Social Bonds and Trauma Through the Life Span

ISTSS 27th Annual Meeting

Final Program

November 3 – 5, 2011
Pre-Meeting Institutes November 2
Baltimore Marriott Waterfront Hotel
Baltimore, Maryland USA

The largest gathering of professionals dedicated to trauma treatment, education, research and prevention

Jointly Sponsored by
Boston University School of Medicine and the International Society for Traumatic Stress Studies

www.istss.org
The ISTSS 27th Annual Meeting is supported in part by education grants from the following:

**Platinum Supporter**

This event is supported by National Institutes of Health Grant Number R13MH078814 from the National Institute of Mental Health. The content is solely the responsibility of the authors and does not necessarily represent the official views of the National Institute of Mental Health or the National Institutes of Health.

**Silver Supporter**

**Bronze Supporter**

The Trauma Disorders Program at Sheppard Pratt, part of the nationally and internationally renowned Sheppard Pratt Health System, provides inpatient treatment for all stages of psychological trauma recovery. Integrating an intensive multi-disciplinary approach through individual therapy, milieu, and process-oriented, experiential and psycho-educational group therapies, our expertly trained treatment team provides a structured, supportive environment to facilitate stabilization and step-down to other levels of care, both in our continuum and in home communities.

Beyond Boundaries:
Innovations to Expand Services and Tailor Traumatic Stress Treatments

**November 1 – 3, 2012**
Pre-Meeting Institutes, October 31, 2012
JW Marriott Los Angeles at L.A. Live
Los Angeles, CA USA

Visit [www.istss.org](http://www.istss.org) for the latest meeting information
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## Wednesday Sessions

- **8:30 a.m. – Noon**: Pre-Meeting Institutes
- **1:30 p.m. – 5:00 p.m.**: Pre-Meeting Institutes
- **6:15 p.m. – 7:30 p.m.**: Pioneers Panel

## Thursday Sessions

- **8:00 a.m. – 9:15 a.m.**: Concurrent Session 1
- **9:30 a.m. – 10:45 a.m.**: Keynote Address and Concurrent Session 2
- **9:30 a.m. – 6:00 p.m.**: Poster Session 1
- **11:00 a.m. – 12:15 p.m.**: Concurrent Session 3
- **2:00 p.m. – 3:15 p.m.**: Concurrent Session 4
- **3:30 p.m. – 4:45 p.m.**: Concurrent Session 5
- **5:00 p.m. – 6:00 p.m.**: Poster Session 1 Presentations

## Friday Sessions

- **8:00 a.m. – 9:15 a.m.**: Concurrent Session 6
- **9:30 a.m. – 10:45 a.m.**: Keynote Address and Concurrent Session 7
- **9:30 a.m. – 6:00 p.m.**: Poster Session 2
- **11:00 a.m. – 12:15 p.m.**: Concurrent Session 8
- **1:00 p.m. – 2:00 p.m.**: Early Career Panel
- **2:00 p.m. – 3:15 p.m.**: Concurrent Session 9
- **3:30 p.m. – 4:45 p.m.**: Concurrent Session 10
- **5:00 p.m. – 6:00 p.m.**: Poster Session 2 Presentations

## Saturday Sessions

- **8:00 a.m. – 9:15 a.m.**: Concurrent Session 11
- **9:30 a.m. – 10:45 a.m.**: Keynote Address and Concurrent Session 12
- **9:30 a.m. – 6:00 p.m.**: Poster Session 3
- **11:00 a.m. – 12:15 p.m.**: Concurrent Session 13
- **2:00 p.m. – 3:15 p.m.**: Concurrent Session 14
- **3:30 p.m. – 4:45 p.m.**: Concurrent Session 15
- **5:00 p.m. – 6:00 p.m.**: Poster Session 3 Presentations
- **6:00 p.m.**: Meeting Adjourns

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### Hotel Floor Plans  Inside Back and Back Cover
Dear Colleagues,

The 27th Annual Meeting of the International Society for Traumatic Stress Studies (ISTSS) will be held November 3 – 5, 2011, at the Baltimore Marriott Waterfront Hotel in Baltimore, Maryland, USA, with Pre-Meeting Institutes held on November 2. The meeting theme is “Social Bonds and Trauma Through the Life Span.”

