Preliminary Program

Trauma and Public Health:
Innovative Technology and Knowledge Dissemination

November 10 –12, 2016
Pre-Meeting Institutes, November 9
Sheraton Dallas Hotel
Dallas, Texas USA

www.istss.org
Dear Colleagues,

Welcome to the ISTSS 32nd Annual Meeting! The theme of this year’s meeting is “Trauma and Public Health: Innovative Technology and Knowledge Dissemination.”

Trauma and trauma-related disorders are significant public health issues that require interdisciplinary approaches including epidemiology, biostatistics and health services research. Advances in assessment, treatment and prevention efforts and knowledge translation are of critical importance if we are to increase public awareness and de-stigmatize trauma-related disorders. The use of Innovative Technology is closely tied to public health strategies. Through modern technologies, media and internet usage, knowledge translation has increased and research has a greater impact on clinical practice just as practice is informing the research agenda. Innovative technologies are being used in treatment and research, and new clinical tools such as e-health and online therapy, as well as those that aid supervision, have improved the speed and quality of treatment.

In this era of exciting methodological innovations and worldwide globalization, the aims of this meeting are to integrate research, clinical practice, and public health and facilitate the transference and implementation of knowledge. This meeting will feature new and exciting developments in the field of trauma and their potential to improve existing treatment interventions and facilitate the development of new treatment interventions by recognized experts in the field from around the world.

Moreover, panels and workshops provide a lively forum for critical discussions on what we have learned so far. In addition to high-quality, scientific contributions, there will be ample opportunities to reflect on the topics that need to be addressed from a clinical point of view and the challenges in clinical practice that hamper optimal implementation of effective interventions. All in all, this meeting will invite attendees to broaden their perspectives, intensify the clinician-researcher dialogue, and promote more interdisciplinary collaborative learning.

We specifically would like to invite you to join the Wednesday evening opening ceremony featuring the panel "Responding to Terror Attacks: What are the Right Ways to Act?" where experts from different places that experienced terror attacks – Oslo, London, Paris and the USA - share their personal and scientific experiences of the immediate reactions and efforts to organize help for the survivors.

For up-to-date information, please visit www.istss.org.

We look forward to welcoming you to Dallas for an outstanding educational event.

Christian Schmahl, MD (Chair, Scientific Committee),
Paul Frewen, PhD (Co-Chair, Scientific Committee)

Joanne Davis, PhD (Chair, Organizing Committee),
Rochelle Hanson, PhD (Co-Chair, Organizing Committee)

Grete Dyb, MD, PhD (ISTSS President)
Founded in 1985, the International Society for Traumatic Stress Studies provides a forum for sharing research, clinical strategies, public policy concerns and theoretical formulations throughout the world through networking, education, training and publications. The Society is dedicated to developing knowledge and stimulating policy, program and service initiatives that seek to reduce traumatic stress and its immediate and long-term consequences. ISTSS has more than 1,700 members including mental health, social service, religious and legal professionals from 50 countries worldwide.

**Why Attend the ISTSS 32nd Annual Meeting?**

Learn about cutting-edge research and new technology in the fields of trauma and public health
- Meet the leaders in the field of trauma research
- Delve into new practices and techniques
- Connect with researchers and clinicians from around the world
- Discuss the translation of basic research into clinical interventions
- Opportunities to build your network with professionals in your field
- Earn CE and CME credits

**Who Should Attend?**
- Psychiatrists
- Psychologists
- Social workers
- Nurses
- Counselors
- Researchers
- Marriage and family therapists
- Administrators
- Victim advocates
- Journalists
- Clergy

**Diverse Background of Attendees**
- Government
- Law enforcement
- Law firms and legal aid organizations
- Military
- News organizations
- NGOs
- Nonprofit/private/public social service and health agencies
- Private clinical practice
- Religious institutions
- Research organizations
- Universities

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**Pre-Meeting Institute Abstracts Pages 26 – 32**

*Pre-Meeting Institutes require a separate registration fee.*
Schedule at a Glance (subject to change)

**Tuesday, November 8**
4:00 p.m. - 6:00 p.m.  Registration Desk Open

**Wednesday, November 9**
7:30 a.m. – 8:30 a.m.  Coffee and Tea Service
7:30 a.m. – 6:30 p.m.  Registration Desk Open
8:30 a.m. – Noon  Pre-Meeting Institutes
10:30 a.m. – 5:00 p.m.  Bookstore Open
Noon – 1:30 p.m.  Lunch on your own
1:30 p.m. – 5:00 p.m.  Pre-Meeting Institutes
3:00 p.m. – 5:00 p.m.  Exhibitor Set Up
5:15 p.m. – 6:15 p.m.  Student Attendee Orientation
6:30 p.m. – 8:00 p.m.  Keynote Opening Panel

**Evening Events to be Announced**

**Thursday, November 10**
7:30 a.m. – 8:30 a.m.  Coffee and Tea Service
7:30 a.m. – 6:00 p.m.  Registration Desk Open
7:30 a.m. – 6:00 p.m.  Exhibits Open
8:00 a.m. – 10:30 a.m.  Poster Session One Set Up
8:00 a.m. – 7:00 p.m.  Bookstore Open
8:30 a.m. – 9:50 a.m.  Keynote Address and ISTSS Awards
10:15 a.m. – 11:30 a.m.  Concurrent Session One
10:30 a.m. – 5:30 p.m.  Poster Viewing Session One
11:30 a.m. – 1:15 p.m.  Lunch on your own
11:45 a.m. – 1:00 p.m.  Special Interest Group (SIG) Meetings
1:15 p.m. – 2:30 p.m.  Concurrent Session Two
2:45 p.m. – 4:00 p.m.  Concurrent Session Three
4:15 p.m. – 5:30 p.m.  Concurrent Session Four
5:30 p.m. – 6:30 p.m.  Author Attended Poster Session One (Cash Bar)
6:30 p.m. – 8:00 p.m.  Welcome Reception with SIG Endorsed Posters

**Friday, November 11**
7:30 a.m. – 8:30 a.m.  Coffee and Tea Service
7:30 a.m. – 6:00 p.m.  Registration Desk Open
7:30 a.m. – 6:00 p.m.  Exhibits Open
8:00 a.m. – 10:30 a.m.  Poster Session Two Set Up
8:00 a.m. – 6:30 p.m.  Bookstore Open
8:30 a.m. – 9:50 a.m.  Keynote Address and ISTSS Awards
10:15 a.m. – 11:30 a.m.  Concurrent Session Five
10:30 a.m. – 5:30 p.m.  Poster Viewing Session Two
11:30 a.m. – 1:15 p.m.  Lunch on your own
11:45 a.m. – 1:30 p.m.  Student Lunch Meeting
1:15 p.m. – 2:30 p.m.  Concurrent Session Six
1:45 p.m. – 3:30 p.m.  Internship and Post-Doctoral Program Networking Fair
2:45 p.m. – 4:00 p.m.  Concurrent Session Seven
4:15 p.m. – 5:30 p.m.  Concurrent Session Eight
5:30 p.m. – 6:30 p.m.  Author Attended Poster Session Two (Cash Bar)
6:45 p.m. – 7:45 p.m.  ISTSS Business Meeting

**Saturday, November 12**
7:30 a.m. – 8:30 a.m.  Coffee and Tea Service
7:30 a.m. – 4:30 p.m.  Registration Desk Open
7:30 a.m. – Noon  Exhibits Open
8:00 a.m. – 5:30 p.m.  Bookstore Open
8:30 a.m. – 9:50 a.m.  Keynote Address and ISTSS Awards
10:15 a.m. – 11:30 a.m.  Concurrent Session Nine
11:30 a.m. – 1:15 p.m.  Lunch on your own
11:45 a.m. – 1:00 p.m.  Special Interest Group (SIG) Meetings
1:15 p.m. – 2:30 p.m.  Concurrent Session Ten
2:45 p.m. – 4:00 p.m.  Concurrent Session Eleven
4:15 p.m. – 5:30 p.m.  Closing Plenary

For the list of posters being presented, visit https://www.istss.org/am16/home.aspx
The ISTSS 32nd Annual Meeting is supported in part by:

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**Non-Profit Sponsorship Program:**
Meeting Bag – Cohen Veterans Network

**ISTSS Exhibit and Support Opportunities**

We invite commercial, government agencies and nonprofit organizations to participate in the ISTSS Annual Meeting as exhibitors and supporters. Gain valuable exposure for your products and services and bring new ideas and tools to the attendees of the meeting.

**Exhibitors:** Contact new prospects, gather leads, introduce your presence in the market and show your appreciation for your existing customers by exhibiting at the ISTSS Annual Meeting.

**Supporters:** Show your support for quality educational content at the ISTSS Annual Meeting or online continuing education program by providing sponsorship to ISTSS.

For more information, contact Kim Santos at +1-847-686-2363 or email ksantos@istss.org.
Guides to Information in Schedule

Keyword Type Descriptions

Primary Keywords
- Assessment/Diagnosis (Assess Dx)
- Biological/Medical (Bio Med)
- Clinical/Intervention Research (Clin Res)
- Clinical Practice (Practice)
- Community-Based Programs (Commun)
- Culture/Diversity (Cul Div)
- Ethics (Ethics)
- Global Issues (Global)
- Journalism and Trauma (Journalism)
- Multi-Media (Media)
- Prevention/Early Intervention (Prevent)
- Public Health (Pub Health)
- Research Methodology (Res Meth)
- Social Issues – Public Policy (Social)
- Technology (Tech)
- Training/Education/Dissemination (Train/Ed/Dis)
- Vicarious Traumatization and Therapist Self-Care (Self-Care)

Secondary Keywords
- Accident/Injury (Acc/Inj)
- Acute/Single Trauma (Acute)
- Affective Processes/Interventions (Affect/Int)
- Aggression/Aggresive Behavior (Aggress)
- Aging/LifeCourse (Aging)
- Anxiety (Anx)
- Assessment/Diagnosis (Assess Dx)
- Biological/Medical (Bio Med)
- Child Physical Abuse/Maltreatment (CPA)
- Child Sexual Abuse (CSA)
- Chronic/Repeated Trauma (Chronic)
- Clinical/Intervention Research (Clin Res)
- Clinical Practice (Practice)
- Cognitive Processes/Interventions (Cog/Int)
- Community-Based Programs (Commun)
- Community/Social Processes/Interventions (Comm/Int)
- Community Violence (Comm/Vio)
- Complex Trauma (Complex)
- Culture/Diversity (Cul Div)
- Death/Bereavement (Death)
- Depression (Depr)
- Developmental Processes/Interventions (Dev/Int)
- Domestic Violence (DV)
- (Epi)Genetic Processes/Interventions (Gen/Int)
- Ethics (Ethics)
- Ethnicity (Ethnic)
- Family Relationship Processes/Interventions (Fam/Int)
- Gender and Trauma (Gender)
- Genetics/Epigenetics (Genetic)
- Global Issues (Global)
- Health Impact of Trauma (Health)
- Human Rights (Rights)
- Illness/Medical Conditions (Illness)
- Intergenerational Trauma (Intergen)
- Journalism and Trauma (Journalism)
- Multi-Media (Media)
- Natural Disaster (Nat/Dis)
- Neglect (Neglect)
- (Neuro)Biological Processes/Interventions (Bio/Int)
- Neuro Imaging (Neuro)
- Prevention/Early Intervention (Prevent)
- Primary Care (Care)
- Psychodynamic Research (Psych)
- Public Health (Pub Health)
- Quality of Life (QoL)
- Rape/Sexual assault (Rape)
- Refugee/Displacement Experiences (Refugee)
- Research Methodology (Res Meth)
- Sexual Orientation and Trauma (Orient)
- Sleep (Sleep)
- Social Issues – Public Policy (Social)
- Substance Use/Abuse (Sub/Abuse)
- Survivors/Descendants of Historical Trauma (Surv/Hist)
- Technical Disaster (Tech/Dis)
- Technology (Tech)
- Terrorism (Terror)
- Theory (Theory)
- Torture (Torture)
- Training/Education/Dissemination (Train/Ed/Dis)
- Traumatic Grief (Grief)
- Vicarious Traumatization and Therapist Self-Care (Self-Care)
- War – Civilians in War (Civil/War)
- War – Military/Peacekeepers/Veterans (Mil/Vets)
Guides to Information in Schedule

Regions
- Central and Eastern Europe and the Commonwealth of Independent States (C & E Europe & Indep)
- Eastern and Southern Africa (E & S Africa)
- East Asia and the Pacific (E Asia & Pac)
- Industrialized Countries (Industrialized)
- Latin America and the Caribbean (Latin Amer & Carib)
- Middle East and North Africa (M East & N Africa)
- South Asia (S Asia)
- West and Central Africa (W & C Africa)

Population Types
- Child/Adolescent (Child/Adol)
- Adult (Adult)
- Older People/Aging (Older)
- Both Adult and Child/Adolescent (Lifespan)
- Mental-Health Professionals (Prof)
- Other Professionals (Other)

Presentation Level
All presentations designate the knowledge/skill level required of the participant as either: Introductory (I), Intermediate (M) or Advanced (A). These are used as a general guide only since attendees have very diverse educational and professional backgrounds.

Introductory (I): Presentations that all participants (including undergraduate students) with any appropriate background will be able to fully comprehend and/or appreciate. Presentations will discuss concepts that are considered basic skills/knowledge for those working in the field.

Intermediate (M): Presentations that participants may more fully comprehend/appreciate if they have at least some work experience in the topic to be discussed.

Advanced (A): Presentations consisting of concepts requiring a high-level of previous educational background, or work experience, in the particular area/topic to be discussed as well as being most geared for specialists and those in advanced stages of their career.

Presentation Type Descriptions*

- **Case Study Presentation**
  Sessions use material from a single or a set of cases to illustrate clinical, theoretical or policy issues. These sessions may involve the audience in discussion of the case material presented.

- **Media Presentation**
  Session involving presentation of a segment of film, video, music, drama, literature, artwork or other form of media relevant to traumatic stress, along with discussion.

- **Oral Paper Presentation**
  Individual presentations of no more than 15 minutes on a topic related to traumatic stress, typically including the presentation of research data.

- **Panel Presentation**
  Sessions that include three to four participants discussing a common theme, issue or question. Panels may include short statements during which panelists outline diverse or similar approaches to the same question. Panels are typically more interactive than symposia, involving active discussion among the panelists.

- **Poster Presentation**
  Individual presentation in a poster format on a topic related to traumatic stress, typically including the presentation of research data.

- **Pre-Meeting Institute (PMI)**
  Institutes are full- or half-day sessions that provide an opportunity for intensive training on topics integral to the conference program, presented by leaders in the field.

- **Symposium**
  Session that includes a group of three to four sequential presentations, each related to the overall theme of the symposium.

- **Workshop Presentation**
  Instructional session that helps increase participants’ understanding and skill in a particular area of interest. Such sessions may include active involvement of the audience.

* Presentation types are color-coded throughout the schedule.
Keynote Panel

Wednesday, November 9. 6:30 p.m. – 8:00 p.m.

Responding to Terror Attacks: What are the Right Ways to Act?

Moderator: Grete Dyb, MD, PhD,
Norwegian Center of Violence And Traumatic Stress Studies, Oslo, Norway

Panelists: Bruce Shapiro,
Dart Center for Journalism & Trauma, USA
Chris Brewin, PhD,
University College London, United Kingdom
Tuva Svendsen, Medical Student,
The Arctic University of Tromsø, Tromsø, Norway
Philippe Pirard, MD, PhD,
National Institute of Public Health, Saint-Maurice Cedex, France
Melissa Brymer, PhD, PsyD,
National Center for Child Traumatic Stress at UCLA, Los Angeles, California USAA
Robert Pynoos, MD, MPH,
National Center for Child Traumatic Stress, University of California at Los Angeles (UCLA) and UCLA School of Medicine, Los Angeles, California, USA

Primary Keyword: Prevent
Secondary Keyword: Acute-Journalism-Pub Health-Terror
Population Type: Lifespan
Presentation Level: I
Region: Global

Since the attacks on the U.S. in 2001 and the Madrid train bombing in 2004, there have been an increasing number of terrorist incidents around the world. Professionals in the field of traumatic stress have a particular responsibility to support health authorities in developing and implementing the best strategies in acute crisis and the aftermath of terror. How do we meet these challenges? Panelists with experiences from terror attacks across the world present suggestions for future responses.

Based on the worldwide work of the Dart Center for Journalism and Trauma, Bruce Shapiro will discuss the role of media in resilience, recovery and social policy following large-scale atrocity and explore ways for important knowledge from the trauma field to be communicated more effectively through news media.

Drawing on his experiences after the 2005 London bombings, Chris Brewin will emphasize the difficulty in identifying and following up survivors after incidents involving dispersed populations, such as transport incidents and attacks on public gatherings. He will discuss strategies for ensuring longer term mental health needs are met.

Tuva Svendsen is a medical student at the Arctic University of Norway. In July 2011 she survived the Utøya terror attack where 69 young people attending a summer camp were killed by a single perpetrator. Sharing her personal experiences in fighting her way back to a normal life gives a unique insight in the user perspective of trauma outreach programs.

Last year’s attack in Paris challenged the organization of medical and psychological outreach to victims and an epidemiologic study showed a high proportion of traumatized civilians with unmet needs. Philippe Pirard and co-authors Thierry Baubet, Stéphanie Vandentorren and Yvon Motreff therefore concluded that we need to enlarge the scope of the population to be contacted and ensure more structured early outreach through novel initiatives to reach exposed persons on web-based platforms.

Robert Pynoos and Melissa Brymer will describe how the National Child Traumatic Stress Network has collaborated with partners to respond to the needs of children and families after terrorist attacks worldwide. Future directions for response and recovery programs for children, adolescents, and families after terrorism will be discussed and recommendations for expanding services for underserved populations and for addressing different cultures.
Keynote Address

Thursday, November 10, 8:30 a.m. – 9:50 a.m.

Note: The Keynote Address will be preceded by a brief ISTSS Awards Presentation

The Epidemiology of Trauma and PTSD

Ronald C. Kessler, PhD
Harvard Medical School, Boston Massachusetts, USA

This presentation will provide an overview of results from the World Health Organization’s World Mental Health (WMH) Surveys on the epidemiology of trauma and PTSD. The WMH Surveys are a coordinated series of mental health needs assessment surveys carried out in representative national and regional household surveys to support mental health policy planning efforts in countries throughout the world. WMH surveys have been completed to date in 25 countries in the America, Europe, the Middle East, Africa, Asia, and the Pacific. Each WMH survey asks respondents about lifetime prevalence, age-of-onset, and course of a wide range of common mental and substance disorders. PTSD is one of these disorders. WMH respondents are also asked about lifetime history of exposure to a wide range of traumas. The presentation will focus on the distribution and clustering of trauma exposure; differential risk of PTSD onset and persistence across trauma types as a joint function of age of exposure and prior trauma history; and the role of temporally prior mental and substance disorders in predicting trauma exposure, risk of PTSD after trauma exposure, and course of PTSD after onset. Clinical and public health implications of results will be pointed out throughout the presentation.

Dr. Kessler’s research deals broadly with the social determinants of mental health and illness as studied from an epidemiological perspective. He is the author of over 600 publications and the recipient of many awards for his research, including the Senior Scientist and MERIT awards from the National Institute of Mental Health. He has been rated as the most widely cited researcher in the world in the field of psychiatry for each of the past fifteen years and is a member of both the Institute of Medicine and the National Academy of Sciences.

Dr. Kessler is the Principal Investigator of the US National Comorbidity Survey, the first nationally representative survey of the prevalence and correlates of mental disorders in the U.S., and a Co-Director of the World Health Organization’s World Mental Health Survey Initiative, a series of comparative community epidemiological surveys of the prevalence and correlates of mental disorders and treatment for these disorders in 26 countries around the world. In addition to his epidemiological studies, Kessler is involved in evaluating a number of innovative programs for the prevention and treatment of mental illness in high-risk segments of the population. Finally, Dr. Kessler is the Principal Investigator of the Harvard Medical School site for STARRS-LS, a research program funded by the Department of Defense to study risk and protective factors for suicide among Army personnel.

Dr. Kessler earned his PhD in sociology from New York University in 1975. He completed a postdoctoral fellowship in psychiatric epidemiology at the University of Wisconsin before joining the faculty at the University of Michigan in 1979. He was a Professor of Sociology and a Program Director at Michigan’s Institute for Social Research at the time he took his current position at Harvard Medical School in 1994.
Keynote Address

Friday, November 11, 8:30 a.m. – 9:50 a.m.

Note: The Keynote Address will be preceded by a brief ISTSS Awards Presentation

Epigenetic Regulation of Stress Genes and Their Role in Stress-Related Psychiatric Disorders: FKBP5 as an Example

Elizabeth Binder, MD, PhD
Emory University, Atlanta, Georgia, USA

Stress responses and related outcomes vary markedly across individuals. Elucidating the molecular underpinnings of this variability is of great relevance for developing individualized prevention strategies and treatments for stress-related disorders. An important modulator of stress responses is FKBP5. FKBP5 acts as a co-chaperone that modulates not only glucocorticoid receptor activity in response to stressors but also a multitude of other cellular processes in both the brain and periphery. Notably, the FKBP5 gene is regulated via complex interactions among environmental stressors, FKBP5 genetic variants, and epigenetic modifications of glucocorticoid-responsive genomic sites. These interactions can result in FKBP5 disinhibition that has been shown to contribute to a number of aberrant phenotypes in both rodents and humans and possibly contributes to both behavioural and medical symptoms associated with stress exposure. Consequently, FKBP5 blockade may hold promise as a treatment intervention for stress-related disorders, and recently developed selective FKBP5 blockers show encouraging results. Although risk for stress-related disorders is conferred by multiple environmental and genetic factors, the findings related to FKBP5 illustrate how a deeper understanding of the molecular and systemic mechanisms underlying specific gene-environment interactions may provide insights into the pathogenesis of stress-related disorders.

Dr. Binder has studied Medicine at the University of Vienna, Austria and Neuroscience at Emory University in Atlanta, GA, USA. Following a postdoctoral training at the Max-Planck Institute of Psychiatry in Munich, Germany, she returned to Emory University as an Assistant Professor in the Departments of Psychiatry and Behavioral Sciences and Human Genetics. In 2007, she was appointed as research group leader at the Max-Planck Institute of Psychiatry within the Minerva Program of the Max-Planck Society.

Since August 2013, Elisabeth Binder is the director of the Department of Translational Research in Psychiatry at the Max-Planck Institute of Psychiatry. She also holds an appointment as an Associate Professor in the Dept. of Psychiatry and Behavioral Sciences at Emory University School of Medicine. Her main research interests are the identification of molecular moderators of the response to environmental factors, with a focus on early trauma and gene x environment interactions. She studies how such factors influence trajectories to psychiatric disease or well-being to ultimately use this information for novel prevention and treatment strategies.
Keynote Address

Saturday, November 12, 8:30 a.m. – 9:50 a.m.

Note: The Keynote Address will be preceded by a brief ISTSS Awards Presentation

Supporting Vast Numbers of People in Communities Affected by Adversity: Lessons Learned (So Far)

Mark van Ommeren, PhD
World Health Organization, Geneva, Switzerland

Following exposure to violence, disaster, or other adversity, rates of mental health problems and non-pathological distress increase. At the same time, most people in countries affected by adversity do not have access to appropriate mental health support. Despite insufficient numbers of (a) mental health specialists, (b) non-specialists working for mental health, and (c) public mental health practitioners, this area of public health has much momentum.

This presentation will seek to cover the World Health Organization (WHO)’s approach to addressing vast mental health needs in emergency-affected countries. It will emphasize 4 aspects: (a) mental health system building (as described in WHO (2013) Building back Better: Sustainable Mental Health Care after Emergencies), (b) clinical interventions integrated into general health services (as described in the WHO & UNHCR (2015) mhGAP Humanitarian Intervention Guide: Clinical Management of Mental, Neurological and Substance Use Disorders in Humanitarian Emergencies, (c) social interventions that can reach large numbers of people with the aim to create a supportive recovery environment (as described in the Inter-Agency Standing Committee (IASC, 2007) Guidelines on Mental Health and Psychosocial Support in Emergency Settings), and (d) scalable (low resource-intensity) psychological interventions, as currently developed and tested by WHO and many partners.

The presentation includes both country and normative examples with lessons learned and relearned (such as “training without supervision is entertainment” and “in public health, less is often more”).

Dr. van Ommeren is Public Mental Health Adviser in the Department of Mental Health and Substance Abuse at the World Health Organization (WHO). He functions in WHO as the global focal point for mental health and psychosocial support in emergencies. This position includes advising and supporting all relevant agencies in providing the best possible social and mental health supports to people affected by war and other disasters. He has played a key role in initiating and drafting the most popular documents currently used in emergencies worldwide.

He was initiator and co-chair of the Inter-Agency Standing Committee (IASC) Task Force for Mental Health and Psychosocial Support in Emergency Settings, representing guidelines for emergencies written and endorsed at head-of-agency level by 27 agencies representing key UN agencies, the Red Cross/Red Crescent movement and leading non-governmental organizations.

He also led the drafting of the mental health standard in the Sphere Handbook (2004, 2011), which is worldwide the most widely used guide in emergencies across disciplines.

He has a particular interest in action related to “building back better”, that is converting short-term emergency-related interest in mental health into momentum for long-term improvement, as described in Building Back Better: Sustainable Mental Health Care after Emergencies (WHO, 2013).

He is also a member of the WHO mhGAP team where he is the focal point for psychological interventions as well as for depression, trauma and loss. His recent work focuses on the development and testing of simplified “low-intensity” psychological interventions to be used in communities affected by adversity.

He was the recipient of the 2002 ISTSS Chaim Danieli Young Professional Award for excellence in service or research in the field of traumatic stress. He regularly co-authors articles in leading public health journals (h-index is 36 in Google scholar).
Master Clinician

Thursday, November 10, 2:45 p.m. – 4:00 p.m.

Competent Parenting: The Key to Preventing Social, Emotional and Behavioural Problems in Children of Trauma Related Adversity

Primary Keyword: Practice
Secondary Keyword: CPA-Fam/Int
Population Type: Lifespan
Presentation Level: M
Region: Global

Matthew Sanders, PhD
University of Queensland, Brisbane, Queensland, Australia

There is nothing more important in promoting the healthy development and wellbeing of children than the quality of parenting a child receives regardless of their life circumstances. Competent parenting is the key to preventing child social, emotional and behavioural problems because it provides a common pathway to confident, resilient and skilled children. From single-subject research in the early 1980s that investigated individually administered parenting programs to a widely disseminated public health approach that has impacted millions of families worldwide, Triple P has evolved an array of evidence-based interventions designed to overcome a diverse range of clinical problems affecting families every day. This need for flexibility has inspired the more recent innovation work investigating how the Triple P system can be applied to trauma related adversity. The difficulties faced and lessons learned through implementing a large-scale evidence-based parenting program across diverse communities will be discussed.

Professor Sanders is a Professor of Clinical Psychology and Director of the Parenting and Family Support Centre at the University of Queensland. He is also a consulting Professor at The University of Manchester, a visiting Professor at the University of South Carolina, and holds adjunct Professorships at Glasgow Caledonian University and The University of Auckland. As the founder of the Triple P-Positive Parenting Program, Professor Sanders is considered a world leader in the development, implementation, evaluation and dissemination of population-based approaches to parenting and family interventions. Professor Sanders is recognised as the global leader in the field of evidence-based parenting intervention and one of The University of Queensland’s Innovation champions. Professor Sanders’ Triple P system is currently in use across 25 countries, has over 68,000 practitioners trained to deliver it, and some 7 million families are estimated to have benefited from Triple P.

Professor Sanders’ work has been widely recognised by his peers as reflected a number of prestigious awards. In 2007, he received the Australian Psychological Society’s President’s Award for Distinguished Contribution to Psychology and in 2004 he received an International Collaborative Prevention Science award from the Society for Prevention Research in the US. In 2007 he received a Trailblazers Award from the Parenting and Families Special Interest Group in the Association for Behavioural and Cognitive Therapy and in 2008 was became a fellow of the New Zealand Psychological Society. Professor Sanders has also won a Distinguished Career Award from the Australian Association for Cognitive Behaviour therapy, was named Honorary President of the Canadian Psychological Association (2009), and Queenslander of the Year (2007).
Master Clinician

Friday, November 11, 2:45 p.m. – 4:00 p.m.

Compassion Focused Therapy: Is Compassion an Antidote to Shame and an Effective Treatment of Complex PTSD?

Primary Keyword: Practice
Secondary Keyword: Complex
Population Type: Adult
Presentation Level: M
Region: Global

Deborah L. Lee, PhD
Berkshire Traumatic Stress Service, Berkshire, United Kingdom

Those who have been repeatedly traumatised at the hands of others have many challenges to face as they discover a life without trauma and learn how to live in a mind that can flourish. Predominant issues of self-blame, self-loathing, lack of trust, interpersonal difficulties and struggles to regulate threat-based emotions are prevalent in therapy.

Effective treatments of interpersonal trauma suggest phased-based approaches for Complex PTSD (Cloitre, 2010), yet the precise ingredients of the phases are still up for debate. Key struggles for clients are to discover that their lives are not of their making or their fault and that can take responsibility to act and feel differently.

Can compassion help you discover what you don’t know and help you feel what you have never felt?

This masterclass explores the use of compassion focused therapy offers clients the psychoeducation to discover their lives are not their fault and the brain training exercises to help them develop the capacity to feel emotionally safe with and connected to others. Perhaps this could offer a vital precursor to change the emotional context of minds and allow clients to think differently about their traumatic experiences in a way that allows them to hold themselves in mind with kindness, understanding, wisdom and courage.

Compassion focused therapy was developed by Gilbert and his colleagues (Gilbert, 2005, 2009). The explicit goal is to develop, access and stimulate positive effect associated with self-soothing in the mind and body of the patient in order to promote an inner sense of psychological safeness (Gilbert, 2005).

The therapeutic work presented in this talk can be considered as part of phase 2, as compassionate resilience enhances affect regulation, interpersonal functioning, problem-solving and the ability to hold trauma memories with a caring compassionate mind. Compassionate resilience enhances feelings of self-soothing and safeness in these memories and reduces self-critical maintenance cycles by developing compassionate self-talk. It helps the development of the capacity to self-soothe to those who feel deeply ashamed about who they are and what they have been through.

Dr. Lee is a Consultant Clinical Psychologist, Head of Berkshire Traumatic Stress Service and South Central Veterans Service. She is also an honorary Senior Lecturer at University College London. She is a board member of the Compassionate Mind Foundation and author of the Compassionate Mind Guide to Recovering from Trauma and PTSD: Using Compassion-Focused Therapy to Overcome Flashbacks, Shame, Guilt, and Fear (2013). New Harbinger, New York.

Dr Lee has worked in the field of trauma for 24 years and specialises in the treatment of PTSD and complex Trauma. Her particular area of clinical and research interest is in shame-based PTSD and self-criticism. She has developed the use of compassion-based treatments including the use of compassionate imagery in shame-based flashbacks to enhance clinical practice in this field. She has pioneered the use of developing compassionate resilience as part of a phased based treatment approach to complex PTSD. She has widely contributed to the dissemination of her clinical knowledge through writing and delivering over 100 clinical workshops and talks in North America and Europe.
Master Clinician

Saturday, November 12, 1:15 p.m. – 2:30 p.m.

Treating PTSD through the Internet – Efficacy, Treatment Principles and Challenges of the Virtual Therapeutic Relationship with the PTSD Patients

Primary Keyword: Clin Res
Secondary Keyword: Clin Res-Global-Media-Tech
Population Type: Lifespan
Presentation Level: M
Region: Global

Christine Knaevelsrud, PhD
Free University of Berlin, Berlin, Germany

Meta-analyses show consistent evidence and large effect sizes of trauma-focused therapies. However, these are not widely applied in clinical practice. Moreover, only a minority of traumatized individuals who experience symptoms of PTSD are in touch with the health care system and only around one in five patients seeks psychological treatment due to fear of stigmatization, embarrassment, judgment or exclusion or negative beliefs about mental health care services. Above all, there is a pronounced lack of psychotherapy supply for PTSD, with long waiting times and inadequate psychotherapy infrastructure. This disparity of need for psychotherapy and supply is crucial, and alternative means of providing access to treatment are needed. Web-based psychotherapeutic interventions may help to improve access to mental health care for individuals with PTSD through being independent of seeing a therapist face-to-face and through being easily accessible, low-threshold and visually anonymous. Meta-analytical evidence shows that cognitive and behavioral intervention techniques for PTSD can be successfully applied through the Internet. The presentation will describe how current evidence-based treatment approaches can be transferred to the Internet (i.e. through writing assignments, video/ audio vignettes or interactive training) and describe specific moderators that are associated with better outcomes (i.e. duration of treatment, guided versus unguided interventions). The virtual therapeutic relationship with PTSD patients who regularly show difficulties with interpersonal trust and relationships will be specifically discussed.

Dr. Knaevelsrud is a full professor for Clinical Psychological Intervention at the Freie University Berlin and trained psychotherapist. She completed her studies in psychology at the University of Amsterdam, Netherlands and New York University, USA and obtained her PhD at the University of Zurich, Switzerland. During the last decade, she also served as the scientific director of the Treatment Center for Torture Victims Berlin. She is Vice President of the German Society for Traumatic Stress Studies. Dr. Knaevelsrud’s clinical and research interests are focused on web-based interventions. She conducted several treatment trials on internet-based cognitive-behavioral treatments for PTSD, Complicated Grief and Depression. Her current work focuses on improving access to evidence-based intervention in regions of war and violent conflicts. Further research interests include psychological risk factors for PTSD such as attention biases, transgenerational transmission and revictimization.
We have conducted population based assessments of trauma and trauma-related disorders, both in the general public and in sub-populations at greater risk to trauma, for decades.

Some populations at greater risk of traumatic events, including active duty military, veterans, first responders, some adjudicated crime victims, among others, can be identified and sampled from databases. However, traumatic events including crime, war, other forms of violence, natural disasters, fires, flooding, vehicular crashes and other accidents, occur throughout the general population. Hence, many studies of trauma begin with general population sampling frames from which cross-sectional or longitudinal, retrospective or prospective assessments of trauma, trauma-related disorders, their correlates and the mediators can be conducted. The ISTSS meeting is an ideal platform to reflect on the promise of innovative technology and methodology in improving our measurement of trauma and trauma-related disorders. Mobile data collection may allow us to develop real time measures of conditions and reactions to natural (and man-made) disasters. Web-based panels may permit us to measure changes in symptom pattern, health outcomes and recovery from trauma on a much more detailed basis.
Virtual reality (VR) has undergone a transition in the past 20 years that has taken it from the realm of expensive toy and into that of functional technology. Revolutionary advances in the underlying VR enabling technologies have now driven a renewed public enchantment with the medium as a new source of entertainment. However, VR is not limited to the domain of fun and games. VR technology provides an ideal method for creating controlled stimulus environments. Stimuli can be systematically delivered within realistic simulations of real world contexts that allow for exquisite timing and control of stimulus load/complexity, all of which can be manipulated in a dynamic fashion contingent on the responses of the client/research participant. Within such VR simulations, human performance can be digitally captured in real time to support a rich and precise analysis of relevant responses. In this regard, VR can be seen as the “ultimate Skinner Box” for conducting human research and for providing clinical care. Thus, in spite of the early limitations of the technology, a large scientific literature has emerged over the last 2 decades demonstrating the added value that is accrued with the use of VR to address a wide range of clinical health conditions. There is also evidence that many clinicians have come to recognize VRs potential for creating tools that can amplify and extend their capacity to deliver evidence-based care. This can be seen in the results from a survey where expert clinicians were queried as to what interventions they predicted would increase in the next decade (Norcross, 2012); VR ranked 4th out of 45 options with other computer-supported methods occupying 4 out of the top 5 rankings. This presentation will describe VR efforts that are now generating research that is having an impact on the prevention, assessment and treatment of PTSD. After a brief introduction to the technology, I will cover the use of VR to deliver prolonged exposure for the treatment of PTSD and describe studies that aim to assess PTSD by recording the physiological reactivity of users interacting with VR stimuli. Applications that leverage VR to immerse service members within interactive, story-based simulations for teaching emotional coping and resilience prior to a military deployment will then be presented. The talk will conclude with a discussion of the use of AI Virtual Humans that serve the role of digital standardized patients for clinical training and as health care support coaches.
Master Methodologist

Saturday, November 12, 2:45 p.m. – 4:00 p.m.

