



ACOTS2019

20th AUSTRALASIAN CONFERENCE
ON TRAUMATIC STRESS

12-14 SEPTEMBER SYDNEY

MASTSS
Australasian Society for Traumatic Stress Studies

PHOENIX | Centre for
AUSTRALIA | Posttraumatic
Mental Health

CONFERENCE PROGRAM AND ABSTRACTS





ACOTS

AUSTRALASIAN CONFERENCE
ON TRAUMATIC STRESS

THURSDAY 12th SEPTEMBER – PRE-CONFERENCE WORKSHOPS

08:00 – 18:00	Registration Desk Open Arrival Tea and Coffee	Ground Floor Convention Centre, Reception 1 Level 4 Foyer
08:00 – 17:30	Speaker Preparation	Speakers Preparation Centre, Ground Floor
09:00 – 12:30	WORKSHOP 1 Narrative exposure therapy <i>Professor Frank Neuner</i>	Room C4.5
10:30 – 11:00	Morning Tea	Level 4 Foyer
12:30 – 13:30	Lunch	Level 4 Foyer
13:30 – 17:00	WORKSHOP 2 Applying posttraumatic growth in clinical practice <i>Professor Richard Tedeschi</i>	Room C4.5
15:00 – 15:30	Afternoon Tea C4.4 & C4.5 foyer	
17:15 – 18:30	Welcome Reception	Level 4 Foyer



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FRIDAY 13th SEPTEMBER							
07:30 – 18:00	Registration Desk Open Arrival Tea and Coffee	Ground Floor Convention Centre, Reception 1 Level 4 Foyer					
07:30 – 17:30	Speaker Preparation	Speakers Preparation Centre, Ground Floor					
08:30 – 08:45	Welcome to Country <i>Elder Uncle Allen Madden</i>	Room C4.5					
08:45 – 09:00	Welcome to Conference <i>Professor Jane Shakespeare-Finch</i>	Room C4.5					
09:00 – 10:00	Keynote Address Recent developments in the science and application of posttraumatic growth <i>Professor Richard Tedeschi</i>	Room C4.5					
10:00 – 10:30	Morning Tea	Level 4 Foyer					
10:30 – 12:00	Concurrent Sessions						
Session 1A Symposium 1 <i>Chair: Professor Justin Kenardy</i>	Room C4.5	Session 1B Symposium 2 <i>Chair: Dr Shraddha Kashyap</i> <i>Discussant: A/Prof Angela Nickerson</i>	Room C4.4	Session 1C Free papers 1 <i>Chair: A/Professor Sam Harvey</i>	Room C4.2	Session 1D Clinical tutorials 1 <i>Anne-Laure Couineau</i>	Room C4.3
Risk factors and interventions that influence physical and psychological recovery following trauma exposure during early childhood through adolescence <ol style="list-style-type: none">1. The relationship between parental posttraumatic stress and child wound healing <i>Erin Brown</i>2. Predictors of children's posttraumatic stress reactions six months after paediatric intensive		Pre-settlement factors, trauma, and the family context in post-migration mental health among refugees <ol style="list-style-type: none">1. Pre-settlement context mediates post-migration wellbeing among refugees <i>Shraddha Kashyap</i>2. Mechanisms underlying the impact of family separation on refugee mental health <i>Belinda Liddell</i>		Peer support and clinical approaches <ul style="list-style-type: none">• Mental health training for senior first responders: The results of two randomised controlled trials <i>Sam Harvey</i>• The SIX Cs Model: Immediate Psychological First Aid <i>Moshe Farchi</i>• Prolonged Exposure Therapy: Training and support program for private psychologists in Australia <i>Darryl Wade</i>		Trauma-informed care for clients who have experienced violence: Implications for clinicians	

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<p>care unit admission <i>Belinda Dow</i></p> <p>3. Interventions for parents following their child's injury: A systematic review and intervention design <i>Jo Butler</i></p> <p>4. Birdie's Tree: Helping young children, parents and families weather the weather <i>Andrea Baldwin</i></p> <p>5. Preventing posttraumatic stress in young children: Results from a randomised controlled trial conducted in Australia and Switzerland <i>Alexandra De Young</i></p>	<p>3. Impacts of parental posttraumatic stress on child posttraumatic stress among refugees <i>Winnie Lau</i></p> <p>4. Factors associated with parenting and childhood mental health among refugees <i>Richard Bryant</i></p>	<ul style="list-style-type: none"> • Self-reported outcome measures for adults with posttraumatic stress disorder: Recommendations for clinical practice <i>Holly Bowen-Salter</i> • Do cognitive tasks reduce intrusive memory frequency after exposure to trauma? <i>Amalia Badawi</i> • In survival mode: Implementing complex trauma informed care within a public mental health service <i>Michelle White & Nicola Spence</i> 	
12:00 – 13:00	<p>Lunch</p> <p>Concurrent Student Lunch</p> <p style="text-align: right;">Level 4 Foyer</p>		
13:00 – 14:00	<p>Keynote Address</p> <p>The power of the narration: Understanding and treating complex trauma in victims of abuse, war and torture</p> <p><i>Professor Frank Neuner</i></p> <p style="text-align: right;">Room C4.5</p>		
14:00 – 15:00	<p>Panel</p> <p>How to move from a focus on symptoms to the promotion of wellbeing.</p> <p><i>Chair: A/Professor Andrea Phelps</i></p> <p><i>Professor Richard Tedeschi, Professor Frank Neuner, Dr Stephanie Hodson, Dr Ruth Wells</i></p> <p style="text-align: right;">Room C4.5</p>		
15:00 – 15:30	<p>Afternoon Tea</p> <p style="text-align: right;">Level 4 Foyer</p>		

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15:30 – 17:00	Concurrent Sessions						
Session 2A	Room C4.5	Session 2B	Room C4.4	Session 2C	Room C4.2	Session 2D	Room C4.3
Symposium 3		Symposium 4		Free papers 2		Clinical tutorial 2 & 3	
<i>Chair: Prof Jane Shakespeare-Finch</i> <i>Discussant: Prof Richard Tedeschi</i>		<i>Chair: A/Prof Andrea Phelps</i>		<i>Chair: Dr Elizabeth Newnham</i>		<i>Prof Meaghan O'Donnell</i> <i>Dominic Hilbrink & Prof Zachary Steel</i>	
Contemporary findings using diverse methods in posttraumatic growth research		Current research into moral injury in Australia		Refugees and culture		Everything you need to know about transdiagnostic interventions and how they are relevant to trauma-related disorders	
1. DNA Methylation of NR3C1 and FKBP5 predicts posttraumatic stress disorder, posttraumatic growth and resilience <i>Olivia Miller</i>		1. Perceived injustice and betrayal: Association with anger during the course of residential treatment for PTSD <i>David Berle</i>		<ul style="list-style-type: none"> • Mechanisms of adaptation in the Syrian refugee community in Jordan: The role of gender in shaping resilience in ecological context <i>Wafa Al-Hayek</i> • Barriers to accessing psychological care for migrant and refugee women who have experienced family and sexual violence <i>Anne-Laure Couineau</i> • Early intervention in asylum-seeker mental health: applications of the STAR-MH <i>Debbie Hocking</i> • Determining the prevalence of psychological problems of asylum-seeking children and parents facing insecure residency and immigration restrictions <i>Reza Rostami</i> • The psychological effects of trauma for adolescent disaster survivors in China and Nepal <i>Elizabeth Newnham</i> 		<i>Prof Meaghan O'Donnell</i>	
2. Posttraumatic growth and PTSD: Talking helps – sometimes <i>Jane Shakespeare-Finch</i>		2. Moral injury appraisals and psychopathology in refugees: A latent profile analysis <i>Joel Hoffman</i>				Working with moral injury and moral appraisals <i>Dominic Hilbrink & Prof Zachary Steel</i>	
3. Not the change hoped for: A qualitative investigation of women's experiences following miscarriage and stillbirth <i>Daniel Krosch</i>		3. Moral injury within the RAAF and the role of chaplains: Exploratory findings <i>Lindsay Carey</i>					
4. Tending to dwell on the positive: Markers of posttraumatic outcomes in EEG and eye tracking <i>Jonathan Robinson</i>		4. Working towards an international understanding of the impacts of moral injury <i>Andrea Phelps</i>					
5. Exploring the transition and adaptation of people who have experienced forced migration <i>Sara Parsafar</i>		5. Emerging themes on the impacts of moral injury from the moral injury outcomes scale (MIOS) international consortium <i>Kim Murray</i>					
17:15 – 18:00	ASTSS AGM						Room TBA
19:00	Conference Dinner						L'Aqua, Cockle Bay Wharf, Darling Park

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SATURDAY 14 th SEPTEMBER						
08:00 – 16:30	Registration Desk Open Arrival Tea and Coffee			Ground Floor Convention Centre, Reception 1 Level 4 Foyer		
08:00 – 17:00	Speaker Preparation			Speakers Preparation Centre, Ground Floor		
09:00 – 10:00	Keynote Address The past, present, and future of Australian psychotraumatology <i>Professor Richard Bryant</i>			Room C4.5		
10:00 – 10:30	Morning Tea			Level 4 Foyer		
10:30 – 12:00	Concurrent Sessions					
Session 3A Symposium 5 <i>Chair: Dr Ruth Wells</i>	Room C4.5	Session 3B Symposium 6 <i>Chair: Dr Yulisha Byrow</i> <i>Discussant: Belinda Liddell</i>	Room C4.4	Session 3C Free papers 3 <i>Chair: Prof Jane Shakespeare-Finch</i>	Room C4.2	
<p>The role of physical activity in promoting resilience and recovery in populations exposed to continuous traumatic stress</p> <ol style="list-style-type: none"> 1. Going multidisciplinary on multimorbidity <i>Simon Rosenbaum</i> 2. Physical activity and mental health among Farsi and Dari speaking refugees and asylum seekers in Sydney <i>Reza Rostami</i> 3. Rapid ecological assessment of community readiness to engage in physical activity in the Rohingya refugee community in Bangladesh <i>Ruth Wells</i> 4. A co-designed physical activity intervention delivered online for first responders and their partners <i>Grace McKeon</i> 		<p>Research advancements in the field of refugee mental health</p> <ol style="list-style-type: none"> 1. The mental health impact of visa insecurity on refugees in Australia <i>Angela Nickerson</i> 2. Post-migration living difficulties in refugees: A latent class analysis <i>Yulisha Byrow</i> 3. Emotion regulation in refugees: A latent class analysis <i>Philippa Specker</i> 4. Moral injury in traumatised refugees: A structural equation model <i>Joel Hoffman</i> 		<p>Qualitative/Open</p> <ul style="list-style-type: none"> • Intersex lived experiences – findings from narrative analysis <i>Bonnie Hart</i> • Over exposure: The trauma exposure of TV news camera operators and reporters <i>Jasmine MacDonald</i> • A focus on exposure: Potentially traumatic events and the psychological implications for TV news camera operators <i>Jasmine MacDonald</i> • Reconstructing trauma: An interdisciplinary analysis of traumatic knowledge and recovery <i>Cody Reynolds</i> • Psychological post-trauma outcomes after a vehicle hijacking: 	Session 3D Clinical tutorial 4 <i>A/Prof Andrea Phelps</i>	Room C4.3
		<p>Imagery rehearsal (rescripting nightmares)</p>				

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5. Nothing about us, without us: How can we best help people exposed to trauma to engage in meaningful physical activity? <i>Ronnie Moseley and Ross Beckley</i>		A phenomenological exploration within the South African context <i>Leesa Adlard</i>		
12:00 – 13:00	Lunch and Poster Session		Level 4 Foyer	
13:00 – 14:00	Keynote Address Factors underlying the greater prevalence of PTSD in women: The role of neurobiological, cognitive and social influences <i>Professor Kim Felmingham</i>		Room C4.5	
14:00 – 15:00	Debate PTSD diagnoses: ICD-11 is better than DSM-5 <i>Moderator: A/Professor Sam Harvey</i> <i>For the affirmative: Professor Meaghan O'Donnell & Professor Zachary Steel</i> <i>For the negative: Professor Richard Bryant & Professor David Forbes</i>		Room C4.5	
15:00 – 15:30	Afternoon Tea		Level 4 Foyer	
15:30 – 17:00	Concurrent Sessions			
	<p>Session 4A Room C4.5 Symposium 7 <i>Chair: Professor Kim Felmingham</i></p> <p>Mechanisms underlying PTSD: Biological influences on fear extinction, emotional memory and neural responses</p> <ol style="list-style-type: none"> The impact of aerobic exercise on fear extinction recall <i>Dharani Keyan</i> The role of progesterone in intrusive memories and fear extinction recall: The Impact of stress <i>Luke Ney</i> 	<p>Session 4B Room C4.4 Free papers 4 <i>Chair: Dr Lindsay Carey</i></p> <p>Defence research</p> <ul style="list-style-type: none"> Research translation within Defence: Mental health and resilience <i>Carolina Casetta</i> The Longitudinal ADF Study Evaluating Resilience (LASER-Resilience): Patterns and predictors of wellbeing in the early years of the military career <i>David Forbes</i> 	<p>Session 4C Room C4.2 Free papers 5 <i>Chair: Jane Nursey</i></p> <p>Developmental and adolescent mental health</p> <ul style="list-style-type: none"> Adolescent mental health after natural disasters: Highlighting the role of chronic stressors <i>Elizabeth Newnham</i> Activating attachment impacts young people's approach to conversations about death <i>Holly Evans</i> Psychological interventions for the treatment of post-traumatic stress, anxiety, depression and 	<p>Session 4D Room C4.3 Clinical tutorials 5 & 6 <i>Ann Linsten and Dr Tarni Jennings</i> <i>Joe Losinno</i></p> <p>The power of nature: Its role in stabilisation, treatment, recovery and growth following trauma <i>Ann Linsten and Dr Tarni Jennings</i></p> <p>Compassion focused treatments for posttraumatic stress injuries <i>Joe Losinno</i></p>

