2019 PCIT International Biennial Convention
Call for Submissions: Guidelines

Deadline for Submissions

Submissions will be accepted through **March 17, 2019**.

Review, Selection, and Notification

Submissions will be reviewed by the Program Committee. Reviewer assignments will be made based on the fit between the topic area and reviewer expertise. We aim for reviews to be blind, so please refrain from including identifying information outside the presenter information section of each submission. For all presentation formats, submitters will be notified of the status of their submission by **April 15, 2019**.

If accepted, please note that presenters (including co-authors/co-presenters) will be required to submit additional information (e.g., curriculum vitae, conflict of interest form, and brief biosketch) to the Program Committee within 5 business days of acceptance notification. These documents are not required at the time of submission, but are necessary at the time of acceptance to comply with various Continuing Education requirements for programming offered.

All presenters must be available 08/28/19 and 08/29/19 from 9am – 5pm, and 08/30/19 from 8am – 12pm, as we are unlikely able to accommodate presentation time requests.

Submission Process

Submissions will be accepted via an online portal at:

**2019 PCIT Convention - Online Proposal Submission**

No emailed submissions will be accepted. The required information for each submission type is detailed in the following document and available in example preparation forms at the **2019 PCIT Convention - Online Proposal Submission** and at the [official 2019 PCIT Convention webpage](#).

Convention Theme Priorities

Successful submissions will relate to the 2019 Convention theme of **Inspired Globally, Implemented Locally: Cultivating Diverse Roots**. Programming will emphasize international efforts and local/regional contributions toward PCIT practice. Thus, the theme encapsulates the need to learn from a diverse global community while keeping our local efforts sustainable. Convention programming will also highlight the broad importance of making PCIT accessible to diverse families and clinicians through inclusive research, clinical practice, and
training. We encourage cross pollination, collaboration, and expansion across invisible lines to push PCIT toward the next innovation, including input from PCIT clinicians, trainers, administrators, and advocates.

**Presenter Information**

For the various presentation formats, the following information for each presenter/co-presenter is needed:

Name:
Degree:
Field of Degree (e.g., clinical psychology, counseling, social work, etc.):
Licensure Type:
Licensure State:
Licensure Number:
Professional Title:
Affiliation:
Email address:
Phone Number:

**Presentation Formats**

**Clinical Skills Mini-Workshop**
A clinical skills mini-workshop focuses on in-depth, hands-on clinical training and supports learning of practical PCIT skills. Clinical skills mini-workshops are scheduled in 90-minute time slots.

To submit a clinical skills mini-workshop, please provide the following information:

- Workshop title
- Abstract describing the mini-workshop (250-word maximum)
- 3 learning objectives
- 3 current citations
- Level of intended audience (i.e., introductory, intermediate, and/or advanced)
- Presenter information

**Individual Paper Presentation**
This format allows for the oral presentation of research or clinical issues by one or more presenters. Topics may include discussion of research findings, applied clinical work, unique adaptations, or special topics related to training, implementation, and/or sustainability of PCIT. Individual paper presentations are scheduled for 15-minute time slots.

We hope this format will encourage submissions from diverse and novel perspectives. If multiple proposals are received on the same topic, the Program Committee may group presentations.

To submit a presentation, please provide the following information:

- Presentation title
Poster

“Posters offer the opportunity to present data and have substantive discussions with interested colleagues. The audience circulates among the posters, stopping to discuss papers of particular interest to them. Poster presentations should incorporate illustrative materials such as tables, graphs, photographs, and large-print text, and materials should be clearly readable from a distance of three feet (primary text font should be 20 points or larger, and headings font at least 30 points). Posters are assigned a session number and bulletin board number and are organized by keyword when possible. No audio visual equipment can be used.” (Excerpt of Definition from the Association for Psychological Science)

For the PCIT Convention, posters will be considered that are data-based (quantitative, qualitative, or mixed methods) as well as conceptual or clinical (e.g., case studies).

To submit a poster, please provide the following information:

- Poster title
- Abstract describing the poster (250-word maximum)
- 3 current citations
- Level of intended audience (i.e., introductory, intermediate, and/or advanced)
- Presenter information

Research in Brief: Bridge to Clinical Practice

A research in brief acts as a summative paper which fully informs the reader regarding the knowledge and research on a specific topic. It uses a base of evidence to argue for particular solutions, recommendations, or set of actions to address an identified problem within the field. It may, but does not necessarily, include original research; rather the purpose is to create a concise summary of available literature for consumption by stakeholders and practitioners who otherwise may not have access to academic resources. Thus, the research in brief final product is a short paper (5 pages of content; 1 page of references) providing an abstract, problem statement, background, solution, and conclusion. The intended outcome is to create a document that clinicians may use to inform their agencies, communities, administrators, and other stakeholders about research solutions to common PCIT problems (e.g., timeout, use in trauma populations, PCIT compared to other therapies, barriers to treatment/engagement/attrition, etc.). The research in brief will be presented similar to a poster session, in which the presenter(s) are available to a circulating audience for discussion.