We are pleased to announce that we have four keynote addresses this year and have received a large number of high-quality submissions from researchers, clinicians and other professionals in the field of traumatic stress. After the pre-meeting institutes, the conference will start late afternoon on November 2 with “We Couldn’t Have Done It Without Them: Four Pioneers Discuss the Social Bonds that Shaped the Field of Traumatic Stress” featuring Sandra Bloom, MD; Christine Courtois, PhD; Charles Figley, PhD; and Matthew Friedman, MD, PhD.

Each day of the conference will feature a keynote address beginning on Thursday morning with author and filmmaker Alex Kotlowitz in conversation with CeaseFire Violence Interrupter Eddie Bocanegra. Judith L. Herman, MD, will deliver a keynote address on Friday and Saturday’s keynote speaker will be Stephen Suomi, PhD.

We are also looking forward to the invited featured sessions including symposia focused on the recent tsunami disaster in Japan, the 10th anniversary of the September 11 terrorist attacks and the new ISTSS Complex Trauma Treatment Guidelines.

The popular master clinician sessions will be presented this year by Bessel van der Kolk, MD; Chandra Ghosh Ippen, PhD, and Deborah Lee, MSc. The Program Committee, with the input of over 150 ISTSS member reviewers, has worked to put together a program that will be of interest to everyone working in the field of traumatic stress.

In addition to the high quality pre-meeting institutes, scientific sessions, clinical dialogues and workshops conference attendees have come to expect at ISTSS meetings, our goal is to provide a forum to discuss the role of social bonds in recovery from trauma, as well as to facilitate networking and the promotion of interpersonal and community resources among all of us.

Please join us as we gather to learn from each other, see old friends and colleagues, meet new ones and develop and strengthen collaborative relationships in order to move the field of traumatic stress forward. Welcome to new members, current members and those we hope will soon become members, including students and other young professionals, who are attending this meeting.

We look forward to a rich dialogue among this year’s attendees, and very much hope that you enjoy this year’s program and your time in Baltimore.

Christie Jackson, PhD, and Bradley Stolbach, PhD
27th Annual Meeting Co-Chairs

Marylène Cloitre, PhD
ISTSS President

Program Committee

Program Chair
Christie Jackson, PhD
Bradley Stolbach, PhD

President
Marylène Cloitre, PhD

Deputies
Margaret Blaustein, PhD
Melissa Brymer, PhD, PsyD
Diane Castillo, PhD
Wendy D’Andrea, PhD
Charles Figley, PhD
Julian Ford, PhD
Bita Ghafoori, PhD
Tricia Haynes, PhD
Danny Kaloupek, PhD
Justin Kenardy, PhD
Nnamdi Pole, PhD
Gil Reyes, PhD
Elizabeth Thompson, PhD
Elisa Triffleman, MD
Lynn Waelde, PhD
Lori Zoellner, PhD

Boston University
Program Liaison
Ilana Hardesty

About the International Society for Traumatic Stress Studies

ISTSS is an international interdisciplinary professional organization that promotes advancement and exchange of knowledge about traumatic stress. Learn more at www.istss.org.

This knowledge includes:
• Understanding the scope and consequences of traumatic exposure,
• Preventing traumatic events and ameliorating their consequences, and
• Advocating for the field of traumatic stress.
Schedule at a Glance

Tuesday, November 1
4:00 p.m. – 6:00 p.m.  Registration

Wednesday, November 2
7:30 a.m. – 8:30 a.m.  Coffee and Tea
7:30 a.m. – 9:00 a.m.  Registration
9:00 a.m. – 5:00 p.m.  Pre-Meeting Institutes
10:30 a.m. – 5:00 p.m.  Bookstore
1:30 p.m. – 5:00 p.m.  Pre-Meeting Institutes
5:15 p.m. – 6:15 p.m.  New Member and First-Time Attendee Gathering
6:15 p.m. – 7:30 p.m.  Pioneers Panel — Bloom, Courtois, Figley, Friedman
8:00 p.m. – 10:00 p.m.  Cash Bar Meet and Greet

