

Most Value

4. What features of the conference were of **MOST** value:

To have a day to listen, learn and be with like minded professionals

Everything! The info was awesome.

Different perspectives about what grief is

Certainly validating consolidation of concepts and strategies.

The set up of the room.

Strategies in grief. Counselling. Roles of therapist.

An opportunity to spend some time reviewing my past knowledge and understandings and integrating them with newer perspectives.

Treatment strategies, connection btwn PTSD and Traumatic Grief.

Learning that approaches to grief work are open and changing - on going.

Examples used i.e. stories and the video was great.

The excellent presentation, the opportunity to display, network - meet people.

The different stages, means for length of certain stages.

Language- he spoke broadly which, for me as a non-clinical person was understanding and very useful.

The stories, research, the professional readings.

The video`s were great! First hand information. Tell more stories.

Definition of suicide

The realization that ``it depends`` approach is very flexible. Very informative and great hand outs.

I liked the video he included of suicide survivors.

Defining the meaning of suicide and how it affects those around you.

The language used by the presenter - plain, easily understandable.

Power point presentation

New concepts/approaches. Presentors deal well in the large groups.

Traumatic grief.

Jack knew his material and was very responsive to the audience. He was very human - very real.

Networking.

Always using examples for clarity.

Little hints as to how survivors cope (skills).

The video was great. The experiences are valuable to hear but Dr. Jordan was great.

It was all very valuable information on grief.

Reinforcement and new ideas on communication with survivors.

General information on grieving, grieving styles, etc.

The `human` perspective for professionals. Thank you for that.

Affirmation of what I don't know and what I know and language given, i.e. empathic failure and dual process model.

Ability to convey prof. materials in a very understanding way -language was easy to follow.

The panic video. Presenter's style of communication.

Practical skills. Insights into causes.

Information/ intervention.

The video clips of survivors was very good and a great change of pace. Bibliography.

John Jordan's experience and knowledge of years of doing this work. Content was GREAT!!!

Presentation style, clear and concise information.

Understanding that a one day conference can't give you everything but a comprehensive reading list enables you to learn more at your own pace.

Distinction betwn PTSD and grief and reading list. All helpful information

When people were being interviewed - the actuality of the 'real' feelings.

The panel of 5 video

Power point info.

I liked the reading list, however, it would have been helpful to have it divided by topics for quick reference search.

Clinical examples and therapies specific to grief.

New interventions for traumatic grief.

Clinical focus

Reinforcing the way I work and building on my knowledge

The examples given from his clinical practice and some of the research statistics.

Hearing from the survivors through the video. The impact, how they dealt with it, etc.

Data. The information that survivors benefited most from one on one with other survivors.

The different techniques that are utilized in grief therapy.

All.

Video panel

Learned many things to use in my group. Also reinforced what I'm doing is right.

Video end part

I enjoyed it all

Trauma support counselling in the grouping of losses and being sincere in our support.

Impact on family systems, PTSD, Complicated Grief happens, importance of 'sense of control' and Grief vs. Trauma, and the research findings.
(It was all helpful.)

Understanding how to phrase words and react to a person grieving

All the info, especially the video clips.

Video, interactive discussion

All of it - appreciated being able to be interactive (all was valuable).

Suicide survivors

Head and heart at work, with awareness, stretching the ground rules; use of rituals, journalling, liked the video shown. Very usual and helpful.

Relation to other aspects of grief.

Risk factors and role of therapists

Content, interactive discussions

American perspective, dual process model

Meals were great!

That out of every experience a gift can be found (video)

Specialized techniques

Networking. Writing letter to deceased and deceased writing back.

Watching the video and hearing from people who have survived (also the chocolate :)) It all made me think and realize my own grief process.

Suicide survivor, coping skills, slide presentation

Survivor

The cartoons in p.m. Session helped lighten the topic, better than bubbles.

All ideas helpful to the clinician

Ways to "be with" a survivor and background reasoning

Least Value

5. What features of the conference were of **LEAST** value:

The body mousse stuff was horrible.

Didn't seem very dynamic. Too dry.

Lunch.

DSM stuff b/c I already had the knowledge, however, impt for those in the audience who aren't knowledgeable in that area.

The conference started very slowly. I needed the pm part of the session more than the morning.

Research results could be summarized more concisely.

talk, talk, talk. Too much explanation/detail on specifics

A bit long/quite a bit of talking...

Very much lecture style. Interactive with maybe group activities would be good - though I understand the difficulty with large number of people.

Not enough time to cover all the material well.

Very little discussion on children which is my background.

Detail on surveys not particularly useful.

The professional bibliography is a bit too specialized to be of significant help to us.

American statistics - Are there any available from Canadian Studies

Psychotherapy ideas/roles -not particularly my role.

Too much info for time frame - became lecture rather than conference. PPPresentations are dry.

Questioning why Calgary had a 2 day and Edmonton's 1.

Allowing participant questions/comments during presentation

So much talking and reading from handouts

Clinical info - I was needing more practical.

The Boston survey

The speaker did not move around enough and from time to time I did not feel part of the group session.

Would like shortened length of 8 - 4

Research

Would like to do some table interactive work as opposed to listening if possible. Practice what is facilitated. Learn from the people at our table.

Statistics on clinical studies.

pilot study results

Level of conference was less than I had hoped - not in much depth, not enough presentation of research, not enough discussion

I am not a councillor so that portion was least helpful for me.

need more breaks, such a heavy subject to talk about

Speaker unfamiliar with Alberta (Canadian) protocols and services.

Not enough interaction, not enough discussion or participation.

statistics

pilot study fact sheet

few to many stats.