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	<p>3. The impact of brain derived neurotrophic factor on emotional memories in PTSD <i>Emma Nicholson</i></p> <p>4. The interaction of sex and stress hormones on intrusive memories in PTSD <i>Ken Chia-Ming-Hsu</i></p> <p>5. A meta-analysis of the effect of PTSD and trauma exposure on event-related potentials <i>Lisa Miller</i></p>	<ul style="list-style-type: none"> • PTSD and associated risk factors in mental health treatment-seeking Canadian armed forces veterans <i>J Don Richardson</i> • The prevalence and longitudinal course of trauma and PTSD in current and ex-serving ADF members: Comorbidity and risk factors <i>Miranda Van Hooff</i> • The relationship between trauma and the emergence of PTSD symptoms in a combat deployed cohort of current and ex-serving ADF members <i>Ellie Lawrence-Wood</i> • Mental health in ADF unmanned aerial vehicle operators in Afghanistan <i>Andrew Moss</i> • Investigating the utility of compassionate mind training in ex-service personnel with PTSD and their partners <i>Kelly Brown</i> 	<p>substance use following interpersonal trauma in young people: A meta-analysis <i>Wilma Peters</i></p> <ul style="list-style-type: none"> • Secure attachment priming reduces fear learning and enhances extinction <i>Metaxia Toumbelekis</i> • Attachment style and post-traumatic stress: The role of cognitive appraisals <i>Sally Hopwood</i> • The role of posttraumatic growth in moderating the association between parenting experience and psychological distress in breast cancer survivors who are mothers of dependent children <i>Carissa Kuswanto</i> • Decreasing trauma symptoms in children in statutory out-of-home care <i>Stacey McMullen & Nicole Galloway</i> 	
<p>17:00 – 17:15</p>	<p>Closing Remarks <i>Professor David Forbes</i></p>			<p style="text-align: right;">Room C4.5</p>

Clinical Tutorials

Clinical Tutorial

Trauma informed care for clients who have experienced violence: Implications for clinicians

This clinical tutorial will include:

- New development in trauma informed care as applied to interpersonal violence, particularly family violence: impact on care coordination and client engagement
- Practical implications of trauma informed care in guiding early disclosure, assessment and engaging other providers in the care of clients who have experienced violence
- Barriers experienced by clients with histories of and/or ongoing interpersonal violence in accessing support and impact on therapeutic process

We will also present the way in which trauma informed care can be applied when supporting migrants or refugees who have experienced family violence. TIC principles will be examined with a cultural lens and practical strategies to support recovery and engagement for migrant and refugee clients will be discussed.

The tutorial is suitable for clinicians working with trauma clients in both specialist and non-specialist services as well as private practice. Managers and policy makers may also benefit from participating.

Submitter: Anne-Laure Couineau

Affiliation: Phoenix Australia

Clinical Tutorial

Everything you need to know about transdiagnostic interventions and how they are relevant to trauma-related disorders

There has been increasing interest in transdiagnostic approaches to treating psychiatric disorders. This clinical tutorial will address what is meant by 'transdiagnostic', the different types of approaches to interventions that take a transdiagnostic approach, and why/how this may be relevant to trauma related disorders. The key controversies in the area will be described and directions forward will be presented.

Submitter: Professor Meaghan O'Donnell

Affiliation: Phoenix Australia

Clinical Tutorial

Working with moral injury and moral appraisals

Moral injury and its treatment has become a central focus in the field of traumatic stress injuries and their treatment. Litz and colleagues have done much important work in defining moral injury, its causes and its prevalence in military populations, and differentiating the divergent treatment needs associated with different types of trauma. In this workshop, we will outline a broader, more inclusive typology of traumatic stress injuries. We provide an integrative clinical model based on 25 years working with military and emergency services personnel. This model helps clinicians to identify the specific nature of the injury and puts the focus on adapting clinical interventions to the core affect associated with each injury type. Case material will be presented to demonstrate specific ways in which interventions can target core affect.

Submitter: Dominic Hilbrink & Professor Zachary Steel

Affiliation: St John of God

Clinical Tutorial

Imagery rehearsal (rescripting nightmares)

This clinical tutorial will briefly present a review of the latest research on the nature of posttraumatic nightmares in PTSD and outline the range of treatment approaches. It will then provide a detailed, session by session guide to using imagery rehearsal therapy with clients on an individual or group basis. Case material will be used to illustrate the range of potential changes that clients can choose to make to the content of their repetitive nightmares in order to increase their sense of mastery or control over the nightmare. In small groups, participants will have the opportunity to brainstorm ideas for how to change the script of posttraumatic nightmares. For the purpose of this activity, participants are welcome to use a de-identified nightmare reported by one of their own clients or to use one of the examples provided

Submitter: A/Professor Andrea Phelps

Affiliation: Phoenix Australia

Clinical Tutorial

The Power of Nature: Its Role in Stabilisation, Treatment, Recovery and Growth Following Trauma

Psychological research and evidence-based treatment guidelines for recovery from trauma have tended to consider the client in isolation from their broader context. More recently there has been recognition that social connection between individuals and their family, friends and community is also fundamental to healing. A further important connection – between the individual and the natural world - is only now receiving more attention from the scientific mental health community. A recent report on key factors in recovery and resilience following the 2009 'Black Saturday' bushfires concluded:

But in our efforts to identify systems that support recovery we cannot overlook the strength people drew from the bush that surrounded them. Our research showed that people who were attached to the natural environment were more likely to report positive mental health, wellbeing and resilience 3-5 years after the fires. (Forbes D and Gibbs L, 2019)

Research and best-practice guidelines into supporting individuals and communities after such large scale environmental disasters clearly demonstrates the importance of addressing these broad range of factors. However treatment involving nature is also relevant for clients experiencing any form of trauma.

This paper will outline the importance of connection to the natural world (plant and animal) for sustaining health and well-being while also being a valuable aspect of treatment for people who have experienced trauma. Practical examples will be provided from treatment for clients who had experienced the 2009 'Black Saturday' bushfires. It will be demonstrated how the natural world can be included in all stages of therapy: creation of a therapeutic treatment space; assessment, stabilisation, treatment and post-traumatic growth.

Keywords: Trauma treatment; Nature

Submitter: Ms. Ann Linsten

Affiliation: Private practice

Co-authors: Dr Tarni Jennings

Clinical Tutorial

Compassion focused treatments for posttraumatic stress injuries

This workshop will provide an evidence-based overview and introduction to the use of CFT for PTSD. CFT emerges as an intervention that may be particularly suited in addressing components of PTSD associated with distorted cognitions about the self and persistent negative emotional states. The approach may have also have particular merit in targeting Disturbances in Self Organization recognised as part of the ICD-11 diagnosis of complex PTSD and symptoms arising from moral injury associated with transgression of personal ethical standards. We will examine the strategies applied by CFT to address trauma-related feelings of shame, guilt and humiliation that can emerge as barriers to trauma-focused therapy and the impact of self-critical internal discourses that can impair improvement in quality of life. Through the presentation of a number of case studies we will illustrate the use of key CPT based interventions including compassionate imagery, developing an inner compassionate self, creating a safe place, compassionate carer work, compassionate letter writing, compassion flowing in and out and compassionate chair work. This clinical tutorial would be suitable for clinicians working with trauma clients in specialist and non-specialist services as well as private practice

Submitter: Joe Losinno

Affiliation: St John of God

Free Papers

Free Paper

Decreasing Trauma Symptoms in Children in Statutory Out of Home Care (OOHC)

In November 2015 the NSW Government commissioned David Tune AO PSM to carry out an independent review of the out of home care system in NSW. The Review made some important observations about the way government as a whole relates to vulnerable children and families. It found that, while the current system responds to immediate crises, it's failing to address the complex needs of vulnerable children and families or arrest the devastating cycles of intergenerational abuse and neglect. Outcomes for Aboriginal children and young people in OOHC are particularly poor. One of the recommendations from David Tune's review was to support children and young people to better reach their potential, improve mental health outcomes and develop a new approach to service delivery and design so that those with the greatest need were able to receive support. Their Futures Matter (TFM) was created to implement the recommendations from David Tune's review. One of the initiatives of TFM was to provide a trauma healing service to children and young people in OOHC who have not only been exposed to complex trauma, but had also had significant instability in care. LINKS Trauma Healing Service was commissioned as a multidisciplinary service to run as a pilot where evidence based therapeutic models would be used to support the mental wellbeing, and recovery from trauma, for children and young people who have been exposed to complex trauma. It started at three year pilot in October 2017, we are now approaching the half way point.

Cohort: Children and young people (16 and under) in statutory OOHC who have had either:

- Two or more placements in the past 6 months

Or

- An increase in the utilisation of respite over the past 12 months.

Treatment Modalities:

- Trauma Focused Cognitive Behavioural Therapy (TF-CBT)
- Eye Movement Desensitization and Reprocessing (EMDR)
- Parent Child Interaction Therapy (PCIT)
- Tuning into Kids/Tuning into Teens (TIK/TIT)

Outcome Measures: Standardised measures of trauma symptoms (Trauma Symptoms Checklist), children's behavioural and emotional functioning (the Strengths and Difficulties Questionnaire), children's psychological wellbeing (Personal Wellbeing Index and HoNOSCA), and carer capacity and wellbeing (Personal Wellbeing Index, Parental Stress Scale) are utilised to inform clinical decision making as well as forming part of the evaluation.

Summary: The flash presentation will outline the structure of the service, the interventions selected from the available evidence base, briefly describe the research methodology and the preliminary outcomes available to date, and provide a case example of a young person involved in the project to demonstrate outcomes.

Keywords: Treatment; Trauma

Submitter: Mrs. Megan Spencer

Affiliation: LINKS Trauma Healing Service

Co-authors: Jane Davenport, Nicole Galloway, Stacey McMullen

Free Paper

Psychological Post Trauma Outcomes after a Vehicle Hijacking: A Phenomenological Exploration Within the South African Context

Within the South African context individuals are exposed to high prevalence rates of criminal violence and the possibility of experiencing multiple traumatic events. Vehicle hijacking is a prominent type of criminal violence. Studies (Engelbrecht, 2009; Fischer, 2002; Jacobs, 2002; Macgregor, 1998) focusing on psychological outcomes after criminal violence events have reported negative outcomes of posttraumatic stress symptomology. Studies have explored the possibility of posttraumatic growth across a range of events, however only two studies (Peltzer, 2000; Roe-Berning, 2009), included criminal violence where findings demonstrated lower levels of posttraumatic growth.

This study aimed to explore the lived experience of posttrauma outcomes after experiencing a vehicle hijacking event within the South African context. Using an interpretive phenomenological analysis approach, it explored the possibility of both negative and positive outcomes in the short and longer-term aftermath. Purposive sampling was used. The sample included six female participants that had experienced a vehicle hijacking event 2-5 years prior. Semi-structured interviews were used. The intra-analysis illuminated the richness of individual experiences and inter-analysis compared themes between participants.

Findings during the actual hijacking included physical and emotional reactions, survival strategies, and immediate support. The posttrauma outcomes demonstrated the co-occurrence of negative and positive outcomes that were multi-faceted and evolved over time. Negative outcomes included symptoms of posttraumatic stress, losses, changes to assumptive world, and fear of future criminal violence. Positive outcomes involved posttraumatic growth including strength in self, changed philosophy in life, spiritual growth, and positive changes in relationships. Findings showed the South African socio-cultural context and the individuals proximate environment influenced the outcomes that evolved.