Thursday, November 3
7:00 a.m. – 8:00 a.m.  Coffee and Tea
7:00 a.m. – 5:00 p.m.  Registration
7:00 a.m. – 6:00 p.m.  Bookstore/Exhibits
8:00 a.m. – 9:15 a.m.  Concurrent Session 1
9:30 a.m. – 10:45 a.m.  Keynote Address – Kotlowitz/Bocanegra and Concurrent Session 2
9:30 a.m. – 6:00 p.m.  Poster Session 1
11:00 a.m. – 12:15 p.m.  Concurrent Session 3
12:30 p.m. – 1:45 p.m.  Special Interest Group (SIG) Meetings
2:00 p.m. – 3:15 p.m.  Concurrent Session 4
3:30 p.m. – 4:45 p.m.  Concurrent Session 5
5:00 p.m. – 6:00 p.m.  Poster Session 1 Presentations
6:15 p.m. – 7:30 p.m.  Town Hall Meeting
7:00 p.m. – 9:00 p.m.  Welcome Reception
8:00 p.m. – 10:30 p.m.  The Interrupters Film Screening

Friday, November 4
7:00 a.m. – 8:00 a.m.  Coffee and Tea
7:00 a.m. – 5:00 p.m.  Registration
7:00 a.m. – 6:00 p.m.  Bookstore/Exhibits
8:00 a.m. – 9:15 a.m.  Concurrent Session 6
9:30 a.m. – 10:45 a.m.  Keynote Address – Herman and Concurrent Session 7
9:30 a.m. – 6:00 p.m.  Poster Session 2
11:00 a.m. – 12:15 p.m.  Concurrent Session 8
12:30 p.m. – 1:45 p.m.  Student Luncheon Meeting
1:00 p.m. – 2:00 p.m.  Early Career Panel
2:00 p.m. – 3:15 p.m.  Student Internship and Postdoctoral Program Networking Fair
2:00 p.m. – 3:15 p.m.  Concurrent Session 9
3:30 p.m. – 4:45 p.m.  Concurrent Session 10
5:00 p.m. – 6:00 p.m.  Poster Session 2 Presentations
6:15 p.m. – 7:30 p.m.  Awards Ceremony and Business Meeting
7:30 p.m. – 9:00 p.m.  Kathak Dance Performance
9:00 p.m. – 10:00 p.m.  Reception for VA and DoD Employees

Saturday, November 5
7:00 a.m. – 8:00 a.m.  Coffee and Tea
7:00 a.m. – 2:00 p.m.  Exhibits
7:00 a.m. – 3:30 p.m.  Registration
7:00 a.m. – 5:00 p.m.  Bookstore
8:00 a.m. – 9:15 a.m.  Concurrent Session 11
9:30 a.m. – 10:45 a.m.  Keynote Address – Suomi and Concurrent Session 12
9:30 a.m. – 6:00 p.m.  Poster Session 3
11:00 a.m. – 12:15 p.m.  Concurrent Session 13
12:30 p.m. – 1:45 p.m.  Special Interest Group (SIG) Meetings
2:00 p.m. – 3:15 p.m.  Concurrent Session 14
3:30 p.m. – 4:45 p.m.  Concurrent Session 15
5:00 p.m. – 6:00 p.m.  Poster Session 3 Presentations
6:00 p.m.  Meeting Adjourns
General Information

Registration
The ISTSS Registration and CE/Membership Services desks are located in the Grand Ballroom Foyer, 3rd floor and will be open at the following times:

- Tuesday, November 1  4:00 p.m. – 6:00 p.m.
- Wednesday, November 2  7:30 a.m. – 5:00 p.m.
- Thursday, November 3  7:00 a.m. – 5:00 p.m.
- Friday, November 4  7:00 a.m. – 5:00 p.m.
- Saturday, November 5  7:00 a.m. – 3:30 p.m.

Participation in the ISTSS 27th Annual Meeting is limited to registered delegates.