Spotify Mental-health for Depression and Anxiety: Personalise, Engage & Connect

Primary Keyword: Clin Res
Secondary Keyword: Anx-Pub Health-Res Meth-Tech
Population Type: Lifespan
Presentation Level: M
Region: Industrialized

Heleen Riper, PhD
Vrije Universiteit, Amsterdam, The Netherlands

The digitalisation of the treatment of mental disorders such as depression and anxiety has gained momentum over the last two decades. Riper and colleagues have shown with ample studies that online prevention and treatment, for example by means of cognitive behavioural therapy, can be (cost) effective. However, ample challenges remain, such as to assess for whom digital treatments work or not, how they work and whether they can work even better than face-to-face therapies. eMental-health, including mobile health, has led to numerous innovations but its implementation in routine care appears still limited. One could argue that this is due to a question of time as it takes a long time to implement innovations in routine care. Under the umbrella of an ‘agile science’ approach Riper will explore how a different line of reasoning, namely that we need not only to innovate our treatments but our scientific methods for the development (‘co-creation’), evaluation (‘beyond RCT’s only’) and implementation (‘evidence-based implementation strategies’) of digital interventions as well. The application of mobile devices that support virtual and augmented realities, sensors, and gaming will become an integral component of studying and providing these interventions. These enable a more personalized approach of depression and anxiety by patients and therapists alike. Riper will discuss these innovations by beyond state of the art anxiety research, specifically related to stress and stress related disorders including routine care examples as well.

Over the past 15 years, her research focus has been on the development, evaluation and implementation of innovative eMental-Health interventions for common mental disorders from prevention to treatment. The scope of her current research activities includes the use of mobile health, and combined online and face to face (‘blended’) treatments for depression and anxiety. New methodological challenges include the development and evaluation of mobile ecological momentary assessments and interventions (EMA/EMI), serious gaming and predictive modeling. She has opted for an international perspective and collaboration throughout her academic career and acted as Principal Investigator of over 15 large scale European Union projects and reviewer for Research Funding Organizations globally. She has have published over 120 international peer-reviewed papers and book chapters within the eMental-health domain. In 2013 Heleen Riper (co) founded the Journal of Internet Interventions (published by Elsevier) and in 2014 she became President of the International Society for Research on Internet Interventions (ISRIII) for which she now acts as Past-President.
Invited Presentation

Thursday, November 10, 10:15 a.m. – 11:30 a.m.

Symposium

How Novel Technology may Support a Public Health Approach to Trauma and Its Consequences around the World

Primary Keyword: Global
Secondary Keyword: Global-Pub Health-Tech
Population Type: Lifespan
Presentation Level: M
Region: Global

Chair: Miranda Olff
Josef I. Ruzek, PhD; Brian J. Hall, PhD; Samuel M.Y. Ho, PhD, PsyD; Nancy Kassam-Adams, PhD

1Academic Medical Center, Amsterdam, The Netherlands
2VA Palo Alto Health Care System, National Center for PTSD/Stanford University, Menlo Park, California, USA
3University of Macau, Taipa, Macau (SAR), China
4City University of Hong Kong, Hong Kong, China
5University of Pennsylvania School of Medicine, Philadelphia, Pennsylvania, USA

Around the world, millions of adults, as well as children each year, experience potentially traumatic events. Especially when events happen on a large scale such as in the case of disasters, migration or highly prevalent events, clinical resources may be limited. The growth of phone and mobile access does enable opportunities for electronic mental health (eMental Health) interventions. We can also more easily address specific contexts and for diverse cultures. However, with all the potential there is for a big step forward towards efficient mental health approaches the biggest challenge may be to provide evidence-based resources that are culturally-relevant, and truly accessible. In this symposium, we discuss how novel technologies may support our public health goals.

Dr. Ruzek will present on the mobile technology applications developed at the National Center for PTSD and explore issues related to expanding their reach to trauma survivors in less-resourced communities with limited access to mental health services.

Dr. Hall will discuss how eMental Health intervention may help populations in need, such as the millions of migrant workers in China who typically face substantial barriers to obtain classical mental health services.

Dr. Ho will share with us how to promote post-disaster management in China e.g. by hotlines, mobile apps and e-mental health tools. He will focus on current e-mental health approaches (‘hope stories’) aimed at increasing hope in children – an important predictor of resilience.

Dr. Kassam-Adams will share how to reach large numbers of children and families by eHealth tools e.g. via gamified and interactive features. She will update us with recent research, lessons learned regarding practical development processes and dissemination models.
Invited Presentation

Thursday, November 10
1:15 p.m. – 2:30 p.m.

Panel

The Refugee Situation in the World: a Humanitarian Emergency

Primary Keyword: Global
Secondary Keyword: Health-Refugee-Social-Civil/War
Population Type: N/A
Presentation Level: I
Region: Global

Moderator: Tanja Michael, PhD

Adib Essali, MD; Kerry Young, PhD; Jutta Lindert, PhD, MPH, MA; Belinda Liddell, PhD; Mark van Ommeren, PhD

1Saarland University, Saarbruecken, Germany
2Waikato District Health Board, Thames, Auckland, New Zealand
3Central and North West London NHS Foundation Trust, London, United Kingdom
4University of Emden, Emden, Germany
5University of New South Wales, Sydney, New South Wales, Australia
6World Health Organization, Geneva, Switzerland

Although providing refuge to people fleeing persecution, war or hunger is considered the hallmark of civilization, many high-income countries shy away from their humanitarian responsibilities. Refugees – already exposed to danger in their home country – face often perilous situations during their flight and meet difficult living conditions in their country of arrival. In the panel, five distinguished scholar-clinicians will exchange views on which mental health and psychosocial support measures are most needed and how to build structures to provide them: Dr. Adib Essali (Waikato District Health Board, NZ) has profound knowledge on the psychological consequences of the violence in Syria and the Middle East; Dr. Kerry Young (Forced Migration Trauma Service, UK) is an expert on treatment approaches for refugees; Dr. Jutta Lindert (Professor of Public Health, DE) is a former head of a refugee camp and expert on the impact of violence on mental health; Dr. Belinda Liddell (Refugee Trauma and Recovery Program, UNSW Australia) has worked with a variety of refugee and post-conflict populations; Dr. Mark van Ommeren (Public Mental Health Adviser at WHO) functions as global focal point for mental health and psychosocial support in emergencies as well as for interventions for trauma and loss. Dr. Tanja Michael will be moderating this session.

Invited Presentation

Friday, November 11
10:15 a.m. – 11:30 a.m.

Symposium

Moving from Research to Practice to Meet the Needs of Trauma-exposed Populations across the Globe

Primary Keyword: Train/Ed/Dis
Secondary Keyword: Clin Res-Practice-Comm/Int-Cul Div
Population Type: Prof
Presentation Level: I
Region: Global

Chair: Tine K. Jensen, PhD
Discussant: Paula P. Schnurr, PhD

Benjamin E. Saunders, PhD; Joan Cook, PhD; Ane-Marthe Solheim Skar, PhD; Debra Kaysen, PhD, ABPP

1Norwegian Centre for Violence and Traumatic Stress Studies, Oslo, Norway
2National Center for PTSD, White River Junction, Vermont, USA
3Medical University of South Carolina, Charleston, South Carolina, USA
4Yale School of Medicine, West Haven, Connecticut, USA
5University of Oslo, Oslo, Norway
6University of Washington, Seattle, Washington, USA

Many effective practices have been developed, tested, and are now being disseminated and implemented in services around the world. Meaningful dissemination and implementation require attention to organizational, leadership, and therapist factors. In this symposium, the presenters will present data and experiences from four large-scale implementation efforts to integrate the adoption of evidence-based mental health interventions in usual care contexts. The presentations cover different settings such as community service agencies and mental health clinics, both child and adult target populations, different interventions that were implemented, including Cognitive Processing Therapy, Prolonged Exposure and Trauma-Focused CBT. The implementation projects were conducted in high and low resource countries. Together the studies show that implementing evidence-based practice in usual care organizations is possible, but requires activities targeting multiple levels of the service system so that critical barriers are addressed.
Invited Presentation

Friday, November 11
4:15 p.m. – 5:30 p.m.

Panel

ISTSS Treatment Guidelines

Primary Keyword: Clin Res
Secondary Keyword: Clin Res-Practice-Res Meth
Population Type: Lifespan
Presentation Level: I
Region: Global

Moderator: Jonathan Ian Bisson, MD
Marylene Cloitre, PhD; Lutz Goldbeck, PhD; Catrin Elisabeth Lewis, PhD; Neil Patrick Roberts, DPsych(Clin)

1Cardiff University School of Medicine, Cardiff, Wales, United Kingdom
2National Center for PTSD-Dissemination and Training Division, Menlo Park, California, USA
3University Ulm, Ulm, Germany
4Cardiff and Vale University Health Board, Cardiff, Wales, United Kingdom

The ISTSS Guidelines Committee is currently developing updated Treatment Guidelines for PTSD informed by the research evidence base. The Committee includes experts from various professional backgrounds and areas of the world, including members with considerable systematic review and guideline development expertise. The ISTSS membership and key stakeholders are being consulted at all stages of the development process. A consumer (especially PTSD sufferer/ex-PTSD sufferer) perspective is being gathered through a consumer reference group. There is also a practitioner reference group comprising practitioners from different professional backgrounds who are not working in the trauma field. The Committee is liaising closely with the ISTSS Board, which is planning the dissemination of the treatment guidelines. The panel comprises members of the Committee who will provide an overview of the methodology being employed, the progress to date and next steps, before engaging in discussion with those attending.

Invited Presentation

Saturday, November 12
10:15 a.m. – 11:30 a.m.

Symposium

Sleep and Nightmares in PTSD: Advances in Neuroscience and Treatment

Primary Keyword: Clin Res
Secondary Keyword: Bio/Int-Sleep
Population Type: Adult
Presentation Level: M
Region: Global

Chair: Murray Raskind, MD
Discussant: Elaine Peskind, MD
Anne Germain, PhD; Thomas Mellman, MD; Richard Ross, MD, PhD; Murray Raskind, MD

1VA Northwest Network (VISN 20) Mental Illness Research, Education and Clinical Center (MIRECC), Seattle Washington, USA
2University of Washington School of Medicine, Seattle, Washington, USA
3University of Pittsburgh, Pittsburgh, Pennsylvania, USA
4Howard University College of Medicine, Washington, District of Columbia, USA
5Department of Veterans Affairs Medical Center (116 MHC), Philadelphia, Pennsylvania, USA

Sleep disturbance and nightmares are distressing clinical symptoms central to PTSD that often are resistant to commonly used psychotherapies and or pharmacotherapies. In turn, sleep impairment can also adversely affect the neural circuits underlying resilience to trauma and can contribute to adverse general health outcomes in PTSD. This symposium brings together clinical investigators with extensive research experience addressing both the neuroscience and treatment of those critically important nocturnal PTSD symptoms.

Recent neuroscience research findings on the effects of sleep deprivation on extinction learning and recall, and on increased autonomic arousal and immune activity in an urban minority sample with highly prevalent hypervigilant sleep fears and PTSD will be presented. The symposium also will address steps toward a “precision treatment” of nightmares and sleep disturbance. Data will be presented supporting; pretreatment blood pressure may be a useful “biomarker” for predicting response of trauma nightmares and sleep disturbance to prazosin in combat PTSD; clinical severity and demographic characteristics may influence nightmare response to imagery rehearsal therapy in Veterans; a brief behavioral treatment normalizes neural responses to threat in chronic insomnia; and alternative cognitive strategies along with behavioral modifications targeting the disruptive effects of nocturnal vigilance on sleep.
Invited Presentation

Saturday, November 12
4:15 p.m. – 5:30 p.m.

Closing Panel

What I Have Changed My Mind About and Why

Moderator: Paula P. Schnurr, PhD
Lucy Berliner, MSW; Josef I. Ruzek, PhD; Dean Kilpatrick, PhD; Richard Bryant, PhD; Skip Rizzo, PhD

1National Center for PTSD, White River Junction, Vermont, USA
2University of Washington/ Harborview Medical Center, Seattle, Washington, USA
3VA Palo Alto Health Care System, National Center for PTSD/ Stanford University, Menlo Park, California, USA
4Medical University of South Carolina, Charleston, South Carolina, USA
5University of New South Wales, Sydney, New South Wales, Australia
6University of Southern California, Los Angeles, California, USA

As the field of traumatic stress studies has evolved, we have learned many things that have caused us to change our minds—about the nature of traumatic exposure, its effects, and how these effects can be treated. This session brings together a group of leaders who have worked on issues that include population and global health, as well as technology, to discuss how and why they have changed previously held beliefs in light of experience and empirical evidence. The goal of the session is to illustrate the factors that have led to the changes and to discuss how the current state of knowledge continues to evolve.
**Ethics-related Presentations**

**Pre-Meeting Institute**  
**Wednesday, November 9**  
**8:30 a.m. – Noon**

**PMI #2**

**Keeping Traumatic Stress Patients’ Electronic Data and Communication Private and Secure: Ethical and Legal Issues, and Applied Software Applications**

**Primary Keyword:** Tech  
**Secondary Keyword:** Practice-Ethics  
**Population Type:** N/A  
**Presentation Level:** I  
**Region:** Global

Jon Elhai, PhD  
*University of Toledo, Toledo, Ohio, USA*

In recent years, mental health professionals have increasingly incorporated information technology into patient care, including the use of smartphones, tablets and laptops for electronic communication, psychological assessment, homework assignment completion and record keeping. Yet weaknesses exist in these technologies that can put patient privacy at risk. This issue is especially salient when working with traumatic stress patients, given the sensitive nature of the narrative discussion that happens in trauma-focused psychotherapy (e.g., exposure interventions). In this workshop, issues of ethics, privacy and security of such technology will be discussed in regard to the treatment of traumatic stress patients. Common vulnerabilities empirically found with electronic privacy among mental health clinicians will be detailed. HIPAA regulations related to electronic security will be discussed. An introduction to the concept of “encryption” and its application to traumatic stress practice will be emphasized. I will also explain the relevance of social psychological theory on protection motivation to explaining the successful adoption of electronic security practices. Discussion and details are offered on free, easy to use software application solutions for securing patient communication and records. Also discussed are such issues as using encrypted wireless networks, secure email, encrypted messaging and video conferencing, privacy on social networks, and others. For non-technologically savvy users, this discussion will likely be unfamiliar; though the information will be presented in very basic, non-technical terms. Even for advanced, technologically savvy users, a good deal of this information will likely be unfamiliar and of interest.

**Pre-Meeting Institute**  
**Wednesday, November 9**  
**1:30 p.m. – 5:00 p.m.**

**PMI #7**

**Ethics for the International Trauma Specialists**

**Primary Keyword:** Global  
**Secondary Keyword:** Ethics-Global-Civil/War  
**Population Type:** Prof  
**Presentation Level:** M  
**Region:** Global

Elena Cherepanov, PhD  
*Cambridge College, Boston, Massachusetts, USA*

An international trauma specialist provides services to highly vulnerable and culturally diverse populations around the world. The unprecedented scale of human suffering, complexity of psychological needs and limited resources create particular professional and personal challenges and puts special demands on making independent, responsible and ethical decisions in extraordinary and often unique circumstances. Adherence to ethical principles sets standards for practice, gives a sense of professional community (Williams, 2012) and ensures a shared framework in every humanitarian response. The international perspective offers a guidance for the competent trauma care based on the international humanitarian principles: humanity, neutrality, impartiality, and independence (UNOCHA, 2012). In the first part of the training, the participants will learn about international humanitarian norms, universal humanitarian values, and limits of humanitarian actions as they apply to the trauma work and research. In the second part, participants will use case scenarios to further explore the role and responsibility of an international trauma specialist in the setting with complex needs; moral, cultural and ethical dilemmas; advocacy, media and communication; and ethically questionable practices: rescue fantasy, imposing moral judgments; fostering psychological dependence; misuse of power, or ignoring survivors’ competency. The review of the signs and consequences of the burnout in the field work highlights the importance of self-awareness and self-care as cornerstones of the professionalism and offers relevant coping skills.
Continuing Education

Educational Need
The ISTSS Annual Meeting provides a forum for sharing research, clinical strategies, public policy concerns and theoretical formulations on trauma. It is an international assembly of professionals and students representing an array of disciplines including psychiatrists, psychologists, social workers, nurses, counselors, researchers, administrators, victim advocates, journalists, clergy and others with an interest in the study and treatment of traumatic stress. Speakers are strongly requested to avoid unnecessary jargon and to make their work and its implication to the traumatic stress field as accessible as possible to those who do not share their particular perspective and type of scientific approach. This is designed to facilitate increased understanding of what different types of researchers (e.g., basic scientists, clinical researchers) focusing on different types of traumatic stressors (e.g., child maltreatment, disasters, terrorism, war) using different research methods and perspectives (e.g., epidemiology, genetics, psychosocial, psychobiological) have found as well as what the implications of their work are for the traumatic stress field. Our aspirational goal is to establish a jargon-free zone in which experts maximize communication of their work, findings and implications in a way that facilitates understanding and cross-fertilization among researchers, clinicians and policy makers from other perspectives.

Conference Goals
After participating in this activity, participants will be able to:

- Discuss the use of innovative technologies to improve treatment for trauma-related disorders
- Identify new ways of disseminating knowledge related to trauma and PTSD
- Describe public health-related issues that help to better understand trauma-related disorders and facilitate treatment

Continuing Medical Education Accreditation
This activity has been planned and implemented in accordance with the accreditation requirements and policies of the Accreditation Council for Continuing Medical Education (ACCME) through the joint providership of Boston University School of Medicine and the International Society for Traumatic Stress Studies. Boston University School of Medicine is accredited by the ACCME to provide continuing medical education for physicians.

Credit Designation
Boston University School of Medicine designates this live activity for a maximum of 28.5 AMA PRA Category 1 Credits™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

Note: CME includes author-attended poster sessions.

CME Course Director
Danny Kaloupek, PhD, Boston University School of Medicine

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Continuing Education Credit (non-MD)
The ISTSS 32nd Annual Meeting is co-sponsored by the International Society for Traumatic Stress Studies and The Institute for Continuing Education.

Continuing education credit is offered on a session by session basis with full attendance required for attended sessions. Application forms and CE packets will be available on site. Types of CE credit are listed below.

The program offers a total of 26.5 credit hours. If you have questions regarding continuing education, the program, learning objectives, or grievance issues, contact The Institute by phone, +1-800-557-1950; or email, instconted@aol.com. Continuing education verification is mailed to participants within 8 weeks of completing the online submission.

Continuing education credit is offered in the following disciplines for attendees who are licensed/certified by United States’ boards. The Institute for Continuing Education holds no provider status with licensing/certification boards in Canada or other countries. It is the responsibility of attendees who make application for CE credit and who hold licensure/certification with boards in countries other than the United States to determine if credit issued by an approved provider of a licensure/certification Board in the United States will meet their board’s regulations.

Psychology: The Institute for Continuing Education is approved as a provider by the American Psychological Association (APA) to sponsor continuing education for psychologists. The Institute for Continuing Education maintains responsibility for this program and its content. All clinical sessions are eligible for CE credit for psychology credit.
Continuing Education

Counseling: Texas Board of Examiners of Professional Counselors, provider 2183. Note: NBCC credit is not offered for this conference.

Social Work: The Institute for Continuing Education is approved as a provider for continuing education by the Association of Social Work Boards (ASWB), through the Approved Continuing Education Program (ACE). Licensed social workers should contact their individual state jurisdiction to review current continuing education requirements for licensure renewal. The Institute for Continuing Education maintains responsibility for the program. ASWB Provider No. 1007.

- Illinois Dept. of Professional Regulation: Social Work License: 159-000606.
- Ohio Board of Counselor/Social Work: Provider No. RCS 030001.
- Florida Provider: Department of Health, Div. of Counseling, Social Work, Marriage/Family Therapy. BAP #255.

Marriage/Family Therapy: Texas Board Marriage/Family Therapy, Provider 177.

Nursing: The Institute for Continuing Education is accredited as a provider of continuing education in nursing by the California Board of Nursing, Provider No. CEP 12646. Nurses should contact their state board to determine if approval of this program through the California Board of Nursing is acceptable for continuing education in their state.

Note: CE credit is offered only through United States state licensing/certification boards. The Institute for Continuing Education holds no provider status with Canadian Licensing/Boards Certification.

Commercial Support: The institute received no commercial support for its participation in this event.

Continuing Education Registration and Requirements for The Institute for Continuing Education

You may not register for credits after November 16. Continuing education credit will be awarded on a session-by-session basis, with full attendance required for each session attended. To receive continuing education credit, attendees must pay the CE fee, sign in/sign out daily, complete the continuing education evaluation packet, and complete the online submission. Stop by the continuing education desk before attending any sessions to receive your packet and to sign in/sign out daily. It is the responsibility of conference attendees who hold licensure with boards to contact their individual licensing jurisdiction to review current continuing education requirements for licensure renewal. The following events/presentations are not available for continuing education credits: poster sessions*, awards ceremony/business meeting, internship and postdoctoral networking fair, student lunch, films, town hall meeting and special interest group meetings.

Note: *Author-attended poster sessions are available for CME only.
Paper in a Day

Wednesday, November 9
8:30 a.m. – 5:00 p.m. – Plus Pre- and Post-Meeting Assignments

Paper in a Day grew out of a wish to foster collaborations between young researchers from around the world. Many of these researchers will be future leaders in the domain of posttraumatic mental health and the field will benefit from their partnerships and teamwork. Paper in a Day is designed to stimulate international connections and the exchange of ideas by working on a tangible outcome: a brief paper or commentary for a peer-reviewed journal. This will be an intensive, productive and enjoyable day. Previous editions have led to conference contributions, journal articles, and lasting contacts (see the recent article in Traumatic Stress Points for more information). Because Paper in a Day will take place prior to the ISTSS annual meeting, participants will have the opportunity to continue dialogue with colleagues during the conference.

Program
After registration, participants will be assigned to a team. Each team will choose a topic based on shared interests. Two weeks prior to the workshop, participants will individually prepare (e.g. read relevant articles, draft sections of the paper). The workshop will include plenary discussions about the topic and the drafted texts, and writing time in subgroups. Following the workshop, the draft will be finalized for submission.

Commitment
In order to make the event a success, we ask participants to commit to:

a) Prepare in advance of the meeting - dedicate eight hours prior to the workshop.
b) Be present for the entire workshop.
c) Contribute to the final editing and referencing following the workshop.

How to participate
This event is aimed at early career academics who have obtained their PhD after November 2011 or who are in the final stages of submission. If you would like to participate, please send an email to sadieelarsen@gmail.com by October 1, 2016 (first come, first serve) with the following information:

1) A short CV listing your publications and main research interests to inform our choice of topics. Please also let us know if you have an idea for/access to data to complete a relatively contained empirical paper, meta-analysis/review, or commentary on a recent article.
2) A statement that you commit to the required preparation, attendance and follow-up activities as described.

There is no registration fee for this PMI.

ISTSS Special Interest Groups

Special Interest Groups (SIGs) provide members with a forum for communication and interaction about specific topics related to traumatic stress. They provide a means of personal and professional involvement in the activities of the society. All meeting participants are welcome to attend SIG meetings.

Thursday, November 10, 11:45 a.m. – 1:00 p.m.
Complex Trauma SIG
Diversity and Cultural Competence SIG
Early Interventions SIG
Family Systems SIG
Gender and Trauma SIG
Genomics and Trauma SIG
Lesbian, Gay, Bisexual and Transgender (LGBT) SIG
Psychodynamic Research and Practice SIG
Terrorism and Bioterrorism Related Trauma SIG
Theory and Traumatic Stress Studies SIG
Trauma and Substance Use Disorders SIG
Traumatic Loss and Grief SIG

Saturday, November 12, 11:45 a.m. – 1:00 p.m.
Aging, Trauma and the Life Course SIG
Dissemination and Implementation SIG
Intergenerational transmission of Trauma and Resilience SIG
Military SIG
Trauma Assessment and Diagnosis SIG
Pre-Symposium Institutes
Wednesday, November 9

**Full-Day Institute**
8:30 a.m. – Noon and 1:30 p.m. – 5:00 p.m.

**PMI #1**

**Behavioral Sleep Medicine Interventions for Trauma-related Sleep Disturbances: Cognitive Behavioral Therapy for Insomnia and Exposure, Relaxation, and Rescripting Therapy for Chronic Nightmares**

*Primary Keyword:* Train/Ed/Dis  
*Secondary Keyword:* Practice-Sleep-Train/Ed/Dis  
*Population Type:* Adult  
*Presentation Level:* I  
*Region:* Global  

Kristi Pruiksma, PhD; Rachel Micol, BS; Daniel Taylor, PhD

1University of Texas Health Science Center at San Antonio, Fort Hood, Texas, USA  
2The University of Tulsa, Tulsa, Oklahoma, USA  
3University of North Texas, Denton, Texas, USA

Nightmares and sleep disturbances are commonly reported following trauma and are considered the hallmark of posttraumatic stress disorder (PTSD). Historically, sleep disturbances have been conceptualized as secondary symptoms that will remit following PTSD treatment. However, coalescing lines of research indicate sleep disturbances are more than just PTSD symptoms, have likely become partially independent, and may be maintaining and exacerbating PTSD. Sleep disturbances may also remain following successful treatment of PTSD and are uniquely related to suicidality, depression, and substance use. There is strong evidence supporting non-medication treatments for insomnia and nightmares, yet many providers have not received adequate training in the implementation of these interventions. Thus the goals of this PMI are to (1) present the evidence base for cognitive behavioral therapy for insomnia (CBT-I) and Exposure, Relaxation, and Rescripting Therapy (ERRT) for nightmares and (2) to provide step-by-step guidance on how to implement these interventions in clinical practice. We will achieve these goals by presenting case examples, providing handouts to be used in clinical practice, video demonstrations as well as audience exercises to further reinforce the utility of these treatments.

**Half-Day Institute**
8:30 a.m. – Noon

**PMI #2**

**Keeping Traumatic Stress Patients’ Electronic Data and Communication Private and Secure: Ethical and Legal Issues, and Applied Software Applications**

*Primary Keyword:* Tech  
*Secondary Keyword:* Practice-Ethics  
*Population Type:* N/A  
*Presentation Level:* I  
*Region:* Global  

Jon Elhai, PhD

University of Toledo, Toledo, Ohio, USA

In recent years, mental health professionals have increasingly incorporated information technology into patient care, including use of smartphones, tablets and laptops for electronic communication, psychological assessment, homework assignment completion and record keeping. Yet weaknesses exist in these technologies that can put patient privacy at risk. This issue is especially salient when working with traumatic stress patients, given the sensitive nature of narrative discussion that happens in trauma-focused psychotherapy (e.g., exposure interventions). In this workshop, issues of ethics, privacy and security of such technology will be discussed in regard to the treatment of traumatic stress patients. Common vulnerabilities empirically found with electronic privacy among mental health clinicians will be detailed. HIPAA regulations related to electronic security will be discussed. An introduction to the concept of “encryption” and its application to traumatic stress practice will be emphasized. I will also explain the relevance of social psychological theory on protection motivation to explaining successful adoption of electronic security practices. Discussion and details are offered on free, easy to use software application solutions for securing patient communication and records. Also discussed are such issues as using encrypted wireless networks, secure email, encrypted messaging and videoconferencing, privacy on social networks, and others. For non-technologically savvy users, this discussion will likely be unfamiliar; though the information will be presented in very basic, non-technical terms. Even for advanced, technologically savvy users, a good deal of this information will likely be unfamiliar and of interest.
Pre-Meeting Institutes
Wednesday, November 9

Half-Day Institute
8:30 a.m. – Noon

PMI #3

Systematic Delivery of Exposure, Cognitive, and Behavioral Treatments for PTSD with a 16-Week Manualized Group Protocol

Primary Keyword: Clin Res
Secondary Keyword: Practice-Cog/Int-Mil/Vets-Gender
Population Type: Adult
Presentation Level: A
Region: Industrialized

Diane Castillo, PhD1; Janet C’de Baca, PhD2; Christine Chee, PhD2; Heidi La Bash, PhD1
1VA VISN 17 Center of Excellence for Research on Returning War Veterans, Waco, Texas, USA
2New Mexico VA Healthcare System, Albuquerque, New Mexico, USA

This is a two-part advanced workshop for clinicians wishing to use a group format to deliver exposure, cognitive, and behavioral treatments for PTSD. The first hour will cover the group literature, challenges to group treatment, and results from a unique 3-member randomized controlled trial with three treatment modules. The manualized 16-week group treatment showed improvement in PTSD (24-point decrease on the CAPS, p<.001, ES=1.72); on functioning (SF-36: Mental: p<.001, ES=1.31; and Physical, p<.001, ES=1.08); and in quality of life (QOLI: p<.001, ES=1.01) in a sample of female OEF/OIF PTSD Veterans. Clinical improvement was comparable to individual PE (Schnurr, et al., 2003), with 77% showing a response to treatment and 52% loss of diagnosis. PCL scores significantly improved for the Exposure (ES=1.42) and Cognitive (ES=0.90) modules, with both superior to the behavioral (Skills) module.

The second part of the workshop will be devoted to providing direction on how to conduct the novel 3-member, 3-module (Exposure, Cognitive, Skills) group treatment protocol. Instruction will include a combination of didactics, instructor demonstrations, and role play for attendees. Most unique to the protocol is conducting imaginal exposure in a 3-member, 90-minute group, with weekly in-session imaginal exposure for each group member. This protocol design addresses the logistic problem of exposure therapy in group. Orientation and Wrap up are conducted in sessions 1 and 16, respectively. Exposure Module (5 sessions). The rationale, identification of safety options, and index trauma are addressed in session 1. Guided imaginal exposure (Keane, et al., 1989; Foa, et al., 2007) is conducted in sessions 2 through 5, with 30 minutes devoted to each member. Cognitive Module (5 sessions).

Half-Day Institute
8:30 a.m. – Noon

PMI #4

The Interpersonal Paradox of Trauma: Principles and Practice of Treating Trauma in Couple and Family Systems

Primary Keyword: Practice
Secondary Keyword: Fam/Int-Theory
Population Type: Lifespan
Presentation Level: M
Region: Global

Briana Nelson Goff, PhD1; Lauren Oseland, MS, PhD Student1; Kami Schwerdtfeger Gallus, PhD, LMFT2; Laurel Kiser, PhD MBA2; Rachel Dekel, PhD4
1Kansas State University, Manhattan, Kansas, USA
2Oklahoma State University, Stillwater, Oklahoma, USA
3University of Maryland School of Medicine, Baltimore, Maryland, USA
4Bar-Ilan University, Ramat Gan, Ramat Gan, Israel

While the study of psychological trauma has traditionally focused on the development of individual symptoms in the person directly exposed to a traumatic event, research over the past 20 years invites a more dynamic conceptualization of the recursive relationship between trauma, interpersonal relationships, and broader contextual factors that influence the expression and duration of traumatic stress (e.g., Figley & Kiser, 2013; Goff & Smith, 2005). Trauma exposure is a multifaceted and complex experience that uniquely impacts individual survivors, their loved ones, and the social systems in which they live. In particular, there appears to be a basic, yet
important paradox involved within the interpersonal context of trauma as trauma frequently erodes the strengths of and has a negative impact on the very interpersonal relationships that could promote recovery and posttraumatic growth (Johnson, 2002). Due to the interpersonal nature of trauma, traditional intervention and recovery-focused therapy on an individual level may be inadequate. In Part 1 of this PMI, the presenters will describe models of systemic trauma, based on current theories, research, and clinical experience, including Family Systems Theory, Ecological Systems Theory, and Attachment Theory. Specifically, The Couple Adaptation to Traumatic Stress Model (Goff & Smith, 2005; Oseland, Gallus, & Nelson Goff, 2016) and the Family Adaptation to Trauma Model (Figley & Kiser, 2013) will be reviewed. The presentation will disseminate information regarding the presented models, the primary issues faced by traumatized systems (i.e., couple, family, and community), and methods to apply these models to the empirical study of and clinical approaches with traumatized systems. In Part 2 of this PMI, the presenters will describe methods of engaging couple and family systems in trauma-informed systemic treatment approaches. This session will focus on practical skills for working systemically with couple and family systems, recognizing critical ethical issues in working with these groups, and addressing specific challenges that may be unique to trauma-exposed relational systems. Presenters have experience working in industrialized and developing countries with couples, families and communities coping with traumatic stress. Thus, the aim of this session is to provide applicable knowledge for clinicians from diverse backgrounds to bridge the gap between empirical and clinical approaches to working with trauma survivors and their families.

Pre-Meeting Institutes
Wednesday, November 9

Half-Day Institute
8:30 a.m. – Noon

PMI #5

Addressing Trauma and Grief in Adolescence: New Models, Measures, and Interventions

Primary Keyword: Clin Res
Secondary Keyword: Death-Dev/Int-Pub Health-Grief
Population Type: Child/Adol
Presentation Level: M
Region: Global

William Saltzman, PhD(c)1; Christopher Layne, PhD2; Julie Kaplow, PhD, ABPP3; Robert Pynoos, MD, MPH2; Erna Olafson, PhD, PsyD4; Monique Marrow, PhD5

1California State University, Long Beach, Long Beach, California, USA
2UCLA - National Center for Child Traumatic Stress, Los Angeles, California, USA
3University of Texas Health Science Center, Houston, Texas, USA
4University of Cincinnati, Cincinnati, Ohio, USA
5University of Kentucky Center for the Study of Violence Against Children, Lexington, KY 40506, Kentucky, USA

Converging developments in basic and applied research suggest that posttraumatic stress and grief reactions are related yet different entities that call for different assessment measures and intervention components. Further, trauma and bereavement often co-occur, especially among adolescents—an age group at highest risk for exposure to violent crime, traumatic injury, and traumatic death. This PMI will cover recent advances in the treatment of the effects of trauma and bereavement in adolescence, including an evidence-based intervention for traumatized and bereaved adolescents—Trauma and Grief Component Therapy for Adolescents (TGCT-A). TGCT-A is an assessment-driven, modularized intervention that can be flexibly tailored according to the exposure histories, needs, strengths, and life circumstances of specific groups and individuals. We will begin with an overview of the developmental tasks, capacities, and needs of adolescents, and the window of opportunity offered by adolescence for intervention. We will then discuss recent advances in conceptualizing, assessing, and treating the interplay between trauma and bereavement as viewed through the lens of multidimensional grief theory. We will then present findings from domestic and international open field trials, qualitative studies, and a large-scale randomized controlled field trial, which show consistent evidence of the effectiveness of TGCT-A in reducing posttraumatic stress and maladaptive grief reactions, and improving academic performance, peer relationships, and pro-social behaviors.
We will then discuss how TGCT-A components, paired with properly designed assessment measures, can be tailored to provide universal (broad-spectrum), targeted (specialized), and preventive (resilience-enhancing) services in school, juvenile justice, and child welfare settings. We illustrate methods for providing state-of-the-art treatment for posttraumatic stress and grief reactions to vulnerable adolescents with complex histories of trauma and loss in ways that abide by public health principles—including identifying high-risk groups, stratifying groups by exposure severity and type of need, and improving access to services. Given its utility for juvenile justice, we will review a recently published multi-year evaluation of TGCT-A paired with trauma-informed staff training (Think Trauma) at six residential facilities, which found significant pre-post reductions in posttraumatic stress, depression and anger symptoms, seclusions, and restraints. We will conclude with demonstrations of ways to use TGCT-A’s modularized design to customize intervention for either groups or individuals with different assessment profiles, as well as discussion of next steps in research and program dissemination.

