

Grief, PTSD and the Vietnam Veteran

**August 3, 2017
8:30am - 4:30pm
Holiday Inn Express
Morgantown, WV**

Presenter: Michelle Lewis MSW, LICSW

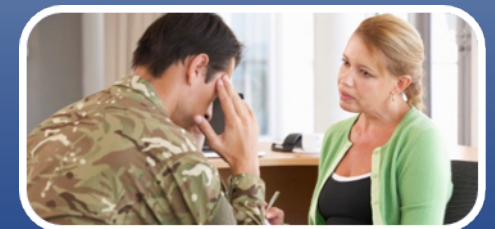


Overview

Vietnam Veterans are frequently diagnosed with Post Traumatic Stress Disorder due to their service. Often as professionals we fail to acknowledge the profound grief that many combat veterans also experience. In this workshop, you will gain an understanding of the unique factors related to the Vietnam War and begin to identify PTSD and/or complicated grief reactions frequently experienced by veterans.

Objectives

- Participants will be able to identify 3 factors that were unique to the Vietnam War.
- Participants will be able to discuss the differences between grief reactions and complicated grief.
- Participants will be able to identify the importance of assessing Veterans for both PTSD and Complicated Grief.



*This workshop is
approved for 5.5 CEU's
by the WVBSWE*



About your Presenter

Michelle Lewis worked as a therapist with the Department of Veteran's Affairs, Vet Center program for fourteen years. She has experience working with veterans of all combat eras and veterans that experienced sexual trauma while on active duty. In addition, Michelle was the bereavement counselor at the Vet Center for families that experienced the death of an active duty family member. Currently she is working as a therapist in private practice at Integrative Counseling Solutions.

Agenda

8:30am – Coffee and Registration
9:00am – The Vietnam Veteran, How the Vietnam War was Different
10:30 – Break
10:45 – Case Considerations
12:00 – Lunch
1:00 – How PTSD presents in Vietnam Veterans
2:15 – Break
2:30 – Grief and Complicated Grief in Veterans
3:30 – Considerations when working with Vietnam Veterans
4:15 – Questions and Evaluations
4:30 - End

Registration

To Register:

Call Samantha Clarkson
at

681-758-1677

or

Register online at

<https://www.eventbrite.com/e/grief-ptsd-the-vietnam-veteran-tickets-35573549444>

Cost of Workshop: \$60.00

Mail in Registration Form

Name _____

Employer/Affiliation _____

Mailing Address _____

City _____ State _____ Zip _____

Payment Amount _____

Payment Type: Check ___ Credit Card ___

CC# _____

CC TYPE _____

(All Major CC accepted EXCEPT AMEX)

Make Checks Payable to:
Integrative Counseling Solutions

Mail Payment and Form to:
104 Poplar Dr. Morgantown, WV 26505

SPACE IS LIMITED