Your full registration includes:
- Education Sessions and Materials
  - Admission to all program sessions (except Pre-Meeting Institutes, which require an additional fee)
  - Admission to poster sessions
  - Final Program and access to online itinerary builder
- Networking/Social Events
  - Awards Ceremony/Business Meeting
  - Welcome Reception
  - Orientation Meeting
  - Morning coffee and tea networking opportunities
  - Special Interest Group (SIG) meetings
  - Town Hall Meeting
  - Admission to the film screening of The Interrupters

Conference Features
- Four Keynote Addresses
- Featured Sessions
- Master Clinician Series
- Annual Business Meeting
- Committee and task force meetings
- Students/trainees visits with the presidents
- Student Poster Award
- Internship and Postdoctoral Program Networking Fair
- Exhibits of products and services
- ISTSS Bookstore
- Audio recordings of education sessions

Events Available for Additional Fee
- Pre-Meeting Institutes
- Cash Bar Meet and Greet
- Video-captured recordings for additional CE credit
- Special Interest Group (SIG) box lunches
- Audio recordings of education sessions

Meeting Hotel and Meeting Rooms
All sessions and events at the ISTSS 27th Annual Meeting will take place at Baltimore Marriott Waterfront Hotel, Baltimore, Maryland, USA. A floor plan of the meeting facilities can be found on the back cover.

Baltimore Marriott Waterfront Hotel
700 Aliceanna Street
Baltimore, Maryland 21202 USA
Toll Free Reservations: +1-800-228-9290
Guest Phone: +1-410-385-3000
Guest Fax: +1-410-895-1900

Attire
Attire for the conference is business casual.

ISTSS Audio Recordings
ISTSS is offering audio recordings of annual meeting sessions. Whether you are joining us in Baltimore, or want to find out what you missed, these recordings contain a comprehensive recap of the in-depth education available to our attendees. Available on a single DVD, recordings will also be available online for easy download. In addition to the audio, selected sessions will have slides available as Adobe Acrobat® presentations. Purchasing information will be available at the meeting.

Pricing (including shipping):
- Online Library Purchase
  - On-site meeting price is $99
  - Post-meeting price is $129

- DVD Purchase
  - On-site meeting price is $129
  - Post-meeting price is $159

Individual Sessions may be purchased for $20 each after the meeting.

Membership Information
Join the International Society for Traumatic Stress Studies and take advantage of the reduced member registration rate along with all the other benefits of being an ISTSS member.

Join online today using the secure online membership application at www.istss.org.

ISTSS membership includes the peer-reviewed Journal of Traumatic Stress, Traumatic StressPoints newsletter and access to the online ISTSS members-only area including a full membership directory and access to the diagnostic scales. ISTSS members may participate in Special Interest Groups, listservs and committees. Your ISTSS membership plays an important role in supporting international trauma research and treatment. ISTSS membership is based on a calendar year — January 1 through December 31 — and dues are not prorated. Applicants joining after October 1 will be paid through the following membership year.

For 2012, regular membership in ISTSS is $200, which includes both print and electronic versions of the Journal of Traumatic Stress (JTS), or $180 which includes the electronic version of JTS only. Student membership is $100 (both print and electronic versions of JTS), or $80 (electronic version of JTS only). Students must provide their student advisor’s name and email address on the online application.

Email or fax advisor information to istss@istss.org or +1-847-480-9282, Attn: ISTSS.
General Information

Badges
The Annual Meeting badge you received in your on-site registration packet is required for admittance to all sessions and social activities. A fee may be charged to replace lost badges. First-time attendees are designated with light blue ribbons. Please help welcome them to the ISTSS meeting.

ISTSS Bookstore – Grand Ballroom Foyer, 3rd Floor
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, read9books@aol.com or visit www.professionalbooks.com with any questions.)

Bookstore Hours
The bookstore is open Wednesday, from 10:30 a.m. – 5:00 p.m., Thursday and Friday from 7:00 a.m. – 6:00 p.m., and Saturday, from 7:00 a.m. – 5:00 p.m.

Business Center – Close to the Grand Ballroom, 3rd Floor
Copying, faxing, office supplies, computer and printer stations and other business services are available from the hotel business center with 24-hour access. Assistance is available seven days a week from 9:00 a.m. – 6:00 p.m.