Half-Day Institute
8:30 a.m. – Noon

PMI #6
Trauma-informed Primary Care: A Practical Approach

Primary Keyword: Practice
Secondary Keyword: Health-Care
Population Type: Lifespan
Presentation Level: M
Region: N/A

Jennifer Ayres, PhD\(^1\); Karen Sitterle, PhD\(^2\)
\(^1\)University of Texas at Austin, Austin, Texas, USA
\(^2\)University of Texas Southwestern, Dallas, Texas, USA

Patients who are reluctant to self-refer for psychotherapy are often more receptive to receiving behavioral health services integrated into medical care. Intervention with patients with histories of recent or past trauma presenting for primary care gives medical and mental health providers an opportunity to address the neurobiological aspects of trauma in an integrated fashion that fosters interdisciplinary collaboration. This pre-meeting institute (PMI) will address (1) the unique challenges and benefits of intervening with trauma survivors in primary care settings, (2) how to provide interdisciplinary trauma training that addresses impact of traumatic life events on patient health, (3) quick and efficient screening for trauma history, intimate partner violence, traumatic grief & loss, trauma due to injury, illness, or medical procedures (4) the continuum of trauma-informed interventions ranging from single session, short-term (EBTs), and patient education, and (5) how to provide linkage to community resources, including outpatient behavioral health, shelter, legal resources. Providers in primary care settings find themselves addressing the needs of survivors of abuse, natural & manmade disasters, traumatic grief & loss, medical trauma, and intimate partner violence. Interventions need to recognize the common clinical needs of survivors (e.g., coping with emotional & physical pain, grief & loss, finding meaning following painful experiences, and self-identity shifts from trauma victim to survivor) and simultaneously be flexible enough to address trauma-specific needs of survivors (e.g., avoidance issues, preparing for anticipated trigger situations).

This PMI will focus on how to overcome barriers and limitations to providing trauma-informed care in primary care settings (e.g., short appointment slots, busy schedules, lack of resources for mental health services, limited financial and transportation resources, and treatment adherence issues). Case examples will be presented.

Half Day Institute
1:30 p.m. – 5:00 p.m.

PMI #7
Ethics for the International Trauma Specialists

Primary Keyword: Global
Secondary Keyword: Ethics-Global-Civil/War
Population Type: Prof
Presentation Level: M
Region: Global

Elena Cherepanov, PhD
Cambridge College, Boston, Massachusetts, USA

An international trauma specialist provides services to highly vulnerable and culturally diverse populations around the world. The unprecedented scale of human suffering, complexity of psychological needs and limited resources create particular professional and personal challenges and puts special demands on making independent, responsible and ethical decisions in extraordinary and often unique circumstances. Adherence to ethical principles sets standards for practice, gives a sense of professional community (Williams, 2012) and ensures a shared framework in every humanitarian response. The international perspective offers a guidance for the competent trauma care based on the international humanitarian principles: humanity, neutrality, impartiality, and independence (UNOCHA, 2012). In the first part of the training, the participants will learn about international humanitarian norms, universal humanitarian values, and limits of humanitarian actions as they apply to the
trauma work and research. In the second part, participants will use case scenarios to further explore the role and responsibility of an international trauma specialist in the setting with complex needs; moral, cultural and ethical dilemmas; advocacy, media and communication; and ethically questionable practices: rescue fantasy, imposing moral judgments; fostering psychological dependence; misuse of power, or ignoring survivors’ competency. The review of the signs and consequences of the burnout in the field work highlights the importance of self-awareness and self-care as cornerstones of the professionalism, and offers relevant coping skills.

Half Day Institute
1:30 p.m. – 5:00 p.m.

PMI #8
Dropping the Trauma Account: Intro into Cognitive Processing Therapy—Cognitive Only

Primary Keyword: Practice
Secondary Keyword: Clin Res-Practice-Cog/Int
Population Type: Adult
Presentation Level: I
Region: Industrialized

Katherine Dondanville, PsyD1; Patricia Resick, PhD, ABPP2
1University of Texas Health Science Center at San Antonio, San Antonio, Texas, USA
2Duke University Medical Center, Durham, North Carolina, USA

CPT is an evidence-based cognitive therapy for PTSD and comorbid symptoms that can be implemented without a written account. For over a decade trainings in Cognitive Processing Therapy (CPT) have exclusively taught CPT including the trauma account as an assignment. Results from a dismantling study (Resick et al., 2008) indicate the trauma account is a non-essential element for symptom change. CPT- Cognitive Only (CPT-C) was found to be equally effective and more efficient than utilizing the traditional model. Most importantly, eliminating the trauma account may prevent patient drop-out. The purpose of this institute is to provide attendees the basics of cognitive processing therapy – cognitive only (CPT-C) and facilitate a discussion about making the transition for those practicing CPT with the trauma account. Clinicians may be more comfortable with providing the version of CPT that does require writing and reading a trauma account or may have been in the habit of doing so and are unsure of how to conduct the protocol without the written narrative. CPT-C is a systematic approach to treating PTSD in which participants are encouraged to feel their emotions and learn to think about their traumatic events differently. The institute includes a functional cognitive description of why some people do not recover after traumatization. Following a review of research on CPT-C, participants will receive an overview of the 12-session therapy, with an emphasis on the differences between CPT and CPT-C. The use of Socratic Dialogue to facilitate emotional processing will be reviewed, along with research regarding who may respond better to treatment with or without a trauma narrative. Specific trauma details will be discussed and presented in video-recorded sessions. Role-play and consultation will be included.

Half Day Institute
1:30 p.m. – 5:00 p.m.

PMI #9

Use of Expert Evidence on Counterintuitive Victim Behavior in Sexual Assault Prosecution

Primary Keyword: Train/Ed/Dis
Secondary Keyword: DV-Rape-Social-Gender
Population Type: Adult
Presentation Level: I
Region: Industrialized

Mindy Mechanic, PhD
California State University, Fullerton, Fullerton, California, USA

The goal of the proposed PMI is to provide trauma professionals with education and training on the use of expert testimony on counterintuitive victim behavior in sexual assault prosecutions. Such training will provide trauma professionals with valuable knowledge, enabling them to share their knowledge with judges and juries. The term "counterintuitive victim behavior" (CIVB) refers to behavioral, emotional, or physical responses observed among, or reported by trauma/ crime victims that can be understood within the context of that trauma/victimization, but which lay persons fail to understand or misunderstand due to lack of information, myths and stereotypes or other misconceptions held about how ‘real’ victims behave or ought to behave. It includes actions, behaviors, feelings, and other responses, in addition to failures to respond in expected ways. Courts across the U.S. have admitted CIVB testimony in the prosecution of sexual assault. When lay persons fail to accurately understand the reality of IPA/sexual assault, they apply their own incorrect assumptions about how ‘real’ victims do or should behave, consequently judging victims as not credible and dismissing their accounts as lacking veracity. Expert testimony on CIVB can help to rebut prevailing myths and misunderstandings about the nature of, and responses to sexual assault, particularly non-stranger sexual assault, in contrast to the prevailing ‘stranger danger’ mythology. Expert testimony can be used to provide a framework or context, within which to interpret a sexually assaulted woman’s behavior, helping to
make sense out of the unimaginable things that simply do not make logical sense when viewed out of the unique context in which they occurred. This is particularly true for acts that defy lay expectations, e.g., compliance perpetrator demands, lack of forceful resistance, and lack of affect post-assault. CIVB evidence offers jurors a framework for fairly interpreting and evaluating victim accounts without dismissing them as disingenuous. In addition to myths and misunderstandings about how victims respond to sexual assault or IPSA, many aspects of trauma-related behavior are unfamiliar and counterintuitive to them. Such topics include traumatic memory; delayed reporting/disclosure; lack of effect when recounting the assault; incomplete or inconsistent statements to the police or other providers; continued contact with the alleged offender, particularly in non-stranger sexual assault cases; returning to life as usual following assault.

**Half Day Institute**  
1:30 p.m. – 5:00 p.m.  
PMI #10

**Learning To Effectively Administer and Score the Clinician-administered PTSD Scale for DSM-5 (CAPS-5)**

Primary Keyword: Assess/Dx  
Secondary Keyword: Practice-Res Meth-Train/Ed/Dis  
Population Type: N/A  
Presentation Level: M  
Region: N/A

Michelle Bovin, PhD1; Frank Weathers, PhD2  
1VA Boston Healthcare System, National Center for PTSD; Boston University School of Medicine, Boston, Massachusetts, USA  
2Auburn University, Auburn, Alabama, USA

Reliable and valid assessment of posttraumatic stress disorder (PTSD) is essential for correctly identifying individuals with this debilitating disorder. Structured diagnostic interviews are considered the “gold standard” for assessing PTSD symptoms and establishing PTSD diagnostic status (Bovin, Marx, & Schnurr, 2015). Since its development in 1990 at the National Center for PTSD, the Clinician-Administered PTSD Scale (CAPS; Blake et al., 1990) has become the most widely used structured interview for PTSD (Bovin & Weathers, 2012). In response to the significant revisions made to the PTSD diagnosis for the fifth edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM-5; APA, 2013), the CAPS was recently revised to reflect the new criteria. The goals for the revision were to ensure correspondence with DSM-5, retain distinctive features and maximize backward compatibility with earlier versions of the CAPS, and streamline administration and scoring (Weathers, 2014). Initial evaluation of the CAPS-5 indicates that it maintains the excellent psychometric properties of its predecessors (Weathers et al., in preparation).

Because the DSM-5 PTSD criteria constitute the current official definition of PTSD and reflect an updated conceptualization of the disorder, it is essential for clinicians and investigators to begin using DSM-5-compatible measures such as the CAPS-5 as soon as possible -- measures reflecting DSM-IV criteria are now outdated. However, because of the changes made to both the structure and the content of the CAPS-5, careful training on the new version of the instrument is required to ensure that the measure is administered and scored accurately. Accordingly, the purpose of this pre-meeting institute is to provide attendees with an in-depth examination of the CAPS-5 so they can begin to use it effectively in their own clinics and laboratories. This important and timely workshop will review the following topics:

1. The history of the CAPS and the rationale for the new format for the CAPS-5;  
2. The three versions of the CAPS-5 and when each can be employed effectively;  
3. Guidelines for standard administration and scoring;  
4. Tips for effectively handling common challenges that occur during CAPS-5 interviews.

In order to provide a “hands-on” training experience, participants will watch a live mock CAPS-5 interview, score each item in real time, and have the opportunity to ask questions about the rationale behind administration and scoring decisions.
Half Day Institute  
1:30 p.m. – 5:00 p.m.  

PMI #11  

Working with PTSD in Refugees and Asylum Seekers  

Primary Keyword: Practice  
Secondary Keyword: Cul Div-Refugee-Torture-Theory  
Population Type: Adult  
Presentation Level: M  
Region: Industrialized  

Kerry Young, PhD  
Central and North West London NHS Foundation Trust, London, England, United Kingdom  

Many countries across the world have seen a dramatic increase in the number of people seeking asylum. Currently, there are thought to be approximately 19 million official refugees worldwide (UNHCR, 2016). While estimates vary, we expect up to half of those seeking asylum to suffer from PTSD (Bogic et al., 2012; Turner et al., 2001). Thus, there is a pressing need for evidence-based interventions for treating PTSD in this group.

There are well-established protocols for the effective treatment of PTSD using trauma-focused therapies (e.g. Ehlers et al. 2005; McLean and Foa, 2011; Resick et al., 2012). However, there is relatively little information about how to adapt these therapies for PTSD resulting from multiple traumatic events in refugee populations. Currently, the weight of what evidence there is points to the effectiveness of Narrative Exposure Therapy (NET) (Schauer, Neuner & Elbert, 2005) in the treatment of multiply traumatized refugees and asylum seekers (see Robjant and Fazel, 2010 for a review). There has also been some work adapting Cognitive Processing Therapy (CPT) (Kaysen et al., 2011; Bass et al., 2013) and standard Imagery Re-scripting (ImRS) protocols in this population (Arntz et al., 2013).

In this workshop, I will give participants a theoretical and practical framework for the cognitive-behavioural assessment and treatment of refugees and asylum seekers with PTSD, using the aforementioned evidence base as a guide. Topics covered will be:

- Working with interpreters  
- Cultural modifications of trauma-focused therapy  
- What to consider at assessment  
- What theoretical framework to use for formulation  
- Treatment planning  
- How to do reliving and other evidence-based treatments with people who have experienced multiple traumatic events  
- Outcome research in this area

The workshop will involve formal presentations, case discussion, lots of video role-play of techniques and group discussion.
## Daily Schedule

### Tuesday, November 8

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
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<tr>
<td>4:00 p.m. – 6:00 p.m.</td>
<td>Registration Desk Open</td>
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### Wednesday, November 9

<table>
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<tr>
<th>Time</th>
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<tbody>
<tr>
<td>7:30 a.m. – 8:30 a.m.</td>
<td>Coffee and Tea Service</td>
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### Wednesday, November 9, 8:30 a.m. – 5:00 p.m.

#### PMI 1

**Behavioral Sleep Medicine Interventions for Trauma-related Sleep Disturbances: Cognitive Behavioral Therapy for Insomnia and Exposure, Relaxation, and Rescripting Therapy for Chronic Nightmares**

(Pruiksma, Kristi, PhD; Micol, Rachel, BS; Taylor, Daniel, PhD)

(Train/Ed/Dis, Practice, Sleep, Train/Ed/Dis, Adult, Global)

### Wednesday, November 9, 8:30 a.m. – Noon

#### PMI 2

**Keeping Traumatic Stress Patients’ Electronic Data and Communication Private and Secure: Ethical and Legal Issues, and Applied Software Applications**

(Elhai, Jon, PhD)

(Tech, Practice, Ethics, N/A, Global)

#### PMI 3

**Systematic Delivery of Exposure, Cognitive, and Behavioral Treatments for PTSD with a 16-Week Manualized Group Protocol**

(Castillo, Diane, PhD; C’de Baca, Janet, PhD; Chee, Christine, PhD; La Bash, Heidi, PhD)

(Clin Res, Practice, Cog/Int, Mil/Vets, Gender, Adult, Industrialized)

#### PMI 4

**The Interpersonal Paradox of Trauma: Principles and Practice of Treating Trauma in Couple and Family Systems**

(Nelson Goff, Briana, PhD; Oseland, Lauren, MS, PhD Student; Schwerdtfeger Gallus, Kami, PhD, LMFT; Kiser, Laurel, PhD MBA; Dekel, Rachel, PhD)

(Practice, Fam/Int, Theory, Lifespan, Global)

#### PMI 5

**Addressing Trauma and Grief in Adolescence: New Models, Measures, and Interventions**

(Saltzman, William, PhD(c); Layne, Christopher, PhD; Kaplow, Julie, PhD, ABPP; Pynoos, Robert, MD MPH; Olafson, Erna, PhD, PsyD; Marrow, Monique, PhD)

(Clin Res, Death, Dev/Int, Pub Health, Grief, Child/Adol, Global)

#### PMI 6

**Trauma-informed Primary Care: A Practical Approach**

(Ayres, Jennifer, PhD; Sitterle, Karen, PhD)

(Practice, Health, Care, Lifespan, N/A)

### Noon – 1:30 p.m.

**Lunch on your Own**
# Daily Schedule

## Wednesday, November 9, 1:30 p.m. – 5:00 p.m.

| PMI 7 | Ethics for the International Trauma Specialists  
**Cherepanov, Elena, PhD**  
(Global, Ethics, Global, Civil/War, Prof, Global) | M |
| --- | --- | --- |
| PMI 8 | Dropping the Trauma Account: Intro into Cognitive Processing Therapy-cognitive Only  
**Dondanville, Katherine, PsyD; Resick, Patricia, PhD, ABPP**  
(Practice, Clin Res, Practice, Cog/Int, Adult, Industrialized) | I |
| PMI 9 | Use of Expert Evidence on Counterintuitive Victim Behavior in Sexual Assault Prosecution  
**Mechanic, Mindy, PhD**  
(Train/Ed/Dis, DV, Rape, Social, Gender, Adult, Industrialized) | I |
| PMI 10 | Learning To Effectively Administer and Score the Clinician-Administered PTSD Scale for DSM-5 (CAPS-5)  
**Bovin, Michelle, PhD; Weathers, Frank, PhD**  
(Assess Dx, Practice, Res Meth, Train/Ed/Dis, N/A, N/A) | M |
| PMI 11 | Working with PTSD in Refugees and Asylum Seekers  
**Young, Kerry, PhD**  
(Practice, Cul Div, Refugee, Torture, Theory, Adult, Industrialized) | M |

### 5:15 p.m. – 6:15 p.m.

**Student Attendee Orientation**

### 6:30 p.m. – 8:00 p.m.

**Keynote Panel**  
**Responding to Terror Attacks: What are the Right Ways to Act?**  
**Moderator: Grete Dyb, MD, PhD**  
**Dyb, Grete, MD, PhD, Shapiro, Bruce, Brewin, Chris, PhD, Svendsen, Tuva, Pirard, Philippe, Brymer, Melissa, PhD, PsyD, Pynoos, Robert, MD, MPH**

## Thursday, November 10

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<thead>
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<tr>
<td>7:30 a.m. – 6:00 p.m.</td>
<td>Exhibits Open</td>
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<tr>
<td>8:00 a.m. – 7:00 p.m.</td>
<td>Bookstore Open</td>
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### 8:30 a.m. – 8:50 a.m.

**ISTSS Award Presentations**

### 8:50 a.m. – 9:50 a.m.

**Keynote Address**  
**The Epidemiology of Trauma and PTSD**  
**Kessler, Ronald, PhD**  
(Pub Health, Chronic, Complex, Global, Prevent, Adult, Global)
## Daily Schedule

**Thursday, November 10, 10:15 a.m. – 11:30 a.m.**

### Concurrent Session One

<table>
<thead>
<tr>
<th>Invited Symposium</th>
<th>How Novel Technology may Support a Public Health Approach to Trauma and Its Consequences around the World</th>
</tr>
</thead>
</table>
| Chair (Olff)      | Scaling Up: Using Web and Phone Technologies to Assist Trauma Survivors  
(Ruzek, Josef, PhD) (Global, Global, Pub Health, Tech, Lifespan, Global) |
|                   | Reaching Populations in Need: A Protocol for Developing an eMental Health Intervention for Migrant Workers  
(Hall, Brian, PhD) (Global, Global, Pub Health, Tech, Lifespan, Global) |
|                   | Using Hope Stories to Facilitate Resilience: A Public Health Approach  
(Ho, Samuel, PhD; Zhang, Eugene, PhD) (Global, Global, Pub Health, Lifespan, Global) |
|                   | Addressing the Population-level Burden of Child Trauma: The Promise and Challenge of eHealth Tools  
(Kassam-Adams, Nancy, PhD) (Global, Global, Pub Health, Tech, Lifespan, Global) |

<table>
<thead>
<tr>
<th>Symposium</th>
<th>How does Media Coverage of Traumatic Events Impact the Populace and Those Who Report It? Evidence from Survey and Experimental Research</th>
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<tbody>
<tr>
<td>Chair (Garfin)</td>
<td>Discussant (Galea)</td>
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<tr>
<td>Holman, E. Alison, PhD; Garfin, Dana Rose, PhD; Cohen Silver, Roxane, PhD) (Pub Health, Terror, Adult, Industrialized)</td>
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<tr>
<td>Garfin, Dana Rose, PhD; Holman, E. Alison, PhD; Fischhoff, Baruch, PhD; Wong-Parodi, Gabrielle, PhD; Cohen Silver, Roxane, PhD) (Pub Health, Health, Adult, Industrialized)</td>
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<tr>
<td>Holmes, Emily, PhD; James, Ella, PhD) (Prevent, Cog/Int, Prevent, Pub Health, Res Meth, Adult, N/A)</td>
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<tr>
<td>Redmond, Sarah, Doctoral Student; Cohen Silver, Roxane, PhD; Lubens, Pauline, PhD Candidate) (Journalism, Civil/War, Adult, N/A)</td>
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</tbody>
</table>
## Daily Schedule

**Thursday, November 10, 10:15 a.m. – 11:30 a.m.**

### Concurrent Session One

#### New Computational Methods for PTSD Research

**Chair (Saxe)**

**Discussant (Marmar)**

- **Risk Factors for PTSD in Children: New Computational Methods**
  - **(Saxe, Glenn, MD)**
  - (Res Meth, Acc/Inj, Bio Med, Genetic, Child/Adol, N/A)

- **Identification of High Dimensional Genetic & Phenotypic Interactions that Regulate the Emergence of Posttraumatic Stress & Resilience following Life Threat in a Prospective Cohort of Police Officers**
  - **(Galatzer-Levy, Isaac, PhD; Marmar, Charles, MD)**
  - (Bio Med, Acute, Chronic, Sleep, Genetic, Adult, Industrialized)

- **Advanced Computational Methods Improve the Prediction of Post-traumatic Psychopathology in Acutely Traumatized Adults.**
  - **(Shalev, Arieh, MD; Galatzer-Levy, Isaac, PhD; Qi, Wei, MD; Gevonden, Martin, PhD; Marmar, Charles, MD)**
  - (Assess Dx, Acute, Assess Dx, Bio Med, Prevent, Adult, Global)

- **Brain Entropy as a Substrate of Psychological States in Trauma Victims**
  - **(Calderone, Daniel, PhD)**
  - (Bio Med, Res Meth, Neuro, Theory, Child/Adol, Industrialized)

#### A Multi-Method Evaluation of Current Initiatives for Trauma-Exposed Children and Youth

**Chair (Romano)**

- **Meta-analysis of Interventions for Children Exposed to Intimate Partner Violence**
  - **(Saini, Michael, PhD; Romano, Elisa, PhD, Cpsych; Bell, Tessa, Doctoral Student)**
  - (Clin Res, DV, Res Meth, Lifespan, N/A)

- **Permanency and Safety among Children in Foster Family and Kinship Care: A Scoping Review**
  - **(Bell, Tessa, Doctoral Student; Romano, Elisa, PhD, Cpsych)**
  - (Clin Res, CPA, Prevent, Res Meth, Child/Adol, N/A)

- **How Useful is a Community-based Partnership Model to Support Educational Outcomes for Foster Care Youth?**
  - **(Weegar, Kelly, PhD Candidate; Fall, Mariama, PhD Candidate; Hickey, Andrea, PhD Candidate; Shewchuk, Samantha, PhD Candidate; Flynn, Robert, PhD)**
  - (Commun, CPA, Comm/Int, Prevent, Child/Adol, Industrialized)

- **Understanding Outcomes of the SafeCare® Program for Child Welfare-involved Families: A Focus on Provider and Parent Assessments**
  - **(Romano, Elisa, PhD, Cpsych; Gallitto, Elena, PhD Student; Czechowski, Karina, BA (Hons))**
  - (Prevent, Clin Res, Neglect, Lifespan, Industrialized)
## Daily Schedule

**Thursday, November 10, 10:15 a.m. – 11:30 a.m.**

### Concurrent Session One

<table>
<thead>
<tr>
<th>Symposium</th>
<th>Title</th>
<th>Chair</th>
<th>Discussant</th>
<th>Presenters</th>
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<tbody>
<tr>
<td><strong>Symposium</strong></td>
<td><strong>Sex Specificity in Posttraumatic Stress Disorder: From Biological Mechanisms to Treatment Response</strong></td>
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<td>Chair (Felmaningham)</td>
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<td>Discussant (Jovanovic)</td>
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<td></td>
<td>Prospective Study of Sex Differences in the Development of PTSD: Why Women are at Higher Risk</td>
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<td>Michopoulos, Vasiliki, PhD, MSc; Rothbaum, Barbara, PhD, ABPP; Ressler, Kerry, MD PhD; Jovanovic, Tanja, PhD</td>
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<td>Sex Differences in the Reinstatement of Fear: High Estradiol as a Protective Factor</td>
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<td>Felmingham, Kim, PhD; Zuj, Daniel, PhD Candidate; Nicholson, Emma, BSc Hons Psychology; Chia Ming Hsu, Ken, MPych</td>
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<td></td>
<td>Gender Difference in Outcomes following Trauma-focused Interventions for Posttraumatic Stress Disorder: Systematic Review and Meta-analysis</td>
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<td>Wade, Darryl, PhD; Varker, Tracey, PhD; Kartal, Dzenana, PhD Candidate; Hetrick, Sarah, PhD; O'Donnell, Meaghan, PhD; Forbes, David, PhD</td>
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<td>Sex Differences in the Enzyme Site at which GABAergic Neuroactive Steroid Synthesis is Blocked in PTSD: Implications for Targeting of PTSD Therapeutics</td>
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<td>Rasmusson, Ann, MD; King, Matthew, PhD; Gregor, Kristin, PhD; Scioli-Salter, Erica, PhD; Pineles, Suzanne, PhD; Valovski, Ivan, MD; Hamouda, Mohamed, MD; Pinna, Graziano, PhD</td>
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<td><strong>Symposium</strong></td>
<td><strong>Implementing and Evaluating Exposure-based Group Treatments with Trauma Survivors</strong></td>
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<td>Chair (Karlsson)</td>
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<td>Follow-Up Data from a Brief Exposure-based Group Treatment with Incarcerated Women</td>
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<td>Karlsson, Marie, PhD; Zielinski, Melissa, MA PhD Student; Calvert, Maegan, MS, PhD Student; Bridges, Ana, PhD</td>
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<td></td>
<td>Practical Considerations in Adapting Evidence-based Trauma Treatment for Incarcerated Women</td>
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<td>Zielinski, Melissa, MA, PhD Student; Karlsson, Marie, PhD; Bridges, Ana, PhD</td>
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<td></td>
<td>Group-Delivered Exposure Therapy: Empirical Support for from Two Studies on Female Veterans with PTSD</td>
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<td>Castillo, Diane, PhD; C’de Baca, Janet, PhD; La Bash, Heidi, PhD</td>
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<td>A Model for Group-delivered Exposure Therapy</td>
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<td>C’de Baca, Janet, PhD</td>
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</table>
### Daily Schedule

**Thursday, November 10, 10:15 a.m. – 11:30 a.m.**

**Concurrent Session One**

<table>
<thead>
<tr>
<th>Symposium</th>
<th>ICD-11 Symposium I: An Update of the Development of the ICD-11 Classification of Disorders Specifically Associated with Stress</th>
</tr>
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<tbody>
<tr>
<td>Chair</td>
<td>(Maercker)</td>
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</table>

- Ecological Implementation Studies for ICD-11 Disorders Specifically Associated with Stress: A Preview  
  **(Keeley, Jared, PhD)**  
  (Assess Dx, Practice, Cul Div, Global, Res Meth, Lifespan, Global)

- An Overview of the Emerging Evidence on PTSD in ICD-11  
  **(Brewin, Chris, PhD)**  
  (Assess Dx, Practice, Pub Health, Adult, Industrialized)

- An Overview of Complex PTSD in ICD-11: Measurement and Evidence  
  **(Cloitre, Marylene, PhD)**  
  (Assess Dx, Chronic, Complex, Global, Social, Adult, N/A)

- Investigating the ICD-11 formulations for Prolonged Grief Disorder and Adjustment Disorder  
  **(Maercker, Andreas, PhD, MD)**  
  (Assess Dx, Pub Health, Adult, Global)

<table>
<thead>
<tr>
<th>Symposium</th>
<th>Strengthening at the Roots: Violence Prevention and Mental Health Intervention in the Context of Ongoing Political Conflict</th>
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<tbody>
<tr>
<td>Chair</td>
<td>(D’Andrea)</td>
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</tbody>
</table>

- Fostering Healing in Communities Where Everyone Hurts  
  **(Bergholz, Lou, BS)**  
  (Commun, Chronic, Commun, Comm/Vio, Civil/War, Child/Adol, M East & N Africa)

- Why They Fight: Evidence from the Field  
  **(Sheikh, Hammad, PhD)**  
  (Social, Terror, Mil/Vets, Lifespan, Global)

- Eye to the Future: Reducing Aggression and Stress and Building Resilience Using a Community Psychosocial Approach with Children Living in Gaza  
  **(D’Andrea, Wendy, PhD; Bergholz, Lou, BS; Freed, Steven, MA, PhD Student; Aboagye, Adjoa, PhD)**  
  (CulDiv, Agress, Complex, Civil/War, Child/Adol, M East & N Africa)
### Daily Schedule

**Thursday, November 10, 10:15 a.m. – 11:30 a.m.**

**Concurrent Session One**

#### Symposium

**Public Health and Individual Impact of Different Screening Procedures to Assess Risk for PTSD following Traumatic Injury**

**Chair** (deRoon-Cassini)

**Discussant** (O’Donnell)

**Effective Strategies for Predicting Prospective Risk for PTSD Symptom Development in the Aftermath of Trauma**

*(Rothbaum, Barbara, PhD, ABPP; Michopoulos, Vasiliki, PhD, MSc; Post, Loren, PhD; Fiorillo, Devika, PhD; Roffman, Rebecca, MA; Rothbaum, Alex, BS; Maples, Jessica, MS (PhD Student); Jovanovic, Tanja, PhD; Ressler, Kerry, MD PhD)*

(Assess Dx, Acc/Inj, Prevent, Adult, N/A)

**Enhancing the Population Impact of PTSD and Comorbidity Screening**

*(Zatzick, Douglas, MD; Ingraham, Leah, BS; Guiney, Roxanne, BA; Colosi, Patricia L., BS, BA; Darnell, Doyanne, PhD; Kompar, Christopher, BS; Sandgren, Kirsten, MSW; Love, Jeff, BA; Wang, Jin, PhD; Russo, Joan, PhD)*

(Clin Res, Acute, Assess Dx, Prevent, Pub Health, Adult, Industrialized)

**PTSD and Depression Screening with an In-Person 9-Item Measure for Hospitalized Trauma Survivors**

*(deRoon-Cassini, Terri, PhD; Hunt, Josh, PhD; Warren, Ann Marie, PhD)*

(Part of the See, Acc/Inj, Prevent, Pub Health, Adult, Industrialized)

**Use of Brief Screening Tools for Psychological Assessment Following Physical Injury: Strategies for Implementation During Acute Care**

*(Warren, Ann Marie, PhD)*

(Clin Res, Acc/Inj, Prevent, Pub Health, Adult, Industrialized)

**Symposium**

**Emerging Network for Post-disaster Psychosocial Support in Asia**

**Chair** (Kim)

**Trauma and/or Embitterment of the Bereaved Parents of Adolescent Victims by Sewol Ferry Disaster**

*(Chae, Jeong-Ho, MD, PhD; Huh, Hyu Jung, MD; Huh, Seung, MD)*

(Assess Dx, Acc/Inj, Death, Tech/Dis, Grief, Adult, E Asia & Pac)

**Fukushima, Mental Health and Suicide**

*(Maeda, Masaharu, MD, PhD; Oe, Misari, MD PhD; Bromet, Evelyn, PhD; Yasumura, Seiji, MD PhD; Ohto, Hitoshi, MD, PhD)*

(Pub Health, Acc/Inj, Assess Dx, Health, Tech/Dis, Lifespan, Industrialized)

**How We Can Strengthen Traumatic Stress Studies in Asia**

*(Tsutsumi, Atsuro, PhD; Izustu, Takashi, PhD; Kim, Yoshiharu, MD, PhD)*

(Train/Ed/Dis, Nat/Dis, Health Professionals, S Asia)

**Trauma and Panic Response Facing MERS (Middle East Respiratory Syndrome) in Korea**

*(Lee, So Hee, MD, PhD)*

(Prevent, Acute, Anx, Pub Health, Tech/Dis, Adult, Global)
### Daily Schedule

**Thursday, November 10, 10:15 a.m. – 11:30 a.m.**

**Concurrent Session One**

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<tr>
<th>Panel Presentation</th>
<th>The Concept and Role of the Therapeutic Relationship Across Trauma Therapies: A Conversation Among PE, CPT, EMDR, and Body Therapy Experts</th>
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<tr>
<td>Discussant (Kudler)</td>
<td>Kudler, Harold, MD; Frankfurt, Sheila, PhD; Resick, Patricia, PhD, ABPP; van der Kolk, Bessel, MD; Rauch, Sheila, PhD, ABPP; Rouanzoin, Curtis, PhD</td>
</tr>
<tr>
<td>Practice, Clin Res, Cog/Int, Train/Ed/Dis, Psych, N/A, N/A</td>
<td>(Practice, Clin Res, Cog/Int, Train/Ed/Dis, Psych, N/A, N/A)</td>
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**Thursday, November 10**

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<tr>
<th>Time</th>
<th>Event</th>
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<td>10:30 a.m.– 5:30 p.m.</td>
<td>Poster Viewing Session One</td>
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<tr>
<td>11:30 a.m. – 1:15 p.m.</td>
<td>Lunch on your Own</td>
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<tr>
<td>11:45 a.m. – 1:00 p.m.</td>
<td>SIG Meetings</td>
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<tr>
<td>Complex Trauma</td>
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<tr>
<td>Diversity and Cultural Competence SIG</td>
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<td>Early Interventions SIG</td>
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<td>Family Systems SIG</td>
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<td>Gender and Trauma SIG</td>
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<td>Genomics and Trauma SIG</td>
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<td>Lesbian, Gay, Bisexual and Transgender (LGBT) SIG</td>
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<td>Psychodynamic Research and Practice SIG</td>
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<td>Terrorism and Bioterrorism Related Trauma SIG</td>
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<td>Theory &amp; Traumatic Stress Studies SIG</td>
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<td>Trauma and Substance Use Disorders SIG</td>
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<td>Traumatic Loss and Grief SIG</td>
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</table>

**Thursday, November 10, 1:15 p.m. – 2:30 p.m.**

**Concurrent Session Two**

<table>
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<tr>
<th>Invited Panel</th>
<th>The Refugee Situation in the World: a Humanitarian Emergency</th>
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<tbody>
<tr>
<td>Discussant (Michael)</td>
<td>Michael, Tanja, PhD; Essali, Adib, MD; Young, Kerry, PhD; Lindert, Jutta, PhD, MPH, MA; Liddell, Belinda, PhD; van Ommeren, Mark, PhD</td>
</tr>
<tr>
<td>Global, Health, Refugee, Social, Civil/War, N/A, Global</td>
<td>(Global, Health, Refugee, Social, Civil/War, N/A, Global)</td>
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</tbody>
</table>
### Symposium: Sudden and Violent Deaths: Implications for Improved Public Health Response

**Co-chairs (Cozza, Shear)**

- **Military Family Members Bereaved by Sudden and Violent Death: Differentiating Grief-, Depression- and Trauma-related Symptom Clusters**
  - **Presenters:** (Cozza, Stephen, MD; Fisher, Joscelyn, PhD; Zhou, Jing, MS; Fullerton, Carol, PhD; Ursano, Robert, MD)
  - **Categories:** (Pub Health, Death, Pub Health, Grief, Civil/War, Adult, Industrialized)