Keywords: Posttrauma outcomes after criminal violence event involving vehicle hijacking in South Africa; Criminal Violence and Posttraumatic Growth and Posttrauma stress in South Africa

Submitter: Dr. Leesa Adlard

Affiliation: Private practice/University of Johannesburg

Free Paper

The Role of Posttraumatic Growth in Moderating the Association Between Parenting Experience and Psychological Distress in Breast Cancer Survivors who are Mothers of Dependent Children

Studies have showed that many women reported psychological distress as well as positive life changes, or posttraumatic growth (PTG), as a result of their experience with breast cancer. Little is known about the relationship between parenting experience and psychological distress in mothers who have had breast cancer, and the role of PTG in moderating the association between psychological distress and parenting experience. Eighty-six breast cancer survivors who are mothers of dependent children (defined as children aged 18 years and younger) completed the Depression, Anxiety and Stress Scale (DASS-21), Parenting Sense of Competence Scale (PSCS), and Cancer-Related Parenting Self-Efficacy (CaPSE) scale. There were significant negative associations between PSCS Parenting Satisfaction and Depression, and CaPSE Parenting Confidence and Depression in mothers who reported low levels of PTG, but not in mothers with high levels of PTG. There were direct effects of PSCS Parenting Satisfaction with Stress, and CaPSE Parenting Confidence with Stress, but no significant interactions were found. Our findings suggest that parenting satisfaction and confidence were moderated by PTG in predicting depressive symptoms. More specifically, lower parenting satisfaction and confidence were associated with higher depression in women with lower PTG. Parenting satisfaction and efficacy were not associated with depressive symptoms in mothers with high levels of PTG. This suggests that PTG is a potential protective factor and suggests an important role for psychosocial interventions that enhance PTG by focusing on promoting spiritual growth and relationships with others, reflecting on personal strengths, and providing new possibilities for individual growth.

Keywords: Cancer; Parenting

Submitter: Ms. Carissa Kuswanto

Affiliation: Swinburne University of Technology

Co-authors: Dr Jessica Sharp, Associate Professor Lesley Stafford, Professor Penelope Schofield

Free Paper

A Focus on Exposure: Potentially Traumatic Events and the Psychological Implications for TV News Camera Operators

TV news camera operators are exposed first-hand to the emotional and visceral experience of filming individuals and communities in times of adversity and disaster. Despite this, there are currently no empirical studies focusing on camera operators' psychological well-being or trauma exposure. This study explored what it is like to cover potentially traumatic events (PTEs) as a television (TV) news camera operator, and the psychological implications of this work. An online quantitative questionnaire was completed by both camera operators and other TV news workers (n = 134). The questionnaire included measures assessing demographics, professional and personal trauma exposure, and trauma reactions. The findings suggest that a high proportion of professionals currently working in the TV news industry could exceed clinical cut-offs for posttraumatic stress disorder. Camera operators are not only exposed to as many PTEs as other news workers, they also experience elevated levels of psychological distress equivalent to that of other news workers. The findings of this study serve to raise the status of the psychological implications of journalistic work for TV news camera operators. Previous trauma exposure and reactions research in journalist samples posits that reporters are an at-risk population and worthy of increased industry support and further research. Therefore, the finding that camera operators and other TV news workers have comparable levels of trauma exposure and trauma reactions makes camera operators a noteworthy population by association. Hence, camera operators are equally as deserving of acknowledgement in terms of the potential psychological risks and implications of their work, as well as the accompanying support and research interest.

Keywords: Trauma exposure and reactions; TV news

Submitter: Dr. Jasmine MacDonald

Affiliation: Australian College of Applied Psychology

Co-authors: Anthony J Saliba, Gene Hodgins

Free Paper

Activating Attachment Impacts Young People's Approach to Conversations About Death

Talking about dying can be distressing, but for young people with incurable diseases like advanced cancer, talking about their needs and wishes at end-of-life (EoL) is critical for achieving the best outcomes for patients and their families and avoiding the development of psychopathology. Given the known contribution of attachment theory in managing emotions in times of stress, this study examined the role of attachment theory in openness to talking to close others about death. It was hypothesised that an attachment induction will increase participant's comfort with talking about death, compared to a neutral control induction. Eighty first-year psychology students participated visualised a supportive person or neutral person. Participants were then led through a visualisation involving having terminal cancer and completed several purpose-designed self-report items assessing their comfort and likelihood of discussing EoL topics with family, friends or a psychologist. Finally, participants completed a measure of adult attachment style. A moderation analysis indicated that overall, promoting attachment through an attachment induction led participants to want to talk about death with friends and family, but not with a psychologist. There was also a significant interaction with attachment style such that for those receiving the control induction, the more avoidantly attached participants were less likely to want to talk. Friends and family may represent attachment figures while an unknown psychologist might not. Clinicians working with young people suffering from serious illness should consider attachment style in the way they work with these young people. Individual differences in openness to discussing difficult topics such as death should also be expected.

Keywords: Attachment; PTSD

Submitter: Ms. Holly Evans

Affiliation: University of New South Wales

Co-authors: Ursula M Sansom-Daly, Professor Richard Bryant

Free Paper

Adolescent Mental Health After Natural Disasters: Highlighting the Role of Chronic Stressors

Natural disasters disproportionately affect low-resource areas, where prolonged adversity has potential to cause mental health difficulties and disrupt developmental processes for children and adolescents. However, little is known about the interaction between trauma exposure, chronic stressors and mental health in disaster-affected settings. We aimed to determine the rates of PTSD, depression and anxiety among adolescents affected by recent earthquakes in China and Nepal, and examine the specific roles of trauma exposure and chronic stressors across the three mental health outcomes. A school-based, cross-sectional study of 4215 adolescents (53% female, ages 15-19 years) was conducted in disaster-affected areas of southern China and Nepal. Participants completed a series of translated and culturally adapted standardized assessments. Mixed effects logistic regression analyses were conducted for each mental health outcome. The overall rate of PTSD was 22.7% and was higher among Nepalese participants (China: 19.4% vs Nepal: 26.8%, $p < 0.001$), but did not differ between genders (China: $p = 0.087$ and Nepal: $p = 0.758$). In both countries, level of trauma exposure was a significant risk factor for PTSD, depression and anxiety (China: OR's 1.09-1.18 and Nepal: OR's 1.08-1.13). Chronic stressors significantly improved the model and further contributed to mental health outcomes (China: OR's 1.23-1.26 and Nepal: OR's 1.10-1.23). Addressing the effects of ongoing economic insecurity, domestic violence, and school cessation is critical to preventing psychological difficulties in disaster-affected settings. Programs that identify chronic stressors for adolescents, and work to address poverty and violence after disasters will have cascading effects for mental health, development and security.

Keywords: Natural disasters; Adolescent mental health

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Free Paper

Attachment Style and Post-traumatic Stress: The Role of Cognitive Appraisals

There is strong evidence that attachment style impacts on the severity of Post-Traumatic Stress Disorder but the mechanisms underlying the relationship is less clear. Given the central role of cognitive processes in both attachment theory and models of PTSD, it seems likely that appraisals and rumination underlie the impact of attachment processes on the posttraumatic response. To explore this, we conducted a number of studies that investigated the role of explicit and implicit appraisals and rumination as potential mediators of this relationship. Using experimental designs that utilised an analogue trauma film and attachment priming, we found early evidence that appraisals of self mediate the effect of attachment style on posttraumatic stress, and evidence that attachment priming can reduce implicit negative self-appraisals for people high in attachment anxiety. However, our inconsistent findings raise questions about the specific effects of attachment priming, and suggest that different mechanisms may be involved in attachment avoidance and attachment anxiety. Implications and advances in using attachment primes to enhance coping will also be discussed.

Keywords: PTSD; Attachment

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Free Paper

Barriers to Accessing Psychological Care for Migrant and Refugee Women who Have Experienced Family and Sexual Violence

There is evidence that migrant and refugee women who have experienced family and/or sexual violence do not tend to receive services that take into account the traumatic impact of violence and their subsequent mental health needs. While research identifies barriers encountered by migrant and refugee women who have experienced family and/or sexual violence when accessing support services, this research does not focus on the mental health needs of women. The present study investigated barriers and facilitators to receiving care that was informed by migrant and refugee women's experience of trauma and their mental health needs. Women's experience of help-seeking and service providers' practices across a range of sectors including health, community support and mental health were investigated through interviews and focus groups. The data obtained will be used to develop a pilot program that will promote a trauma-informed model of care adapted to the needs of migrant and refugee women who have experienced trauma.

The initial results of the qualitative phase of the study will be presented. Themes extracted from 20 interviews with service providers, 12 interviews with women from migrant and/or refugee backgrounds who have experienced family or sexual violence and 2 focus groups with community representatives will be presented. For women, significant barriers emerged from the thematic analysis, including themes around cultural safety, the influence of trauma and culture on women's understanding of risk, mental health issues and service provision as well as perceived lack of agency. Service providers reported widely different practices around identification of violence and associated psychological issues, cultural engagement, consideration of the psychological impact of trauma and how risk was defined. A number of systemic and organisational factors were also noted. Implication from the results of this study for trauma and culturally informed practice, particularly in the context of family and sexual violence will be presented.

Keywords: Migrant and refugee women; Family and sexual violence

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Free Paper

Determining the Prevalence of Psychological Problems of Asylum-Seeking Children and Parents Facing Insecure Residency and Immigration Restrictions

Objective: To examine mental health strengths and difficulties among 99 Iranian and Afghani asylum-seeking and refugee children and adolescents aged 5-17 years and their caregivers who have arrived in Australia since 2010.

Background: The numbers of children who have become refugees are shocking every year. Almost one-quarter of the refugees worldwide are children. Between 2008 and 2014, 51,797 asylum seekers have arrived in Australia maritime arrivals. In August 2012 the Federal Government suspended the processing of refugee claims leaving 30,500 asylum seekers, including many families with children living in Australia for prolonged periods without having their claims assessed and limited entitlements. They are was experiencing Adverse both pre and postmigration, including traumatic events. The accumulation of these stressors increases the risk of stress- and trauma-related mental health issues. Although large numbers of asylum-seeking children are resident in Australia, there is no research available to assess how this group is faring. International research suggests that asylum families exposed to the dual stresses of pre-migration trauma and the daily stressors of uncertainty in the displacement environment are at increased risk of family dysfunction and conflict and psychological symptoms. This research is a part of the proposed Reassure CAP that provides the first Australian prevalence and longitudinal information relating to the mental health and wellbeing of children from asylum-seeking backgrounds living in the Australian community.

Materials and methods: Measures have been selected which allow comparisons of this sample to the general Australian population (Longitudinal Study of Australian Children LSAC) and refugee children living in Australia with permanent residency (BNLA). Measures used previously validated translations in Farsi and Dari. Parents interviewed regarding symptoms of depression (Hopkins Symptom Checklist – 15), Posttraumatic stress (Harvard Trauma Questionnaire, parenting practices and couple relationships as well as post-migration difficulties (Living Difficulties).

Descriptive analyses with 95% confidence intervals and between groups ANOVA, controlled for demographic factors applied to determine prevalence.

Result:

At the time of preparation Seventy-two families that overall had 99 children participated in the Questionnaires, children had different possession visa: 8 living in Community detention, 31 Bridging visa, 22 on Temporary protection visa, 26 Permanent visas, 10 citizenship, 1 Tourist, 1 Sponsorship visa. The findings of this research support a better understanding of the effect of asylum processing and insecure residency on the psychosocial well-being of children had an enormous policy implication.

Keywords: *Reassure cap; Child and adolescents*

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Free Paper

Do Cognitive Tasks Reduce Intrusive Memory Frequency After Exposure to Trauma?

Distressing intrusive memories are a hallmark feature of Posttraumatic Stress Disorder (PTSD) and considered to be a key maintaining factor. They are thought to arise from compromised encoding of trauma-related memory at the time the event is being consolidated into longer-term memory. Cognitive tasks such as Tetris and pattern tapping have been associated with reduced intrusive memories when administered in the consolidation and reconsolidation phases after exposure to analogue trauma, potentially traumatic events, and traumatic events. We conducted two studies using experimental and case series methodologies to replicate and extend upon these findings. The first study involved a non-clinical community sample where 110 participants were randomly allocated to one of three conditions (Control, Tetris, Visuospatial Tapping) in the memory consolidation phase after viewing an upsetting film. Generalized estimating equations analyses showed that participants in the Tetris condition reported consistently fewer intrusive memories for the film over the course of the following week as compared to both other conditions ($p = .02$ and $.03$ respectively), however intrusions decreased at a similar rate across all three groups. Considerations for clinical translation will be discussed. The second study involved clinical inpatients undergoing treatment for PTSD from backgrounds including Defence, police, and paramedics. Participants played Tetris after three therapy sessions involving imaginal exposure, that is, during the memory reconsolidation phase. Intrusive memories were recorded for 21-days in total. Preliminary findings for case series data will be reported for 10 participants, and prospects for the implementation of such cognitive tasks in clinical settings will be discussed.