Committee Meeting Rooms
The Falkland, Galena and Heron rooms, located on the 4th floor, are available for committee or small group meetings at designated times during the conference. Attendees can reserve meeting times by using the sign-up sheet outside each of the meeting rooms.

Exhibits – Grand Rotunda and Grand Foyer, 3rd Floor
Thursday, November 3  7:00 a.m. – 6:00 p.m.
Friday, November 4  7:00 a.m. – 6:00 p.m.
Saturday, November 5  7:00 a.m. – 2:00 p.m.

Stop by the exhibits to see the display of products and services of interest in the trauma field. The exhibits provide valuable interaction between the profession and organizations that supply products and services. A list of the exhibitors can be found on pages 9 – 10 of the final program with additional exhibitors in the onsite newsletter in your registration packet.

Tools for Accessing the 27th Annual Meeting Session Abstracts

Abstract Search Tool and Itinerary Builder
The Abstract Search Tool, available at www.istss.org, allows you to search the meeting’s educational content and add presentations into an itinerary using the Itinerary Builder Tool. Once your itinerary has been created, it can be printed out or downloaded to your mobile device such as a smartphone (iPhone, Blackberry, etc.) or a personal computer. With wireless access provided in the meeting rooms, you will always have access to your itinerary along with presentation abstracts online.

Features of the Itinerary Builder:
• Synchronize your itinerary with MS Outlook, Google Calendar, IBM Lotus Notes or any iCalendar compliant program
• Export your itinerary to Microsoft Excel for easy access from your personal computer

ISTSS 27th Annual Meeting Abstract E-Book
The ISTSS 27th Annual Meeting abstract e-book contains all of the abstracts for the meeting presentations. Visit www.istss.org to download the e-book to your e-reader device (including personal computers, smartphones, Amazon Kindle, iPad, etc.) Detailed instructions on how to access the e-book are available in your registration materials.

Meeting Evaluation
ISTSS needs your input to enhance future ISTSS meetings. An online meeting evaluation survey will be emailed to you shortly after the ISTSS Annual Meeting. Your participation in this survey is greatly appreciated.

Message Center – Grand Foyer, 3rd Floor
The ISTSS message center is located next to the registration desk in the Grand Foyer – 3rd Floor at the Baltimore Marriott Waterfront Hotel. Messages for registrants are posted alphabetically by last name. Please remove your messages after you have received them. The ISTSS message center can be reached by calling the hotel operator at +1-410-385-3000 and ask to be transferred to the ISTSS registration desk.

Smoking Policy
Smoking is prohibited at any ISTSS function.

Special Assistance
Notify the ISTSS Registration Desk in the Grand Rotunda – 3rd Floor, if you require special assistance at the conference.

Speaker Ready Room – Boardroom, 3rd Floor
If you plan to use audiovisual aids during your presentation, visit the speaker-ready room before your presentation. The room is equipped with much of the same audiovisual setup as session rooms, so you may test your materials and rehearse your presentation.

Speaker Ready Room Hours
The Speaker Ready Room is available on Wednesday from 7:00 a.m. – 5:00 p.m.; Thursday and Friday from 7:00 a.m. – 5:30 p.m.; and Saturday from 7:00 a.m. – 3:30 p.m.

Student Poster Award
ISTSS will present the annual Student Poster Award at the conference. The winner will receive a complimentary 2012 conference registration, with additional presenters receiving honorable mention certificates and ribbons.
**Exhibitor Directory (at Press Time)**

Visit the exhibitors located in the Grand Rotunda and Grand Foyer, 3rd Floor.

**Association for Death Education and Counseling**  
**Table Number: 12**  
111 Deer Lake Road, Suite 100  
Deerfield, IL 60015  
Phone: +1-847-509-0403  
Fax: +1-847-480-9282  
Email: adec@adec.org  
Website: www.adec.org

The Association for Death Education and Counseling® is an international professional organization dedicated to promoting excellence and recognizing diversity in death education, care of the dying, bereavement and grief counseling, and research in thanatology. Its 1,800 plus members include mental health professionals and health care providers, educators, chaplains and clergy, hospice personnel, funeral directors and bereavement care specialists.