- **Terrorism-Related Grief Reactions Fifteen Years After 9-11: Public Health Implications**
  - **Presenters:** (Fisher, Joscelyn, PhD; Fetchet, Mary, LCSW; Zhou, Jing, MS; Dinh, Hieu, BS; Cozza, Stephen, MD)
  - **Categories:** (Assess Dx, Death, Terror, Grief, Adult, Industrialized)

- **Performance of DSM-5 Criteria for Persistent Complex Bereavement Disorder**
  - **Presenters:** (Mauro, Christine, PhD; Shear, M Katherine, MD; Cozza, Stephen, MD; Reynolds, Charles, MD; Simon, Naomi, MD; Zisook, Sidney, MD; Skritskaya, Natalia, PhD; Wang, Yuanjia, PhD; Lebowitz, Barry, PhD; Duan, Naihua, PhD; Gribbin, Colleen, MA; Fisher, Joscelyn, PhD; Zhou, Jing, MS; Ortiz, Claudio, PhD; Fullerton, Carol, PhD; Ursano, Robert, MD; Wall, Melanie, PhD; Ghesquiere, Angela, PhD MSW; First, Michael, MD; Gluckman, Kim, PhD)
  - **Categories:** (Res Meth, Assess Dx, Clin Res, Death, Adult, N/A)

- **Response to Complicated Grief Treatment in Violent Compared to Natural Death**
  - **Presenters:** (Shear, M Katherine, MD; Skritskaya, Natalia, PhD; Mauro, Christine, PhD; Gribbin, Colleen, MA; Reynolds, Charles, MD; Simon, Naomi, MD; Zisook, Sidney, MD; Lebowitz, Barry, PhD)
  - **Categories:** (Clin Res, Clin Res, Practice, Death, Grief, Adult, N/A)

### Symposium: Virtual Reality – Coming to a Clinic Near You

**Chair (Brewin)**

- **Clinical Virtual Reality: A Brief Review of the Future and Beyond!**
  - **Presenters:** (Rizzo, Skip, PhD)
  - **Categories:** (Tech, Clin Res, Adult, Global)

- **Investigating the Relationships Between PTSD Symptom Clusters within Virtual Reality Exposure Therapy for OEF/OIF Veterans**
  - **Presenters:** (Rothbaum, Barbara, PhD, ABPP; Maples, Jessica, MS, PhD Student; Price, Matthew, PhD; Gerardi, Maryrose, PhD; Rauch, Sheila, PhD, ABPP)
  - **Categories:** (Clin Res, Clin Res, Mil/Vets, Adult, N/A)

- **Using Embodiment to Learn Self-Compassion within Immersive Virtual Reality**
  - **Presenters:** (Brewin, Chris, PhD)
  - **Categories:** (Tech, Clin Res, Practice, Depr, Adult, Industrialized)
**Symposium**

**Integrative Approaches for Traumatic Stress Disorders and Addictions using CBT and Biological Interventions**

Chair *(Hien)*  
Discussant *(Norman)*

<table>
<thead>
<tr>
<th>Presentation Level</th>
<th>Title</th>
<th>Chair(s)</th>
<th>Discussant(s)</th>
<th>Abstract</th>
<th>Location</th>
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<tbody>
<tr>
<td>M</td>
<td>Treatment of PTSD and Comorbid Addiction with N-acetylcysteine</td>
<td><em>(Back, Sudie, PhD; Gros, Daniel, PhD; Korte, Kristina, PhD; Brady, Kathleen, MD, PhD)</em></td>
<td><em>(Clin Res, Sub/Abuse, Mil/Vets, Adult, N/A)</em></td>
<td><em>(Clin Res, Sub/Abuse, Mil/Vets, Adult, N/A)</em></td>
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<td>M</td>
<td>Trajectory of PTSD Change with Combination Seeking Safety and Sertraline on Alcohol Use Outcomes</td>
<td><em>(Hien, Denise, PhD, ABPP; Ruglass, Lesia, PhD; Lopez-Castro, Teresa, PhD)</em></td>
<td><em>(Clin Res, Bio Med, Sub/Abuse, Adult, Industrialized)</em></td>
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<tr>
<td>M</td>
<td>Integrated CBT for PTSD and Substance Use Disorders in Iraq and Afghanistan Veterans</td>
<td><em>(Capone, Christy, PhD; Presseau, Candice, MA; Eaton, Erica, PhD; McGovern, Mark, PhD)</em></td>
<td><em>(Clin Res, Clin Res, Mil/Vets, Adult, Industrialized)</em></td>
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<tr>
<td>M</td>
<td>Does Oxytocin Modulate Functional Brain Connectivity in Trauma Exposed Individuals?</td>
<td><em>(Moran-Santa Maria, Megan, PhD; Vaughn, Brandon, BS; Flanagan, Julianne, PhD; Back, Sudie, PhD; Joseph, Jane, PhD)</em></td>
<td><em>(Bio Med, Clin Res, Neuro, Gender, Adult, N/A)</em></td>
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**Symposium**

**Examining the Impact of PTSD on Work, Family, and Other Related Quality of Life Outcomes in Veterans of the Wars in Iraq and Afghanistan**

Chair *(Smith)*

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<tr>
<th>Presentation Level</th>
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<th>Discussant(s)</th>
<th>Abstract</th>
<th>Location</th>
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<tbody>
<tr>
<td>M</td>
<td>Consequences of PTSD for the Work and Family Quality of Life of Female and Male U.S. Afghanistan and Iraq War Veterans</td>
<td><em>(Vogt, Dawne, PhD; Smith, Brian, PhD; Fox, Annie, PhD; Schnurr, Paula, PhD)</em></td>
<td><em>(Clin Res, Clin Res, QoL, Mil/Vets, Gender, Adult, Industrialized)</em></td>
<td><em>(Clin Res, Clin Res, QoL, Mil/Vets, Gender, Adult, Industrialized)</em></td>
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<tr>
<td>M</td>
<td>The Roles of PTSD, Depression, and Alcohol Misuse Symptomatology in Linking Deployment Stressors and Work and Family Outcomes in Male and Female Veterans</td>
<td><em>(Smith, Brian, PhD; Taverna, Emily, BA; Fox, Annie, PhD; Schnurr, Paula, PhD; Matteo, Rebecca, PhD; Vogt, Dawne, PhD)</em></td>
<td><em>(Pub Health, QoL, Res Meth, Mil/Vets, Gender, Adult, Industrialized)</em></td>
<td><em>(Pub Health, QoL, Res Meth, Mil/Vets, Gender, Adult, Industrialized)</em></td>
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<td>M</td>
<td>The Inventory of Psychosocial Functioning (IPF): Development and Utility of a Measure of PTSD-Specific Impairment</td>
<td><em>(Bovin, Michelle, PhD; Black, Shimrit, PhD; Rodriguez, Paola, PhD; Lunney, Carole, MA; Weathers, Frank, PhD; Schnurr, Paula, PhD; Keane, Terence, PhD; Marx, Brian, PhD)</em></td>
<td><em>(Assess Dx, QoL, Adult, Industrialized)</em></td>
<td><em>(Assess Dx, QoL, Adult, Industrialized)</em></td>
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<tr>
<td>M</td>
<td>Perceived Impact of PTSD Symptoms on Work, Social, and Quality of Life Outcomes in Veterans: Exploring the Potential Benefits of a PTSD Specific Functioning Measure</td>
<td><em>(McCAslin, Shannon, PhD; Maguen, Shira, PhD; Metzler, Thomas, MA; Bosch, Jeane, MS, PhD Student; Neylan, Thomas, MD; Marmar, Charles, MD)</em></td>
<td><em>(Assess Dx, Clin Res, QoL, Adult, Industrialized)</em></td>
<td><em>(Assess Dx, Clin Res, QoL, Adult, Industrialized)</em></td>
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</tbody>
</table>
## Daily Schedule

**Thursday, November 10, 1:15 p.m. – 2:30 p.m.**

**Concurrent Session Two**

<table>
<thead>
<tr>
<th>Symposium</th>
<th>Presentation Level</th>
<th>Title</th>
<th>Chair</th>
<th>Abstract</th>
</tr>
</thead>
</table>
| **Symposium** | | **New Directions in Assessing Trauma and Adversity Across the Lifespan: A Public Health Imperative** | | Screening for Childhood Adversity with Depressed and Non-depressed Older Adults *(Ford, Julian, PhD; Steffens, David, MD; Wu, Rong, MS)*

(Assess Dx, Assess Dx, Dev/Int, Pub Health, Aging, Older, Industrialized) |

| | | Initial Psychometric Properties of the Structured Trauma-related Experiences and Symptoms Screener for Adults in a Prenatal Care Clinic Sample of Pregnant Women *(Grasso, Damion, PhD; Ford, Julian, PhD; Greene, Carolyn, PhD)*

(Assess Dx, Assess Dx, CPA, CSA, Prevent, Adult, Industrialized) |

| | | Rapid Assessment of Pediatric Adversity and Trauma (RAPAT): A Two-Part Process *(Sugar, Jeff, MD)*

(Assess Dx, CPA, Practice, Health, Prevent, Child/Adol, Industrialized) |

| **Symposium** | | **Prediction of Posttraumatic Psychopathology in Recent Trauma Survivors, Do We Need Biology?** | | Integrating Early Neuroendocrine and Behavioral Responses to Predict the Development of PTSD *(Galatzer-Levy, Isaac, PhD; Ma, Sisi, PhD; Shalev, Arieh, MD)*

(Res Meth, Assess Dx, Bio Med, Adult, Global) |

| | | Early Symptoms Predict Long-term PTSD in an International Pooled Sample *(Gevorden, Martin, PhD; Ratanatharathom, Andrew, MA, PhD Student; Qi, Wei, MD; Bryant, Richard, PhD; Delahanty, Douglas, PhD; Matsuoka, Yutaka, MD PhD; O’Connor, Paul, BSc; Olff, Miranda, PhD; Robinson, James, MS, Ed; Schnyder, Ulrich, MD; Koenen, Karestan, PhD; Laska, Eugene, PhD; Shalev, Arieh, MD)*

(Assess Dx, Acc/Inj, Acute, Prevent, Adult, Global) |

| | | Closing the Gap between Risk Factors and Prognostic Prediction of PTSD *(Qi, Wei, MD; Gevorden, Martin, PhD; Ratanatharathom, Andrew, MS, PhD Student; Shalev, Arieh, MD; Koenen, Karestan, PhD)*

(Clin Res, Prevent, Res Meth, Adult, Global) |

| | | Can Network Associations of Psychological and Biological Factors Predict PTSD? *(Bryant, Richard, PhD; O’Donnell, Meaghan, PhD; Creamer, Mark, PhD; Forbes, David, PhD; McFarlane, Alexander, MD; Silove, Derrick, MD PhD)*

(Assess Dx, Acc/Inj, Prevent, Res Meth, Adult, Industrialized) |
## Daily Schedule
**Thursday, November 10, 1:15 p.m. – 2:30 p.m.**
### Concurrent Session Two

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<th>Workshop Presentation</th>
<th>Paper Session</th>
<th>Neuroimaging One Paper Session</th>
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<tr>
<td><strong>What Next? Sustainment of Evidence-based Practices</strong>&lt;br&gt;(Lang, Jason, PhD; Ake, George, PhD; Berliner, Lucy, MSW; Halladay Goldman, Jane, PhD, MSW)&lt;br&gt;(Train/Ed/Dis, CPA, Clin Res, Commun, Child/Adol, Industrialized)</td>
<td><strong>Exposure, Relaxation, and Rescripting Therapy for Children: A Cognitive Behavioral Treatment for Child and Adolescent Trauma Related Nightmares</strong>&lt;br&gt;(Cromer, Lisa, PhD; Borntrager, Cameo, PhD; Fernandez Lopez, Shantel, PhD)&lt;br&gt;(Clin Res, Sleep, Child/Adol, N/A)</td>
<td><strong>Moderator:</strong> (Teicher)</td>
<td><strong>Combining Acute Stress Symptoms and Hippocampal Volume in Machine Learning Prediction of PTSD</strong>&lt;br&gt;(Wang, Xin, MD, PhD; Xie, Hong, MD, PhD; Kessler, Daniel, MS; Elhai, Jon, PhD; Liberzon, Israel, MD)&lt;br&gt;(Bio Med, Neuro, Adult, Global)</td>
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<tr>
<td><strong>Workshop Presentation</strong></td>
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<td><strong>Altered Resting State Hippocampus Functional Connectivity in PTSD</strong>&lt;br&gt;(Lowell, Ari, PhD; Zhu, Xi, PhD; Markowitz, John, MD; Helpman, Liat, PhD; Neria, Yuval, PhD)&lt;br&gt;(Bio Med, Assess Dx, Bio Med, Tech, Aging, Adult, Industrialized)</td>
</tr>
<tr>
<td><strong>Presentation</strong></td>
<td><strong>Panel</strong></td>
<td><strong>A</strong></td>
<td><strong>Longitudinal Study of Structural and Functional Brain Connectivity in PTSD among Victims of Sexual Abuse</strong>&lt;br&gt;(Cléry, Helen, PhD; Andersson, Frédéric, PhD; El-Hage, Wissam, PhD, MD)&lt;br&gt;(Bio Med, Rape, Neuro, Adult, Industrialized)</td>
</tr>
<tr>
<td><strong>Exposure, Relaxation, and Rescripting Therapy for Children: A Cognitive Behavioral Treatment for Child and Adolescent Trauma Related Nightmares</strong>&lt;br&gt;(Cromer, Lisa, PhD; Borntrager, Cameo, PhD; Fernandez Lopez, Shantel, PhD)&lt;br&gt;(Clin Res, Sleep, Child/Adol, N/A)</td>
<td></td>
<td></td>
<td><strong>Interactive Sensitizing Effects of Early and Later Exposure to Childhood Maltreatment on Amygdala Volume</strong>&lt;br&gt;(Teicher, Martin, MD, PhD; Anderson, Carl, PhD; Ohashi, Kyoko, PhD; McGreener, Cynthia, Assistant; Bolger, Elizabeth, MA; Khan, Alaptagin, MD)&lt;br&gt;(Bio Med, CPA, CSA, Neglect, Neuro, Lifespan, Industrialized)</td>
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<tr>
<td><strong>Presentation</strong></td>
<td><strong>Workshop</strong></td>
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<td><strong>Presentation</strong></td>
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<tbody>
<tr>
<td>Moderator:</td>
<td>(Edwards-Stewart)</td>
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</table>

**Sustainability of Cognitive Processing Therapy for PTSD 2.5 Years After its Implementation Across National Mental Health Service for Veterans**

(Couineau, Anne-Laure, MA; Kartal, Dzenana, PhD Candidate; Lloyd, Delyth, MA; Nixon, Reginald, PhD; Wade, Darryl, PhD; Forbes, David, PhD)

(Practice, Commun, Train/Ed/Dis, Mil/Vets, Prof, Industrialized)

**A Naturalistic Evaluation of Evidence-based Treatment for Veterans with Posttraumatic Stress Disorder**

(Doran, Jennifer, PhD; DeViva, Jason, PhD)

(Clin Res, Practice, Complex, Mil/Vets, Adult, Industrialized)

**Predictors of Reengagement in Psychotherapy Among Veterans with PTSD**

(Buchholz, Katherine, PhD; Bohnert, Kipling, PhD; Pfeiffer, Paul, MD; Ganoczy, Dara, MPH; Sripada, Rebecca, PhD)

(Clin Res, Pub Health, Mil/Vets, Adult, Industrialized)

**Examining Dose-response in Outpatient Psychotherapy among Active Duty Army Service Members Being Treated for PTSD Symptoms: A Multilevel Modeling Approach**

(Hoyt, Tim, PhD; Edwards-Stewart, Amanda, PhD)

(Practice, Clin Res, Res Meth, Mil/Vets, Adult, Industrialized)

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**Thursday, November 10, 2:45 p.m. – 4:00 p.m.**
### Concurrent Session Three

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<thead>
<tr>
<th>Master Clinician</th>
<th>Competent Parenting: The Key to Preventing Social, Emotional and Behavioural Problems in Children of Trauma Related Adversity</th>
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<tbody>
<tr>
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<td>(Sanders, Matthew, PhD)</td>
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</table>

(Practice, CPA, Fam/Int, Lifespan, Global)
### Daily Schedule
**Thursday, November 10, 2:45 p.m. – 4:00 p.m.**
**Concurrent Session Three**

<table>
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<tr>
<th>Symposium</th>
<th>Title</th>
<th>Chair</th>
<th>Presentations</th>
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</thead>
</table>
| **Symposium** | **Creating a Trauma-informed Health Care System for Children: Global Data on Needs and Training Models** | (Kassam-Adams) | Worldwide Surveys on Trauma-informed Care for Children – Current Knowledge and Training Needs of Emergency Care Providers  
*(Alisic, Eva, PhD; Kassam-Adams, Nancy, PhD; Tyler, Mark, BSc Hons Psychology; Hoysted, Claire, BSc Hons Psychology; Landolt, Markus, PhD)*  
(Prevent, Acc/Inj, Dev/Int, Global, Train/Ed/Dis, Health Care Providers, Global)  
Bringing Trauma-informed Care to a Pediatric Hospital: Results of a Program of Staff Training  
*(Marsac, Meghan, PhD; Weiss, Danielle, MS; Murray, Carol, MSW; Kohser, Kristen, MSW; Winston, Flaura, MD, PhD; Fein, Joel, MD MPH; Kassam-Adams, Nancy, PhD)*  
(Prevent, Acc/Inj, Acute, Health, Illness, Medical Professionals, Industrialized)  
Integrating Trauma-informed Pediatric Care into Simulation-based Assessment and Training in the Emergency Medical Setting  
*(Kassam-Adams, Nancy, PhD; Auerbach, Marc, MD, MsC; Butler, Lucas, BS; Nadkarni, Vinay, MD, MS)*  
(Train/Ed/Dis, Acc/Inj, Acute, Illness, Health Care Professionals, Industrialized)  
Predicting Factors and Consequences of Distress and Posttraumatic Growth in Pediatric Intensive Care Professionals.  
*(Rodriguez Rey, Rocio, PhD Candidate; Palacios, Alba, MD; Alonso-Tapia, Jesus, PhD; Cruz, Jaime, MD; Kassam-Adams, Nancy, PhD; Marsac, Meghan, PhD)*  
(Self-Care, Illness, QoL, Prevent, Train/Ed/Dis, Pediatric Staff, Industrialized) |
| **Symposium** | **Trauma and Public Health Intervention: Is On-line the Best Mainline?** | (Hobfoll) | On-line Intervention for Veterans Using Gamelike Technology  
*(Hobfoll, Stevan, PhD; Stevens, Natalie, PhD; Blais, Rebecca, PhD)*  
(Prevent, Illness, Pub Health, Tech, Mil/Vets, Adult, Industrialized)  
Deployment of My Trauma Recovery for the Planned Parenthood Shooting: A Public Health Cyber Approach  
*(Benight, Charles, PhD)*  
(Pub Health, Comm/Vio, Tech, Adult, Industrialized)  
Providing Brief Cognitive-behavioral Interventions to Abused Homeless Youth via Mobile Technology  
*(Zalta, Alyson, PhD; Dowdle, Claire, PsyD; Glover, Angela, BA; Schueller, Stephen, PhD; Karnik, Niranjan, MD, PhD)*  
(Tech, CPA, CSA, Clin Res, Commun, Adult, N/A)  
Mobile Monitoring of PTSD Symptoms Shortly After a Trauma: A Pilot Study  
*(Price, Matthew, PhD; van Stolk-Cooke, Katherine, BS, BA; Ward, Hannah, BA)*  
(Tech, Acc/Inj, Prevent, Tech, Adult, Industrialized) |
### Daily Schedule

**Thursday, November 10, 2:45 p.m. – 4:00 p.m.**

**Concurrent Session Three**

<table>
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<tr>
<th>Symposium</th>
<th>The Effects of Stress and Sex Hormones on Mechanisms of Posttraumatic Stress Disorder</th>
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<tbody>
<tr>
<td>Chair</td>
<td>(Felmingham)</td>
</tr>
<tr>
<td>Title</td>
<td>Sex Hormones, Imagery, and Emotional Memories</td>
</tr>
<tr>
<td>Authors</td>
<td>(Bryant, Richard, PhD; Felmingham, Kim, PhD)</td>
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<tr>
<td></td>
<td>(Bio Med, Bio/Int, Adult, Industrialized)</td>
</tr>
<tr>
<td>Abstract</td>
<td>Neurobiological Mechanisms of Menstrual Cycle Effects on Extinction Retention among Women with and without PTSD</td>
</tr>
<tr>
<td>Authors</td>
<td>(Pineles, Suzanne, PhD; Irvine, John, PhD; Webb, Andrea, PhD; Nillni, Yael, PhD; Resick, Patricia, PhD, ABPP; Orr, Scott, PhD; Rasmusson, Ann, MD)</td>
</tr>
<tr>
<td></td>
<td>(Bio Med, Bio/Int, Gender, Adult, Industrialized)</td>
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<tr>
<td>Present</td>
<td>Elevated Baseline Noradrenaline Interacts with Impaired Fear Extinction in PTSD</td>
</tr>
<tr>
<td>Authors</td>
<td>(Zuj, Daniel, PhD Candidate; Palmer, Matt, BA (Hons), PhD; Felmingham, Kim, PhD)</td>
</tr>
<tr>
<td></td>
<td>(Bio Med, Bio Med, Bio/Int, Adult, Global)</td>
</tr>
<tr>
<td>Present</td>
<td>Sex Hormones Moderate the Relationship between Stress Hormones and Negative Intrusive Memories Following Trauma</td>
</tr>
<tr>
<td>Authors</td>
<td>(Felmingham, Kim, PhD; Zuj, Daniel, PhD Candidate; Nicholson, Emma, BSc Hons Psychology; Chia Ming Hsu, Ken, M Psych)</td>
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<tr>
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<td>(Bio Med, Bio Med, Bio/Int, Gender, Adult, Industrialized)</td>
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<thead>
<tr>
<th>Symposium</th>
<th>Posttraumatic Dissociation: Intergroup and Interindividual Variability, Impact on Treatment, and Brief Assessment</th>
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<tr>
<td>Chair</td>
<td>(Carlson)</td>
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<tr>
<td>Title</td>
<td>The Structure of the Dissociation Symptoms Scale Across Race and Ethnicity: A Test of Measurement Invariance Using Latent Class Analysis in a Non-clinical Sample</td>
</tr>
<tr>
<td>Authors</td>
<td>(Anglin, Deidre, PhD; Carlson, Eve, PhD; Espinosa, Adriana, PhD; Waelde, Lynn, PhD; Polanco-Roman, Lillian, MA, PhD Student; Macia, Kathryn, BS; Palmieri, Patrick, PhD; Smith, Steve, PhD)</td>
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<tr>
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<td>(Assess Dx, Clin Res, Cul Div, Ethnic, Adult, Industrialized)</td>
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<tr>
<td>Present</td>
<td>Heterogeneity in Manifestations of Dissociation across Individuals from Diverse Clinical and Non-Clinical Samples</td>
</tr>
<tr>
<td>Authors</td>
<td>(Macia, Kathryn, PhD Student; Carlson, Eve, PhD; Waelde, Lynn, PhD; Palmieri, Patrick, PhD)</td>
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<tr>
<td></td>
<td>(Assess Dx, Cul Div, Theory, Adult, Industrialized)</td>
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<tr>
<td>Present</td>
<td>Dissociation During Psychotherapeutic Sessions Jeopardizes Successful Exposure-Based Treatment of PTSD</td>
</tr>
<tr>
<td>Authors</td>
<td>(Kleindienst, Nikolaus, PhD)</td>
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<td></td>
<td>(Clin Res, CSA, Adult, Industrialized)</td>
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<tr>
<td>Present</td>
<td>Development and Validation of a Short Form of the Dissociative Symptoms Scale</td>
</tr>
<tr>
<td>Authors</td>
<td>(Waelde, Lynn, PhD; Macia, Kathryn, BS; Carlson, Eve, PhD; Anglin, Deidre, PhD; Palmieri, Patrick, PhD)</td>
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<td>(Assess Dx, Assess Dx, Clin Res, Adult, Industrialized)</td>
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</table>
## Daily Schedule

**Thursday, November 10, 2:45 p.m. – 4:00 p.m.**

### Concurrent Session Three

#### Panel Presentation

**Public-private Partnerships in Service to Veterans and their Families**

*Discussant (Kudler)*

*(Kudler, Harold, MD; Bellehensen, Mayer, PhD; Tanielian, Terri, MA; Thomesen, Charlene, MD)*

(Commun, Fam/Int, Pub Health, Social, Mil/Vets, Lifespan, Industrialized)

#### Workshop Presentation

**The Challenge and Opportunity of Treatment of Children and Caregivers When Both Have Traumatic Stress**

*(Kagan, Richard, PhD; Blaustein, Margaret, PhD; Kiser, Laurel, PhD, MBA)*

(Practice, Chronic, Complex, Fam/Int, Intergen, Lifespan, Industrialized)

**Early Interventions Following Terrorist Attacks: From the Emergency Room to the Living Room**

*(Freedman, Sara, PhD)*

(Clin Res, Prevent, Terror, Adult, Industrialized)

**Addressing Trauma and Attachment Loss in African Orphans: A Case Study of Community-based Caregiver Training**

*(Penney, Patrice, MSW, LCSW)*

(Global, CPA, Comm/Int, Dev/Int, Fam/Int, Lifespan, E & S Africa)

#### Workshop Presentation

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**The Challenge and Opportunity of Treatment of Children and Caregivers When Both Have Traumatic Stress**

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*(Penney, Patrice, MSW, LCSW)*

(Global, CPA, Comm/Int, Dev/Int, Fam/Int, Lifespan, E & S Africa)

#### Case Study Presentation

**Predictors Paper Session**

*Moderator: (Karstoft)*

**Predictors of Attrition Among Children Receiving Trauma-focused Cognitive Behavioral Therapy (TF-CBT)**

*(Wamser-Nanney, Rachel, PhD; Steinzor, Cazzie, BA)*

(Clin Res, Practice, Commun, Complex, Child/Adol, Industrialized)

**Pre-deployment Cognitive Ability and the Risk of Severe PTSD-symptoms following Deployment**

*(Sørensen, Holger, MD, PhD; Andersen, Søren, PhD, Cpsych; Karstoft, Karen-Inge, PhD, Cpsych; Madsen, Trine, PhD)*

(Assess Dx, Cog/Int, Mil/Vets, Adult, S Asia)

**Experiential Avoidance and Psychological Inflexibility Predicts PTSD Symptom Severity Over and Above Established PTSD Risk Factors in a Sample of War Veterans**

*(La Bash, Heidi, PhD; Meyer, Eric, PhD; DeBeer, Bryann, PhD; Kimbrel, Nathan, PhD; Gulliver, Suzy, PhD; Morissette, Sandra, PhD)*

(Clin Res, Mil/Vets, Adult, N/A)

**Danish OEF Soldiers from Before to 6.5 Years After Deployment: a Prospective Cohort Study**

*(Karstoft, Karen-Inge, PhD, Cpsych; Nielsen, Anni, PhD, MSc, RN; Andersen, Søren, PhD, Cpsych)*

(Assess Dx, Mil/Vets, Adult, Industrialized)
## Daily Schedule

### Thursday, November 10, 2:45 p.m. – 4:00 p.m.
**Concurrent Session Three**

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<th>Level</th>
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| **Substance Abuse/ Suicide Paper Session** | Trauma Exposure, Depression, Suicidal Ideation, and Hazardous Drinking in People with Serious Mental Illness in Rural Ethiopia  
*(Ng, Lauren, PhD; Medhin, Girmay, PhD, MSc; Fekadu, Abebaw, MSc, MRCPsych, MD, PhD)*  
(Global, Depr, Rights, Illness, Sub/Abuse, Adult, E & S Africa) | (Menefee)        | I     |
|                      | The Moderating Role of Dysphoria in the Relationship between Intrusions and Alcohol Use  
*(Contractor, Ateka, PhD; Presseau, Candice, MA; Capone, Christy, PhD; Reddy, Madhavi, PhD; Shea, M. Tracie, PhD)*  
(Assess Dx, Sub/Abuse, Adult, Industrialized) |                 | M     |
|                      | The Influence of Comorbid Depression on Treatment Outcome among Older Male Combat Veterans with PTSD  
*(Walter, Kristen, PhD; Glassman, Lisa, PhD; Conover, Kate, MA; Wells, Stephanie, BA; Leek, Trevor, BS; Thorp, Steven, PhD)*  
(Clin Res, Depr, Mil/Vets, Aging, Older, Industrialized) |                 | I     |
|                      | Examination of Perceived Threat, Cognitive Disortions, and Suicidal Ideation among US Combat Veterans with PTSD  
*(Menefee, Deleene, PhD; Wanner, Jill, PhD; Leopoulos, Wendy, MD)*  
(Clin Res, Affect/Int, Chronic, Depr, Mil/Vets, Adult, Industrialized) |                 | M     |

### Thursday, November 10, 4:15 p.m. – 5:30 p.m.
**Concurrent Session Four**

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<th>Master Methodologist</th>
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<th>(Boyle, John, PhD)</th>
<th>M</th>
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|                      | Planning a Large Scale Population Survey: Choices and Consequences  
(Tech, Acc/Inj, Nat/Dis, N/A, N/A) |                    |       |
### Daily Schedule

**Thursday, November 10, 4:15 p.m. – 5:30 p.m.**

**Concurrent Session Four**

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<td>(Possemato)</td>
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<tr>
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<td>Preliminary Evaluation of Moving Forward: an Online Problem-solving Skills Program</td>
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<td></td>
<td><em>(Carolyn, Greene, PhD; Prins, Annabel, PhD)</em></td>
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<td>(Tech, Clin Res, Depr, GQI, Train/Ed/Dis, Adult, Industrialized)</td>
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<td></td>
<td>Trauma and Drinking Outcomes Among Returning Veterans Participating in a Web-based Intervention</td>
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<td><em>(Brief, Deborah, PhD; Solhan, Marika, PhD; Rybin, Denis, PhD; Enggasser, Justin, PhD; Rubin, Amy, PhD; Roy, Monica, PhD; Helmuth, Eric, PhD; Vittorio, Lisa, BA; Rosenbloom, David, PhD; Keane, Terence, PhD)</em></td>
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<tr>
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<td>(Clin Res, Sub/Abuse, Tech, Mil/Vets, Adult, N/A)</td>
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<td>Can Adding Peer Support Boost the Effectiveness of a Web-Based Treatment for PTSD and Alcohol Use?</td>
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<td><em>(Possemato, Kyle, PhD; Johnson, Emily, PhD; Emery, Janet, BA; Maisto, Stephen, PhD)</em></td>
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<td>(Tech, Clin Res, Pub Health, Mil/Vets, Care, Adult, Industrialized)</td>
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<td>Veteran Preferences for Alternative Methods for Mental Health Care Delivery</td>
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<td><em>(Ortigo, Kile, PhD; Owen, Jason, PhD, MPH; Carlson, Eve, PhD)</em></td>
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<td>(Tech, Media, Tech, Mil/Vets, Care, Adult, Industrialized)</td>
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<th>Symposium</th>
<th>Trauma-related Cognitions in Children, Adolescents and Caregivers</th>
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<td>Chair</td>
<td>(Goldbeck)</td>
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<tr>
<td>Discussant</td>
<td>(Alisic)</td>
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<td></td>
<td>Dysfunctional Maltreatment-related Cognitions in Children and Adolescents</td>
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<tr>
<td></td>
<td><em>(de Haan, Anke, MS, PhD Student; Ganser, Helene, MS, PhD Student; Münzer, Annika, MS, PhD Student; Witt, Andreas, MS, PhD Student; Goldbeck, Lutz, PhD)</em></td>
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<tr>
<td></td>
<td>(Clin Res, CPA, CSA, Cog/Int, Neglect, Child/Adol, Industrialized)</td>
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<tr>
<td></td>
<td>The Relationship Between Parental Cognitions and Mental Health Outcomes after Children Experience Trauma</td>
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<tr>
<td></td>
<td><em>(Schilpzand, Elizabeth, PhD Candidate; Conroy, Rowena, PhD; Alisic, Eva, PhD; Anderson, Vicki, PhD)</em></td>
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<td>(Clin Res, Acc/Inj, Acute, Cog/Int, Fam/Int, Lifespan, Industrialized)</td>
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<td></td>
<td>The Mediating Role of Parental Posttraumatic Cognitions in the Trauma-focused Cognitive Behavioral Therapy of Children and Adolescents: Results from a Randomized Control Study</td>
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<tr>
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<td><em>(Tutus, Dunja, MSc; Pfeiffer, Elisa, MSc; Sachser, Cedric, MSc; Goldbeck, Lutz, PhD)</em></td>
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<tr>
<td></td>
<td>(Clin Res, Clin Res, Fam/Int, Lifespan, Industrialized)</td>
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<tr>
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<td>Attributions Bias Modification Training: An Intervention for Changing Children’s Threat Related Biases</td>
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<td><em>(Hogan, Sue, PhD Candidate; Nixon, Reginald, PhD)</em></td>
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<td>(Clin Res, Acute, Cog/Int, Child/Adol, Industrialized)</td>
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</table>
### Daily Schedule

**Thursday, November 10, 4:15 p.m. – 5:30 p.m.**

**Concurrent Session Four**

<table>
<thead>
<tr>
<th>Symposium</th>
<th>Epigenetic Insights into Post-traumatic Stress Disorder: Novel Results from Psychiatric Genomics Consortium Investigators</th>
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<tbody>
<tr>
<td>Chair</td>
<td>(Uddin)</td>
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<tr>
<td></td>
<td>Region-based Analyses of Differential Methylation in Post-traumatic Stress Disorder</td>
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<td></td>
<td><em>(Ratanatharathorn, Andrew, MA PhD Student; Aiello, Allison, MS, PhD; Armstrong, Don, PhD; Binder, Elisabeth, MD PhD; Bustamante, Angela, BS, MS; Galea, Sandro, MD, DrPH; Koenen, Karestan, PhD; Kilaru, Varun, MS; Ressler, Kerry, MD PhD; Smith, Alicia, PhD; Sumner, Jennifer, PhD; Uddin, Monica, PhD; Wildman, Derek, PhD; Guuffanti, Guia, PhD)</em></td>
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<td>(Bio Med, Genetic, Adult, Industrialized)</td>
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<td>Differential Methylation of Imprinted Genes in Post-traumatic Stress Disorder</td>
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<td><em>(Armstrong, Don, PhD; Koenen, Karestan, PhD; Smith, Alicia, PhD; Ressler, Kerry, MD PhD; Aiello, Allison, MS, PhD; Galea, Sandro, MD, DrPH; Guuffanti, Guia, PhD; Ratanatharathorn, Andrew, MS, PhD Student; Wildman, Derek, PhD; Uddin, Monica, PhD)</em></td>
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<td>(Bio Med, Complex, Gen/Int, Health, Genetic, Adult, Industrialized)</td>
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<td>Blood miRNA dysregulation in PTSD: Implications for Treatment</td>
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<td><em>(Daskalakis, Nikolaos, PhD, MD)</em></td>
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<td>(Bio Med, Gen/Int, Bio/Int, Mil/Vets, Genetic, Adult, N/A)</td>
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<td></td>
<td>An Epigenome-wide Association Study of PTSD in Iraq/Afghanistan Veterans</td>
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<td><em>(Kimbrel, Nathan, PhD; Garrett, Melanie, MS; Dennis, Michelle, BA; MIRECC Workgroup, VA Mid-Atlantic; Hauser, Michael, PhD; Beckham, Jean, PhD; Ashley-Koch, Allison, PhD)</em></td>
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<td>(Bio Med, Gen/Int, Mil/Vets, Genetic, Adult, Industrialized)</td>
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</table>
### Daily Schedule
**Thursday, November 10, 4:15 p.m. – 5:30 p.m.**
**Concurrent Session Four**

