our graduate program which is one of Canada’s youngest clinical psychology programs.

We cannot wait for next year’s summit, and hope to see many new and many returning faces!



Pictured to the left:
 Planning Committee
 (left to right)
 Sonya Dhillon
 Amanda M. Ferguson
 Kathleen M. Walsh
 Courtney Berezuk
 Matthew D. McPhee
 Minnie Kim

Pictured to the right:
 Speakers (left to right)
 Dr. Tayyab Rashid
 Dr. Heather Wheeler
 Dr. Karen Milligan
 Mr. Jack Manchester
 Dr. Zindel Segal





Pictured to the left:
Keynote address by
Dr. Zindel Segal

Calling all students!

The Clinical Section would like to invite you to become a "Convention Reporter". Students who are attending the annual convention are invited to act as convention reporters by providing a brief summary of an event sponsored by the Clinical Section (i.e., workshops, invited speakers). Your summary will be featured in the Fall edition of the Clinical Section newsletter, *The Canadian Clinical Psychologist*.

To become a convention reporter:

1. Email the Clinical Section Student Representative (Carley Pope) as soon as possible (and before June 6th) to indicate which Clinical Section event you would like to review.
*Please note: The presentation must be sponsored by the Clinical Section. This is indicated in both the online abstracts and the grid schedule.
*Only one convention reporter is assigned for each event.
2. Attend the event and write a 200-400 word summary.
3. Email the completed summary to the Student Representative by Sunday, June 18th.

If you have any questions, please contact the Clinical Section Student Representative Carley Pope at cpope@lakeheadu.ca

As well, if you are interested in acting as a convention reporter but are not sure what event you would like to report on or have questions on how to go about it, please contact Carley Pope (cpope@lakeheadu.ca), for assistance and more information.