Keywords: Intrusive memories; Cognitive tasks

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Free Paper

Early Intervention in Asylum-Seeker Mental Health: Applications of the STAR-MH

Mentally ill refugees resettled in Western countries are conferred the opportunity for recovery by their permanent residency, whilst the healing trajectory for asylum seekers is more precarious. Recovery and even posttraumatic may be possible for asylum seekers, however, the allostatic load of pre-migration and protracted post-migration trauma borne by asylum seekers putatively reduces the chance of recovery, particularly when not identified early. A mental health screening tool – the STAR-MH – was developed to assist non-mental health workers to identify likely posttraumatic stress disorder (PTSD) and major depressive disorder (MDD) in adult asylum seekers at their agency of first presentation. For asylum seekers, this enables mental health referral process to be expedited early in the refugee status determination process. This presentation will present results from the roll-out of the STAR-MH and its electronic platform for digital deployment – the e-STAR-MH.

A cross-sectional design was employed with agencies utilising the STAR-MH during intake or triage. Descriptive analyses were conducted with de-identified demographic and clinical client data. Administrators of the STAR-MH also provided anonymised feedback regarding the utility of the STAR-MH via a SurveyMonkey weblink.

155 asylum-seekers from 35 countries of origin were screened using the STAR-MH. Outcome data found a screen-positive rate of 69% (n=107), with 73 being referred for a mental health assessment and 71 attended the assessment appointment. Half of those who screened positive (58/107, 54%) were referred to, and presented for, treatment.

The utility of the STAR-MH was endorsed by those working with forced migrants. 83% found it easy to administer. In 86% of cases it took < 10 minutes to administer, irrespective of whether an interpreter was used.

The e-STAR-MH is currently available in five languages. It is an innovative and globally accessible solution to addressing the multiple barriers to mental health screening in forced migrant populations.

Keywords: Asylum seekers; Mental health screening

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Free Paper

In Survival Mode: Implementing Complex Trauma Informed Care Within a Public Mental Health Service

Statistically, the strongest predictor of someone requiring mental health services is a history of childhood trauma, yet mental health service delivery does not prioritise or acknowledge the association between complex traumatic stress and mental illness. The goal of our project was to embed trauma informed care as a core service pillar for the mental health service and develop implementation strategies that were aligned with the existing literature regarding successful trauma informed care models and practices. Based on the current literature and implementation practices our project focused on getting staff buy-in via surveying, identifying and embedding leaders to champion organisational change, comprehensive staff training to improve understanding of the neurological and behavioural impacts of trauma and the purpose of trauma informed care. This also led to trauma informed initiatives such as a pilot trauma informed therapy room, physical environment triggers and strategies and the drafting of indigenous trauma informed care guidelines including the appropriate use of cultural acknowledgements in the workplace. We will discuss lessons learnt, ongoing challenges and barriers and the triggering nature of attempting to implement trauma informed care into practice.

Keywords: Trauma; Implementation

Submitter: Dr. Michelle White

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Free Paper

Intersex Lived Experiences: Findings from Narrative Analysis

People born with variations in sex characteristics, also referred to as intersex or by other medical nomenclature, have experienced serious and prolonged trauma within clinical settings which frame their bodies as disordered males or females and administer interventions that aim to 'fix' them via cosmetically erasing visible difference. These medically unnecessary procedures often occur at a young age, without the informed consent of the child or adolescent, and are internationally considered human rights abuses. The dramatic dearth of long-term evidence as to the efficacy and effects of these experimental treatments since they became the dominant clinical paradigm in the 1950s, have kept accounts of lived experiences from members of the intersex community stark. In this research, the narratives of 18 people with intersex variations were subjected to a rigorous interpretative phenomenological analysis. Broad themes of shame, silence, stigma, and secrecy were extracted from the data. But this presentation goes beyond those expected and common themes. Issues in the context of social and sexual vulnerability, language and epistemic injustice, disruption to identity and rites of passage, family distress, well-meaning clinical negligence, and physical and psychological scars will be discussed. Direct quotes from the narratives exemplify a common narrative arc from trauma through, suppression, anger, re-connection, to growth.

Keywords: Intersex; IPA

Submitter: Ms. Bonnie Hart

Free Paper

Investigating the Utility of Compassionate Mind Training in Ex-Service Personnel with PTSD and their Partners

Posttraumatic stress disorder (PTSD) is a debilitating condition affecting between 5 and 20 percent of ex-service personnel. PTSD can have a detrimental impact on relationships, with research indicating that marital conflict and dissatisfaction, parenting difficulties, divorce, and intimate partner violence are more frequently encountered in relationships that include a service veteran with PTSD. It has also been documented that partners of ex-service personnel with PTSD experience heightened rates of psychological disorders. Despite this, there are limited group programs available that facilitate the inclusion of both service veterans and their partners as part of the intervention.

Compassion-Focussed Therapy (CFT) and Compassionate Mind Training (CMT; a manualised format of CFT) is a multimodal intervention, developed for individuals who have experienced past exposure to trauma and have mental health conditions linked to self-criticism and shame.

Evidence regarding the effectiveness of CMT for improving compassion and reducing psychological distress is sound. However, there have been limited studies examining the utility of CMT for ex-service personnel and their partners.

This study aimed to explore the feasibility of delivering a CMT intervention with both ex-service personnel and their partners. The study also aimed to evaluate psychological outcomes including compassion, PTSD, depression, anxiety and stress, quality of life and relationship satisfaction. Given the novel application of this intervention, a non-controlled pilot design was used.

Participants included ex-service personnel with a diagnosis of PTSD and their partners. The CMT program included 12 two-hour sessions, facilitated twice-weekly for six weeks by two clinical psychologists. All participants completed outcome measures at baseline, post-program, and at 3-months follow-up. Participants also provided qualitative feedback at the end of the program. Preliminary findings (both quantitative and qualitative) will be discussed, as well as issues surrounding feasibility of delivering a CMT intervention 1) within the ex-serving population and 2) with couples.

Keywords: Compassion; Veterans

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Free Paper

Mechanisms of Adaptation in the Syrian Refugee Community in Jordan: The Role of Gender in Shaping Resilience in Ecological Context

There is increasing interest in understanding how ecological factors impact resilience in trauma exposed and displaced communities (Miller & Rasmussen, 2017). However, understanding the mechanisms whereby social and cultural factors shape both trauma sequelae and resilience is a major challenge. Wells's ecological model of adaptation to displacement (Wells, 2018) draws on the guiding framework of the ADAPT model (Silove, 2013) as well as the biological ecology concept of niche construction. Niche construction is a reciprocal process whereby an organism is impacted by ecological factors while also modifying its environment to promote adaptation. We aimed to use this transactional concept to explore how both agency and vulnerability interact for displaced Syrians in Jordan. We asked how they make use of social and cultural resources to build lives in displacement. 26 key informant interviews were conducted with health workers supporting the Syrian refugee community in Jordan (2013-16). Interviews focused on key local idioms of distress and explanatory models. A grounded theory approach was used to generate a model of adaptive processes, with gender emerging as a key factor in niche construction. Here we extend these findings using critical discourse analysis to explore the social processes that contribute to the construction of gender norms within this community. Co-analysis of interpretive repertoires by two female psychologists (one Syrian, one Australian) demonstrated how cultural and linguistic resources are employed to privilege the emotional needs of men. In response, women innovate to use feminine gender norms to increasing their access to social, occupational and educational resources. This process has led to changes in gender role to support women's independence.

Keywords: Ecological; Refugees

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Free Paper

Mental Health in Australian Defence Force Unmanned Aerial Vehicle Operators in Afghanistan

Increasing use of unmanned aerial vehicles (UAV) in conflicts has led to concerns about the mental health of operators. To determine if there were differences in mental health screening test results, Australian UAV operators were compared to all other Australian Defence Force personnel deployed on operations in the Middle East during OPERATION SLIPPER (2001-14). The results of the Kessler Psychological Distress Scale (K10) and the Post-traumatic Stress Disorder Checklist - Civilian (PCL-C) for UAV operators were compared to all OPERATION SLIPPER personnel both on return to Australia and three to six months later. This is the first report of mental health screening data obtained from Australian UAV operators who served in Afghanistan. Rates of high risk psychological distress and medium or higher risk PTSD symptoms were found to be lower in UAV operators compared to other Australian OPERATION SLIPPER personnel at both return to Australia and three to six months later. After the deployment, there were minor decreases in psychological distress for both groups, with both groups also experiencing a minor increase in PTSD symptoms. Where results achieved significance, all effect sizes were found to be small. Despite concerns about the mental health of UAV operators, this study found that this group did not appear to be at increased risk of psychological distress or posttraumatic stress disorder symptoms compared to all other deployed military personnel. Study limitations and recommendations for future research in this area are discussed.

Keywords: Unmanned aerial vehicle operator; Post-traumatic stress disorder

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Co-authors: Duncan Wallace, Cate Chesney, Mitchell Dowling, Samantha Hodges, Jacqueline Costello

Free Paper

Mental Health Training for Senior First Responders: The Results of Two Randomised Controlled Trials

Background: First responders are at increased risk of PTSD and other mental health conditions as a result of their regular exposure to potentially traumatic events. There is increasing observational evidence that the behaviour of senior staff in emergency service organisations is a key predictor of mental health outcomes.

Methods: We conducted two randomised controlled trials involving over 2000 fire fighters and paramedics. One of these examined the impact of a four-hour face-to-face training program for senior staff, while the other tested an online manager training program called HeadCoach. Baseline, post-intervention and six month follow-up data were collected from the managers and the first responders they supervised. Training as usual was the control condition in both studies. Outcome measures including managers' confidence, their behaviour and sickness absence rates.

Results: Both face to face and online manager training were found to improve senior first responders' confidence regarding having conversations about mental health with their staff ($p=0.015$) and to generate sustained improvements in behaviour. The face-to-face manager training also led to a significant reduction in sickness absence amongst first responders being supervised by those who received the training ($p=0.024$). Economic analyses showed that manager training produced a return on investment for first responder agencies of \$10 for every dollar spent.

Conclusions: The substantial behavioural and financial benefits provide a strong argument for first responder organisations to ensure their senior staff have appropriate, evidence-based, mental health training.

Keywords: *First responder; Emergency service workers*

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Free Paper

Over Exposure: The Trauma Exposure of TV News Camera Operators and Reporters

Past research indicates that journalists experience elevated levels of trauma exposure, as well as elevated levels of posttraumatic stress disorder, depression, and burnout symptoms. Understanding the kinds and nature of potentially traumatic events (PTEs) journalists are exposed to is the first step in safeguarding individuals against adverse trauma reactions. However, research in this area has predominantly focused on quantifying trauma exposure and reactions. The present study aimed to explore individual subjective experiences and processes associated with exposure to PTEs. Two research questions were addressed: (1) What kinds of PTEs are TV news camera operators and reporters exposed to through their work? (2) When covering work-related PTEs, what are the factors that camera operators and reporters suggest result in greater psychological distress? In-depth semi-structured interviews were conducted with 21 Australian TV news camera-operators and reporters. Data analysis was conducted according to a systematic and transparent thematic analysis. Participants' exposure to PTEs were classified into the following themes: accidental and death-related events, direct involvement in events, man-made violence, medical events, natural disasters, and car accidents. Participants were most likely to recall exposure to man-made violence and car accidents; they reported car accidents, harm to colleagues, and harm to children to be the most distressing PTEs. The key factors believed to make a PTE impactful included the participant's ability to relate to the circumstances of the PTE and their level of preparedness. The present findings have spotlighted numerous experiences and processes that have previously gone unconsidered or been under-considered, and hence insufficiently legitimised.

Keywords: Trauma exposure; TV news

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Free Paper

Prolonged Exposure Therapy: Training and Support Program for Private Psychologists in Australia

Objective: Most previous efforts to promote adoption of evidence-based psychological interventions for posttraumatic stress disorder (PTSD) have been undertaken in military or veteran health service systems. The current study sought to do so with a group of individual private practitioners seeing emergency service personnel covered by workers compensation schemes in New South Wales, Australia.

Method: A total of 45 practitioners completed a Prolonged Exposure (PE) therapy workshop followed by group telephone-based consultations for a six month period. Practitioners completed self-report measures at three points: pre-training, post-training and at 6-month follow-up.

Results: Findings will be presented on changes over time on measures of the practitioners' (i) self-efficacy to deliver PE therapy, (ii) expectations of benefits and drawbacks of using PE, and (iii) use of PE therapy techniques. Findings presented will also include the practitioners' views on the quality of the training and support program.

Discussion: The effectiveness, feasibility and acceptability of this program will be discussed in light of previous outcomes of studies undertaken within organisational health settings.