<table>
<thead>
<tr>
<th>Symposium</th>
<th>Title</th>
<th>Chair</th>
<th>Discussant</th>
<th>Impact</th>
<th>Abstract</th>
<th>Topics</th>
<th>Authors</th>
<th>Methodology</th>
<th>Population</th>
<th>Length</th>
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<tbody>
<tr>
<td><strong>Symposium</strong></td>
<td>Diverse Approaches to Understanding Post-combat Adaptation among OEF/OIF/OND Veterans: Integrating Social, Cognitive, Affective, and Trait-based Factors</td>
<td>Smith</td>
<td>Bryan</td>
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<td></td>
<td>Evolving our Approach to Understanding Social Support and PTSD: Incorporating Bi-directional Models and Method Variance</td>
<td>Woodward, Matthew</td>
<td>Morissette, Sandra</td>
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<td></td>
<td>Resilience and Traumatic Brain Injury among Iraq/Afghanistan War Veterans: Differential Patterns of Adjustment and Quality of Life</td>
<td>Elliott, Timothy, ABPP</td>
<td>Hsiao, Yu-Yu</td>
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<td>Modifiable Risk Factors for the Emergence of PTSD in Deployed Military Personnel</td>
<td>Roberge, Erika</td>
<td>Williams, Paula</td>
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<td>Emotion Dysregulation, Coping Appraisals, and Negative Worldview in the Post-Combat Adaptation Process among Treatment Seeking OEF/OIF/OND Veterans</td>
<td>Smith, Andrew, MA, PhD Student</td>
<td>Holohan, Dana</td>
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<tr>
<td><strong>Symposium</strong></td>
<td>Core Symptoms of ‘Classic’ PTSD and Complex PTSD – and Their Relation to DSM-5 PTSD</td>
<td>Lueger-Schuster</td>
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<td>Performance of the PCL-5 in Comparison to the CAPS-5 in Diagnosing PTSD in a UK Treatment Seeking Population</td>
<td>Roberts, Neil, DPsych(Clin); Downes, Anthony</td>
<td>Jumbe, Sandra</td>
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<td></td>
<td>The Psychopathological Symptom-networks of Trauma Related Disorders in DSM-5 and Proposed ICD-11</td>
<td>Knefel, Matthias, MS, PhD Student</td>
<td>Lueger-Schuster, Brigitte</td>
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<td>A Comparison of the Factor Structure of ICD-11 PTSD, ICD-11 Complex PTSD, and DSM-5 PTSD among a British Clinical Sample</td>
<td>Hyland, Philip</td>
<td>Shevlin, Mark</td>
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<td>ICD-11 and DSM-5: Prevalence, Overlap and Stability of Posttraumatic Stress Symptoms over Time in Young Survivors of the 2011 Norway Attacks</td>
<td>Hafstad, Gertrud</td>
<td>Dyb, Grete</td>
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</table>
## Daily Schedule

**Thursday, November 10, 4:15 p.m. – 5:30 p.m.**

**Concurrent Session Four**

### Innovative Interventions: How to Make Therapy More Accessible

**Chair** (Freedman)

**Discussant** (Kassam-Adams)

**GETSmart: Guided Use of Smart Phone Apps to Reduce PTSD Symptom Severity**

*(Roy, Michael, MD, MPH; Highland, Krista, PhD; Costanzo, Michelle, PhD)*

*(Clin Res, Prevent, Tech, Mil/Vets, Adult, Industrialized)*

**A Self-directed Parenting Program for Military Families: Outcomes of the After Deployment, Adaptive Parenting Tools Online Program**

*(Gewirtz, Abigail, PhD, LP)*

*(Tech, Fam/Int, Prevent, Mil/Vets, Lifespan, Global)*

**iVR - An Internet Based Virtual Reality Early Intervention for PTSD**

*(Freedman, Sara, PhD)*

*(Prevent, Prevent, Tech, Adult, Industrialized)*

**A Parent-led Intervention to Promote Pediatric Injury Recovery: Initial Results**

*(Marsac, Meghan, PhD; Weiss, Danielle, MS; Kohser, Kristen, MSW; Kassam-Adams, Nancy, PhD)*

*(Prevent, Acc/Inj, Acute, Health, Lifespan, Industrialized)*

### Enhancing Quality of Online Information to Support Treatment Engagement

**Chair** (Hamblen)

**Using Graphics to Communicate Information about PTSD Treatment Effectiveness to Patients**

*(Harik, Juliette, PhD; Grubbs, Kathleen, PhD; Schnurr, Paula, PhD)*

*(Train/Ed/Dis, Res Meth, Tech, Adult, Industrialized)*

**Customizing an Online PTSD Treatment Decision Aid to Improve Patient-Centered Care**

*(Merrick, Cybele, MA; Bippart, Victoria)*

*(Practice, Tech, Train/Ed/Dis, Adult, Industrialized)*

**Online Interventions to Promote PTSD Treatment Engagement for a Community Sample of OEF/OIF/OND Reserve/ National Guard and Active Component Servicewomen**

*(Sadler, Anne, PhD; Mengeling, Michelle, PhD; Torner, James, PhD; Booth, Brenda, PhD)*

*(Train/Ed/Dis, Tech, Adult, Industrialized)*

**Preferences for Decision Making Involvement and Information About PTSD Treatment: A Nationally Representative Online Survey of Adults Who Screened Positive for PTSD**

*(Hamblen, Jessica, PhD; Hundt, Natalie, PhD; Bernardy, Nancy, PhD; Norman, Sonya, PhD)*

*(Tech, Practice, Adult, Industrialized)*
## Daily Schedule

**Thursday, November 10, 4:15 p.m. – 5:30 p.m.**

### Concurrent Session Four

#### Panel Presentation

**Interprofessional Perspectives on Trauma-informed Care**  
*Discussant (Gradus)*  
**McBain, Sacha, Doctoral Student; Gradus, Jaimie, ScD; McKinney, Robert, LCSW; Stokes, Yehudis, RN; Vasquez, Jan, MPH**  
(Pub Health, Clin Res, Practice, Lifespan, Industrialized)

#### Paper Session

**Neuroimaging Two Paper Session**  
*Moderator: (Elzinga)*

1. **Cerebral Networks Underlying Hypersensitivity to Salient Sounds in Posttraumatic Stress Disorder**  
   *(Naegeli, Christoph, MSc; Zeffiro, Thomas, MD, PhD; Hassanpour, Katayun, MD; Schick, Matthis, MD; Orr, Scott, PhD; Mueller-Pfeiffer, Christoph, MD)*  
   (Bio Med, Neuro, Adult, Industrialized)

2. **Neither Here nor There: Traumatic Stress, Oscillation, and the Role of the Cerebellum**  
   *(Minshew, Reese, PhD; D’Andrea, Wendy, PhD; Siegle, Greg, PhD)*  
   (Clin Res, CPA, Neuro, Adult, Industrialized)

3. **Positive Outcomes of Transcranial Magnetic Stimulation in a Rodent Model of PTSD**  
   *(Legrand, Marc, PhD Student; El-Hage, Wissam, PhD, MD)*  
   (Tech, Anx, Bio Med, Bio/Int, Theory, N/A, N/A)

4. **Childhood Maltreatment and Social Functioning later in Life: a Neurobiological Approach**  
   *(Elzinga, Bernet, PhD; van Schie, Charlotte, PhD Candidate; van Harmelen, Anne-Laura, PhD; Crone, Eveline, PhD)*  
   (Bio Med, Bio Med, CSA, Chronic, Neuro, Lifespan, Industrialized)
### Daily Schedule

**Thursday, November 10, 4:15 p.m. – 5:30 p.m.**

**Concurrent Session Four**

<table>
<thead>
<tr>
<th>Paper Session</th>
<th>Treatment Two Paper Session</th>
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<tbody>
<tr>
<td><strong>Moderator:</strong></td>
<td>(Soh)</td>
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<tr>
<td><strong>Effective Treatments for PTSD: A Meta-analytic Review</strong></td>
<td>(Maddoux, John, MA)</td>
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<tr>
<td>(Practice, Clin Res, Cog/Int, Train/Ed/Dis, Adult, N/A)</td>
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<tr>
<td><strong>Evidence-Based Psychotherapy Utilization Among Iraq and Afghanistan Combat Veterans with PTSD</strong></td>
<td>(Myers, Ursula, MS, PhD Student; Norman, Sonya, PhD; McKnight, Aaron, Undergraduate; Angkaw, Abigail, PhD)</td>
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<tr>
<td>(Clin Res, Practice, Mil/Vets, Adult, N/A)</td>
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<tr>
<td><strong>Utilizing Online Role-Plays with Emotionally Responsive Virtual Patients to Train Mental Health Students in Conducting Prolong Exposure Therapy</strong></td>
<td>(Greene Megaw, Meredith, MA, MHC; Albright, Glenn, PhD)</td>
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<tr>
<td>(Train/Ed/Dis, Anx, Practice, Tech, Train/Ed/Dis, Prof, N/A)</td>
<td><strong>I</strong></td>
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<tr>
<td><strong>Dissemination of Community-based TF-CBT in Singapore</strong></td>
<td>(Soh, Lynn, MSc)</td>
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<td>(Commun, Clin Res, Comm/Int, Train/Ed/Dis, Child/Adol, Industrialized)</td>
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<th>Time</th>
<th>Event</th>
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<tbody>
<tr>
<td>5:30 p.m. – 6:30 p.m.</td>
<td><strong>Author Attended Poster Session One (Cash Bar)</strong></td>
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<tr>
<td>6:30 p.m. – 8:00 p.m.</td>
<td><strong>Welcome Reception with SIG Endorsed Posters</strong></td>
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</table>
**Daily Schedule**

**Friday, November 11**

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
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<tbody>
<tr>
<td>7:30 a.m. – 8:30 a.m.</td>
<td>Coffee and Tea Service</td>
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<tr>
<td>7:30 a.m. – 6:00 p.m.</td>
<td>Registration Desk Open</td>
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<tr>
<td>7:30 a.m. – 6:00 p.m.</td>
<td>Exhibits Open</td>
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<tr>
<td>8:00 a.m. – 6:30 p.m.</td>
<td>Bookstore Open</td>
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<tr>
<td>8:30 a.m. – 8:50 a.m.</td>
<td>ISTSS Award Presentations</td>
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<tr>
<td>8:50 a.m. – 9:50 a.m.</td>
<td>Keynote Address</td>
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</table>

**Epigenetic Regulation of Stress Genes and Their Role In Stress-related Psychiatric Disorders: FKBPS as an Example**

*(Binder, Elisabeth, MD PhD)*

(Bio Med, Gen/Int, Genetic, Lifespan, Global)

**Friday, November 11, 10:15 a.m. – 11:30 a.m.**

**Concurrent Session Five**

**Invited Symposium**

**Moving from Research to Practice to Meet the Needs of Trauma-exposed Populations Across the Globe**

*Chair (Jensen)*

*Discussant (Schnurr)*

*Don’t Forget the Brokers! One Potential Strategy for Increasing Reach of Trauma-focused Evidence-based Treatments (EBTs) for Youth and their Families*  
*(Hanson, Rochelle, PhD; Saunders, Benjamin, PhD)*  
(Train/Ed/Dis, Practice, Commun, Child Welfare, Industrialized)

*Testing a Comprehensive Model of Implementation for EBPs for PTSD: A National Investigation in 38 US VA Residential Settings across Three Yearly Time Points*  
*(Cook, Joan, PhD; Simiola, Vanessa, MA; Thompson, Richard, PhD; Schnurr, Paula, PhD; Ruzek, Josef, PhD)*  
(Train/Ed/Dis, Train/Ed/Dis, Mil/Vets, Adult, Industrialized)

*Transferring Knowledge to Practice: Implementing TF-CBT in Norwegian Child Mental Health Clinics*  
*(Skar, Ane-Marthe, PhD; Ormhaug, Silje, PhD; Granly, Lene, Sr Clin Psychologist; Jensen, Tine, PhD)*  
(Train/Ed/Dis, Assess Dx, Practice, Complex, Train/Ed/Dis, Lifespan, Industrialized)

*Implementation of Cognitive Processing Therapy in the Democratic Republic of Congo*  
*(Kayser, Debra, PhD, ABPP; Stappenbeck, Cynthia, PhD; Topolska, Monika, BA; Robinette, Katie, MPH; Maroy, Viviane, BA; Bolton, Paul, MB BS)*  
(Train/Ed/Dis, Clin Res, Commun, Global, Rape, Adult, W & C Africa)
## Daily Schedule

**Friday, November 11, 10:15 a.m. – 11:30 a.m.**  
Concurrent Session Five

### Symposium

**Harnessing eHealth Technology to Improve Outcomes for PTSD Patients: A Public Health Approach to Treatment**

Chair (Wilson)  
Discussant (Beckham)

- **A Preliminary Investigation of a Relapse Prevention Mobile Phone-based Application to Maintain Smoking Abstinence among Individuals with Posttraumatic Stress Disorder**  
  *(Hicks, Terrell, BS)*  
  (Clin Res, Clin Res, Pub Health, Sub/Abuse, Tech, Adult, Industrialized)

- **Reach, Adoption, and Implementation of a Web-based Alcohol Intervention for Veterans with Problem Drinking and PTSD**  
  *(Brief, Deborah, PhD; Enggasser, Justin, PhD; Helmuth, Eric, PhD; Rubin, Amy, PhD; Roy, Monica, PhD; Solhan, Marika, PhD; Schreiner, Amy, PhD; Heilman, Meagan, MA; Rosenbloom, David, PhD; Keane, Terence, PhD)*  
  (Clin Res, Sub/Abuse, Tech, Mil/Vets, Adult, N/A)

- **Tailored Online Multiple Behavior Interventions Can Reduce Symptoms of PTSD in Veterans**  
  *(Jordan, Patricia, PhD)*  
  (Res Meth, Anx, Depr, Tech, Mil/Vets, N/A, Industrialized)

- **Prolonged Exposure for Posttraumatic Stress Disorder: A Non-inferiority Trial of Treatment Delivered in Person versus Home-Based Telemedicine**  
  *(Gilmore, Amanda, PhD; Tuerk, Peter, PhD; Ruggiero, Kenneth, PhD; Acierno, Ron, PhD)*  
  (Tech, Clin Res, Pub Health, Tech, Mil/Vets, Adult, N/A)

### Symposium

**Theoretical Predictors of the Effectiveness of Web Interventions for Trauma**

Chair (Yeager)  
Discussant (Ruzek)

- **Understanding Engagement with a Trauma Recovery Web Intervention Using the Health Action Process Approach (HAPA) Framework**  
  *(Yeager, Carolyn, PhD Student; Benight, Charles, PhD)*  
  (Tech, Clin Res, Pub Health, Adult, Industrialized)

- **Changes Self-appraisal and Mood Utilizing a Web-based Recovery System on Posttraumatic Stress Symptoms: A Laboratory Experiment**  
  *(Benight, Charles, PhD; Shoji, Kotaro, PhD; Yeager, Carolyn, PhD Student; Mullings, Austin, MA Student; Dhamija, Svati, MS, PhD Student; Boult, Terrance, PhD)*  
  (Tech, Affect/Int, Clin Res, Pub Health, Adult, Industrialized)

- **Pre-treatment Difficulties and Resources as Predictors of Therapist Working Alliance in Online PTSD Treatment**  
  *(Littleton, Heather, PhD; Layh, Marlee, BS, BA; Decker, Melissa, MA PhD Student; Grills, Amie, PhD)*  
  (Clin Res, Rape, Tech, Adult, Industrialized)
## Daily Schedule
**Friday, November 11, 10:15 a.m. – 11:30 a.m.**
**Concurrent Session Five**

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<thead>
<tr>
<th>Symposium</th>
<th>Updates from the Psychiatric Genomics Consortium for PTSD: GWAS, EWAS, Expression, and Imaging</th>
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<tbody>
<tr>
<td></td>
<td>Genomics of PTSD from Large-scale Genome-wide Association Studies (GWAS) across Military and Civilian Cohorts</td>
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<td>(Nievergelt, Caroline, PhD; Davie, Shareefa, PhD; Duncan, Laramie, PhD; Maihofer, Adam, MS; Ratanatharathorn, Andrew, MA, PhD Student; Daly, Mark, PGDip Psych; Liberzon, Israel, MD; Ressler, Kerry, MD, PhD; Koenen, Karestan, PhD; PGC PTSD workgroup)</td>
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<td>DNA Methylation at NRG1 May Be an Epigenetic Biomarker of PTSD in Civilian Cohorts</td>
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<td>(Ratanatharathorn, Andrew, MA, PhD Student; Kuan, Pei-Fen, PhD; Armstrong, Don, PhD; Boks, Marco, MD, PhD; Logue, Mark, PhD; Maihofer, Adam, MS; Luft, Benjamin, MD; Bromet, Evelyn, PhD; Miller, Mark, PhD; Ressler, Kerry, MD, PhD; Koenen, Karestan, PhD; Guffanti, Guia, PhD; Hauser, Michael, PhD; Kimbrel, Nathan, PhD; Vermetten, Eric, MD, PhD; Stein, Murray, MD, MPH, FRCP; Baker, Dewleen, MD; Nievergelt, Caroline, PhD; Smith, Alicia, PhD; Uddin, Monica, PhD; PGC-PTSD, Epigenetics Workgroup, MD, PhD)</td>
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<td>Investigation of Expression Signatures Associated with PTSD</td>
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<td>(Hauser, Michael, PhD; Ashley-Koch, Allison, PhD; PGC PTSD, Gene Expression Working Group)</td>
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<td>(Bio Med, Bio Med, Health, Genetic, Adult, Global)</td>
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<td>Altered Subcortical Volumes in PTSD: Findings from PGC-ENIGMA PTSD</td>
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<td>(Morey, Rajendra, MD; Lancaster, Sarah, BA; Dennis, Emily, PhD; McLaughlin, Katie, PhD; Peverill, Matthew, PhD; Sheridan, Margaret, PhD; Harpaz-Rotem, Ilan, PhD; Levy, Ifat, PhD; Wrocklage, Kristen, PhD; Abdallah, Chadi, MD; Thompson, Paul, PhD; Thomaes, Kathleen, MD; Veltman, Dick, MD, PhD; Koch, Saskia, MSC; Geuze, Elbert, PhD; Stein, Dan, BSc(Med); MBCchB, FRCP, FRSSAf, PhD, DPhil; Ipser, Jonathan, PhD; Ressler, Kerry, MD, PhD; Stevens, Jennifer, PhD; van Rooij, Sanne, PhD; Logue, Mark, PhD)</td>
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### Daily Schedule
**Friday, November 11, 10:15 a.m. – 11:30 a.m.**
**Concurrent Session Five**

#### Symposium
**Factors Influencing Long-term Functional Recovery among Warzone-deployed Service Members**
*Chair (Morissette)  Discussant (Keane)*

<table>
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<tr>
<th>Presentation Level</th>
<th>Title</th>
<th>Authors</th>
<th>Audience</th>
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<tbody>
<tr>
<td>M</td>
<td>Long-term Trajectories of Functional Impairment among Iraq/Afghanistan Veterans</td>
<td><em>(Kimbrel, Nathan, PhD; Meyer, Eric, PhD; DeBeer, Brynn, PhD; Gulliver, Suzy, PhD; Morissette, Sandra, PhD)</em></td>
<td>(Assess Dx, Chronic, Complex, Depr, Mil/Vets, Adult, Industrialized)</td>
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<tr>
<td>M</td>
<td>Associations between DSM-5 Posttraumatic Stress Disorder Symptom Clusters and Functional Impairment Over Time in Female and Male War Veterans</td>
<td><em>(Meyer, Eric, PhD; Konecky, Brian, PhD; Kimbrel, Nathan, PhD; Marx, Brian, PhD; Schumm, Jeremiah, PhD; Gulliver, Suzy, PhD; Morissette, Sandra, PhD)</em></td>
<td>(Assess Dx, Assess Dx, Mil/Vets, Gender, Adult, Industrialized)</td>
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<td>The Effects of Spouse/Partner Functioning Over Time on Soldier Post-deployment Outcomes</td>
<td><em>(Erbes, Christopher, PhD LP; Polusny, Melissa, PhD; Arbisi, Paul, PhD; DeGarmo, David, PhD; Kramer, Mark, PhD; Vogt, Dawne, PhD)</em></td>
<td>(Prevent, Fam/Int, Mil/Vets, Adult, Industrialized)</td>
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<td>Examining the Longitudinal Associations among Functional Impairment, Quality of Life Outcomes, and PTSD Status with OEF/OIF Veterans</td>
<td><em>(Marx, Brian, PhD; Bovin, Michelle, PhD; Lee, Daniel, MS; Green, Jonathan, PhD; Parker-Guilbert, Kelly, PhD; Rosen, Raymond, PhD; Keane, Terence, PhD)</em></td>
<td>(Assess Dx, Clin Res, QoL, Res Meth, Mil/Vets, Adult, Industrialized)</td>
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#### Symposium
**Increasing our Understanding of Subclinical PTSD Symptoms**
*Chair (Franklin)*

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<th>Title</th>
<th>Authors</th>
<th>Audience</th>
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<tr>
<td>M</td>
<td>Defining Subthreshold PTSD in the DSM-IV Literature: A Look Toward DSM-5</td>
<td><em>(Franklin, C, PhD; Piazza, Vivian, PhD; Chelminski, Iwona, PhD; Zimmerman, Mark, MD)</em></td>
<td>(Assess Dx, Anx, Practice, Adult, Industrialized)</td>
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<td></td>
<td>The Structure of Subclinical PTSD: Factor or Fiction?</td>
<td><em>(Cuccurullo, Lisa-Ann, PsyD; Walton, Jessica, PhD; Ball, Jacqueline, PhD; Vaught, Amanda, PsyD; Chambliss, Jessica, MS; Maieritsch, Kelly, PhD; Franklin, C, PhD)</em></td>
<td>(Assess Dx, Mil/Vets, Adult, N/A)</td>
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<td></td>
<td>Efficacy of a Brief Computerized Intervention on Subclinical Posttraumatic Stress Symptoms</td>
<td><em>(Raines, Amanda, MS, PhD Student; Schmidt, Norman, PhD)</em></td>
<td>(Clin Res, Anx, Clin Res, Prevent, Adult, N/A)</td>
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<td></td>
<td>A Comparison of Evidence-Based Trauma-focused Treatment Outcomes in a Diverse, Multi-era Sample of Veterans Experiencing Subthreshold Vs. Threshold PTSD</td>
<td><em>(Lamp, Kristen, PhD; Astin, Millie, PhD; Rauch, Sheila, PhD, ABPP; Norrholm, Seth, PhD; Bradley, Bekh, PhD)</em></td>
<td>(Clin Res, Assess Dx, Clin Res, Mil/Vets, Adult, Industrialized)</td>
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</table>
### Daily Schedule

**Friday, November 11, 10:15 a.m. – 11:30 a.m.**

**Concurrent Session Five**

<table>
<thead>
<tr>
<th>Symposium</th>
<th>Title</th>
<th>Chair</th>
<th>Presentations</th>
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<tr>
<td><strong>Symposium</strong></td>
<td><strong>The Treatment of Co-occurring PTSD and Substance-related Disorders</strong></td>
<td>(Kehle-Forbes)</td>
<td>A Randomized Clinical Trial of Sequential Versus Integrated Treatment for Veterans with Co-occurring PTSD and Substance Use Disorders (Kehle-Forbes, Shannon, PhD; Drapkin, Michelle, PhD; Foa, Edna, PhD; Koffel, Erin, PhD; Polusny, Melissa, PhD; Van Horn, Deborah, PhD; Yusko, David, PsyD; Oslin, David, MD) (Clin Res, Sub/Abuse, Adult, Industrialized) Integrated Treatment of PTSD and Addiction in Veterans Using Prolonged Exposure (Back, Sudie, PhD; Killeen, Therese, PhD, RN; Badour, Christal, MA, PhD Student; Flanagan, Julianne, PhD; Korte, Kristina, PhD; Brady, Kathleen, MD, PhD) (Clin Res, Sub/Abuse, Adult, N/A) Role of Alcohol Use Disorder in PTSD Treatment Engagement among Treatment Seeking Veterans (Norman, Sonya, PhD; Myers, Ursula, MS, PhD Student; Angkaw, Abigail, PhD) (Clin Res, Sub/Abuse, Adult, Industrialized) Concurrent Varenicline and Prolonged Exposure for Patients with Nicotine Dependence and PTSD: A Randomized Controlled Trial (Asnaani, Anu, PhD; Rosenfield, David, PhD; Zandberg, Laurie, PsyD; Gariti, Peter, PhD; Imms, Patricia, RN; Foa, Edna, PhD) (Clin Res, Health, Pub Health, Sub/Abuse, Adult, Industrialized)</td>
</tr>
<tr>
<td><strong>Symposium</strong></td>
<td><strong>Welcoming Adjustment Disorder to the Trauma and Stressor Related Disorders</strong></td>
<td>(O'Donnell)</td>
<td>Self-help Interventions for Adjustment Disorder: A Randomized Waiting-list Controlled Study (Maercker, Andreas, PhD, MD) (Clin Res, Pub Health, Adult, Global) A Longitudinal Study of Adjustment Disorder after Trauma Exposure (O'Donnell, Meaghan, PhD; Nathan, Alkmemade, PhD; Creamer, Mark, PhD; McFarlane, Alexander, MD; Silove, Derrick, MD, PhD; Bryant, Richard, PhD; Felmingham, Kim, PhD; Steel, Zachary, PhD; Forbes, David, PhD) (Assess Dx, Acc/Inj, Adult, Industrialized) New Revision of Adjustment Disorder in ICD-11: Factor Structure Study in Lithuania (Kazlauskas, Evaldas, PhD; Eimontas, Jonas, MA, PhD Student; Zelviene, Paulina, MA, PhD Student) (Assess Dx, Assess Dx, Global, Theory, Adult, Industrialized)</td>
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<tr>
<td><strong>Panel</strong></td>
<td><strong>An Analysis of Technology and Mobile Applications for Facilitating EMDR Treatment of PTSD with Dissociative Features</strong></td>
<td>(Marotta-Walters, Sylvia, PhD, ABPP; Jain, Kshipra, PhD Student; Dinardo, Jeff, PhD Student; Friday, Amanda, PhD Student; Kaur, Preet, PhD Student) (Practice, Complex, Tech, Train/Ed/Dis, Prof, Industrialized)</td>
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### Daily Schedule

**Friday, November 11, 10:15 a.m. – 11:30 a.m.**  
**Concurrent Session Five**

| Workshop Presentation | **Concerted Care for Foster Children: Results of the Anne E. Casey Bridging the Way Home Study**  
*Brown, Adam, PsyD; Saxe, Glenn, MD; McCauley, Kelly, LCSW*  
(Clin Res, Chronic, Complex, Train/Ed/Dis, Child/Adol, Industrialized) | M |
| --- | --- | --- |
| **Paper Session** | **Symptomology/Classification One Paper Session**  
**Moderator:** (Mitchell)  
Latent Classes of PTSD Symptoms in Veterans Undergoing Residential PTSD Treatment  
*Sripada, Rebecca, PhD; Hoff, Rani, PhD, MPH; Pfeiffer, Paul, MD; Ganoczy, Dara, MPH; Blow, Fred, PhD; Bohnert, Kipling, PhD*  
(Assess Dx, Aggress, Health, Pub Health, Adult, Industrialized) | M |
|  | Longitudinal Measurement Invariance of Posttraumatic Stress Disorder in Deployed Marines  
*Contractor, Ateka, PhD; Bolton, Elisa, PhD; Gallagher, Matthew, PhD; Nash, William, MD; Litz, Brett, PhD*  
(Assess Dx, Res Meth, Mil/Vets, Adult, Industrialized) | A |
|  | Longitudinal Cortex Features in PTSD Patients Following Motor Vehicle Accidents: A Cohort Study  
*Wang, Zhen, MD PhD; Hu, Hao, PhD Student; Su, Shanshan, Clinician in Psychiatry; Wang, Qian, PhD, MSc; Xiao, Zeping, PhD, MD*  
(Clin Res, Acc/Inj, Acute, Neuro, Adult, E Asia & Pac) | I |
|  | Network Models of DSM-5 Posttraumatic Stress Disorder: Implications for ICD-11  
*Mitchell, Karen, PhD; Wolf, Erika, PhD; Bovin, Michelle, PhD; Rosen, Raymond, PhD; Keane, Terence, PhD; Marx, Brian, PhD*  
(Assess Dx, Gender, Adult, Industrialized) | M |
| **Paper Session** | **Emotions Paper Session**  
**Moderator:** (Krause-Utz)  
Emotion Dysregulation as a Prospective Predictor of PTSD Following Sexual Assault  
*Franz, Molly, Doctoral Student; Hein, Christina, Doctoral Student; Jaffe, Anna, Doctoral Student; Messman-Moore, Terri, PhD; Gratz, Kim, PhD; DiLillo, David, PhD*  
(Clin Res, Affect/Int, Rape, Adult, Industrialized) | I |
|  | Investigating Perceived Effectiveness of Therapies Used by Survivors of Rape and Sexual Assault Using a Mixed Method Approach  
*Weingarten, Christine, BA; Einolf, Christopher, PhD*  
(Train/Ed/Dis, CSA, DV, Rape, Adult, Industrialized) | M |
|  | Effects of Intimate Partner Violence, Mental Health, and Social Support on Perinatal Health  
*Srafford, Kathryn, PhD Student; Miller-Graff, Laura, PhD; Grein, Katherine, BA*  
(Clin Res, DV, Health, Gender, Adult, Industrialized) | M |
|  | The Effectiveness of an Emotional Working Memory Training in Patients with Borderline Personality Disorder  
*Krause-Utz, Annegret, PhD; Walther, Julia-Caroline, MA; Schweizer, Susanne, PhD; Elzinga, Bernet, PhD; Bohus, Martin, MD*  
(Clin Res, Chronic, Clin Res, Cog/Int, Complex, Adult, Industrialized) | M |
## Daily Schedule
**Friday, November 11**

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<td>10:30 a.m. – 5:30 p.m.</td>
<td>Poster Viewing Session Two</td>
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<tr>
<td>11:30 a.m. – 1:15 p.m.</td>
<td>Lunch on your own</td>
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<tr>
<td>11:45 a.m. – 1:30 p.m.</td>
<td>Student Lunch Meeting</td>
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## Concurrent Session Six
**Friday, November 11, 1:15 p.m. – 2:30 p.m.**

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<th>Master Methodologist</th>
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<th>Chair</th>
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<tr>
<td></td>
<td>The Ultimate Skinner Box: Virtual Reality as a Tool for the Prevention, Assessment and Treatment of PTSD</td>
<td>(Rizzo, Albert, PhD)</td>
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<td>(Tech, Clin Res, Adult, Global)</td>
<td>(Tech, Clin Res, Adult, Global)</td>
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<tr>
<td>Symposium</td>
<td>Challenges in Development of Scalable, Effective Training for Mental Health Providers</td>
<td>(Ruzek)</td>
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<td></td>
<td>Understanding the Neurobiology of Trauma to Improve Psychiatric Care: Design and Evaluation of an eLearning Module for the Continuing Professional Development of Family Physicians</td>
<td>(Ross, Dana, MD, FRCP; Kim, Sarah, BSc; Lax, Leila, PhD; Taylor, Valerie, MD, FRCP; Gupta, Renu, MD; Sockalingam, Sanjeev, MD)</td>
</tr>
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<td></td>
<td>Measuring Outcomes of Online Training for PTSD Providers: Use of Standard Patient (SP) Methodology as a Tool for Objective Outcome Assessment</td>
<td>(Rosen, Raymond, PhD; Graham, Benjamin, PhD; Ruzek, Josef, PhD)</td>
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<td></td>
<td>A Model for Web-facilitated Consultation to Support Online Clinician Training</td>
<td>(Ruzek, Josef, PhD; Rosen, Raymond, PhD; Graham, Benjamin, PhD; Hoyman, Lisa, MS; Sharma, Shivani, BS; Humphrey, Sharon, MS)</td>
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<tr>
<td></td>
<td>Evaluating Clinicians’ Use of a Web-based Training in Cognitive Behavioral Therapy for PTSD: Impact on Outcomes and Correlation with Self-reported Use</td>
<td>(Marceau, Lisa, MPH; Coleman, Julia, MPH candidate; Graham, Benjamin, PhD; Wilkinson, Ashley, MPH; Kato, Bernet, PhD; Rosen, Raymond, PhD; Ruzek, Josef, PhD)</td>
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</table>
## Daily Schedule

**Friday, November 11, 1:15 p.m. – 2:30 p.m.**

### Concurrent Session Six

#### Symposium

**Youth Positive Adaptation in the Aftermath of Trauma and Loss: Implications for Intervention and Public Policy**

*Chair (Kaplow)*

*Discussant (Pynoos)*

- Violence Exposure and the Social Contract: Examining Trends among Youth Victimization, Civic Engagement, and Beliefs about Government over Thirty-Nine Years
  *Oosterhoff, Benjamin, PhD*; Kaplow, Julie, PhD, ABPP; Layne, Christopher, PhD; Pynoos, Robert, MD, MPH
  (Social, Comm/Int, Comm/Vio, Pub Health, Social, Child/Adol, Industrialized)

- Positive Parenting Improves Adult Emotion Regulation for Parentally Bereaved Children
  *Danvers, Alexander, Doctoral Student*; Sandler, Irwin, PhD; Shiota, Michelle, PhD; Tien, Jenn-Yun, PhD; Scott, Brandon, PhD
  (Res Meth, Affect/Int, Death, Fam/Int, Grief, Lifespan, Industrialized)

- Toward an Understanding of “Good Grief” in Bereaved Youth: The Protective Roles of Parenting, Spirituality, and Meaning-making in Post-Bereavement Adaptation
  *Kaplow, Julie, PhD, ABPP*; Layne, Christopher, PhD; Oosterhoff, Benjamin, PhD; Goldenthal, Hayley, MA; Arky, Todd, BA; Gaffney, Donna, Dsc; Pynoos, Robert, MD, MPH
  (Prevent, Comm/Int, Death, Fam/Int, Theory, Child/Adol, Industrialized)

- Multidimensional View of Factors Impacting PTSD Symptoms in Salvadorian Youth Exposed to Violence
  *Houltberg, Benjamin, PhD*; Rojas-Flores, Lisseth, PhD; Currier, Joseph, PhD; Herrera, Sofia, PhD; Cui, Lixian Cui, PhD

#### Symposium

**Movement in Treatment of PTSD: Incorporating Exercise in Treatment**

*Chair (Vermetten)*

*Discussant (Roy)*

- Exploring the Promotion of Sport and Physical Fitness Following a Traumatic Injury: The Canadian Armed Forces and the Role of the Soldier On Program
  *Coulthard, Julie, PhD*; Woycheshin, David, PhD
  (Commun, QoL, Prevent, Mil/Vets, Military, Industrialized)

- Exercise Augmentation of Exposure Therapy for PTSD: Rationale and Pilot Efficacy Data
  *Powers, Mark, PhD*; Lee-Furman, Eunjung, BA; Medina, Johanna, PhD; Burns, Stephanie, BA; Kaufman, Brooke, PhD; Monfils, Marie, PhD; Asmundson, Gordon, PhD; Diamond, Allison, PhD; McIntyre, Christa, PhD; Smits, Jasper, PhD
  (Clin Res, Bio/Int, Rape, Mil/Vets, Theory, Adult, Industrialized)