To submit a research in brief, please provide the following information:

- Research in brief title
- Topic (i.e., key words regarding the problem to be addressed)
- Abstract describing the research in brief, including potential solutions to the problem of focus based on available literature (250-word maximum)
- At least 10 total references (3 within past 10 years)
- Level of intended audience (i.e., introductory, intermediate, and/or advanced)
Solution-Focused Panels

Solution-focused panels are focus groups organized around a topic or theme with the goal of presenting solutions to challenges frequently faced by PCIT clinicians, trainers, and researchers. Solution-focused panels are led by one or two moderators who spend approximately 10 minutes reviewing the aspects of a particular challenge (e.g., increasing accessibility of PCIT to diverse populations, advocating for change in agency or state policy that restricts application of PCIT). In a moderated format, the panelists then focus on finding solutions rather than reviewing problems. At least 15 minutes should be allotted for audience question and answer. Solution-focused panels are scheduled in 45- to 75-minute time slots.

To submit a solution-focused panel, please provide the following information:
- Solution-focused panel title
- Topic (i.e., key words regarding the problem to be addressed)
- Abstract describing the solution-focused panel, including potential solutions to the problem of focus (250-word maximum)
- 3 learning objectives
- 3 current citations
- Level of intended audience (i.e., introductory, intermediate, and/or advanced)
- Presenter information for the moderator(s) and each of the 3-4 panelists
- Specify preferred length of panel (45, 60, or 75 minutes)

Symposium

“A symposium is a focused session in which individual speakers present their views on a common issue. Symposia should have the dual goal of providing diversity of perspective and integrating those perspectives into a meaningful whole.” (Definition from the Association for Psychological Science)

A symposium may focus on research findings, on clinical and practice issues, or on a combination of both. All symposia should include a chair, up to four presenters, and a discussant. Symposia are scheduled in 45- to 90-minute time slots. Time should be reserved for discussion among presenters and the audience.

To submit a symposium, please provide the following information:
- Symposium title
- Abstract describing the symposium (250-word maximum)
- 3 learning objectives for the symposium
- 3 current citations for the symposium
- Level of intended audience (i.e., introductory, intermediate, and/or advanced)
- Presenter information for symposium chair and discussant
- For each presentation included within the symposium (up to 4 total)
  - Primary presenter information
  - Title of the presentation
  - Names of all co-authors
  - Abstract of the presentation (250-word maximum)
Selection Criteria

While focusing on innovation, proposals must remain grounded in tenets of high-quality PCIT practice, training, research, and policy. Therefore, proposals will be evaluated based on the following criteria:

- Relevance to the 2019 Convention theme
- Clear and specific learning objectives
- Presenters with diverse perspectives are a plus
- Strength of the evidence-base (including but not limited to citations) or effectiveness
  - "Evidence-based practice is the integration of the best available research with clinical expertise in the context of patient characteristics, culture and preferences." (American Psychological Association)
  - "EBP is a process in which the practitioner combines well-researched interventions with clinical experience, ethics, client preferences, and culture to guide and inform the delivery of treatments and services." (National Association of Social Workers)
- Level of engagement via a novel topic and/or participatory activities, as appropriate
- Inclusivity of approach

Presenters are expected to use material and language which do not discriminate on the basis of gender, race, color, ethnicity, religion, physical ability, sexual orientation, citizenship status, military status, and/or marital status.

Frequently Asked Questions about the Submission Process

Question: Can the chair of a session also present within one of the sessions?
Answer: Yes.

Question: What equipment will be provided for presenters?
Answer: An LCD projector, screen, microphone, speakers, and laptop will be available in each presentation room. Presenters will be expected to provide their PowerPoint slides on a USB drive the night before their presentation so that it can be uploaded to the presentation computer.

Question: I would like to submit an applied, clinically-oriented presentation (not research) – would that be considered?
Answer: Absolutely!

Question: Am I expected to have my entire 6-page Research in Brief: Bridge to Clinical Practice paper written at the time of the submission?
Answer: Goodness, no. However, in the abstract you submit, you should be able to provide a cohesive conceptualization of a known problem in the field, some background information, and references you will use to identify solutions.
Question: What are the size and formatting restrictions for the Poster Session and Research in Brief: Bridge to Clinical Practice session?
Answer: Upon accepted submission, presenters will be given additional formatting guidelines.

Question: Do I really need 10 citations for a Research in Brief: Bridge to Clinical Practice and do they have to all be on PCIT?
Answer: Remember, the Research in Brief: Bridge to Clinical Practice is about increasing access to good evidence within our broader community of PCIT practitioners. So, yes, you need total 10 citations. However, they don’t all have to be about PCIT. Use citations to define your problem, to set the stage for the background, and, yes, definitely for your evidence-based argument for the solution.