Keywords: *PTSD treatment; Emergency services*

Submitter: A/Professor Darryl Wade

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Free Paper

Psychological Interventions for the Treatment of Post-Traumatic Stress, Anxiety, Depression and Substance use Following Interpersonal Trauma in Young People: A Meta-Analysis

There is a need to better understand the effectiveness of treatment options available for young people (aged 12 to 25) who have been exposed to interpersonal trauma. Young people exposed to interpersonal trauma can develop post-traumatic stress disorder (PTSD) and symptoms of anxiety, depression and substance use. Psychological treatments are effective in reducing symptoms of PTSD in children and adolescents (aged 3-18). Little is known about the effectiveness of PTSD treatments in young adults. It is further unclear if these treatments are also effective in reducing comorbid anxiety, depression and substance use. The aim of this meta-analysis was to investigate the effectiveness of psychological interventions on PTSD and these comorbidities. CINAHL, Cochrane Library, EMBASE, MEDLINE, PsycINFO and PILOTS databases were searched. Of the 4,832 records extracted, 81 studies were reviewed and nine randomised controlled studies included in this review. For PTSD a large pooled effect size was noted (Hedge's $g = 1.17$, $p = .002$); for anxiety, depression and substance use a medium pooled effect size was observed (Anxiety - Hedge's $g = 0.53$, $p = .001$; Depression - Hedge's $g = 0.4$, $p = .004$; Substance Use - Hedge's $g = 0.67$, $p = .018$). When compared to treatment as usual, findings from these studies suggest that current treatments for PTSD may be effective for the treatment of anxiety, depression and substance use in young people who have been exposed to interpersonal trauma.

Keywords: Interpersonal trauma; Evidence based treatment

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Free Paper

PTSD and Associated Risk Factors in Mental Health Treatment-Seeking Canadian Armed Forces Veterans

INTRODUCTION: Previous research has identified a number of risk factors for the development of PTSD amongst military personnel with exposure to peacekeeping and/or combat. The current study aims to identify risk factors amongst a cohort of mental health treatment-seeking Canadian Armed Forces (CAF) members and veterans. **METHODS:** Participants completed the Primary Care Evaluation of Mental Disorders (PRIME-MD), PTSD Checklist (PCL-M), Alcohol Use Disorder Identification Test (AUDIT), and a survey of deployment experiences. We used hierarchical linear regression to examine which pre-trauma (age, level of education), peri-trauma (deployments, deployment experiences), and post-trauma (marital status, stress, and social support) factors are associated with increased PTSD symptom severity. **RESULTS:** Analyses (N=308) show that most participants are veterans (81.2%) with an average age of 41.3. Most participants (71.6%) met criteria for probable PTSD (average PCL score 58.6 ± 14.9). The most common deployment experience was "seeing dead bodies or human remains (74.0%) and "knowing someone seriously injured or killed (69.8%). The final regression model showed that PTSD symptom severity was associated with endorsing at least one deployment experience that was a potential moral injury or atrocity, greater current stress, and being bothered by lack of social support. **CONCLUSION & DISCUSSION:** This study shows that a treatment seeking population, moral injury, current stress, and lower social support are risk factors for PTSD symptom severity. Identification of key factors may accelerate the assessment and treatment process for individuals with positive exposure to one or more identified factor.

Keywords: Military related PTSD; Risk factors

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Free Paper

Reconstructing Trauma: An Interdisciplinary Analysis of Traumatic Knowledge and Recovery

The ontological process of recovery from trauma has been a recent focus for both clinical and critical approaches. In spite of their interpretive similarities, these discourses remain divergent. This paper synthesises current theory with practice to examine the insights each offers the other, and consider the benefits of ongoing interdisciplinary dialogue.

In critical analysis, emerging scholarship has challenged the notion of trauma as universally dislocating and inconceivable (Caruth), and demanded a conception of trauma that accounts for plurality and the potential for rehabilitation (Balaev). New models have analysed traumatic stress as a revelatory psychological process (Forster), interrogating the means by which traumatic knowledge is formed. Engaging the logic of Pierce's 'abductive reasoning,' and the sociological metric of Douglas's 'grid-group theory,' current theory seeks to parse the inconceivable and investigate the ontology of traumatic recovery.

Simultaneously yet discretely, clinical trauma interventions have emphasised the significance of reflexivity in cognitive processes for rehabilitation (Lepore & Smyth). In therapeutic methods of journaling, such as expressive (Pennebaker) or integrative (Harell) writing, the narrative communication of distressing thoughts allows patients to make connections between fractured traumatic experiences and logically integrate their knowledge towards a more positive sense of awareness. For this approach, recovery is the result of unifying internal process, external experience, and the context in which both occur (Harell).

With the assimilation of fractured traumatic knowledge underpinning both critical and therapeutic approaches to recovery, a discursive bridge offers unique benefits for understanding and practice.

Keywords: Theory; Practice

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Free Paper

Research Translation Within Defence: Mental Health and Resilience

During military service, Australian Defence Force (ADF) members may be exposed to single or multiple traumatic events. To better understand mental health outcomes and factors contributing to resilience in this population, and to inform the design and delivery of ADF programs and services, two large collaborative research studies were conducted; the Transition and Wellbeing Research Programme and the Longitudinal ADF Study Evaluating Resilience (LASER-Resilience). One of the major challenges faced in health and medical research is ensuring the translation of research into changes to policy, programs and practice. To achieve effective translation of the findings from these two studies within Defence, a focused Research Translation and Knowledge to Action Framework was established.

The results of this translation process will be discussed and presented as a model for the translation of research, with potential relevance for other organisations. The program proposes directed workshops with target groups and is intended to enhance resilience training and focused evaluation, and to contribute to the initiation of further research with direct practical application. The Transition and Wellbeing Research Programme and LASER-Resilience projects have produced a large amount of valuable data and the effective translation of these findings is critical to improving mental health outcomes and wellbeing for ADF members and their families, and reducing the impact of trauma exposure that may occur during service.

Keywords: Military; Research translation

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Free Paper

Secure Attachment Priming Reduces Fear Learning and Enhances Extinction

PTSD is associated with hyperactive fear responses, and poor extinction learning. We also know that secure attachment priming confers many psychological benefits including reducing fear responsivity, but not for individuals who have an insecure attachment style. Thus, it is no surprise that there is a correlation between PTSD and insecure attachment styles. However, the mechanisms underlying this association are still unclear. Across three studies, we examined the role of secure attachment priming on fear learning processes. Participants underwent a standard fear conditioning and extinction protocol across two consecutive days, and they were instructed to briefly imagine an attachment figure or a non-attachment positive experience at different stages of that learning. Study 1 primed participants prior to fear acquisition, study 2 immediately following acquisition and study 3 before fear extinction. The attachment prime significantly reduced the acquisition ($p = .028$) and consolidation ($p = .049$) of fear, and enhanced extinction learning in that it prevented the long-term reinstatement of fear ($p = .010$). These results demonstrate that a brief secure attachment prime can modulate fear learning and enhance extinction. They provide preliminary evidence for the protective nature of attachment relationships at times that are characterized by fear learning, such as during a traumatic event. Furthermore, these findings speak to a potential risk factor for the development of PTSD where there is an absence of social support from an attachment figure. This talk will finish with a discussion of clinical implications in how we can harness the benefits of the attachment system to reverse this risk in order to facilitate growth and recovery following a traumatic event.

Keywords: Attachment; Fear learning

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Co-authors: Belinda J. Liddell, Richard Bryant

Free Paper

Self-Reported Outcome Measures for Adults with Post Traumatic Stress Disorder: Recommendations for Clinical Practice

Objective: The 2018 Phoenix Australia Clinical Practice Guidelines for Post-Traumatic Stress Disorder (PTSD) recommended that practitioners use validated, user-friendly self-report measures to support their assessments of treatment outcomes over time. However, there are many different outcome measures for PTSD and selecting which outcome measure is best suited can be difficult. While the clinical practice guidelines provide a list of the most commonly used measures, there are currently no recommendations for selecting PTSD outcome measures in clinical practice. This review sought to evaluate self-report outcome measures for adults with PTSD and produce recommendations for use by clinicians. **Method:** A systematic review methodology was used to identify relevant articles. The Cochrane Library, Medline®, EMBASE® and PsychInfo® databases were reviewed for articles published between January 2013 and 17th of January 2019 using a series of key search terms. A comprehensive list of the existing measures of PTSD symptoms was compiled and evaluated for their psychometric properties and utility for clinical practice. Inclusion criteria included peer-reviewed randomised controlled trials which involved a PTSD intervention for adults which utilised at least one self-reported outcome measure for assessing PTSD. **Results & Conclusions:** Over 300 studies met the inclusion criteria and details of their PTSD outcome measures were extracted. Each measure was then assessed for its psychometric properties and clinical utility and a score was provided for each. A breakdown of validation populations was also performed. Recommendations are made for the utilisation of these outcome measures for both research purposes and clinical practice.

Keywords: *Self-report Outcome Measures; Posttraumatic Stress Disorder*

Submitter: Ms. Holly Bowen-Salter

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Co-authors: Dr Kobie Boshoff, Dr Jocelyn Kernot, Dr Amy Baker, Dr Miriam Posselt

Free Paper

The Longitudinal ADF Study Evaluating Resilience (LASER-Resilience): Patterns and Predictors of Wellbeing in the Early Years of the Military Career

Joint Health Command, on behalf of the Australian Defence Force, has conducted the Longitudinal ADF Study Evaluating Resilience (LASER-Resilience) since 2009, in collaboration with Phoenix Australia: Centre for Posttraumatic Mental Health. LASER-Resilience is a longitudinal study of the psychological and environmental factors that contribute to or erode the resilience of ADF members. Data was collected upon enlistment or shortly after training commenced for members who enlisted between Nov 2009 and Dec 2012, with individuals followed up yearly for five time points resulting in an analytic sample of over 5,000 individuals. To date, eight reports have been produced on LASER-Resilience data. This presentation will focus upon the most recent LASER-Resilience report: "Patterns and predictors of wellbeing" which was the first report to use data from all five time points. The patterns of wellbeing that emerged from the data will be outlined in this presentation as well as the main individual and situational factors (such as social support and coping styles) that are associated these patterns. This presentation will also provide an overview of the entire LASER-Resilience research program; including the methodology of the project, challenges in conducting a longitudinal study within the Defence context and lessons learnt.

Keywords: Resilience; Wellbeing

Submitter: Dr. Lisa Dell

Affiliation: Phoenix Australia

Co-authors: Casetta, C, Fredrickson, J, Cowlshaw, S, Sadler, N, Crane, M, Lewis, V, O'Donnell, M, Terhaag, S, Cole, R, Forbes, D.

Free Paper

The Prevalence and Longitudinal Course of Trauma and PTSD in Current and Ex-Serving Australian Defence Force (ADF) Members: Co-Morbidity and Risk Factors

The Transition and Wellbeing Research Programme, conducted in 2015, reported that almost 1 in 2 ADF members who transition from Regular service have a 12-month mental disorder. Among the Transitioned ADF, anxiety disorders were most prevalent with 17.7% of Transitioned ADF members meeting 12 month criteria for PTSD. This was more than double the rates of PTSD reported in the Regular ADF in 2010 (8.3%). These results suggest that ADF members with a mental disorder such as PTSD have a greater probability of transitioning from military service with emerging psychological distress likely to be a significant driver of an individual's decision to discharge or be medically discharged. This presentation will provide a detailed snapshot of the prevalence, comorbidity and predictors of PTSD in the Australian military with a particular focus on service, demographic and transition related predictors as well as the role of both lifetime, deployment and cumulative trauma. Secondly it will examine the shifts in PTSD symptom status over a five year period (2010-2014) among ADF members who have transitioned out of regular 'full time' service compared to those who remain in the Regular ADF. Cumulative trauma exposure (lifetime and deployment-related) played an important role in predicting the course of mental disorder as well as differentiating ADF members who had transitioned from those who remained in service. Together, results highlight the importance of studying transitioning members in addition to Regular ADF members if the true magnitude of the risk associated with combat and trauma exposure are to be determined.

Keywords: Military; Prevalence

Submitter: Dr. Miranda Van Hooff

Affiliation: University of Adelaide

Free Paper

The Psychological Effects of Trauma for Adolescent Disaster Survivors in China and Nepal

An escalation in the number of climatic and geological hazards occurring in Asia has substantial implications for mental health in the region. Yet evidence concerning the qualitative experience of children and adolescents affected by disasters is limited. The current study aimed to investigate culturally nuanced expressions of psychological distress among adolescent disaster survivors in China and Nepal. Key informant interviews and focus group discussions were conducted with adolescents, caregivers, teachers and experts in disaster-affected districts of Yunnan Province, China (n=79), and Kathmandu Valley, Nepal (n=62). An inductive approach was used in thematic content analysis to examine themes within the data. Four domains that reflected expressions of anxiety and stress, mood difficulties, somatic complaints, and behavioral changes emerged from the data. Further, post-traumatic growth and strengthened connections between adolescents and their family were described in both settings. The findings reflect a transition towards globalized conceptualizations of distress among young people in China and Nepal, despite a continued emphasis on the importance of family and community. There is a significant need for psychological and community services that operate with sensitivity to culturally specific understandings of development and the unique capabilities of adolescents. Engaging young people in decisions regarding their own care will facilitate strengthened recovery in disaster-affected communities.