- Exercise Augmentation Compared to Usual Care for Posttraumatic Stress Disorder: A Randomised Controlled Trial
  *Rosenbaum, Simon, PhD*
  (Pub Health, Bio/Int, Theory, Adult, Industrialized)

- Walk & Talk: Multi-modal Motion-assisted Memory Desensitization and Reconsolidation (3MDR) for the Treatment of Treatment-resistant Patients with Posttraumatic Stress Disorder
  *van Gelderen, Marieke, MSc*; Nijdam, Mirjam, PhD; Vermetten, Eric, MD, PhD
  (Clin Res, Practice, Tech, Mil/Vets, Theory, Adult, Industrialized)
<table>
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<tr>
<th>Symposium</th>
<th>Understanding the Associations between Trauma Exposure and Suicide Risk in Veterans: Using Multiple Methods to Hone in on Novel Risk Factors</th>
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<td>Chair</td>
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<tr>
<td>Discussant</td>
<td>Bryan</td>
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Using Machine Learning to Predict Suicidal Ideation in OEF/OIF Veterans

(Gradus, Jaimie, ScD; King, Matthew, PhD; Galatzer-Levy, Isaac, PhD; Street, Amy, PhD)
(Res Meth, Mil/Vets, Gender, Adult, Industrialized)

Understanding Suicidal Self-directed Violence among Veterans with Military Sexual Trauma

(Monteith, Lindsey, PhD; Bahraini, Nazanin, PhD; Matarazzo, Bridget, PsyD; Soberay, Kelly, MA, LPC; Gerber, Holly, BA; Barnes, Sean, PhD)
(Clin Res, Depr, Rape, Mil/Vets, Gender, Adult, Industrialized)

Improving Suicide Risk Assessment among Psychiatrically Hospitalized Veterans with PTSD

(Barnes, Sean, PhD; Forster, Jeri, PhD; Monteith, Lindsey, PhD; Bahraini, Nazanin, PhD)
(Clin Res, Assess Dx, Adult, N/A)

Factors that Mediate and Moderate the Relationship Between PTSD, Depression, and Suicidal Ideation in a Military Sexual Trauma Sample

(Holliday, Ryan, MA; Holder, Nicholas, BS; Wilblin, Jessica, BA; Clem, Matthew, MEd; Suris, Alina, PhD, ABPP)
(Clin Res, Depr, Rape, Mil/Vets, Prof, Industrialized)

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<th>Symposium</th>
<th>Emotion Regulation Strategies as Predictors of Posttraumatic Stress and Depression</th>
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<tr>
<td>Co-chairs</td>
<td>Pfaltz, Michael</td>
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<tr>
<td>Discussant</td>
<td>Schnyder</td>
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Emotion Recognition and Expressive Suppression in Traumatized Individuals with and without Posttraumatic Stress Disorder

(Pfaltz, Monique, PhD; Passardi, Sandra, MSc; Plichta, Michael, PhD; Wingenbach, Tanja, MSc; Hassanpour, Katayun, MD; Mueller-Pfeiffer, Christoph, MD; Michael, Rufer, MD; Schnyder, Ulrich, MD)
(Clin Res, Acute, Affect/Int, Assess Dx, Chronic, Adult, Industrialized)

Emotion Regulation Strategies in Severely Traumatised Refugees — a Follow-Up Study

(Morina, Naser, MA; Bryant, Richard, PhD; Schick, Matthis, MD; Schnyder, Ulrich, MD; Nickerson, Angela, PhD)
(Clin Res, Refugee, Torture, Civil/War, Adult, Industrialized)

A Prospective Study of Pre-trauma Risk Factors for Posttraumatic Stress Disorder and Depression

(Wild, Jennifer, DPsych(Clin); Smith, Kirsten, Clinical Psychologist; Thompson, Erin, DPsych(Clin); Bear, Francine, BSc Hons Psychology; Lommen, Miriam, PhD; Ehlers, Anke, PhD)
(Prevent, Cog/Int, Depr, Health, Illness, Adult, Industrialized)

Intrusive Memories of Experimental Trauma: Findings from Experimental Research

(James, Ella, PhD; Holmes, Emily, PhD)
(Prevent, Clin Res, Cog/Int, Prevent, Sleep, Adult, N/A)
### Daily Schedule

**Friday, November 11, 1:15 p.m. – 2:30 p.m.**

**Concurrent Session Six**

| Symposium | Identifying Influential PTSD Symptoms, Trauma Exposure, and Social Perceptions on Use of Intimate Partner Aggression or Parent-to-Child Aggression: Recent Research Findings and Clinical Implications  
Co-chairs (MacDonald, Creech)  
Discussant (van Voorhees) | A |
| --- | --- |
|  | Trauma Exposure and Aggression Towards Partners and Children: Differential Contextual Influences of Fear and Anger  
*Marshall, Amy, PhD; Roettger, Michael, PhD; Mattern, Alexandra, BA; Feinberg, Mark, PhD; Jones, Damon, PhD*  
(Clin Res, Aggress, CPA, DV, Gender, Adult, Industrialized) | A |
|  | Social Skills Deficits as a Mediator between Returning Veterans’ PTSD Symptoms and Use of Intimate Partner Aggression  
*LaMotte, Adam, BA; Taft, Casey, PhD; Weatherill, Robin, PhD; Eckhardt, Christopher, PhD*  
(Clin Res, Aggress, Cog/Int, DV, Mil/Vets, Adult, Industrialized) | A |
|  | Anger, Hostility, and Aggression among US Veterans Receiving Residential PTSD Treatment  
*Schumm, Jeremiah, PhD; Birkley, Erica, PhD; Chard, Kathleen, PhD; Eckhardt, Christopher, PhD*  
(Clin Res, Aggress, Clin Res, Cog/Int, Mil/Vets, Adult, Industrialized) | A |
|  | Examining PTSD Symptoms as a Predictor of Intimate Partner Violence Intervention Outcomes  
*Macdonald, Alexandra, PhD; Creech, Suzannah, PhD; Benzer, Justin, PhD; Poole Laposta, Gina, PhD; Murphy, Christopher, PhD; Taft, Casey, PhD*  
(Clin Res, Clin Res, DV, Adult, Industrialized) | A |
| Panel Presentation | What the Heck is Trauma-informed Care Anyway? Unraveling the Mystery One State at a Time  
Discussant: (Agosti)  
*Hanson, Rochelle, PhD; Lang, Jason, PhD; Ake, George, PhD; Donisch, Katelyn, MPH; Gewirtz, Abigail, PhD LP; Agosti, Jen, MPP*  
(Train/Ed/Dis, Commun, Pub Health, Social, Child/Adol, N/A) | I |
| Workshop Presentation | Addressing Perpetration and Moral Injury in Cognitive Processing Therapy  
*Healy, Ellen, PhD; Bassett, Gwendolyn, LCSW*  
(Practice, Agress, Cog/Int, Rape, Mil/Vets, Adult, Industrialized) | M |
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<tr>
<th>Paper Session</th>
<th>Intergenerational /Parenting One Paper Session</th>
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<tr>
<td>Moderator:</td>
<td>(O'Toole)</td>
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<tr>
<td></td>
<td>Prenatal Stress Related Variations of the Epigenome Across Three generations: Maternal and Grandmaternal Exposure to Community and Intimate Partner Violence During Pregnancy. &lt;br&gt; <strong>(Serpeloni, Fernanda, PhD Student; Radtke, Karl, MSc; Henning, Frederico, PhD; Hecker, Tobias, PhD; Elbert, Thomas, PhD; Nätt, Daniel, PhD)</strong> &lt;br&gt; (Bio Med, Comm/Vio, DV, Genetic, Intergen, Child/Adol, Global)</td>
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<td>Considering Postpartum Depression in the Intergenerational Transmission of Maltreatment and its Mental Health Sequelae &lt;br&gt; <strong>(Choi, Karmel, MA)</strong> &lt;br&gt; (Prevent, CPA, Depr, Dev/Int, Intergen, Lifespan, Industrialized)</td>
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<td>The Relation among PTSD Symptom Clusters and Parenting Stress &lt;br&gt; <strong>(Calvert, Maegan, MS, PhD Student; Petretic, Patricia, PhD; Berman, Ilana, BA; Lentz, Mariah, Undergraduate)</strong> &lt;br&gt; (Assess Dx, CPA, CSA, DV, Intergen, Adult, Industrialized)</td>
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<td>Intergenerational Transmission of PTSD in Australian Vietnam Veterans and Their Children &lt;br&gt; <strong>(O'Toole, Brian, PhD)</strong> &lt;br&gt; (Pub Health, Mil/Vets, Intergen, Gender, Adult, Industrialized)</td>
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<th>Disaster –Related Paper Session</th>
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<tr>
<td>Moderator:</td>
<td>(Newnham)</td>
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<td></td>
<td>Community Unemployment and Disaster-related Stressors Shape Risk for Posttraumatic Stress in the Longer-term Aftermath of Hurricane Sandy &lt;br&gt; <strong>(Lowe, Sarah, PhD; Sampson, Laura, BA; Gruebner, Oliver, PhD; Galea, Sandro, MD, DrPH)</strong> &lt;br&gt; (Pub Health, Acute, Nat/Dis, Adult, Industrialized)</td>
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<td>Reducing the Future Risk of Trauma: Harnessing EU Policy Strategies and International Treaties to Advance Population and Disaster Mental Health &lt;br&gt; <strong>(Reifels, Lennart, PhD)</strong> &lt;br&gt; (Global, Nat/Dis, Prevent, Pub Health, Social, Prof, Global)</td>
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<td>Exposures, PTSD and Lower Respiratory Symptoms among Rescue/Recovery Workers and Community Members after the 9/11 World Trade Center Attacks - a Longitudinal Mediation Analysis &lt;br&gt; <strong>(Wyka, Katarzyna, PhD; Stellman, Steven, PhD; Jordan, Hannah, MD, MPH)</strong> &lt;br&gt; (Pub Health, Bio Med, Health, Illness, Prevent, Adult, Industrialized)</td>
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<td>Key Risks for Adolescent Mental Health following the Nepal 2015 Earthquakes &lt;br&gt; <strong>(Newnham, Elizabeth, PhD; Guragain, Bhushan, MB BS; Patrick, Kaylie, MPH; Ghimire, Lajina, BSC, RN; Leaning, Jennifer, MB, BS)</strong> &lt;br&gt; (Global, Anx, Nat/Dis, Grief, Child/Adol, S Asia)</td>
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## Daily Schedule

**Friday, November 11, 2:45 p.m. – 4:00 p.m.**

### Concurrent Session Seven

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<th>Innovative Technological Advances in Child Trauma Prevention, Early Intervention, and Treatment</th>
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<tr>
<td><strong>Compassion Focused Therapy: Is Compassion an Antidote to Shame and an Effective Treatment of Complex PTSD?</strong>&lt;br&gt;(Lee, Deborah, PhD)&lt;br&gt;(Practice, Complex, Adult, Global)</td>
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**Symposium**

### Innovative Technological Advances in Child Trauma Prevention, Early Intervention, and Treatment

- Chair (Jaycox)
- Discussant (Hoffman)

- A Tablet-based Approach to Enhance Child Engagement and Provider Fidelity in Trauma-focused CBT<br>(Hanson, Rochelle, PhD; Davidson, Tatiana, PhD; Saunders, Benjamin, PhD; Danielson, Carla, PhD; Adams, Zachary, PhD; Cohen, Judith, MD; Deblinger, Esther, PhD; Ruggiero, Kenneth, PhD)<br>(Clin Res, Tech, Train/Ed/Dis, Child/Adol, Industrialized)

- Helping Kids Cope: A Mobile App to Ready Families for the Next Disaster<br>(Brymer, Melissa, PhD, PsyD)<br>(Train/Ed/Dis, Nat/Dis, Prevent, Tech, Child/Adol, Global)

- TF-CBT Triangle of Life<br>(Mannarino, Anthony, PhD; Cohen, Judith, MD)<br>(Clin Res, CSA, Child/Adol, Global)

- Life Improvement for Teens: An Online Curriculum for Stress and Trauma in High School Students<br>(Jaycox, Lisa, PhD; Hehman, Chris, BS; Ayer, Lynsay, PhD; Mahmud, Ammarah, MPH; Woolley, Melissa, MA; Vona, Pamela, BS; Stein, Bradley, MD PhD)<br>(Prevent, Prevent, Tech, Train/Ed/Dis, Child/Adol, Industrialized)
### Symposium: Trauma, PTSD, and Women's Reproductive Health

**Chair** (Nillni)
**Discussant** (Rasmusson)

- **Posttraumatic Stress Symptoms Induced by Childbirth: Real or Illusionary?**
  - *Dekel, Sharon, PhD; Pitman, Roger, MD*
  - (Clin Res, Clin Res, Gender, Adult, Global)

- **PTSD and Depression Across the First Postpartum Year and Their Additive Influences on Maternal-infant Bonding**
  - *(Choi, Karmel, MA; Roos, Annerine, PhD; Sikkema, Kathleen, PhD; Vythilingum, Bavanisha, MD; Stein, Dan, BSc(Med), MBChB, FRCPC, FRSSAf, PhD, DPhil)*
  - (Prevent, Depr, Fam/Int, Global, Gender, Lifespan, E & S Africa)

- **Traumatic Experiences Predict Prospective Emotional Reactivity to Ovarian Steroid Changes: Evidence from Three Prospective Studies**
  - *(Eisenlohr-Moul, Tory, PhD)*
  - (Bio Med, Bio Med, CPA, CSA, Gender, Lifespan, Industrialized)

- **Differences in Ovarian Hormone Steroids across the Menstrual Cycle among Women with and without PTSD**
  - *(Nillni, Yael, PhD; Irvine, John, PhD; Webb, Andrea, PhD; Resick, Patricia, PhD, ABPP; Orr, Scott, PhD; Rasmusson, Ann, MD; Pineles, Suzanne, PhD)*
  - (Bio Med, Gender, Adult, Industrialized)

### Symposium: Refining our Understanding of the Associations among Trauma Exposure, Posttraumatic Symptoms, and Risks for Youth Justice Involvement

**Chair** (Kerig)
**Discussant** (Ford)

- **Integrating Traumatic Stress Screening and Risk Assessments of Justice-involved Youth: Enhancing Identification of Delinquency Risk**
  - *(Cruise, Keith, PhD; Holloway, Evan, MA; Ford, Julian, PhD; Grasso, Damion, PhD)*
  - (Assess Dx, Aggress, Comm/Vio, Child/Adol, N/A)

- **The Role of Posttraumatic Stress Symptoms in the Sexual Revictimization Trajectories of Justice-involved Youth**
  - *(Chaplo, Shannon, Doctoral Student; Kerig, Patricia, PhD; Modrowski, Crosby, MS, PhD Student)*
  - (Clin Res, CSA, Gender, Child/Adol, Industrialized)

- **Is Non-Suicidal Self-injury Related to PTSD Symptoms of Overmodulation or Undermodulation in Traumatized Justice-involved Adolescents?**
  - *(Modrowski, Crosby, MS, PhD Student; Chaplo, Shannon, Doctoral Student; Kerig, Patricia, PhD; Mozley, Michaella, BS)*
  - (Clin Res, Affect/Int, Aggress, Dev/Int, Child/Adol, Industrialized)

- **Increasing Specificity in Our Understanding of the Associations among Trauma Exposure, Posttraumatic Stress Reactions, and Risk Factors for Boys and Girls Involved in the Justice System**
  - *(Kerig, Patricia, PhD; Chaplo, Shannon, Doctoral Student)*
  - (Assess Dx, CPA, CSA, Health, Gender, Child/Adol, Industrialized)
### Daily Schedule

**Friday, November 11, 2:45 p.m. – 4:00 p.m.**

**Concurrent Session Seven**

#### Symposium

**Disseminating Prolonged Exposure and Cognitive Processing Therapy into Community Settings**

*Chair (Charney)*

*Discussant (Riggs)*

- Using Technology to Support Sustained Implementation of Evidence Based Treatments through Consultation and Education for Veterans in Community Settings
  
  *(Norman, Sonya, PhD; McKee, Todd, MDIV; Hamblen, Jessica, PhD)*
  
  *(Train/Ed/Dis, Train/Ed/Dis, Mil/Vets, Prof, Industrialized)*

- Piloting A Two-level Training and Consultation Model of Prolonged Exposure Therapy for PTSD
  
  *(Zwiebach, Liza, PhD; Rauch, Sheila, PhD, ABPP; Rothbaum, Barbara, PhD, ABPP)*
  
  *(Train/Ed/Dis, Affect/Int, Commun, Adult, N/A)*

- Evidence-based Therapy Training for Community Providers Treating Military Service Members
  
  *(Charney, Meredith, PhD; Baier, Allison, BS; Chow, Louis, PhD; Clair-Hayes, Kathy, LICSW; Morrison, Emma, MA; Simon, Naomi, MD)*
  
  *(Train/Ed/Dis, Practice, Commun, Train/Ed/Dis, Prof, Industrialized)*

- The Cognitive Processing Therapy Learning Collaborative: Intensive Training of Community Clinicians in North Carolina
  
  *(LoSavio, Stefanie, PhD; Dillon, Kirsten, PhD; Resick, Patricia, PhD, ABPP)*
  
  *(Train/Ed/Dis, Commun, Tech, Prof, Industrialized)*

#### Symposium

**Core Belief Disruptions Contributing to Posttraumatic Growth in Japan, Australia, and Puerto Rico**

*Chair (Tedeschi)*

- Core Belief Disruption and Posttraumatic Growth Following the Great East Japan Earthquake
  
  *(Taku, Kanako, PhD)*
  
  *(CulDiv, Cog/Int, Cul Div, Death, Nat/Dis, Adult, Industrialized)*

- Core Belief Disruption, Grief, Traumatic Stress and Posttraumatic Growth in Women who Have Experienced Pregnancy Loss
  
  *(Shakespeare-Finch, Jane, PhD)*
  
  *(Clin Res, Practice, Cog/Int, Death, Gender, Adult, Industrialized)*

- Religious Cognition and Experience Leads to Rumination and Core Belief Disruption in Puerto Rican Trauma Survivors Reporting Posttraumatic Growth
  
  *(Orejuela, Ana, PhD Candidate)*
  
  *(CulDiv, Cog/Int, Adult, Global)*

#### Panel Presentation

**Handling Traumatic Imagery: The Need for Exposure Mitigation Strategies in Journalism and the Wider Consequences for Social Media Consumption**

*Discussant (Brewin)*

*(Rees, Gavin, MA; Cohen Silver, Roxane, PhD; Dubberley, Sam, MA, eMBA; Brewin, Chris, PhD)*

*(Journalism, Pub Health, Tech, Terror, Train/Ed/Dis, Lifespan, Global)*
### Daily Schedule

**Friday, November 11, 2:45 p.m. – 4:00 p.m.**

**Concurrent Session Seven**

**Panel Presentation**

<table>
<thead>
<tr>
<th>Title</th>
<th>Presenters</th>
<th>Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family Immigration Detention in the U.S.: the New and Shameful American Internment Camps</td>
<td>Keller, Allen, MD; Joscelyne, Amy, PhD; Winchester, Amanda, MPH; Ryan, Johnathan, JD; RAICES Client, Former Detainee) (Social, Fam/Int, Rights, Refugee, Gender, Lifespan, Industrialized)</td>
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</tbody>
</table>

**Case Study Presentation**

<table>
<thead>
<tr>
<th>Title</th>
<th>Presenters</th>
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</thead>
<tbody>
<tr>
<td>Through the Door: Complex Symptom Presentations of a New Generation of Veterans</td>
<td>Zingman, Maggie, PhD (Practice, Chronic, Complex, Mil/Vets, Adult, Global)</td>
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</table>

**Paper Session**

<table>
<thead>
<tr>
<th>Title</th>
<th>Presenters</th>
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</thead>
<tbody>
<tr>
<td>Mediation Effect of Combat Exposure on Post-deployment Physical Symptoms through Generalized Anxiety, Panic Disorder, Depression, and Posttraumatic Stress Disorder in Canadian Armed Forces Members</td>
<td>Richer, Isabelle, PhD; Born, Jennifer, MSc; Zamorski, Mark, MD (Pub Health, Anx, Depr, Health, Mil/Vets, Adult, Industrialized)</td>
</tr>
<tr>
<td>Latent Class and Transition Analysis of PTSD Symptoms among a Sample of National Guard Soldiers</td>
<td>Bohnert, Kipling, PhD; Sripada, Rebecca, PhD; Ganoczy, Dara, MPH; Valenstein, Marcia, MD (Pub Health, Mil/Vets, Adult, Industrialized)</td>
</tr>
<tr>
<td>The Psychosocial Costs of Comorbidity: PTSD and Chronic Conditions Among Iraq and Afghanistan Veterans</td>
<td>Lee, Sharon, MA PhD Student; Park, Crystal, PhD; Hoff, Rani, PhD, MPH (Pub Health, Health, Illness, Mil/Vets, Adult, Industrialized)</td>
</tr>
<tr>
<td>Different Types of Combat Experiences and Associated Symptoms in OEF and OIF National Guard and Reserve Veterans</td>
<td>Shea, M, Tracie, PhD; Presseau, Candice, MA; Finley, Shauna, PhD; Reddy, Madhavi, PhD; Spofford, Christopher, PhD (Clin Res, Mil/Vets, Adult, Industrialized)</td>
</tr>
</tbody>
</table>
## Daily Schedule

**Friday, November 11, 2:45 p.m. – 4:00 p.m.**

### Concurrent Session Seven

<table>
<thead>
<tr>
<th>Paper Session</th>
<th>Sexual Assault/ Military Assault Paper Session</th>
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<tbody>
<tr>
<td>Moderator:</td>
<td>(Wilson)</td>
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<tr>
<td></td>
<td>Effects of Sexual Victimization History, Sexual Attitudes, and Psychopathology on Women’s Responses to Increasingly Coercive Sexual Social Situations</td>
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<tr>
<td></td>
<td><em>(Nason, Erica, PhD; Yeater, Elizabeth, PhD; Bottera, Angeline, BA)</em></td>
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<tr>
<td></td>
<td><em>(Prevent, Rape, Social, Gender, Adult, N/A)</em></td>
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<tr>
<td></td>
<td>The Role of PTSD Symptom Clusters in Sexual Functioning in Women with a History of Sexual Assault</td>
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<td></td>
<td><em>(Kelley, Erika, PhD; Dardis, Christina, PhD; Gidycz, Christine, PhD)</em></td>
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<tr>
<td></td>
<td><em>(Clin Res, Health, Rape, Lifespan, Industrialized)</em></td>
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<tr>
<td></td>
<td>Exploring Provider Gender Preference and Perceptions of Providers in Male and Female Veterans who have Experienced Military Sexual Trauma</td>
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<tr>
<td></td>
<td><em>(McBain, Sacha, Doctoral Student; Garneau-Fournier, Jade, BS, MS; Torres, Tammy, BS, MS; Turchik, Jessica, PhD)</em></td>
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<tr>
<td></td>
<td><em>(Practice, Mil/Vets, Gender, Adult, Industrialized)</em></td>
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<tr>
<td></td>
<td>The Prevalence of Sexual Revictimization: A Meta-analytic Review</td>
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<td></td>
<td><em>(Wilson, Laura, PhD; Freud, Jennifer, Undergraduate; Fraine, Shawn, Undergraduate; Ellis, Robyn, Undergraduate; Walker, Hannah, Undergraduate)</em></td>
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<tr>
<td></td>
<td><em>(Social, CSA, Rape, Gender, Lifespan, Industrialized)</em></td>
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</tbody>
</table>

**Friday, November 11, 4:15 p.m. – 5:30 p.m.**

### Concurrent Session Eight

<table>
<thead>
<tr>
<th>Invited Panel</th>
<th>ISTSS Treatment Guidelines</th>
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<tbody>
<tr>
<td></td>
<td><em>(Bisson, Jonathan, MD; Cloitre, Marylene, PhD; Goldbeck, Lutz, PhD; Lewis, Catrin, PhD; Roberts, Neil, DPsych(Clin)</em></td>
</tr>
</tbody>
</table>
## Daily Schedule
### Friday, November 11, 4:15 p.m. – 5:30 p.m.
#### Concurrent Session Eight

### Symposium
**Mental and Physical Health Sequelae of Trauma: Data from General Population, Military and Veteran Cohorts**

**Chair (Gradus)**
**Discussant (Galea)**

The Longitudinal Sequelae of Stress Disorders in the Population of Denmark

(Gradus, Jaimie, ScD; Körmendiné Farkas, Dóra, MSc; Svensson, Elisabeth, PhD; Lash, Timothy, Dsc; Toft Sørensen, Henrik, MD, PhD)

(Pub Health, Gender, Adult, Industrialized)

Psychiatric and Physical Health Morbidity Associated with Multiple Trauma Exposures in a U.S National Sample of Adolescents

(Basu, Archana, PhD; Liu, Howard, PhD Candidate; McLaughlin, Katie, PhD; Stolbach, Bradley, PhD; Koenen, Karestan, PhD)

(Pub Health, Complex, Health, Illness, Child/Adol, Industrialized)

Short- and Long-term Longitudinal Outcomes of Military Deployment to the Iraq War: Findings from the Neurocognition Deployment Health Study

(Vasterling, Jennifer, PhD; Proctor, Susan, Dsc; Aslan, Mihaela, PhD; Concato, John, MD, MPH)

(Pub Health, Mil/Vets, Adult, Industrialized)

Longitudinal Associations between Posttraumatic Stress Disorder and Metabolic Syndrome Severity

(Marx, Brian, PhD; Wolf, Erika, PhD; Bovin, Michelle, PhD; Green, Jonathan, PhD; Mitchell, Karen, PhD; Stoop, Tawni, BA; Barretto, Kenneth, BA; Jackson, Colleen, PhD; Lee, Lewina, PhD; Trachtenberg, Felicia, PhD; Rosen, Raymond, PhD; Keane, Terence, PhD)

(Pub Health, Assess Dx, Illness, Res Meth, Mil/Vets, Adult, Industrialized)

### Symposium
**Translational Perspectives on the Clinical Application of Oxytocin Among Individuals with PTSD**

**Chair (Flanagan)**
**Discussant (Olff)**

Augmenting Prolonged Exposure Therapy for PTSD with Intranasal Oxytocin: Safety, Feasibility, and Acceptability

(Flanagan, Julianne, PhD; Moran-Santa Maria, Megan, PhD; Messinger, Justin, BA; Back, Sudie, PhD)

(Clin Res, Cog/Int, Bio/Int, Adult, Industrialized)

Intranasal Oxytocin Administration as Early Preventive Intervention for PTSD: Efficacy and Prescriptive Factors

(van Zuiden, Mirjam, PhD; Frijling, Jessie, MSc; Nawijn, Laura, MSc; Koch, Saskia, MSc; Bosch, Jos, PhD; Veitman, Dick, MD, PhD; Olff, Miranda, PhD)


Childhood Trauma Alters the Effects of Oxytocin on Amygdala Reactivity to Fear in Individuals with PTSD

(Moran-Santa Maria, Megan, PhD; Flanagan, Julianne, PhD; Back, Sudie, PhD; Joseph, Jane, PhD)

(Bio Med, CPA, Clin Res, Neuro, Adult, N/A)

Effects of Oxytocin on Stress Reactivity and Craving Among Veterans with Co-Occurring PTSD and Alcohol Use Disorders

(Back, Sudie, PhD; Flanagan, Julianne, PhD; Moran-Santa Maria, Megan, PhD; Henschel, Aisling, BS; Messinger, Justin, BA; Brady, Kathleen, MD, PhD; McGinty, Jacqueline, PhD)

(Clin Res, Bio/Int, Sub/Abuse, Mil/Vets, Adult, Industrialized)
### Symposium: Attention to Emotion in Posttraumatic Stress Disorder: Neurobiological Response to Positive Cues and Relationship to Recovery

**Chair:** Fani  
**Discussant:** Bradley  

- **Anhedonia in Treatment-seeking Veterans: Reward Learning and Feedback-related Negativity**  
  *(Eskelund, Kasper, PhD, MSC; Karstoft, Karen-Inge, PhD, Cpsy; Andersen, Søren, PhD, Cpsy)*  
  *(Assess Dx, Depr, Bio/Int, Mil/Vets, Adult, Industrialized)*

- **Recruitment of Top-down Attentional Control over Time Following Trauma: A Mechanism for Resilience?**  
  *(Thornton, Laura, PhD)*  
  *(Bio Med, Cog/Int, Neuro, Adult, Industrialized)*

- **Attention Biases Toward Emotional Face Cues and Anhedonic PTSD Symptoms: An Eye-Tracking Study**  
  *(Brisicone, Maria, BS; Fani, Negar, PhD; Cao, Minhnguyen, BS; Flowers, Nathaniel, BA; Kim, Ye Ji, BA; Lakshman, Maya, Undergraduate; Shin, Jiyoon, Undergraduate; Norrhholm, Seth, PhD; Jovanovic, Tanja, PhD; Ressler, Kerry, MD, PhD; Bradley, Bekh, PhD; Powers Lott, Abigail, PhD)*  
  *(Clin Res, Cog/Int, Adult, N/A)*

- **Attentional Control and Anhedonia in Posttraumatic Stress Disorder**  
  *(Fani, Negar, PhD; Jovanovic, Tanja, PhD; Ressler, Kerry, MD PhD; Bradley, Bekh, PhD)*  
  *(Res Meth, Affect/Int, Bio Med, Cog/Int, Neuro, Adult, Industrialized)*

### Symposium: Clarifying Connections between Cannabis Use and PTSD: Moving from the Laboratory to the Treatment Clinic

**Chair:** Dworkin  
**Discussant:** Bonn-Miller  

- **Does PTSD Predict Marijuana Use? Event-level Relationships between PTSD and Marijuana Use among Young Sexual Minority Women**  
  *(Kaysen, Debra, PhD; Bedard-Gilligan, Michele, PhD; Rhew, Issac, PhD; Lee, Christine, PhD)*  
  *(Res Meth, Orient, Sub/Abuse, Adult, Industrialized)*

- **Chronic Cannabis Use is Associated with Impaired Fear Extinction in Humans**  
  *(Papini, Santiago, MA; Ruglass, Lesia, PhD; Lopez-Castro, Teresa, PhD; Powers, Mark, PhD; Smits, Jasper, PhD; Hien, Denise, PhD, ABPP)*  
  *(Clin Res, Bio/Int, Adult, Industrialized)*

- **Medicinal versus Recreational Cannabis Use: An Investigation of Characteristics and Correlates among Veterans with PTSD**  
  *(Loflin, Mallory, MA, PhD Student; Earleywine, Mitch, PhD; Bonn-Miller, Marcel, PhD)*  
  *(Clin Res, Social, Sub/Abuse, Mil/Vets, Adult, N/A)*

- **Associations between Cannabis Use and Treatment Outcomes Among Individuals with Co-occurring PTSD and Substance Use Disorders Receiving Cognitive-behavioral Treatment**  
  *(Ruglass, Lesia, PhD; Hien, Denise, PhD, ABPP)*  
  *(Clin Res, Clin Res, Practice, Sub/Abuse, Adult, N/A)*
## Daily Schedule

**Friday, November 11, 4:15 p.m. – 5:30 p.m.**

**Concurrent Session Eight**

<table>
<thead>
<tr>
<th>Symposium</th>
<th>Tending to Issues of Diversity when Implementing Evidence-based Practices</th>
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<tbody>
<tr>
<td>Chair</td>
<td>Smith (Smith)</td>
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<tr>
<td></td>
<td>A Randomized, Controlled, Pilot Study of a Single Session Psychoeducation Treatment for Urban, Culturally Diverse, Trauma-exposed Adults</td>
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<td><em>(Ghafoori, Bita, PhD)</em></td>
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<td><em>(Clin Res, Clin Res, Cog/Int, Cul Div, Pub Health, Adult, N/A)</em></td>
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<td>Implementing Evidence-based Practice: Considering Issues of Diversity within a Pilot Study</td>
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<td><em>(Pinna, Keri, PhD; Vincent, Gabrielle, Undergraduate; Rodarte, Amanda, Undergraduate; Vincent, Rochelle, Undergraduate)</em></td>
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<td><em>(CulDiv, CPA, Clin Res, Commun, Prevent, Adult, Industrialized)</em></td>
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<td>The Treatment of Low-income, Culturally Diverse Individuals with Complex PTSD: A Randomized, Controlled, Pilot Study of Prolonged Exposure (PE) Compared to Present Centered Therapy (PCT)</td>
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<td><em>(Hansen, Marissa, PhD, MSSW; Ghafoori, Bita, PhD)</em></td>
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<td><em>(Clin Res, Affect/Int, Commun, Complex, Cul Div, Adult, Industrialized)</em></td>
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<td>Factors Affecting the Implementation Fidelity of Trauma-Focused Cognitive-behavioral Therapy (TF-CBT) Using a Learning Collaborative Model</td>
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<td><em>(Donisch, Katelyn, MPH; Bray, Chris, PhD; Gewirtz, Abigail, PhD LP)</em></td>
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<td><em>(Clin Res, CPA, Chronic, Commun, Train/Ed/Dis, Prof, Industrialized)</em></td>
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<tr>
<td>Panel</td>
<td>Developing the Warrior Care Network: Strategies for National Academic Medical Center Collaboration</td>
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<tr>
<td>Presentation</td>
<td><em>(Harvey, Margaret, PsyD; Rauch, Sheila, PhD, ABPP; Sornborger, Jo, PsyD; Zalta, Alyson, PhD)</em></td>
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<td><em>(Train/Ed/Dis, Practice, Fam/Int, Mil/Vets, Adult, N/A)</em></td>
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<tr>
<td>Panel</td>
<td>How to Submit Graduate and Early Career Awards: What You Need to Know About NIH and VA Grants</td>
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<tr>
<td>Presentation</td>
<td><em>(Vogt, Dawne, PhD; Iverson, Katherine, PhD; Gutner, Cassidy, PhD; Wells, Stephanie, BA; Badour, Christal, MA PhD Student)</em></td>
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<td><em>(Train/Ed/Dis, Train/Ed/Dis, N/A, N/A)</em></td>
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<tr>
<td>Workshop</td>
<td>Review of Mobile Apps for Clinical Practice: Recommendations for Client Treatment and for Therapist Self-care</td>
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<tr>
<td>Presentation</td>
<td><em>(Hallett, Kristina, PhD, ABPP)</em></td>
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<td><em>(Practice, QoL, Prevent, Tech, Train/Ed/Dis, N/A, Industrialized)</em></td>
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<tr>
<td>Media</td>
<td>Getting the Word Out on Complex Trauma: Use of Multimedia Resources to Support Education and Awareness for Youth and Families and Across Systems</td>
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<tr>
<td>Presentation</td>
<td><em>(Kisiel, Cassandra, PhD; Fehrenbach, Tracy, PhD; Habib, Mandy, PsyD; Spinazzola, Joseph, PhD)</em></td>
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<td></td>
<td><em>(Train/Ed/Dis, Assess Dx, CPA, Complex, Media, Child/Adol, Industrialized)</em></td>
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</tbody>
</table>
## Daily Schedule

**Friday, November 11, 4:15 p.m. – 5:30 p.m.**

### Concurrent Session Eight

#### Paper Session: Intergenerational /Parenting Two Paper Session

**Moderator:** (Hiller)

**Prediction of Parental Psychopathology and Posttraumatic Growth from Resilience After a Child’s Admission to Intensive Care: a Longitudinal Study.**

(Rodriguez Rey, Rocio, PhD Candidate; Alonso-Tapia, Jesus, PhD; Colville, Gillian, PhD; Casanueva Mateos, Lidia, MD, PhD; Palacios, Alba, MD; Kassam-Adams, Nancy, PhD)

- Prevent, Anx, Assess Dx, Fam/Int, Illness, Adult, Industrialized

**Differential Sensitization of Parenting on Early Adolescent Cortisol: Moderation by Profiles of Maternal Child Abuse and Stress**

(Gamache Martin, Christina, MS, PhD Student; Kim, Hyoun, PhD; Fisher, Philip, PhD)

- Clin Res, Chronic, Fam/Int, Bio/Int, Lifespan, Industrialized

**The Course of Posttraumatic Stress Symptoms in Couples in Relation to Parental Emotions and Appraisal following Pediatric Burns**

(Egberts, Marthe, MSc; van de Schoot, Rens, PhD; Geenen, Rinie, PhD; Van Loey, Nancy, PhD)

- Clin Res, Acc/Inj, Affect/Int, Fam/Int, Adult, Industrialized

**Parental Responses to Child Trauma: The Role of Trauma Specific Behaviours and Parenting Style in Facilitating Child’s Psychological Adjustment**

(Hiller, Rachel, PhD; Halligan, Sarah, PhD; Meiser-Stedman, Richard, PhD; Lobo, Sarah, BS, MS; Creswell, Cathy, PhD; Fearon, Pasco, PhD)

- Clin Res, Acc/Inj, Acute, Comm/Int, Fam/Int, Child/Adol, Industrialized

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**Paper Session: Community Paper Session**

**Moderator:** (Matteo)

**Dissemination of a Trauma-focused School-based Intervention Using a Performance Feedback Data System**

(Sapere, Heather, MA; Lang, Jason, PhD)

- Train/Ed/Dis, TechChild/Adol, Industrialized

**Developing Trauma-informed Organizations and Systems: A Universal Measure of Organizational Trauma-informed Care**

(Guarino, Kathleen, LMHC)

- Pub Health, Commun, Comm/Int, Pub Health, Lifespan, Industrialized

**An Investigation of Psychological and Social Support Services within Regional Emergency and Disaster Preparedness and Planning: Organization, Competence and Collaboration amongst Key Agencies**

(Naslund, Monika, BBSc, MPsysch)

- Social, Comm/Int, Prevent, Prof, Industrialized

**What People with PTSD Symptoms Do (and Don’t) Know about PTSD: A National Survey**

(Matteo, Rebecca, PhD; Harik, Juliette, PhD; Hermann, Barbara, PhD; Hamblen, Jessica, PhD)

- Social, Practice, Comm/Int, Train/Ed/Dis, Mil/Vets, Adult, Industrialized

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**5:30 p.m. – 6:30 p.m.**  
Author Attended Poster Session Two (Cash Bar)

**6:45 p.m. – 7:45 p.m.**  
ISTSS Business Meeting
**Daily Schedule**

**Saturday, November 12**

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>7:30 a.m. – 4:30 p.m.</td>
<td>Registration Desk Open</td>
</tr>
<tr>
<td>7:30 a.m. – Noon</td>
<td>Exhibits Open</td>
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<tr>
<td>8:00 a.m. – 5:30 p.m.</td>
<td>Bookstore Open</td>
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<tr>
<td>8:30 a.m. – 8:50 a.m.</td>
<td>ISTSS Award Presentations</td>
</tr>
<tr>
<td>8:50 a.m. – 9:50 a.m.</td>
<td>Keynote Address</td>
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<tr>
<td></td>
<td>Supporting Vast Numbers of People in Communities Affected by Adversity: Lessons Learned (So Far) (van Ommeren, Mark, PhD) (Pub Health, Commun, Nat/Dis, Civil/War, Care, Lifespan, Global)</td>
</tr>
</tbody>
</table>

**Saturday, November 12, 10:15 a.m. – 11:30 a.m.**

**Concurrent Session Nine**

<table>
<thead>
<tr>
<th>Invited Symposium</th>
<th>Sleep and Nightmares in PTSD: Advances in Neuroscience and Treatment</th>
</tr>
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<tbody>
<tr>
<td>Chair</td>
<td>Raskind</td>
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<tr>
<td>Discussant</td>
<td>Peskind</td>
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</tbody>
</table>

- Acute and Chronic Sleep Disruption: Interference with Neural Pathways Underlying Fear Learning and Extinction *(Germain, Anne, PhD)* *(Clin Res, Bio/Int, Sleep, Adult, Global)*
- Nocturnal Arousal and Trauma and Stress-related Sleep Disturbance *(Mellman, Thomas, MD)* *(Clin Res, Bio/Int, Sleep, Adult, Global)*
- Higher Pretreatment Blood Pressure is Associated with Greater Nightmare and other PTSD Symptom Reduction to Prazosin *(Raskind, Murray, MD)* *(Clin Res, Bio/Int, Sleep, Adult, Global)*
## Daily Schedule

**Saturday, November 12, 10:15 a.m. – 11:30 a.m.**

**Concurrent Session Nine**

### Symposium

**Predictors of Trauma-related Stress in High Risk Occupations**

**Chair** (Drevo)

**Discussant** (Newman)

- Pathways to Posttraumatic Stress among a Sample of Journalists
  
  **(Drevo, Susan, MA, PhD Student; Newman, Elana, PhD; Brummel, Bradley, PhD; Parker, Kelsey, MA, PhD Student)**
  
  (Journalism, Prevent, Journalists, Global)

- Predictors of Resilience in a 6-year Prospective Longitudinal Cohort Study of New York and Bay Area Police Officers
  
  **(Marmar, Charles, MD; Galatzer-Levy, Isaac, PhD; Neylan, Thomas, MD; Yehuda, Rachel, PhD; Henn-Haase, Clare, PsyD; Purchia, Emily, MPH)**
  
  (Pub Health, Bio Med, Health, Genetic, Adult, Industrialized)

- Treating PTSD from Traumatic Loss in the Military: The Role of Depression, Guilt, and Anger
  
  **(Jacoby, Vanessa, PhD; Hale, Willie, PhD; Dillon, Kirsten, PhD; Pruiksma, Kristi, PhD; Dondanville, Katherine, PsyD; Wachen, Jennifer, PhD; Yarvis, Jeffrey, PhD; Resick, Patricia, PhD; ABPP; Hembree, Elizabeth, PhD; Litz, Brett, PhD; Mintz, Jim, PhD; Peterson, Alan, PhD; Young-McCaughan, Stacey, PhD)**
  
  (Clin Res, Chronic, Death, DeprAdult, Industrialized)

- Symptoms of PTSD and Disability: Bidirectional Longitudinal Relationship in World Trade Center Disaster Workers
  
  **(McAleavey, Andrew, PhD; Wyka, Katarzyna, PhD; Difede, JoAnn, PhD)**
  
  (Pub Health, QoL, Res Meth, Terror, Adult, Industrialized)

### Symposium

**Using Web-based Platforms to Support the Use of Trauma-informed Evidence-based Practices**

**Chair** (Stein)

- Using a Web-based Platform to Train Graduate Students in a Trauma-informed Evidence-based Intervention: Lessons from the SSET Website
  
  **(Vona, Pamela, BS; Jaycox, Lisa, PhD; Wong, Marleen, PhD; Stein, Bradley, MD PhD)**
  
  (Train/Ed/Dis, Tech, N/A, Industrialized)

- A Randomized Implementation Trial of TF-CBT for Adjudicated Teens in Residential Treatment Facilities
  
  **(Cohen, Judith, MD)**
  
  (Clin Res, Chronic, Child/Adol, Industrialized)

- Use of a Web-based, EBT-specific Implementation Tool to Support a Statewide Child Mental Health Training, Treatment and Monitoring Program
  
  **(Hagel, Dana, MD, MPH; Amaya-Jackson, Lisa, MD, MPH; DeRosier, Melissa, PhD; Potter, Donna, LCSW; Gienke, Beverly, MA; Fiore, Ashley, MSW, LCSW; Alvord, Ashley, MPH)**
  
  (Tech, Tech, Train/Ed/Dis, Prof, Industrialized)

- Virtual Training in Cognitive Processing Therapy-Cognitive for Military/Veteran Behavioral Health Providers
  
  **(Schuyler, Ashley, MPH; Atuel, Hazel, PhD; Ursich, Luci, PhD; Berg, Dax, BA; Kintzle, Sara, PhD, LCSW; Castro, Carl, PhD)**
  
  (Res Meth, Cog/Int, Tech, Train/Ed/Dis, Mil/Vets, Prof, Industrialized)
## Daily Schedule
### Saturday, November 12, 10:15 a.m. – 11:30 a.m.
### Concurrent Session Nine

<table>
<thead>
<tr>
<th>Symposium</th>
<th>Use of Technology to Enhance Sexual Violence Prevention Programs</th>
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<tbody>
<tr>
<td><strong>Co-chairs</strong></td>
<td>(Rowe, Jouriles)</td>
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<tr>
<td><strong>Discussant</strong></td>
<td>(Messman-Moore)</td>
</tr>
<tr>
<td><strong>Using Video Technology to Help Prevent Adolescent Relationship Violence: A School-based Effectiveness Trial of TakeCARE, a Video Bystander Program</strong></td>
<td>(Sargent, Kelli, BA; Rosenfield, David, PhD; McDonald, Renee, PhD; Jouriles, Ernest, PhD; Messman-Moore, Terri, PhD)</td>
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<tr>
<td>(Clin Res, Prevent, Rape, Train/Ed/Dis, Child/Adol, Industrialized)</td>
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<tr>
<td><strong>Virtual Reality Technology in Bystander Program Evaluation – Evidence Among College Students</strong></td>
<td>(Krauss, Alison, PhD Student; Sargent, Kelli, BA; Bridges, Kate, BA; McDonald, Renee, PhD; Jouriles, Ernest, PhD)</td>
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<tr>
<td>(Clin Res, Prevent, Rape, Tech, Train/Ed/Dis, Lifespan, Industrialized)</td>
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<tr>
<td><strong>Virtual-reality Enhanced Assertiveness Training Program for Teen Girls: Who Benefits the Most?</strong></td>
<td>(Boyers, Grace, PhD Student; Rowe, Lorelei, PhD; McDonald, Renee, PhD; Jouriles, Ernest, PhD)</td>
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<td>(Prevent, Prevent, Rape, Child/Adol, N/A)</td>
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<tr>
<th>Symposium</th>
<th>Innovative Assessment and Treatment Approaches to Post-conflict Mental Health in Low and Middle Income Countries</th>
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<tr>
<td><strong>Chair</strong></td>
<td>(Tay)</td>
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<tr>
<td><strong>Peritraumatic Reaction Trajectories during War: A Proximal Intensive Assessment (Pia) Study of Gender, Mental Health Status and Exposure</strong></td>
<td>(Gelkopf, Marc, PhD; Greene, Talya, MPH, PhD; Lapid, Liron, MA; Greenapple, Shulamit, PhD Candidate)</td>
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<tr>
<td>(Assess Dx, Chronic, Res Meth, Civil/War, Gender, Adult, Industrialized)</td>
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<tr>
<td><strong>Tracing Trajectories of Trauma-related Symptoms in Two Large Cohort Studies Conducted in Post-conflict Timor-Leste and Sri Lanka</strong></td>
<td>(Tay, Alvin, PhD; Jayasuriya, Rohan, MD; Jayasuriya, Dinuk, PhD; Silove, Derrick, MD, PhD)</td>
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<tr>
<td>(Clin Res, Clin Res, Civil/ War, Adult, E Asia &amp; Pac)</td>
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<tr>
<td><strong>A Wait-list Controlled Trial of a Trauma-focused CBT Treatment for Intermittent Explosive Disorder in Post-conflict Timor Leste</strong></td>
<td>(Hewage, Kalhari, DPscy(Clin); Steel, Zachary, PhD; Mohsin, Mohammed, PhD, MSc; Tay, Alvin, PhD; Silove, Derrick, MD, PhD)</td>
</tr>
<tr>
<td>(Clin Res, Aggress, Clin Res, Torture, Civil/War, Adult, E Asia &amp; Pac)</td>
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<tr>
<td><strong>The Electronic Refugee Mental Health Assessment Tool (ER-MHAT): a Novel Tablet Based Platform for Collecting Complex Survey Data in Epidemiological Mental Health Surveys in Low-income Countries</strong></td>
<td>(Tay, Alvin, PhD; Duetter, Dominik, MS; Reichersdoerfer, Marcel, MS)</td>
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<tr>
<td>(Tech, Assess Dx, Pub Health, Tech, Adult, E Asia &amp; Pac)</td>
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**Saturday, November 12, 10:15 a.m. – 11:30 a.m.**  
**Concurrent Session Nine**

<table>
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<tr>
<th>Symposium</th>
<th>Evaluating the Population Impact of an Enhanced Collaborative Care Intervention for PTSD and Depression: Examining Reach, Effectiveness, and Cost Effectiveness across the Military Health System (MHS)</th>
</tr>
</thead>
</table>
|           | Chair (Belsher)  
|           | Discussant (Zatzick)  
|           | PTSD, Depression and Suicidal Ideation in a Veteran Cohort: Results from the Mind Your Heart Study  
|           | (Arenson, Melanie, BS; Neylan, Thomas, MD; Whooley, Mary, MD; Maguen, Shira, PhD; Cohen, Beth, MD, MAS)  
|           | (Clin Res, Depr, Mil/Vets, Adult, Industrialized)  
|           | The Cost-effectiveness of a Collaborative Care Approach to Treating Depression and Post-traumatic Stress Disorder in Military Personnel  
|           | (Lavelle, Tara, PhD; Jaycox, Lisa, PhD; Kommareddi, Mallika, MPH; Engel, Charles, MD, MPH; Belsher, Bradley, PhD; Freed, Michael, PhD, EMT-B)  
|           | (Pub Health, Clin Res, Practice, Care, Adult, Industrialized)  
|           | Population-based Impact of an Enhanced Collaborative Care Intervention in the Military Health System (MHS)  
|           | (Belsher, Bradley, PhD; Engel, Charles, MD, MPH; Novak, Laura, BS; Evatt, Daniel, PhD; Liu, Xian, PhD; Freed, Michael, PhD, EMT-B; Jaycox, Lisa, PhD; Zatzick, Douglas, MD; Bray, Robert, PhD)  
|           | (Clin Res, Clin Res, Depr, Care, Adult, Industrialized)  
|           | Alcohol Misuse and Co-occurring PTSD in Military Primary Care: Identification and Population Impact  
|           | (Evatt, Daniel, PhD; Belsher, Bradley, PhD; Beech, Erin, MA; Stewart, Lindsay, BA; Novak, Laura, BS; Liu, Xian, PhD; Jaycox, Lisa, PhD; Bray, Robert, PhD; Freed, Michael, PhD, EMT-B; Engel, Charles, MD, MPH)  
|           | (Clin Res, Clin Res, Depr, Sub/Abuse, Care, Adult, Industrialized)  
| Level     | A  

**Click Here to Register**
### Daily Schedule

**Saturday, November 12, 10:15 a.m. – 11:30 a.m.**

**Concurrent Session Nine**

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<th>Symposium</th>
<th>Innovative Approaches to Improving PTSD Treatment: Using Technology to Aid Public Health</th>
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<td><strong>Chair (Bernardy)</strong></td>
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<td><strong>Discussant (Norman)</strong></td>
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<td></td>
<td>The Use of Technology to Improve PTSD Care in Rural Areas</td>
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<td><em>(Bernardy, Nancy, PhD; Sherrieb, Kathleen, MD, DrPH; Montano, Macgregor, PharmD)</em></td>
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<td><em>(Train/Ed/Dis, Clin Res, Comm/Int, Train/Ed/Dis, Adult, Industrialized)</em></td>
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<td>Education Preferences among Community Mental Health and Primary Care Providers Treating PTSD</td>
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<td><em>(Finley, Erin, PhD; Noel, Polly, PhD; Haro, Elizabeth, BS; Bernardy, Nancy, PhD; Lee, Shuko, MS; Garcia, Hector, PsyD; Pugh, Mary Jo, PhD, RN; Pugh, Jacqueline, MD)</em></td>
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<td><em>(Tech, Commun, Train/Ed/Dis, Mil/Vets, Prof, Industrialized)</em></td>
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<td>Using Videoconferencing to Provide PTSD Consultation across Rural Communities</td>
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<td><em>(Jeffreys, Matthew, MD; Grogan, Jessica, PhD; McKee, Todd, MDIv; Friedman, Matthew, MD, PhD; Norman, Sonya, PhD)</em></td>
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<td><em>(Train/Ed/Dis, Train/Ed/Dis, Self-Care, Mil/Vets, Prof, Industrialized)</em></td>
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<td></td>
<td>Engaging Primary Care Providers in VA Community Clinics to Provide Evidence Based Pharmacotherapy for PTSD</td>
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<td><em>(Spoont, Michele, PhD; Bass, Deanna, MD; Osei-Bonsu, Princess, PhD, MPH; O'Dougherty, Maureen, PhD; Hagedorn, Hildi, PhD; Friedman, Matthew, MD, PhD; Felker, Bradford, MD; Post, Edward, MD, PhD)</em></td>
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<td><em>(Commun, Practice, Tech, Train/Ed/Dis, Mil/Vets, Adult, Industrialized)</em></td>
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<th>Symposium</th>
<th>The Social Self: Contributions of Disruptions in Emotion and Physiology to Relational Processes in Trauma</th>
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<td>Chair</td>
<td>D’Andrea</td>
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<tr>
<td>Presentation</td>
<td>Fighting for Feeling: Body Awareness Mediates the Relationship between Trauma Exposure and Interpersonal Problems</td>
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<td>Chair</td>
<td>D’Andrea, Wendy, PhD; Van Cleave, Treva, MA; Fehertoi, Nicholas, MA; Freed, Steven, MA, PhD Student; DePierro, Jonathan, PhD; Nieves, Nadia, MA</td>
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<tr>
<td>(Bio Med, Affect/Int, Complex, Lifespan, Industrialized)</td>
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<tr>
<td>Presentation</td>
<td>Facing Fear: Autonomic and Neural Activity in PTSD During Conscious and Subconscious Processing of Facial Fear Expressions</td>
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<tr>
<td>Chair</td>
<td>Rabellino, Daniela, PhD; D’Andrea, Wendy, PhD; Siegle, Greg, PhD; Frewen, Paul, PhD; Densmore, Maria, BSc; Theberge, Jean, PhD; Lanius, Ruth, MD, PhD</td>
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<tr>
<td>(Bio Med, Affect/Int, Cog/Int, Bio/Int, Neuro, Adult, Industrialized)</td>
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<tr>
<td>Presentation</td>
<td>Moral Reasoning in PTSD: Longstanding Effects of Childhood Trauma Exposure and the Impact of Moral Injury</td>
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<tr>
<td>Chair</td>
<td>McKinnon, Margaret, PhD; Nazarov, Anthony, PhD; Frewen, Paul, PhD; Jetly, Rakesh, MD, FRCPC; Wright, David, MD; Hood, Heather, PhD, Cpsycho; O’Connor, Charlene, PhD, Cpsycho; Moniz, Sandy, PhD, Cpsycho; Lanius, Ruth, MD, PhD</td>
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<td>(Clin Res, Chronic, Mil/Vets, Adult, N/A)</td>
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<tr>
<td>Presentation</td>
<td>On the Effectiveness of an Attachment- and Trauma-informed Intervention Aimed at Improving the Quality of the Mother-toddler Relationship: Group Attachment Based Intervention (GABI)</td>
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<tr>
<td>Chair</td>
<td>Steele, Miriam, PhD</td>
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<td>(Clin Res, CPA, Dev/Int, Fam/Int, Intergen, Lifespan, Industrialized)</td>
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<tr>
<th>Panel</th>
<th>Presentation</th>
<th>Research on Implementation of CPT and PE in the U.S. Veterans Health Administration: Synthesis of Findings from 19 Studies</th>
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<td>Chair</td>
<td>Rosen, Craig, PhD; Matthieu, Monica, PhD, LCSW, CTS; Cook, Joan, PhD; Wiltse, Shirman, Shannon, PhD</td>
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<th>Workshop</th>
<th>Presentation</th>
<th>The Intersection of PTSD and Eating Disorders: Personal and Professional Perspectives</th>
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<tr>
<td>Chair</td>
<td>Setliff, Stephanie, MD; Schaefer, Jenni, BS</td>
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<td>(Practice, Anx, Assess Dx, Bio Med, Rape, Lifespan, Industrialized)</td>
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**Saturday, November 12, 10:15 a.m. – 11:30 a.m.**

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<th>Paper Session</th>
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<tr>
<td>Refugess Paper Session</td>
<td>Epidemiology of Exposure to Trauma and Loss in Relation to Psychopathology for Internally Displaced Colombian Women</td>
<td>Schultz, James, PhD, Espinel, Zelde, MD, MA, MPH</td>
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<td>The Effectiveness of Psychosocial Interventions in Young War-Traumatized Refugees – Systematic Review and Meta-Analysis</td>
<td>Nocon, Agnes, PhD, MSc; Unterhitzenberger, Johanna, PhD; Eberle-Sejari, Rima, DPsych(Clin); Rosner, Rita, PhD(c)</td>
<td>M</td>
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<tr>
<td></td>
<td>Interpersonal Psychotherapy Intervention for Highly Traumatized Colombian Women &quot;Victims of the Armed Conflict&quot;</td>
<td>Espinel, Zelde, MD, MA, MPH; Shultz, James, PhD</td>
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<td>Elder Asylum Seekers and Refugees Seeking Treatment</td>
<td>Piwowarczyk, Lin, MD, MPH; Sato, Jennifer, MA</td>
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<tr>
<td>Military One Paper Session</td>
<td>Longitudinal Association of PTSD and Physical Function in Military Veterans: Data from the Mind Your Heart Study</td>
<td>Ahmadian, Ashkan, BA; Neylan, Thomas, MD; Whooley, Mary, MD; O'Donovan, Aoife, PhD; Metzler, Thomas, MA; Cohen, Beth, MD, MAS</td>
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<td>Procedural and Interactional Justice During Military Deployment: is Perceived Justice a Protective Factor for the Development of PTSD?</td>
<td>Elrond, Andreas, PhD Student; Høgh, Annie, PhD; Andersen, Søren, PhD, Cpsych</td>
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<td>Impact of Military Service on Longevity among World War II American Veterans of Japanese Ancestry</td>
<td>Willis, Emy, BA; Mackintosh, Margaret-Anne, PhD; Schaper, Kim, MA; White, Lon, MD, MPH</td>
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<td>Posttraumatic Stress Disorder and Cardiovascular Fitness: Findings from the Mind Your Heart Study</td>
<td>Rollins, Allman, MD; Frigaard, Martin, MA; Whooley, Mary, MD; Neylan, Thomas, MD; Walker, Benjamin, MD; Cohen, Beth, MD, MAS</td>
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**11:30 a.m. – 1:15 p.m.** Lunch on your own
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**Saturday, November 12, 10:15 a.m. – 11:30 a.m.**

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<td>Aging, Trauma, and the Life Course SIG</td>
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<td>Dissemination and Implementation SIG</td>
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<td>Intergenerational Transmission of Trauma and Resilience SIG</td>
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<td>Military SIG</td>
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<td>Trauma Assessment and Diagnosis SIG</td>
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**Saturday, November 12, 1:15 p.m. – 2:30 p.m.**

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<th>Master Clinician</th>
<th>Treating PTSD through the Internet – Efficacy, Treatment Principles and Challenges of the Virtual Therapeutic Relationship with the PTSD Patients</th>
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<tr>
<td>Knaevelsrud, Christine, PhD</td>
<td>(Clin Res, Clin Res, Global, Media, Tech, Lifespan, Global)</td>
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<tr>
<th>Symposium</th>
<th>Designing and Implementing Broad Reach Early Trauma Focused Interventions for Public Health Dissemination</th>
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<tr>
<td>Chair (Zatzick)</td>
<td>Watchful Waiting: Can an eHealth Approach Address the Challenge of Ongoing Screening Post-Trauma? (Kassam-Adams, Nancy, PhD; Marsac, Meghan, PhD; Kohser, Kristen, MSW; Winston, Flaura, MD, PhD) (Prevent, Acc/Inj, Acute, Tech, Child/Adol, Industrialized)</td>
</tr>
<tr>
<td>Ruzek, Josef, PhD</td>
<td>Designing Technologies to Increase the Reach of Early Post-trauma Intervention (Tech, Prevent, Pub Health, Adult, Industrialized)</td>
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<tr>
<td>Watson, Patricia, PhD</td>
<td>Increasing Community Capacity to Respond to Disasters (Prevent, Nat/Dis, Tech/Dis, Train/Ed/Dis, Civil/War, Lifespan, Global)</td>
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<tr>
<td>Darnell, Doyanne, PhD; O’Connor, Stephen, PhD; Wagner, Amy, PhD; Wang, Jin, PhD; Russo, Joan, PhD; Zatzick, Douglas, MD</td>
<td>Embedding Cognitive Behavioral Therapy Within Care Management to Effectively Reduce Early PTSD Symptoms (Prevent, Prevent, Pub Health, Adult, Industrialized)</td>
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**Concurrent Session Ten**

#### Symposium

**Neural Advances in Posttraumatic Stress Disorder**

*Chair (Liddell)*

- Structural Connectivity Analysis on Diffusion Spectrum Imaging Data Using Low Rank plus Sparse Decomposition for the Studies of Traumatic Brain Injury and Posttraumatic Stress Disorder
  - **Chen, Jingyun, PhD:** Baete, Steven, PhD; Yau, Po Lai, PhD; Blessing, Esther, PhD, MD; Gonzalez, Bryan, BSc; Qian, Meng, PhD; Li, Meng, MSc; Abu-Amara, Duna, MPH; Boada, Fernando, PhD; Marmar, Charles, MD
  - (Assess Dx, Neuro, Adult, N/A)

- Amygdala Down-regulation Using Real Time fMRI in Posttraumatic Stress Disorder
  - **Nicholson, Andrew, BSc:** Rabellino, Daniela, PhD; Paret, Christian, PhD; Densmore, Maria, BSc; Frewen, Paul, PhD; Schmahl, Christian, MD; Lanius, Ruth, MD, PhD
  - (Bio Med, Bio/Int, Neuro, Adult, Industrialized)

- Neural Changes Associated with Increasing Self-efficacy in PTSD
  - **Brown, Adam, PhD:** Titcombe, Roseann, MD PhD; Chen, Jingyun, PhD; Rahman, Nadia, BA; Bryant, Richard, PhD; Marmar, Charles, MD
  - (Bio Med, Bio Med, Mil/Vets, Adult, Industrialized)

- Neural Correlates of Emotional Numbing and Dissociation Symptoms in Survivors of Torture
  - **Liddell, Belinda, PhD:** Das, Pritha, PhD; Felmingham, Kim, PhD; Malhi, Gin, PhD; Nickerson, Angela, PhD; Askovic, Mirjana, BSc Hons Psychology; Aroche, Jorge, BBSc, MPysch; Coello, Mariano, BBSc, MPysch; Bryant, Richard, PhD
  - (Bio Med, Chronic, Clin Res, Torture, Neuro, Adult, Global)

#### Symposium

**Addressing Self-conscious Emotions in Trauma Related Treatment with Military Veterans**

*Chair (Capone)*

*Discussant (Norman)*

- Self-Compassion Focused Treatment for Co-occurring PTSD and Substance Use Disorders in Veterans with Posttraumatic Guilt
  - **Eaton, Erica, PhD:** Capone, Christy, PhD; Shea, M, Tracie, PhD
  - (Clin Res, Health, Sub/Abuse, Mil/Vets, Adult, N/A)

- Guilt, Shame, and Anger as Mediators of the Relationship between Moral Injury and PTSD
  - **Bolton, Elisa, PhD:** Jordan, Alexander, PhD; Eisen, Ethan, MPhil; Nash, William, MD; Litz, Brett, PhD
  - (Clin Res, Clin Res, Complex, Dev/Int, Mil/Vets, Adult, Global)

- Acute Shame, Substance Use and Suicidal Ideation in Veterans
  - **Cameron, Amy, PhD**
  - (Practice, Complex, Grief, Mil/Vets, Adult, Industrialized)

- Moral Injury and the Justice-involved Veteran
  - **Gauthier, Justin, PhD:** Cosden, Merith, PhD
  - (Clin Res, Assess Dx, Mil/Vets, Theory, Adult, Industrialized)
### Daily Schedule
**Saturday, November 12, 1:15 p.m. – 2:30 p.m.**

**Concurrent Session Ten**

#### Symposium: The Use of Innovative Assessment Methods to Examine Psychopathology and Treatment Effects in Traumatized Participants in Daily Life

**Chair (Santangelo)**

- **Observed Emotion Regulation Patterns in Early Responses to Trauma and their Relation to Later PTSD and Depression**
  - **Carlson, Eve, PhD; Cloitre, Marylene, PhD; Macia, Kathryn, PhD Student**
  - (Clin Res, Acc/Inj, Affect/Int, Assess Dx, Prevent, Adult, Industrialized)

- **PTSD, Emotional Valence and Instability in Civilians Exposed to Conflict: A Proximal Intensive Assessment Study**
  - **Greene, Talya, MPH, PhD; Gelkopf, Marc, PhD; Carlson, Eve, PhD; Lapid, Liron, MA**
  - (Res Meth, Chronic, Civil/War, Adult, Industrialized)

- **Sleep Disturbances in Posttraumatic Stress Disorder**
  - **Woodward, Elizabeth, PhD Student; Ehlers, Anke, PhD**
  - (Clin Res, Clin Res, Practice, Sleep, Adult, Industrialized)

- **On the Association between Momentary Dissociation and Concurrent Affect in Traumatized Participants in Daily Life: An E-diary Study**
  - **Santangelo, Philip, PhD; Priebe, Kathien, MSc; Friedmann, Franziska, MA, PhD Student; Steil, Regina, PhD; Bohus, Martin, MD; Ebner-Priemer, Ulrich, PhD**
  - (Res Meth, CPA, CSA, Chronic, Complex, Adult, Industrialized)

#### Symposium: Advances in the Study of Intimate Partner Violence

**Chair (Yalch) **

**Discussant (Levendosky)**

- **Psychological Aggression in Newlywed Couples: How Individual and Couple-level Factors Predict Perpetration**
  - **Jarnecke, Amber, MS; Tan, Kenneth, MS; Sprunger, Joel, PhD Candidate; South, Susan, PhD**
  - (Clin Res, Aggress, DV, Adult, Industrialized)

- **Attention Toward Aggression-promoting Cues in Partner Violent Individuals**
  - **Sprunger, Joel, PhD Candidate; Massa, Andrea, BA; Dyar, Darby, BS; Eckhardt, Christopher, PhD; Parrott, Dominic, PhD**
  - (Res Meth, Affect/Int, Aggress, Cog/Int, DV, Adult, N/A)

- **Intimate Partner Violence, Parenting Support, and Maternal Parenting across Time**
  - **Bernard, Nicola, MA Student; Kobayashi, Jade, BA; Levendosky, Alytia, PhD; Bogat, G. Anne, PhD**
  - (Clin Res, Chronic, DV, Lifespan, Industrialized)

- **A Five Factor Model Approach to Resilience and Vulnerability Factors of Women Exposed to Intimate Partner Violence**
  - **Yalch, Matthew, PhD Candidate; Levendosky, Alytia, PhD; Lannert, Brittany, PhD**
  - (Res Meth, Chronic, DV, Adult, Industrialized)
### Daily Schedule
**Saturday, November 12, 1:15 p.m. – 2:30 p.m.**
**Concurrent Session Ten**

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<tr>
<th>Presentation</th>
<th>Symposia Title</th>
<th>Details</th>
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| **Symposium** | The Influence of Social Resources on Adjustment Following Trauma | Chair (Felix)  
Discussant (Benight)  
Social Resources and Mental Health in Victims of Childhood Violence: Social Support, Social Support Barriers, Shame, other People’s Withdrawal and Loneliness  
*(Thoresen, Siri, PhD; Aakvaag, Helene, MA, PhD Student; Stensland, Synne, MD, PhD; Strøm, Ida, PhD; Myhre, Mia, MD, PhD; Hjemdal, Ole, MA)*  
(Social, CPA, CSA, Chronic, Comm/Int, Adult, Industrialized)  
Social Cognitive Dynamics following Mass Community Violence: How Social Barriers Alter Pathways to Adaptation  
*(Smith, Andrew, MA, PhD Student; Felix, Erika, PhD; Benight, Charles, PhD; Jones, Russell, PhD)*  
(Pub Health, Cog/Int, Comm/Int, Comm/Vio, Theory, Adult, Industrialized)  
Socio-contextual Influences on Posttraumatic Stress Symptoms following Mass Violence  
*(Felix, Erika, PhD)*  
(Pub Health, Comm/Vio, Health, Gender, Adult, Industrialized)  
The Moderating Effects of Different Sources of Social Support on the Relationship between Disaster Exposure and Depression in China  
*(Hall, Brian, PhD; Sou, Kalon, MSc; Wen, PhD; Chang, Kay, PsyD; Latkin, Carl, PhD)*  
(Global, Depr, Nat/Dis, Adult, E Asia & Pac) |

| Panel Presentation | Getting the Word Out on How to Care for Traumatized Children | *Brymer, Melissa, PhD, PsyD; Griffin, DeAnna, MA; Briggs-King, Ernestine, PhD; Gurwitch, Robin, PhD*  
(Train/Ed/Dis, Comm/Int, Dev/Int, Pub Health, Lifespan, N/A) |

| Workshop Presentation | Implementing Technology in Supervision and Consultation for Torture Rehabilitation Programs and Practitioners: Expanding Efforts for Evidence-based Interventions and Culturally Responsive Care | Discussant (Indart)  
*(Indart, Monica, PsyD: Bunn, MA, LCSW, Mary, PhD Student; Yablonskaya, Svetlana, MA, PhD Student; Vallejo, Martha, LCSW)*  
(Train/Ed/Dis, Practice, Rights, Tech, Torture, Prof, Global) |
### Daily Schedule
**Saturday, November 12, 1:15 p.m. – 2:30 p.m.**
**Concurrent Session Ten**