Keywords: Natural disasters; Global mental health

Submitter: Dr. Elizabeth Newnham

Affiliation: Curtin University

Co-authors: Xue Gao, Jessica Tearne, Bhushan Guragain, Feng Jiao, Lajina Ghimire, Emily Y.Y. Chan, Jennifer Leaning

Free Paper

The Relationship Between Trauma and the Emergence of PTSD Symptoms in a Combat Deployed Cohort of Current and Ex-Serving ADF Members

There is substantial evidence that military service may be associated with delayed onset of many conditions, including posttraumatic stress disorder (PTSD). This paper examines the emergence of PTSD symptoms over time in combat deployed ADF members. The study followed up a cohort prior to deployment to the Middle East Area of Operations (MEAO), again at post-deployment, then 3-5 years later. Results showed that the majority remained healthy and largely asymptomatic, although this proportion reduced over time. There were small increases in PTSD symptoms, with successive increases between pre-deployment, post-deployment, and at follow-up. The proportion with sub-syndromal symptoms nearly doubled between pre and post-deployment, and increased again at follow-up. While the proportion with probable PTSD was very low at all three time points, this showed the same pattern of increase over time. In further analyses, the strongest predictors of elevated PTSD symptoms at follow-up were found to be lifetime traumatic events and number of types of traumatic deployment exposures during their career. Importantly, there appeared to be a dose-response association between deployment trauma and subsequent PTSD symptoms, with a threshold at which the effects of exposure began to emerge. Importantly, factors identified as markers of risk for mental disorder more generally within the broader Transitioned ADF population appear to be somewhat magnified in this cohort: there is a preponderance of younger males of lower to middle rank, with relatively high levels of deployment exposure, and reasonably low years of service. Findings observed at a population level in the Transitioned ADF suggest that this is a group at particular risk of increasing rates of disorder following transition.

Keywords: Combat; Trauma

Submitter: Dr. Ellie Lawrence-Wood

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Free Paper

The SIX Cs Model: Immediate Psychological First Aid

Psychosocial responses to traumatic events have received growing attention in recent years. Unlike routine life, emergency situations are usually unexpected. First response in these situations is of utmost importance: immediate, focused and efficient interventions are beneficial for the reduction of acute stress reactions (ASR) and a return to effective functioning as well as possible reduction of the risk for PTSD. The SIX Cs model is a new psychological first aid approach aimed to shift almost immediately person with ASR into effective functionable helper (Farchi et al, 2018). The model addresses the need to standardize the immediate interventions during ASR and to accessible this knowledge & skills for first responders, professionals and nonprofessional community. The SIX Cs model is based on four theoretical and empirically concepts: (1) Hardiness, (2) Sense of Coherence, (3) Self-Efficacy, and (4) on the Neurological aspects focusing on the interaction between the Amygdala and the prefrontal cortex during stressful events. The simple guidelines of the model all start with the letter "C": Cognitive-Communication, Challenge, Control, Commitment, Continuity. Preliminary results on the effectiveness of the SIX C's model in terms of increasing resiliency, reducing anxiety and improving perceived self-efficacy will be presented. To date, this approach has been recognized by the Israeli Ministry of Health as the Israeli national model for psychological first aid. This model has also been adopted and implemented by the Israeli ministry of education, Israeli Defense Force, Fire fighters and more. This session will demonstrate the theory, practice and the wide implementations of the model.

Keywords: Psychological first aid; Resilience

Submitter: Dr. Moshe Farchi

Affiliation: Tel-Hai College

Posters

Poster

A Preliminary Study on Differences in Journalists' Professional Groups and Posttraumatic Growth

This novel research examined characteristic group differences of journalist's subgroups (freelancers and staff, camera operators, broadcast, print, editors, trauma educated and non-educated, war reporters and domestic reporters), trauma exposure, posttraumatic growth (PTG) total and PTG domains. Using Tedeschi and Calhoun's model of PTG the study investigated trauma exposed media professionals. The study purpose was to gain deeper understanding of overall PTG, its sub domains and specific journalist populations by examining between group interactions. Using one-way ANOVA's and independent sample t-tests the study established that journalists as a total cohort and as war reporting, trauma-educated and freelance subgroups experience levels of work-related PTG. These groups, along with those working as camera operators also experienced specific domains of PTG. Further, Using Bentler and Chou's (1987) rule of thumb for Structural Equation Modelling (SEM) (5 participants per 1 parameter {arrow} being tested) the research examined the relationship between PTG, PTSD, work trauma severity (exposure), personal trauma history, peritraumatic response, and gender. The results found that PTG was directly related to intensity of exposure and indirectly to personal trauma history through peritraumatic distress, but not related to PTSD. Male journalists had significantly higher rates of both personal trauma history and work-related exposure intensity. Studies on journalists and trauma are notoriously small in sample size. As such the study's (N= 115) results must be read with caution, including the characteristic subgroups. Nonetheless, this study's preliminary findings serve as a foundation for future research on journalists, PTG and trauma exposure.

Keywords: journalists; posttraumatic growth

Submitter: Dr. Cait McMahon

Affiliation: DART Centre Asia Pacific

Poster

***Assessment of a Phase-Based Approach for the Treatment of Complex PTSD in Women:
A Pilot Study***

The treatment of complex posttraumatic stress disorder (PTSD) is a growing area of interest in both the clinical and research fields of psychology and is a topic under much debate. A survey of trauma experts reported endorsement of phase based treatment as the most appropriate approach to therapy (Herman, 1992; Cloitre et al., 2011). However, this endorsement is based on little evidence and this approach has been criticised (de Jongh et al., 2016; Bongaerts, Van Minnen & de Jongh, 2017; Wangemans, Van Minnen, Sleijpen & de Jongh, 2018). The current study aims to contribute to the growing body of research by looking at the feasibility, effectiveness and the client experience in a phase based approach to treat complex PTSD symptoms. Participants were women who attended the Trauma Recovery Program, a two phase treatment approach comprised of group psychoeducation, safety and stabilisation and individual trauma memory processing therapy. After participating in the treatment, the clients were invited to complete semi-structured interviews at three time points to reflect on their experience in the program. Participants were 6 women, experiencing complex PTSD symptoms. The transcripts were analysed using interpretative phenomenological analysis. The preliminary results suggest that the Trauma Recovery Program is a well-received, acceptable and effective approach for the treatment of complex PTSD symptoms. It is predicted that the results from this pilot study may help inform the debate around best treatment approaches for complex PTSD and provide initial support for future research on this program.

Keywords: Complex posttraumatic stress disorder; Phase based treatment

Submitter: Ms. Kathleen de Boer

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Poster

Cross-Cultural Examination of Resilience: Perspectives from Australia and Singapore

Current theory emphasises social influences such as culture as playing an integral part in influencing resilience, however little is known on the specific cultural aspects that are linked to resilience. To further understand the role of social and cultural factors on resilience cross-culturally, the current study utilised an online survey to examine resilience and associated socio-cultural factors within 333 adults from Australia (n=203) and Singapore (n=128). The two samples (Mage = 32.03, SDage = 11.24, age range = 17-74 yrs; 87% F) completed measures of cultural orientation (individualism and collectivism), emotional expressivity (positive and negative expressivity, and impulse strength), and resilience. Results demonstrated that contrary to expectation, overall resilience did not differ significantly between the samples. Collectivism was shown to be positively associated with resilience across both samples, and surprisingly both Singaporeans and Australians reported dominant collectivist orientations. Contrary to the hypothesis, there was no significant difference between the emotional expressivity of Australians and Singaporeans, however positive expressivity was shown to be positively associated with resilience, and impulse strength was shown to be negatively associated with resilience as hypothesised. Limitations of the research included issues observed in the applicability of the cultural orientation measure, and the lack of a representative sample. The results nevertheless signify that the cultural factors of collectivism and emotional expressivity appear pertinent to our understanding of resilience, and underscore the importance of considering sociocultural factors within current resilience research.

Keywords: Culture; Resilience

Submitter: Dr. Charini Gunaratne

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Co-authors: Belinda Cabanes

Poster

How Daily Activities Influence Health and Adjustment to Civilian Life Following Completion of Military Service: Findings from the Australian Military Transition Study

The transition from military service to civilian life is reported to be difficult or extremely difficult for at least one in four service members. The experience of psychological trauma before, during, or after service is particularly critical in determining transition trajectories.

During service, sources of psychological trauma can include interpersonal violence, exposure to life threatening situations, and the burden of participating in actions that result in the death or injury of others. Service-related trauma has been linked with various adverse health and social outcomes, including physical and mental illness, homelessness, family breakdown, and employment difficulties.

Preliminary research indicates that activities such as working, studying, sailing, writing, and art can be therapeutic during the transition process, enhancing sense of purpose and meaning in life. Activities completed as part of everyday life may also strengthen personal identity, and enable former service members to work through service-related traumatic events.

The Australian Military Transition Study was conducted to further explore relationships between adjustment to civilian life, physical and mental health, exposure to service-related traumatic events, and participation in daily activities among former members of the Australian Defence Force who were discharged on or after January 1, 2004.

Findings highlight the activity patterns and preferences of former service members, and the importance of activities including work, volunteerism, art, gardening, and physical exercise for health and well-being and trauma recovery during the transition process.

Keywords: Meaningful activity; Recovery from service-related trauma

Submitter: Mrs. Kylie Carra

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Poster

Improving The Mental Wellbeing Of Arabic Speaking Refugees: Piloting A Mental Health Promotion Program.

It is well established that refugee populations have higher rates of trauma-related mental health conditions. Arabic speaking refugees have high levels of Posttraumatic Stress Disorder (PTSD) and depression compared to community population samples in Western Countries. Help-seeking is low and there are differing cultural perceptions of mental health conditions and their treatment in this population. This study has used comprehensive background research to develop, present and evaluate a culturally sensitive mental health promotion program for Arabic speaking refugees.

A total of 33 participants (14 (42.4%) male, 19 (57.6%) female) were recruited from an adult migrant English program in South Western Sydney. Participants attended four education sessions presented in Arabic and completed pre, post and three month follow up surveys. The survey included questions following a vignette describing a person with PTSD to assess identification, stigma and help-seeking behaviours, and a Kessler Psychological Distress Scale (K10).

Preliminary data analysis indicates improvement in correct identification of a mental health condition, and positive improvement in attitudes towards mental health problems. An improvement in attitudes towards personal stigma was seen in 60.9% (14/23) and in social distance in 65.5% (19/29) of participants. Program evaluation indicated participants felt they learnt new, relevant information and the program would be useful in the future.

This pilot study is paving the way for necessary strategies to be put in place optimising the mental health of Arabic speaking refugees. The results of this study will inform further development and replication of the program with larger sample sizes.

Keywords: Arabic speaking refugees; Mental health literacy

Submitter: Mrs. Molly McKenzie

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Co-authors: Shameran Slewa-Younan, Molly McKenzie, Mitchell Smith, Yaser Mohammad, Marlin Babakhan, Amin Gadalla, Maria Gabriela Uribe Guajardo, Elizabeth Millen, Gabriela Martinez, Henry Lim, Jonathon Mond, Russell Thomson

Poster

Intimate Partner Violence and Risk of Repeat Suicide Attempt: Presentation of Baseline Results from a Prospective Cohort Study in Australian Emergency Departments

Background: Suicide is the leading cause of death in Australians aged 15-44 years. Effective suicide prevention involves the correct and timely identification of individuals at high risk for suicidality following an emergency department (ED) presentation. Recent research in the ED has linked Intimate Partner Violence (IPV) victimization with repeat suicide attempt/s at six-months post-discharge. This study aims to investigate the prevalence and severity of IPV among individuals with a recent presentation to the ED for a suicidal crisis.

Methods: This phase of research reports the baseline results of a prospective mixed methods cohort study. Simple random sampling – online/in-person in EDs – was used to invite individuals with a recent suicide-related ED presentation to take part in a quantitative survey (option for 12-month follow-up).

Results: In total, 787 participants (631 females; 125 males; 31 non-binary) with a mean age of 30 years (SD=12.58) took part in the baseline phase. Of these, 500 participants (female=412; male=62; non-binary=26) screened positively for potential IPV. Only 126 participants completed the Composite Abuse Scale (Revised) – Short Form resulting in a mean of 14.53 (SD=20.97; range=0-75). Subscale analyses revealed that lifetime experiences of physical (30%), psychological (43%) and sexual abuse (28%) by an intimate partner were prevalent among the sample.

Conclusions: The study findings contribute to the IPV-fatality evidence base and have direct applications in burden of disease analyses, used to identify national health priorities. Results may facilitate renewed screening practices and the development of appropriate and timely intervention strategies.

Keywords: Intimate partner violence; uicide

Submitter: Ms. Victoria Rasmussen

Affiliation: University of New South Wales

Co-authors: Dr Michelle Tye, Prof Zachary Steel, Dr Joanne Spangaro

Poster

Memory Suppression in PTSD is Associated with Dysfunctional Parahippocampal-Inferior Frontal Gyrus Coupling

Difficulties in the ability to regulate the processing of negative emotional content have consistently been documented in post-traumatic stress disorder (PTSD). Voluntary suppression of the episodic memory retrieval process triggered by cues is known to involve the recruitment of prefrontal regions, which in turn engage circuitry in the amygdala, the hippocampus, and the parahippocampus. To date, there have been few studies exploring the neural substrates of memory suppression among individuals with PTSD. Here, we examined memory suppression associated with PTSD by means of the Think/No-Think (TNT) paradigm during functional magnetic resonance imaging (fMRI). Our sample was made up of three groups: adults meeting diagnostic criteria for PTSD ($n = 16$), trauma-exposed adults without PTSD (TC; $n = 13$), and trauma-free healthy controls (HC; $n = 14$). Neuroimaging analysis revealed a main effect of memory retrieval during Think vs No-Think trials with greater activity being found in the superior parietal lobule, the ventral posterior cingulate, the lateral supplementary motor area, the superior temporal gyrus and the hippocampus across groups. ANOVA comparisons between groups identified significantly reduced activation in the parahippocampal gyrus during No-Think trials in participants with PTSD in comparison to HC (whole-brain, $p_{FWE} < 0.05$). Psychophysiological interactions (PPI) analysis using the parahippocampal peak as a region of interest (ROI) identified increased functional coupling between the inferior frontal gyrus and the parahippocampus in the PTSD group compared to HC (whole-brain, $p_{FWE} < 0.05$). As a whole, our findings lend support to neural models of PTSD associating alterations in memory suppression with dysfunctional parahippocampal-IFG coupling.

Keywords: Posttraumatic stress disorder; fMRI

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Poster

Remembering Repeated Incidents of Abuse: An Experimental Investigation Comparing Memory for Repeated Stressful Events and a Single Stressful Event.

Domestic violence is a world-wide social issue causing significant physical and psychological harm to victims. Victims of domestic violence typically experience ongoing and multiple incidents of abuse by a current or former partner. Within the forensic context, a victim's statement of abuse is often used as critical evidence and can significantly influence criminal justice outcomes (such as successful prosecution). Consequently, a victim's memory of abuse plays an important role in gathering accurate and complete information about each incident of abuse. However, while memory for repeated events has been extensively researched in child populations, very little research has addressed this type of memory in adults. Therefore, this poster will present an experimental study that sought to examine the nature of adult memory for repeated stressful events. Specifically, this study compared memory for repeated stressful event to a single stressful event. In this study, participants experienced either one or four relationship scenarios that depicted a domestic violence encounter. After experiencing the scenario(s), participants returned a week later and completed a memory test about one of the scenarios. Preliminary findings indicate that memory for repeated stressful events is poorer than a single stressful event. Findings will be discussed in light of implications relating to domestic violence in the forensic context.

Keywords: Stress and memory; domestic violence

Submitter: Miss Natali Dilevski

Affiliation: University of Sydney

Co-authors: Dr. Helen M. Paterson, Dr Celine van Golde

Poster

Silence to Resilience through MANTRA

The intense dread many individuals seeking asylum experience when they are expected to think and talk about their past may be directly linked to the extreme forms of torture and sexual violence they have endured. Specific forms of torture, especially details of sexual violence are seldom mentioned by men even in the safety of a therapeutic relationship. It is likely that desperate acts, such as self-harm are considered by survivors in efforts to cope with the humiliation, intense pain and the sequelae of torture and sexual violence.

Many individuals seeking asylum may not be ready or able to process their horrific traumas even when threatened with forced repatriation. Therapeutic approaches have generally relied on a combination of strategies to sustain and facilitate improvements in functioning. However, it has been observed that symptoms could persist, and an inability to form coherent narratives and integrate the past is a potential barrier to healing.

The authors therefore adopted a combination of group and individual treatment approaches to assist survivors to form a meaningful narrative of their past, by integrating multiple strategies, incorporating principles of NET (Narrative Exposure Therapy), cultural narratives and practices such as pranayama and mantras in a culturally sensitive manner.

Evaluation indicates that these interventions contradicted the long standing belief that individuals seeking asylum may not be ready or willing to process their difficult past prior to the resolution of their claims for protection. As survivors began to integrate and construct a narrative of their past traumas the intensity of their symptoms of anxiety, avoidance and arousal decreased, and survivors became increasingly confident to share their traumas.

Keywords: Male sexual torture; Group therapy

Submitter: Mrs. Pearl Fernandes

Affiliation: Service for the Treatment And Rehabilitation of Torture and Trauma Survivors (STARTTS)

Co-authors: Yvette Aiello

Poster

The Effect of Past Experiences on Thoughts About the Future Amongst Farsi and Dari Speaking Immigrants Refugees and Asylum Seekers

Research has demonstrated that the mechanisms involved in recalling autobiographical memories overlap considerably with those involved in imagining the future. Individuals with PTSD show similar deficits when generating personal past and future events, which may represent a previously unexamined mechanism involved in the maintenance of PTSD symptoms. Refugees and asylum seekers may experience an array of threat-related future-oriented intrusive symptoms that appear like PTS symptoms. This poster outlines a research protocol to examine the nature of past and future-oriented traumatic intrusions and their impact on autobiographical memory among asylum seekers, immigrants and refugees with secure or insecure residency status. Specifically the study aims to: 1) determine if memory specificity, cognitive functioning and emotional processes associated with future and past-oriented threat manifest in similar ways across symptom presentations 2) determine if symptom presentation is associated with emotional response to the ideographic provocation task and the frequency, intensity, emotional valence and time orientation of intrusions over a 5-day period. We will recruit 60 Farsi / Dari speaking adult males and females who arrived in Australia since 2010 with low (n=20) and high PTSD (n=20) symptoms and with high future-oriented intrusions (n=20). All participants will complete a life narratives autobiographical interview task regarding past- and future-focused memories a measure of executive function and assessment of emotional valance. This will be combined with an ideographic provocation procedure to examine the frequency, nature and intensity of any mental intrusions and responses to these intrusions associated with past and future-oriented memories and imaginings.

Keywords: refugees and asylum seekers; past experiences and future thought

Submitter: Mr. Changiz Iranpour

Affiliation: University of NSW

Co-authors: Ruth Wells, David Berle, Zachary Steel

Poster

The Effects of Creativity on Neuroplasticity and Cognition in Post-Traumatic Stress Disorder (PTSD)

This review examines the current literature relating to the effects of creativity on neuroplasticity and cognition, and places it in the context of psychological trauma and post-traumatic stress disorder (PTSD). People who are diagnosed with (PTSD) have been shown to be more susceptible to neurodegenerative disease, specifically Alzheimer's disease, and exhibit cognitive impairments in attention, memory, speed of information processing and executive function. Additionally, MRI studies show evidence of decreased neural connectivity and white-matter in the frontal lobes and corpus collosum of individuals diagnosed with PTSD. Conversely, people who score highly on creativity indexes have been shown to have increased interhemispheric neural connectivity and abundant white-matter, particularly in brain regions that are associated with neurodegeneration in PTSD. This review forms part of a study which aims to investigate the use of cognitive creativity training, which has been shown to create neuroplastic changes in the brain and cognitive improvements, as a treatment for improving cognition in PTSD. In addition to cultivating better overall function in daily living, improving cognitive function in people with PTSD could have broader clinical implications for enhanced response to traditional psychological therapies currently used for treatment.

Keywords: creativity; trauma

Submitter: Miss Tanya Duckworth

Affiliation: University of Adelaide

Poster

The Impact of the Australian Marriage Law Postal Survey: Distress and Resilience

The 2017 Australian Marriage Law Postal Survey (AMLPS) resulted in considerable social and political division amongst Australians on the issue of same-sex marriage (SSM). Media reports described significant psychological distress experienced by voters during the survey period. However, no empirical research existed to corroborate such reports. The present study aimed to bridge this gap, by examining both previous (during the survey period) and current levels of distress and resilience in voters six-months post-survey. The sample comprised 1034 adult voters ($M_{age}=37.13$, $SD_{age}=15.42$, age range 18-87 yrs, 62% F) who completed online measures examining distress experienced during the AMLPS, current distress, resilience, attitudes towards SSM, social and economic conservatism, emotional experiences during the AMLPS, voting behaviour (yes, no, did not vote), and demographics such as sexual orientation, religion, and political affiliation. Results revealed that as hypothesised, sexual minorities experienced increased levels of distress during the survey, reported lower levels of resilience, and experienced higher levels of current distress compared to heterosexuals. Females, non-religious persons, and sexual minorities were more likely to vote yes to SSM compared to their counterparts. 'No' voters reported higher levels of resilience, yet experienced higher levels of distress compared to 'yes' voters following the AMLPS. Analysis of qualitative responses further indicated anger was a prominent emotion present in participant responses. While limitations include the retrospective nature of the survey, and limited representativeness of the sample, the survey provides a valuable understanding of the negative impact of the AMLPS on the community, vital for informing future policy.

Keywords: Same-sex marriage; Distress

Submitter: Dr. Charini Gunaratne

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Co-authors: Monique Shipp

Poster

The Inter-rater Consistency of Clinician Ratings of Post-Traumatic Stress Disorder (PTSD) Therapy Content

Effective communication between clinicians is essential for the success of mental health interventions in multidisciplinary contexts. This relies on a shared understanding of concepts, diagnoses and treatments. A major assumption of clinicians when discussing psychological treatments with each other is that both parties have a shared understanding of the theory, rationale and application of the respective technique. We aimed to determine to what extent there is inter-rater agreement between clinicians in describing the content of group therapy sessions. Pairs of clinicians, drawn from a large multidisciplinary team (13), were asked to provide ratings of the therapeutic content and emphasis of N = 154 group therapy sessions conducted during an intensive residential treatment program for post-traumatic stress disorder (PTSD). There was a moderate level of agreement between clinicians on therapeutic content (Cohen's Kappa 0.4 to 0.6), suggesting that clinicians have a broad shared understanding of therapeutic content, but that there are also frequent discordant understandings. The implications of these findings on multidisciplinary team communication, patient care and clinical handovers are discussed and directions for further research are outlined.

Keywords: Multidisciplinary team communication; PTSD treatment

Submitter: Mr. Manoj Thogesan

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Co-authors: David Berle, Dominic Hilbrink, Natasha Garwood, Rachaek Kiely, Clare Russell-Williams, Zachary Steel

Poster

The Relationship Between Childhood Trauma, the Risk of Cognitive Decline and Various Late-Life Health Outcomes

It has been shown that childhood trauma can lead to a higher risk in the development of dementia (Radford et al., 2017, Livingston et al., 2017). In such studies, childhood trauma was assessed using the Childhood Trauma Questionnaire (CTQ) a validated retrospective self-report measure, comprised of 28 items that assessed occurrence and frequency of experiences within five different sub-domains of childhood trauma: Physical Abuse, Sexual Abuse, Emotional Abuse, Physical Neglect and Emotional Neglect.

In the present study, we assessed the predictive value of the CQT as a measure for cognitive decline and/or clinical conversion from normal to mild cognitive impairment (MCI) and/or dementia over an 8-year period, from the Sydney Memory and Ageing Study. In addition to the CTQ, participants were administered a locally developed questionnaire that asked about early life events pertaining to traumatic events. The extremity of questions about traumatic early-life events ranged from 'were you a premature baby?', to more questions such as 'were you ever in a concentration/refugee camp?'. The participants were comprised of non-demented community-dwelling individuals [N=1037 (male : female = 44.8% : 55.2%), M_age = 78.8 years] whom were recruited from two areas of Sydney, following a random approach to 8914 individuals on the electoral roll.

We considered the potential long-term mental, social and physical health outcomes of five different sub categories of childhood trauma as well as the relationship between early childhood trauma and cognitive decline and/or clinical conversion in later life. Preliminary analyses suggest that early traumatic experiences are associated with more rapid late-life cognitive decline, significant differences in the effects of different sub-domains of trauma on late-life cognitive abilities and potential gender differences. We discuss our results in the context of using the CTQ and other early-life trauma questionnaires as effective tools for determining those who might be at higher risk for developing dementia and potential targeted intervention strategies based on these results. Additionally, we discuss how these data add to the limited literature on the association between childhood abuse and cognitive decline in later life.

Keywords: Trauma Sub-domains; Mild Cognitive Impairment / Dementia

Submitter: Ms. Rhiagh-Kate Cleary

Affiliation: Centre for Healthy Brain Ageing (CHeBA)

Co-authors: Brian Draper, Katya Numbers, Nicole Kochan, Rhiagh Cleary

Poster

War Veterans and Makeshift Group Therapy in Post-Soviet Society

This paper will discuss results from a study conducted on intergenerational transmission of war-related trauma from parents to children, focusing on returned Soviet veterans of the Soviet-Afghan war (1979-89). Though the study's focus is intergenerational transmission of trauma, a thematic analysis of face-to-face interviews with veterans showed a prevalence of group meetings created by these veterans, which mimic group therapy. This presentation will specifically focus on the makeshift therapy groups created by veterans as a source of comradeship, communal support, and remembrance. Interviews highlighted that these makeshift therapy groups were valued by veterans as a space to find resonance and meaning in relation to their traumatic experiences. Run on a regular basis, primarily coinciding with dates of memorials and remembrance, these spaces are not seen as group therapy by veterans, despite their setup as spaces of sharing and listening mimicking that of group therapy. These spaces are populated by a community generally more averse to mental-health treatment or the discussion of mental health, and as no one with therapeutic training facilitates these sessions the spaces function as an outlet to revisit trauma rather than to discuss issues the veterans continue to confront in their daily lives. This presentation will discuss 1. the formation of these groups and what these spaces look like; 2. the issues of their functioning as a space to revisit trauma without discussing issues the veterans confront in their daily lives; 3. the ongoing impact of the disappearance of individual trauma in the former Soviet Union (pushing society's focus on the collective struggle of the State) on post-Soviet society and the formation of these makeshift therapy groups; 4. and what researchers can learn from these spaces to work toward a collective healing framework in post-Soviet society.