<table>
<thead>
<tr>
<th>Paper Session</th>
<th>Child Trauma Paper Session</th>
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<tbody>
<tr>
<td>Moderator:</td>
<td>(Lauterbach)</td>
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<td>Presentation</td>
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<tr>
<td>Cumulative Childhood Adversity and Revictimization on the Street: The Experience of Mentally Ill Homeless Individuals in Five Canadian Cities&lt;br&gt;(<strong>Edalati, Hanie, PhD</strong>; Nicholls, Tonia, PhD; Crocker, Anne, PhD; Roy, Laurence, PhD; Patterson, Michelle, PhD)&lt;br&gt;(Clin Res, CPA, CSA, Chronic, Pub Health, Adult, N/A)</td>
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<tr>
<td>Longitudinal Trajectories of Posttraumatic Stress Disorder Symptoms among Adolescents after the Wenchuan Earthquake in China&lt;br&gt;(<strong>Fan, Fang, PhD</strong>; <strong>Zhou, Ya, PhD</strong>; Long, Ke, MS, Ed; Liu, Xianchen, MD, PhD)</td>
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<tr>
<td>Agreement on Child Traumatic Stress Symptoms after Pediatric Burn Injury: The Role of Parents’ own Stress Reactions&lt;br&gt;(<strong>Egberts, Marthe, MSc</strong>; van de Schoot, Rens, PhD; Geenen, Rinie, PhD; Van Loey, Nancy, PhD)</td>
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<tr>
<td>Trajectories of Self-regulation Symptoms Among Child Maltreatment Survivors: Findings from a Multisite Study&lt;br&gt;(<strong>Lauterbach, Dean, PhD</strong>; Allen, Brian, PsyD; Poehacker, Stefanie, Doctoral Student; Phillips, David, Doctoral Student)</td>
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<tr>
<td>Paper Session</td>
<td>Military Two Paper Session</td>
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<tr>
<td>Moderator:</td>
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<tr>
<td>PTSD Care among Veterans with and without Co-occurring Substance Use Disorders&lt;br&gt;(<strong>Mansfield, Alyssa, PhD</strong>, <strong>MHA, MPH</strong>; Greenbaum, Mark, MS, MA; Schaper, Kim, MA; Banducci, Anne N., PhD; Rosen, Craig, PhD)&lt;br&gt;(Practice, Sub/Abuse, Mil/Vets, Adult, Industrialized)</td>
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<tr>
<td>Interaction of Oxytocin Receptor Gene and Social Support in Predicting Resilience in U.S. Military Veterans&lt;br&gt;(<strong>Sippel, Lauren, PhD</strong>; Han, Shizhong, PhD; Southwick, Steven, MD; Krystal, John, MD; Gelernter, Joel, MD; Pietrzak, Robert, PhD)</td>
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<td>Effectiveness of Prazosin on PTSD Symptoms During Prolonged Exposure (PE) Therapy with Veterans&lt;br&gt;(<strong>Myers, Ursula, MS, PhD Student</strong>; Keller, Stephanie, PhD; Tuerk, Peter, PhD)</td>
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<td>Modulating Extinction of Conditioned Fear by Transcranial Direct Current Stimulation in Combat Veterans with PTSD&lt;br&gt;(<strong>Reddy, Madhavi, PhD</strong>; van ‘t Wout, Mascha, PhD; Shea, M. Tracie, PhD)</td>
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</table>
## Daily Schedule

**Saturday, November 12, 2:45 p.m. – 4:00 p.m.**

### Concurrent Session Eleven

#### Presentation

| Master Methodologist | **Spotify Mental-health for Depression and Anxiety: Personalise, Engage & Connect**  
(Riper, Heleen, PhD)  
|----------------------|-------------------------------------------------------------------------------------------------|---|

| Symposium | **PTSD Coach around the World: a Global Perspective on a Smartphone App Designed for Self-management of PTSD Symptoms**  
Chair (van der Meer)  
Discussant (Ruzek)  
(Arnberg, Filip, PhD; Cernwall, Martin, PhD; Bergh Johannesson, Kerstin, PhD)  
(Clin Res, Clin Res, Prevent, Tech, Adult, Industrialized) | M |
|----------------------|-------------------------------------------------------------------------------------------------|---|

- Department and Pilot-testing of the Swedish Version of the PTSD Coach  
  **(Arnberg, Filip, PhD; Cernwall, Martin, PhD; Bergh Johannesson, Kerstin, PhD)**  
  (Clin Res, Clin Res, Prevent, Tech, Adult, Industrialized)

- Effectiveness of the Dutch PTSD Coach to Reduce Posttraumatic Stress Symptoms in Trauma-exposed Health Care Professionals  
  **(van der Meer, Christianne, PhD Candidate; Bakker, Anne, PhD; Holmersma, Annemarijn, MSc; van Buschbach, Susanne, MSc; Tariq, Saleha, MSc; Oiff, Miranda, PhD)**  
  (Tech, Clin Res, Trauma-exposed Health Care Professionals, Industrialized)

- A Program of Research on the PTSD Coach Mobile App  
  **(Kuhn, Eric, PhD; Hoffman, Julia, PsyD; Possemato, Kyle, PhD; Kanuri, Nitya, BA; Miner, Adam, Doctoral Student; Owen, Jason, PhD, MPH; Ramsey, Kelly, BA; Taylor, C., MD; Ruzek, Josef, PhD)**  
  (Clin Res, Pub Health, Tech, Adult, Industrialized)

- "Coach PTBS" – a German App for Combat-Related Mental Stress Disorders: Usability and Applicability  
  **(Schellong, Julia, PhD, MD; Lorenz, Patrick, Dipl Psych; Glathe, Caroline, MA; Schopp, Matthias, MA, MSc; Zimmermann, Peter, PD, MD; Weidner, Kerstin, PD, MD)**  
  (Tech, Dev/Int, Prevent, Tech, Mil/Vets, Adult, Industrialized)
### Daily Schedule
**Saturday, November 12, 2:45 p.m. – 4:00 p.m.**
**Concurrent Session Eleven**

#### Symposium
**Utilizing Implementation Science to Develop Trauma-informed Child Welfare Systems**

**Chair** (Dean)  
**Discussant** (Rogers)

<table>
<thead>
<tr>
<th>Title</th>
<th>Presenters</th>
<th>Location</th>
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<tbody>
<tr>
<td>Implementing the Resource Parent Curriculum to Strengthen Trauma-informed Parenting in the Child Welfare Community</td>
<td><strong>Dean, Kristin, PhD</strong>&lt;br&gt;(Commun, Train/Ed/Dis, Foster Parents, Industrialized)</td>
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<tr>
<td>Breaking Down Silos: Developing Trauma-informed Care through a Community Based Learning Collaborative</td>
<td><strong>Moser, Michele, PhD</strong>&lt;br&gt;(Commun, CPA, Complex, Child/Adol, Industrialized)</td>
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<tr>
<td>Using Improvement Science to Implement Trauma-informed Screening for Young Children in Child Welfare</td>
<td><strong>Hoffmann, Melissa, PhD</strong>&lt;br&gt;(Commun, Train/Ed/Dis, Child/Adol, Industrialized)</td>
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<tr>
<td>Staying Strong with Schools: A School Based Intervention for Military Connected Children</td>
<td><strong>Bui, Eric, MD, PhD; Zakarian, Rebecca, BA; Kelly, Hope, BA; Simon, Naomi, MD; Ohye, Bonnie, PhD</strong>&lt;br&gt;(Commun, Clin Res, Child/Adol, Industrialized)</td>
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#### Symposium
**Quality of Parenting and Neurobiological Outcomes in Traumatized Children**

**Co-chairs** (Jovanovic, Vance)  
**Discussant** (Bradley)

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<tr>
<th>Title</th>
<th>Presenters</th>
<th>Location</th>
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<tr>
<td>Latent Profile Analysis of Parenting Behavior in a Traumatized Population</td>
<td><strong>Nugent, Nicole, PhD; Cross, Dorthie, PhD; Vance, Alexander, BA; Bradley, Bekh, PhD; Jovanovic, Tanja, PhD</strong>&lt;br&gt;(Bio Med, CPA, Res Meth, Intergen, Gender, Adult, Industrialized)</td>
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<tr>
<td>Negative Parenting and Child Autonomic Nervous System Responses</td>
<td><strong>Vance, Alexander, BA; Cross, Dorthie, PhD; Nugent, Nicole, PhD; Bradley, Bekh, PhD; Jovanovic, Tanja, PhD</strong>&lt;br&gt;(Bio Med, Bio Med, CPA, Fam/Int, Bio/Int, Lifespan, Industrialized)</td>
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<tr>
<td>Exposure to Violence and Parenting Quality Influence Inhibition-related Activation in the Developing Brain</td>
<td><strong>van Rooij, Sanne, PhD; Stevens, Jennifer, PhD; Kim, Ye Ji, BA; Ely, Timothy, BSc; Jovanovic, Tanja, PhD</strong>&lt;br&gt;(Bio Med, Dev/Int, Bio/Int, Intergen, Neuro, Child/Adol, Industrialized)</td>
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<tr>
<td>Hyperactive Defense-Survival Circuitry and Brain Volumes: A 3-Generation Study</td>
<td><strong>Grillon, Christian, PhD; Warner, Virginia, Dr.P.H.; Bansal, Ravi, PhD; Hao, Xuejun, PhD; Liu, Jun, PhD</strong>&lt;br&gt;(Pub Health, Anx, CPA, Depr, Pub Health, Lifespan, N/A)</td>
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## Daily Schedule

**Saturday, November 12, 2:45 p.m. – 4:00 p.m.**
**Concurrent Session Eleven**

<table>
<thead>
<tr>
<th>Symposium</th>
<th>From Epidemiology to Treatment Delivery and Dissemination: The Influence of Conditions Comorbid with PTSD</th>
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<tbody>
<tr>
<td><strong>Chair</strong> (Walter)</td>
<td><strong>Discussant</strong> (Davis)</td>
</tr>
</tbody>
</table>
| | Sleep Disturbance, PTSD and Depression: Leveraging Client Preferences for Treatment Modality in the Face of Comorbidity  
**Gutner, Cassidy, PhD; Pedersen, Eric, PhD; Drummond, Sean, PhD**  
(Clin Res, Dep, Sleep, Gender, Adult, Industrialized) |
| | Using Explicit Case Formulation to Improve Cognitive Processing Therapy for PTSD  
**Nixon, Reginald, PhD; Bralo, Danielle, BSc Hons Psychology**  
(Clin Res, Practice, Cog/Int, Complex, Adult, Industrialized) |
| | Response to Cognitive Processing Therapy in Veterans with and without Obstructive Sleep Apnea  
**Mesa, Frank, PhD**  
(Clin Res, Clin Res, Practice, Illness, Sleep, Adult, Industrialized) |
| | Prevalence of Posttraumatic Stress Disorder and Psychological Comorbidities among Active-duty Service Members in 2006–2013, and Implications for Treatment  
**Walter, Kristen, PhD; Levine, Jordan, MPH; Highfill-McRoy, Robyn, MPH, MA; Navarro, Melissa, BA/BS; Thomsen, Cynthia, PhD**  
(Pub Health, Mil/Vets, Adult, Industrialized) |

<table>
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<tr>
<th>Symposium</th>
<th>What Do Recent Studies Tell Us about the Distinguishability of PTSD and Complex PTSD in ICD-11?</th>
</tr>
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<tbody>
<tr>
<td><strong>Chair</strong> (Hyland)</td>
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</table>
| | An Assessment of the Construct Validity of ICD-11 Complex PTSD across Multiple Trauma Samples  
**Hyland, Philip, PhD; Shevlin, Mark, PhD; Eikli, Ask, MSc; Murphy, Jamie, PhD; Vaillières, Frédérique, PhD; Garvert, Donn, MS; Cloitre, Marylene, PhD; Brewin, Chris, PhD; Bisson, Jonathan, MD; Roberts, Neil, DPsych(Clin); Karatzias, Thanos, PhD, Cpsych; Fyvie, Claire, DPsych(Clin); Downes, Anthony, PhD; Jumbe, Sandra, PhD**  
(Assess Dx, CSA, Rape, Res Meth, Gender, Adult, Industrialized) |
| | A Comparison of Complex PTSD and Borderline Personality Disorder  
**Bisson, Jonathan, MD; Downes, Anthony, PhD; Jumbe, Sandra, PhD; kitchiner, Neil, PhD; Roberts, Neil, DPsych(Clin)**  
(Assess Dx, Practice, Complex, Adult, Industrialized) |
| | PTSD and Complex PTSD in Male-perpetrated Intimate Partner Violence  
**Gilbar, Ohad, PhD Candidate; Dekel, Rachel, PhD; Ben-Porat, Anat, PhD**  
(Assess Dx, Agress, Complex, DV, Adult, Industrialized) |
| | Investigating the Proposed ICD-11 Complex Posttraumatic Stress Disorder Diagnosis in a Sample of Refugees and Asylum-seekers in Switzerland  
**Hecker, Tobias, PhD; Huber, Stephanie, MSc; Maier, Thomas, MD; Maercker, Andreas, PhD, MD**  
(Clin Res, Chronic, Refugee, Torture, Civil/War, Adult, Industrialized) |
## Daily Schedule

**Saturday, November 12, 2:45 p.m. – 4:00 p.m.**

### Concurrent Session Eleven

#### Symposium

**Ambulatory Tracking Reveals Dynamic Links among PTSD Dimensions, Health and Biology**

*Chair (Ruggero)*  
*Discussant (Kotov)*

- Post-traumatic Stress Disorder (PTSD) Symptom Cascades may Represent a Novel Point of Intervention: Results from Daily Monitoring Study of World Trade Center (WTC) Responders  
  *(Ruggero, Camilo, PhD; Liu, Keke, MS)*  
  *(Res Meth, Assess Dx, Practice, Res Meth, Tech, Adult, Industrialized)*

- Daily Association between Cortisol Rhythms and PTSD Symptoms in World Trade Center (WTC) Responders: The Role of Daily Stressors  
  *(Liu, Keke, MS; Ruggero, Camilo, PhD)*  
  *(Res Meth, Anx, Bio Med, Adult, Industrialized)*

- Daily Smartphone Diaries Embedded into a Clinical Trial for the Treatment of Chronic PTSD: Importance of Symptom Spikes and Variability on Outcomes  
  *(Callahan, Jennifer, PhD, ABPP; Gonzalez, Adam, PhD; Mahaffey, Brittain, PhD)*  
  *(Clin Res, Affect/Int, Practice, Adult, Industrialized)*

- PTSD and Physical Health: Temporal Dynamics and Links with Inflammation  
  *(Kotov, Roman, PhD; Waszczuk, Monika, PhD; Ruggero, Camilo, PhD)*  
  *(Bio Med, Assess Dx, Health, Illness, Tech, Adult, Industrialized)*

#### Symposium

**War and Political Violence in South and Southeast Asia: Trauma, Ongoing Stressors, and Culturally-based Expressions of Distress**

*Chair (Lambert)*

- The Impact of Torture on Survivors in Southern Thailand: a Study of Trauma Related Symptoms and Culturally Specific Manifestations of Distress  
  *(Bunn, MA, LCSW, Mary, PhD Student; Engstrom, Dr. David, PhD)*  
  *(Res Meth, Complex, Cul Div, Torture, Adult, E Asia & Pac)*

- Identifying Local Expressions of Positive/Negative Change and Psychological Distress Among Survivors of War in Sri Lanka  
  *(Jayawickreme, Nuwan, PhD; Jayawickreme, Eranda, PhD; Blackie, Laura, PhD; Lacasse, Justin, DO)*  
  *(Cul Div, Chronic, Cul Div, Refugee, Civil/War, Adult, S Asia)*

- Toward Understanding the Mental Health Status of War and Disaster Affected Widows in Sri Lanka: An Application of COR Theory  
  *(Lambert, Jessica, PhD)*  
  *(Global, Cul Div, Civil/War, Gender, Adult, S Asia)*

#### Panel Presentation

**The Long-term Impact of Man-made Disasters on Community Mental Health and Resilience: The Great East Japan Earthquake, Tsunami, Nuclear Disaster and Deepwater Horizon Oil Spill**

*Discussant: (Watson)*  
*(Walker, Douglas, PhD; Uchiyama, Tokio, MD, PhD; Maeda, Masaharu, MD, PhD; Watson, Patricia, PhD)*  
*(Pub Health, Cul Div, Tech/Dis, Lifespan, Industrialized)*
## Daily Schedule

**Saturday, November 12, 2:45 p.m. – 4:00 p.m.**

### Concurrent Session Eleven

#### Workshop Presentation

**Improving Compliance and Outcome in Clients with Trauma Symptoms and Dysregulated (Addictive/Impulsive) Behavior**  
(Wupperman, Peggilee, PhD)  
(Practice, Affect/Int, Clin Res, Cog/Int, Sub/Abuse, Adult, N/A)

#### Paper Session

**Refugees/Terror Attacks Paper Session**

**Moderator:** (Kristensen)

- **Culturally Informed Community Based Strategies Addressing Mental Health Stigma among Somali Refugees Residing in Bokolmayo, Melkadida and Kobe Refugee Camps in Dolo Ado, Ethiopia**  
  (Bezu, Tadu, BS, MS; Bekele, Hailu, MPH; Yusuf, Abdulwasi, BS, MS; Mulugeta, Sisay, BS, MS)  
  (Commun, Depr, Sub/Abuse, Train/Ed/Dis, Care, Lifespan, E & S Africa)

- **Relationship between Posttraumatic Stress Symptoms, Self-perceived Mental Health Service Needs and Actual Utilization of Mental Health Services among Survivors of the Utøya Terrorist Attack**  
  (Stene, Lise, MD, PhD; Dyb, Grete, MD, PhD)  
  (Pub Health, Health, Prevent, Pub Health, Terror, Lifespan, Industrialized)

- **Physical Injury and Somatic Symptoms: the Mediating Role of Posttraumatic Stress Reactions. A Prospective Longitudinal Study of the Survivors after the Utøya Island Massacre, Norway**  
  (Bugge, Ingrid, MD; Dyb, Grete, MD, PhD; Stensland, Synne, MD, PhD; Ekeberg, Oivind, Professor; Wentzel-Larsen, ToRe, MSc; Diseth, Trond, MD, PhD)  
  (Assess Dx, Acc/Inj, Terror, Lifespan, Industrialized)

- **Prevalence and Associated Factors to Posttraumatic Stress Disorder in Haitian Immigrants in South of Brazil**  
  (Kristensen, Christian, PhD)  
  (Cul Div, Cul Div, Ethnic, Global, Adult, Latin Amer & Carib)
## Daily Schedule

**Saturday, November 12, 2:45 p.m. – 4:00 p.m.**

**Concurrent Session Eleven**

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<thead>
<tr>
<th>Paper Session</th>
<th>Biological/Medical Paper Session</th>
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<td>Moderator</td>
<td>(Lee)</td>
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<tr>
<td><strong>Presentation</strong></td>
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<tr>
<td>Lifetime Adversity, Perceived Stress and the Microbiome</td>
<td><strong>Schüssler-Fiorenza Rose, Sophia Miryam, MD, PhD; Zhou, Wenyu, PhD; Slavich, George, PhD; Rego, Shannon, MS, CGC; Snyder, Michael, PhD</strong></td>
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<td>(Bio Med, Bio/Int, Aging, Genetic, Adult, Industrialized)</td>
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<tr>
<td>Implication of NOTCH1 Gene in Comorbid Anxiety and Depression Symptoms in a Sample of Sexual Abuse Victims</td>
<td><strong>Steine, Iris, PhD Candidate; Zayats, Tetyana, PhD; Stansberg, Christine, PhD; Mrdalj, Jelena, PhD; Grønli, Janne, Associate Professor; Pallesen, Ståle, Professor</strong></td>
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<tr>
<td>(Bio Med, Rape, Genetic, Adult, Industrialized)</td>
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<tr>
<td>Genetic Contribution of Rare and Common Variants on PTSD Outcomes in Adolescents Following Natural-disaster Exposure</td>
<td><strong>Sheerin, Christina, PhD; Williamson, Vernell, PhD; Bountress, Kaitlin, PhD; Vladimirov, Vladimir, PhD; Ruggiero, Kenneth, PhD; Amstadter, Ananda, PhD</strong></td>
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<td>(Bio Med, Nat/Dis, Genetic, Child/Adol, Industrialized)</td>
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<td>Effects of Trauma Related Central Corticotropin Releasing Hormone on Threat Processing</td>
<td><strong>Lee, Royce, MD</strong></td>
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**Saturday, November 12, 4:15 p.m. – 5:30 p.m.**

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<th>Invited Panel</th>
<th>What I Have Changed My Mind About and Why</th>
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<tr>
<td>Moderator</td>
<td>(Schnurr, Paula, PhD; Berliner, Lucy, MSW; Ruzek, Josef, PhD; Kilpatrick, Dean, PhD; Bryant, Richard, PhD; Rizzo, Skip, PhD)</td>
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<td>(Pub Health, Pub Health, Tech, Lifespan, Industrialized)</td>
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5:30 p.m. | Meeting Adjourns |
Internship & Postdoctoral Program Networking Fair

Friday, November 11, 1:45 p.m. – 3:30 p.m.

Finding an internship or postdoctoral fellowship that features trauma specific training can be difficult. In an attempt to ease this burden, the Student Section of ISTSS offers this session to provide an opportunity for students to talk with representatives of various internship and/or postdoctoral fellowship programs who offer rotations or specializations in the clinical and/or research aspects of working with trauma. The training programs have the opportunity to recruit potential interns and postdoctoral fellows, while students have the opportunity to locate these programs, meet representatives, and ask any questions they have about the experiences offered and the application process.

This networking event is coordinated by Sacha McBain, Student Section Chair, and Stephanie Wells & Jon Haga, Student Section Vice Chairs.

*If there are sites you would like to see here in the future, please contact the Student Section leadership.

Participants to date:

**Advanced Fellowship Program in PTSD Mental Health**
Research and Treatment (MIRECC fellowship)
Location: San Francisco, CA
Population: Veterans
Emphasis:
Training Opportunities:
Contact: Shira Maguen, shira.maguen@va.gov

**Durham VA Medical Center Internship Program & Postdoc Fellowship Program**
Location: Durham, NC
Population: Women veterans, Veterans returning from Afghanistan and Iraq, Veterans with serious mental illness
Emphasis: Trauma Recovery, Psychosocial Rehabilitation and Recovery
Training opportunities: Internships and Fellowships
Contact: R Keith Shaw, keith.shaw@va.gov

**UCSD/VA Psychology Internship Training Program; VA San Diego Healthcare System/UCSD Clinical Psychology Postdoctoral Residency Program; VASDHS/UCSD Psychology Clinical Research Postdoctoral Residency Program**
Location: San Diego, CA
Population: Veterans
Emphasis: Combat-related trauma; military sexual trauma
Training opportunities: Internships and Postdoctoral Fellowships
Contact: Carolyn Allard, PhD Carolyn.allard@va.gov; Brittany Davis, PhD Brittany.davis@va.gov

**Tulane Dept of Psychiatry and Behavioral Sciences Postdoc Research Fellowship**
Location: New Orleans, LA
Population: All ages
Emphasis: The goal of the fellowship is to expand candidates research skills with the intent of pursuing an independent academic research career.
Training Opportunities: The Tulane Department of Psychiatry and Behavioral Sciences has assembled an outstanding group of clinical researchers with unique expertise in studying stress and trauma from the infant/preschool period through adulthood, neurobiology, genetics, forensics, psychotherapy development, and other innovations in intervention.
Contact: Michael Scheeringa, MD mscheer@tulane.edu

**Momentous Institute**
Location: Dallas, TX
Population: Diverse client population (SES, ethnicity, religion)
Emphasis: Family systems perspective within a community based setting
Training Opportunities: Broad range of clinical and training activities including an opportunity to learn more about postmodern approaches, psychological testing with children and adolescents, and providing supervision.
Contact: Garica Sanford, PhD, gsanford@momentousinstitute.org
Internship & Postdoctoral Program Networking Fair

**The National Center for PTSD Clinical Neurosciences Division and Yale University School of Medicine: Advanced Fellowship in Mental Illness Research and Treatment**

Location: VA Connecticut Healthcare System (West Haven, CT)  
Population: Veterans and their families  
Training level: Postdoctoral (two-year program)  
Emphasis: PTSD and/or substance use disorders  
Training opportunities: The Advanced Fellowship in Mental Illness Research and Treatment is part of the Clinical Neuroscience division of the National Center for PTSD at VA Connecticut Health Care System and Yale University School of Medicine Department of Psychiatry. It offers a two-year term training designed to advance research and clinical training among psychologists and physicians who would like to embark on VA clinical or an academic career. Fellows will work closely with research mentors from the NCPTSD and Yale University and will conduct their clinical duties at the West Haven VA Medical Center. Fellows will carry an appointment at Yale University as postdoctoral associates and will have full access to all Yale University resources to advance their research and career. We offer one of the most advanced and stimulation training environment for trainees in the field of PTSD and substance use disorder. For several years, Yale Department of Psychiatry ranks as the number one program in the country in the treatment of addiction.  
Contact person and email:  
Ilan Harpaz-Rotem, PhD ilan.harpaz-rotem@yale.edu

**Michael E. DeBakey Veterans Affairs Medical Center (MEDVAMC)**  
Location: Houston, TX  
Training level: Predoctoral; One-year postdoctoral  
Emphasis: Trauma, Primary Care Mental Health, Serious Mental Illness  
Contact: Ellen Tang, PhD, ellen.tang@va.gov

**Alpert Medical School of Brown University Clinical Psychology Training Consortium**  
Location: Providence, RI  
Population: All ages  
Emphasis: A comprehensive predoctoral training program, which ensures the development of adequate levels of proficiency across the basic areas of clinical psychology including assessment, therapy, consultation, and clinical research.  
Training Opportunities:  
Internship: Adult track, child track, health psychology/behavioral medicine track, neuropsychology track  
Postdoc: three types of fellowships, hospital-based Investigator-funded clinical/research fellowships, APA-accredited clinical fellowships, and Institutional NIH-funded T32 research fellowships.  
Contact: Nicole Nugent, PhD Nicole_nugent@brown.edu, Christy Capone, PhD Christy_capone@brown.edu

**Cherokee Health Systems, Clinical Postdoctoral Program**  
Location: Knoxville, TN  
Population: Youth 18 and under and their families  
Emphasis: Complex traumatic stress in children who have experienced chronic maltreatment; child welfare  
Training opportunities: Clinical Child and Adolescent track, APPIC member postdoctoral program  
Contact: Kristin Dean, PhD; Kristin.Dean@cherokeehealth.com

**Cherokee Health Systems, Psychology Internship Program**  
Location: Knoxville and surrounding counties in East Tennessee  
Population: All ages  
Emphasis: Behavioral Health Consultation in primary care, working with underserved populations with chronic traumatic stress exposure  
Training opportunities: Psychology Internship Program, APA Accredited  
Contact: Suzanne Bailey, PsyD; Suzanne.Bailey@cherokeehealth.com
Internship & Postdoctoral Program Networking Fair

Veterans Affairs Salt Lake City Health Care System

Location: Salt Lake City, Utah
Population: Veterans
Training Level: Predoctoral Internship and Postdoctoral Fellowship
Emphasis:

Predoctoral Internship: Generalist emphasis including medical psychology, inpatient psychiatric unit, mental health consult, neuropsychological assessment, and outpatient mental health.

Postdoctoral Fellowship: 2 with a special emphasis on PTSD and polytrauma; 1 with a geropsychology emphasis; 2 with a health related emphasis to include Primary Care-Mental Health Integration (PCMHI), Health Promotion and Disease Prevention (HPDP), Office of Patient Centered Care and Cultural Transformation, Mental Health Consult

Training opportunities:

Predoctoral Internship: This full time generalist internship is APA-accredited and committed to facilitating the transition from student to professional based on a developmental approach to clinical training and supervision. Interns train in a variety of major rotations including Inpatient Psychiatry, Inpatient Mental Health Consultation, Physical Medicine and Rehabilitation, PTSD Clinical Team, Geropsychology, Behavioral Health/Primary Care, OEF/OIF/OND Post-Deployment Readjustment, and Substance Abuse Treatment.

Postdoctoral Fellowship: These are full time postdoctoral residencies are APA-accredited and is focused on training the next generation of VA psychologists. PTSD/polytrauma fellows split their time between the PTSD Clinic and the Polytrauma Clinic where they learn advanced assessment of PTSD and TBI. In addition, clinical interventions are emphasized to include evidence-based treatments for PTSD. Fellows in the health-related fellowships sharpen skills and acumen in operating in a variety of medical positions designed to train medical psychologists operating in PCHMI, HPDP, Office of Patient Centered Care and Cultural Transformation, Mental Health Consult

Contact Persons:

Predoctoral Internship: Sarah Turley, PhD, Psychology Training Director; Sarah.Turley@va.gov

Postdoctoral Residency, PTSD/Polytrauma: Tom Mullin, PhD, Postdoctoral Residency Training Co-Director: Thomas.Mullin2@va.gov

Postdoctoral Residency, Health-related emphasis: Renn Sweeney, PhD, Postdoctoral Fellowship Co-Director: Caroline.Sweeney@va.gov
Hotel and Travel Information

Sheraton Dallas Hotel
400 North Olive Street
Dallas, TX, USA
Toll Free Reservations: +1-888-627-8191
General Guest Phone: +1-214-922-8000
Guest Fax: +1-214-922-0308

All meeting sessions will take place at the Sheraton Dallas Hotel.

Staying in the heart of downtown means all of the best things to do in Dallas including delicious dining, world-class music, a vibrant art scene and exciting nightlife right at your doorstep. Our perfect location puts you in the center of everything Dallas has to offer, with impeccable style, upscale amenities and Texas-sized hospitality. We are located in the heart of downtown Dallas’s vibrant Arts and Financial District, just steps from the DART system and a short walk to the Dallas Convention Center.

ISTSS has negotiated a special rate of $169 per night, single or double occupancy (complimentary Internet included). Rooms and rates are based on availability and subject to state and local fees/taxes (which are currently 15% per room). Be sure to make reservations by October 7, 2016; afterward, the discounted room rates may not apply.

Make your reservation online today! To make your reservation by phone, call the Sheraton Dallas Hotel reservation line at +1-888-627-8191, 24 hours a day, seven days a week and inform them you are attending the ISTSS Meeting.

All reservations require a first night room deposit, or guests can guarantee reservations with a major credit card. Your credit card will not be charged prior to arrival. Make any necessary cancellations at least 48 hours before the scheduled date of arrival to avoid a cancellation charge. Hotel check-in time is 3:00 p.m. and check-out is Noon.

Car Rental
Avis is the official car rental service for the ISTSS 32nd Annual Meeting. An advanced reservation is recommended. For online reservations visit the Avis booking link for ISTSS 32nd Annual Meeting or call +1-800-331-1600 and indicate ISTSS Worldwide Discount number J991745, to receive special pricing. This discount will be effective from seven days prior to the event until seven days after the event.

Parking
The Sheraton Dallas Hotel offers valet parking, $31 per day. Self-parking is also available for $23 per day. Rates include in-and-out privileges for guests staying overnight. Rate are subject to change.

Weather and Meeting Attire
Dallas has an average high temperature of 68° Fahrenheit in early November, with an average low temperature of 49° Fahrenheit. Attire for the conference is business casual. Because meeting room temperatures sometimes fluctuate, attendees may wish to bring a sweater or jacket.

Foreign Visas
Travelers attending the meeting from qualified countries to the United States for tourism or business for 90 days or less may be eligible to visit the United States without a visa. Currently, 27 countries participate in the Visa Waiver Program (VWP). Visitors entering on the VWP may not work or study while in the United States and may not stay longer than 90 days or change their status to another category. Visitors entering on the VWP must have machine-readable passports. Travelers without machine-readable passports will need to apply for a visa to enter the United States. For more information about obtaining a visa, visit the US Government Website.

Airport Transportation Information
Dallas/Fort Worth International Airport (DFW) is 19 miles and approximately 25 minutes by car from the Sheraton Dallas Hotel. The estimated taxi fare is $43 (one way).

The new DART Orange Line makes a direct stop at both Sheraton Dallas and Dallas/Fort Worth International Airport, making it easy for guests to get to/from DFW and the Sheraton Dallas Hotel.
General Information and Meeting Highlights

ISTSS Bookstore
Professional Books offers a large selection of trauma-related publications for sale during the meeting. Contact Marcie Lifson at Professional Books at +1-800-210-7323 or +1-617-630-9393, or email read9books@aol.com.

ISTSS Welcome Reception
Thursday, November 10, 6:30 p.m. – 8:00 p.m.
Please join us for an opportunity to welcome attendees to the ISTSS 32nd Annual Meeting. A selection of the top posters will be presented, organized by the Special Interest Groups. This will be a great opportunity to network and talk with poster presenters about the outstanding work happening in special interest areas. Enjoy a discussion with presenters while hors d’oeuvres are served alongside a cash bar.

ISTSS Business Meeting
Friday, November 11, 6:45 p.m. – 7:45 p.m.
All meeting participants are encouraged to attend the Annual Business Meeting on Friday evening. This is your opportunity to learn about the Society, ask questions and make suggestions for improving ISTSS.

ISTSS Awards
The ISTSS Awards will be presented during the morning Keynote Plenary Sessions.

Thursday, November 10:
• Frank W. Putnam Trauma Research Scholars
• ISTSS Lifetime Achievement Award

Friday, November 11:
• Public Advocacy Award
• Robert S. Laufer Award for Outstanding Scientific Achievement
• Chaim and Bela Danieli Young Professional Award

Saturday, November 12:
• Dart Awards for Excellence in Coverage of Trauma
• Frank Ochberg Award for Media and Trauma Study
• Student Poster Awards

Student Events

Student Attendee Orientation
Wednesday, November 9, 5:15 p.m. – 6:15 p.m.
Student attendees are invited to meet with ISTSS leadership to learn more about the activities of the ISTSS and how ISTSS can help advance their careers.

Student Lunch Meeting
Friday, 11:45 a.m. – 1:30 p.m.
Lunch with ISTSS leadership includes presentation of the Student Awards

Internship and Post-Doctoral Program Networking Fair
Friday, 1:45 p.m. – 3:30 p.m.
Look for the next step in your career. A great networking opportunity.
Registration

Participation in the ISTSS 32nd Annual Meeting is limited to registered participants. Register now at the early discounted rate.

Register online at www.istss.org.

Full Registration includes:
- Admission to all program sessions (excluding Pre-Meeting Institutes, which require an additional fee).
- Thursday Welcome Reception
- Admission to poster sessions
- Special Interest Group (SIG) Meetings
- Wednesday Keynote Panel (November 9)
- Morning coffee and tea
- Final Program and access to online itinerary builder and meeting app

Pre-Meeting Institute Registration Policies
To register for the Pre-Meeting Institute (PMI) being held on Wednesday, November 9, indicate which session(s) you wish to attend when you register online or on the printed registration form. Sessions will be filled on a first come, first serve basis. ISTSS Headquarters will notify you if a session you have chosen has already sold out. PMI session tickets will be distributed in individual registration packets at the meeting. Only those holding tickets for the PMI sessions will be admitted. PMI Abstracts pages 26 – 32.

Student Registration
Students and postdoctoral candidates may volunteer to assist at the ISTSS Annual Meeting and receive either a $40 USD discount on full student registration fee or the sliding scale rate (whichever is lower).

Download the Student Volunteer Forms for discounted registration forms and additional information. Verification of student/postdoctoral status with a valid student ID is required at the time of registration.

Additional information regarding registration, contact Kim Santos at ksantos@istss.org or +1-847-686-2363.

Registration Confirmation
We encourage you to register online. Attendees will receive an email confirmation/receipt within 24 hours of registering online. Allow up to five business days if registering by mail or fax. If an email address is not provided, registrants will receive confirmation in the mail within 14 business days.

Sliding Scale Discounted Registration
ISTSS offers sliding scale registration fees for attendees residing in many countries outside the U.S., Canada, Western Europe, Australia and New Zealand. View the sliding scale fee details. If discounted rates apply, please indicate “sliding fee registration rate” on the registration form.

Payment/Invoice
Registrants must include check or credit card payment in U.S. dollars drawn on a U.S. bank. A $40 USD will be incurred by those requiring an invoice before payment is received. Registration will not be accepted without full payment.

Pre-Registration List
A list of all pre-registered attendees will be provided to exhibitors. If you do not want your information included on the list, please check the “Do not post my name to the pre-registration list” box on the registration form.

Cancellation and Change Policy
Notification of cancellation must be submitted in writing. Cancellations received on or before October 21, 2016, will be refunded, minus a $75 USD cancellation fee. Cancellations will be honored, but money will not be refunded after October 21, 2016.

Substitutions are allowed at any time, but must be submitted in writing and must be of the same member status.