Keywords: Veteran mental health; Mental health in post-Soviet society

Submitter: Dr. Anna Denejkina

Affiliation: University of Technology Sydney

Symposia

Symposium

Contemporary Findings Using Diverse Methods in Posttraumatic Growth Research

Posttraumatic growth (PTG) has been systematically researched for more than two decades with thousands of studies being conducted around the world. Much of the research to date has used cross-sectional surveys and/or cross-sectional qualitative methods. Such methods have, and continue to, enrich understanding about what PTG is, its antecedents, correlates and predictors, as well as shed light on effective therapeutic interventions aimed at supporting positive post-trauma outcomes. In this symposium we present the latest in PTG research conducted in Australia, which showcases the diversity of methodological approaches being pioneered here. Included in this symposium is the first epigenetic study of PTG, the first study using eye-tracking technology, and a study using EEG. These studies examine PTG but contextualize this by also examining resilience and symptoms of PTSD. The symposium also presents cross-sectional PTG model testing research and a longitudinal qualitative research program investigating the experiences of forced migrants from Iran. Very little research exists that recognizes pregnancy loss as a potential trauma and in this symposium we share the narratives gathered from over 400 women who have experienced miscarriage and stillbirth.

Keywords: Posttraumatic growth; Well-being

Submitter: Professor Jane Shakespeare-Finch

Affiliation: Queensland University of Technology

Co-authors: Daniel Krosch, Georgina David, Olivia Miller, Sara Parsafar, Jonathan Robinson, Nick Roots, Patrick Johnston, Divya Mehta, Dagmar Bruenig, Zoe Hazelwood.

Symposium

Current Research into Moral Injury in Australia

The concept of moral injury (MI) is still in its infancy but growing rapidly in popular usage, ahead of adequate research. This symposium will present findings of research into the psychological and spiritual dimensions of moral injury in a range of trauma-affected populations and consider treatment implications.

Paper 1: Generalized Estimating Equations were used to examine the relationship between pre-treatment perceived injustice and betrayal and the course of fear, anger, guilt and shame over a 4-week PTSD program for veterans, military personnel and first responders (n=41 across 51 assessment occasions). Perceived injustice was a significant predictor of increased anger but not fear, shame or guilt.

Paper 2: Latent profile analysis was used to identify three MI appraisal profiles amongst 221 refugees and asylum seekers – MI-Other, MI-Other+Self and no-MI. The profiles were associated with different trauma exposure and living difficulties as well as different mental health outcomes. In particular, MI-Other+Self was associated with greater anger and suicidal ideation.

Paper 3: The Modified Military Moral Injury Questionnaire (M3IQ) was administered to 187 deployed RAAF personnel to gather evidence on exposure to and outcome of potentially morally injurious events. A “Pastoral Narrative Disclosure” restorative model for chaplains helping military personnel suffering moral injury is proposed.

Papers 4 and 5: An international consortium is developing a gold standard measure of MI through three phases: (i) Creation of the initial measure through bottom up qualitative interviews with veterans, and care providers (chaplains and mental health); (ii) Scale refinement and reliability testing; (iii) Construct validity. The methodology and preliminary findings will be presented.

Keywords: Moral injury;

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Symposium

Mechanisms Underlying PTSD: Biological Influences on Fear Extinction, Emotional Memory and Neural Responses

This symposium presents novel data examining biological influences on core mechanisms underlying PTSD, including fear extinction, emotional memory consolidation, intrusive memories, and neural processing. Research will be presented from a range of perspectives examining the impact of brain-neurotrophic and growth factors, and steroid hormones on emotional memory processes, fear extinction learning and recall, and results from a meta-analysis examining the impact of trauma and PTSD on event-related potentials across a range of paradigms will be presented. This series of experimental data provide novel insights into core mechanisms underlying PTSD, and may shed light on future treatment or prevention methods.

Speakers:

1. Dharani Keyan, University of New South Wales: The Impact of Aerobic Exercise on Fear Extinction REcall
2. Luke Ney: University of Tasmania: The Role of Progesterone in Intrusive Memories and Fear Extinction Recall: The Impact of Stress
3. Emma Nicholson, University of Melbourne: The Impact of Brain Derived Neurotrophic Factor on Emotional Memories in PTSD
4. Ken Chia-Ming-Hsu, University of Tasmania: The Interaction of Sex and Stress Hormones on Intrusive Memories in PTSD
5. Lisa Miller: University of Melbourne: A meta-analysis of the effect of PTSD and Trauma Exposure on Event-Related Potentials

Keywords: Emotional memory; Fear processing and extinction

Submitter: Professor Kim Felmingham

Affiliation: University of Melbourne

Co-authors: Dharani Keyan, Luke Ney, Emma Nicholson, Ken Chia Ming Hsu, Lisa Miller

Symposium

Pre-settlement Factors, Trauma, and the Family Context in Post-Migration Mental Health Among Refugees

Diverse experiences before resettlement may account for variable mental health among refugees. In this symposium, we examine the influence of two important contexts in refugee mental health; pre-settlement factors and the role of family.

Study 1 used longitudinal data from the Building a New Life in Australia study (BNLA). Path analyses suggest that among 1647 refugees resettled in Australia, having lived in a refugee camp was associated with lower PTSD, but more living difficulties, compared to those who never lived in a camp. Study 2 found that among 1083 refugees, family separation was associated with higher levels of PTSD, depression, and post-migration stressors. Path analyses revealed collectivistic self-identity was linked to poorer mental health via social stressors in the separated group, and via economic stressors among refugees living with family.

Family context was further explored using path analyses with BNLA data in Study 3. It found that in addition to their own trauma exposure, posttraumatic stress (PTS) among young refugees was directly influenced by their caregivers' trauma and PTS. Finally, using intergenerational BNLA data, Study 4 explored the impact of trauma and stressors on PTSD and grief, as well as on parenting and subsequent childhood mental health.

Together, these findings highlight the importance of trauma, refugee camp experience, and family context on post-migration wellbeing.

1. Shraddha Kashyap: Pre-settlement context mediates post-migration wellbeing among refugees
2. Belinda Liddell: Mechanisms underlying the impact of family separation on refugee mental health
3. Winnie Lau: Impacts of parental posttraumatic stress on child posttraumatic stress among refugees
4. Richard Bryant: Factors associated with parenting and childhood mental health among refugees

Keywords: Asylum seekers/refugees; Post-migration mental health

Submitter: Dr. Shraddha Kashyap

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Symposium

Research Advancements in the Field of Refugee Mental Health

Individuals from refugee backgrounds are typically exposed to multiple traumatic events, as well as significant post-migration challenges, which have a detrimental impact on mental health. This symposium presents four novel studies examining key factors likely to impact on refugee mental health. The first study demonstrated that insecure visa status was associated with greater PTSD, depression, suicidality, and better social engagement in a cohort of 1,085 refugees living in Australia. The second study used latent class analysis (LCA) to identify five unique profiles of post-migration stressors amongst resettled refugees with differential associations with trauma exposure and mental health. The third study used LCA to identify distinct classes of habitual emotion regulation patterns, each with unique associations to gender, trauma exposure and PTSD symptoms. The final study used structural equation modelling to investigate moral injury appraisals related to violations by others or by oneself, in a sample of refugees. Findings indicated that moral injury appraisals were differentially associated with PTSD symptom clusters. These findings have substantial implications for identifying individuals at risk of psychological disorders and for developing efficacious treatments tailored to these vulnerable individuals.

1. Angela Nickerson: The mental health impact of visa insecurity on refugees in Australia.
2. Yulisha Byrow: Post-migration living difficulties in refugees: A latent class analysis.
3. Philippa Specker: Emotion regulation in refugees: A latent class analysis.
4. Joel Hoffman: Moral injury in traumatised refugees: a structural equation model.

Keywords: Refugee mental health; Traumatic stress in refugees

Submitter: Dr. Yulisha Byrow

Affiliation: University of New South Wales

Co-authors: Angela Nickerson, Philippa Specker, Joel Hoffman

Symposium

Risk Factors and Interventions that Influence Physical and Psychological Recovery Following Trauma Exposure During Early Childhood Through Adolescence

At least one in four children will experience one or more potentially traumatic events by adolescence. There is now a strong clinical and empirical evidence base that shows children and their parents are at risk for developing a number of deleterious acute and long-term physical and psychosocial outcomes following trauma. It is therefore important to identify the risk factors associated with adverse physical and psychological outcomes and to develop and evaluate early interventions to promote resilience and recovery. The aim of this symposium is to present the latest advancements in these areas to help progress our understanding of trauma and recovery during childhood. Our first speaker, Dr Erin Brown, will present research that investigated the association between parental acute posttraumatic stress symptoms (PTSS) and their young child's wound healing following a burn. These findings will inform future interventions. Next, Dr Belinda Dow will present research that has identified important medical, affective and cognitive predictors of PTSS 6 months post Pediatric Intensive Care Unit admission and the implications these have for clinical intervention. Our third presenter, Jo Butler, will present the key findings from a systematic review of parent interventions in the child injury context and will outline the development of a new intervention for parents to support their child after a burn injury. Following this, Dr Andrea Baldwin will discuss the development and evaluation of Birdie's Tree, a resource to support young children and families following a natural disaster. Finally, Dr Alexandra De Young will present the results from a randomized control trial (conducted in Australia and Switzerland) that evaluated the efficacy of a 2-session early intervention at preventing PTSS in young injured children. In sum, this symposium will present cutting-edge research that will advance our understanding of risk factors and recovery following trauma exposure during childhood.

Presentation 1, Dr Erin Brown: The relationship between parental posttraumatic stress and child wound healing

Presentation 2, Dr Belinda Dow: Predictors of Children's Posttraumatic Stress Reactions Six Months after Paediatric Intensive Care Unit Admission

Presentation 3, Jo Butler: Interventions for Parents Following Their Child's Injury: A Systematic Review and Intervention Design

Presentation 4, Dr Andrea Baldwin: Birdie's Tree: Helping young children, parents and families weather the weather

Presentation 5, Dr Alexandra De Young: Preventing posttraumatic stress in young children: Results from a randomised controlled trial conducted in Australia and Switzerland.

Keywords: Children; Recovery

Submitter: Dr. Alexandra De Young

Affiliation: Univeristy of Queensland

Co-authors: Erin Brown, Belinda Dow, Jo Butler, Andrea Baldwin

Symposium

The Role of Physical Activity in Promoting Resilience and Recovery in Populations Exposed to Continuous Traumatic Stress

Populations exposed to continuous traumatic stress live in ongoing situations of threat which can undermine resilience and recovery. Physical activity (PA) can prevent and treat a range of physical and mental disorders including PTSD. We explore mechanisms of change, barriers and facilitators for implementation in populations exposed to continuous traumatic stress and provide a framework for designing culturally tailored, trauma informed PA interventions.

1. Going multidisciplinary on multimorbidity: Simon Rosenbaum: Principles of effective design and delivery of PA interventions for trauma exposed populations as described in an upcoming Lancet series on multidisciplinary care.
2. PA and mental health among Farsi and Dari speaking refugees and asylum seekers in Sydney: Reza Rostami: Findings from a prospective longitudinal study of a representative sample (N=411) of Farsi and Dari speaking refugees and asylum seekers demonstrating the impact of insecure residency on trajectories of change in PA and mental health symptoms.
3. Rapid Ecological Assessment of Community Readiness to Engage in PA in the Rohingya Refugee Community in Bangladesh: Ruth Wells: findings of a participatory qualitative study in a humanitarian crisis to inform the design of culturally appropriate PA interventions.
4. A co-designed PA intervention delivered online for first responders and their partners: Grace McKeon: Data from a pilot PA promotion intervention targeting sedentary emergency service workers via Facebook.
5. Nothing about us, without us: How can we best help people exposed to trauma to engage in meaningful PA?: Ronnie Moseley and Ross Beckley: Important strategies for design and delivery of PA interventions from a lived experience perspective.

Keywords: Ecological; Physical Activity

Submitter: Ms. Ruth Wells

Affiliation: UNSW

Co-authors: Simon Rosenbaum, Reza Rostami, Grace McKeon, Ronnie Moseley, Ross Beckley