**American Psychological Association**  
**Table Numbers: 8 and 9**  
750 First Street, NE  
Washington, DC 20002  
Phone: +1-202-336-5570  
Fax: +1-202-336-6091  
Email: agibbs@apa.org  
Website: www.apa.org

American Psychological Association is the premier source for information in psychology. APA delivers this information through its expansive collection of books, journals, newsletters, electronic products and its website, www.apa.org.

**Behavioral Health of the Palm Beaches**  
**Table Number: 1**  
1000 York Road, Suite 1  
Willow Grove, PA 19090  
Phone: +1-215-784-1120  
Fax: +1-215-784-1128  
Email: ekorman@bhpalmbeach.com  
Website: www.bhpalmbeach.com

Behavioral Health of the Palm Beaches in Florida offers our clients state-of-the-art residential alcohol and drug treatment and rehabilitation with the highest success rates for alcohol and drug addiction recovery today. We are one of the few in-patient drug and alcohol addiction centers who provide detox, intervention, and substance abuse rehab programs based on the leading cutting edge research & development methods of treatment.

**Biofeedback Resources International**  
**Table Number: 4**  
109 Croton Ave., 2nd Floor, No. 5  
Ossining, NY 10562  
Phone: +1-914-762-4646  
Fax: +1-914-762-2281  
Email: harry@bipfeedbackinternational.com

Biofeedback Resources International supplies biofeedback equipment and BCIA certification approved training to the healthcare industry, Veterans Administration, the military, educational institutions, corporations, and individuals. Biofeedback instruments measure things like muscle tension, heart rate, and brainwaves. It provides an effective way to measure the body’s reaction to stress in a way that makes it a teaching and therapeutic tool in mental/behavioral health for stress management as well as research. Free Demonstrations at our booth every day.

**Castlewood Treatment Center**  
**Table Number: 5**  
1260 St. Paul Road  
Ballwin, MD 63021  
Phone: +1-636-386-6633  
Email: jaime.halbert@castlewoodtc.com  
Website: www.castlewoodtc.com

Castlewood Treatment Center specializes in the comprehensive treatment of all types of eating disorders. At Castlewood, we do not merely address the symptoms, but help our clients resolve the underlying causes, such as trauma, PTSD, Anxiety Disorders, OCD, or other co-morbid disorders. Castlewood offers a full continuum of care with highly specialized and experienced staff. Please contact us at www.castlewoodtc.com or call 1-888-822-8938 for more information.

**ESTSS**  
**(European Society for Traumatic Stress Studies)**  
**Table Number: 13**  
P.O. Box 12288  
Amsterdam 1100 AG  
The Netherlands  
Phone: +31-20-660-1921  
Email: secretariat@estss.org  
Website: www.estss.org

ESTSS (European Society for Traumatic Stress Studies) is a professional umbrella society, whose aim is to broaden and increase knowledge of the effects of traumatic events in people and to promote effective trauma treatment.
Exhibitor Directory  (at Press Time)

Institute on Violence, Abuse, and Trauma (IVAT)
Table Number: 14
10065 Old Grove Road, Suite 101
San Diego, CA 92131
Phone: +1-858-527-1860 ext. 4050
Fax: +1-858-527-1743
Email: ivat@alliant.edu
Website: www.ivatcenters.org

Brochures and information about Alliant International University’s Institute on Violence, Abuse and Trauma (IVAT), as well as information and sample journals from Taylor and Francis Press journals. Additionally, flyers about IVAT’s training program and conferences as well as a book list from its online bookstore are provided.

Sheppard Pratt Health System
Table Number: 7
6501 N. Charles Street
Baltimore, MD 21204
Phone: +1-410-938-3584
Fax: +1-410-938-3159
Email: kfriner@sheppardpratt.org
Website: www.traumaatsp.org

The Trauma Disorders Program at Sheppard Pratt, part of the nationally and internationally renowned Sheppard Pratt Health System, provides inpatient treatment for all stages of psychological trauma recovery. Integrating an intensive multidisciplinary approach through individual therapy, milieu, and process-oriented, experiential and psycho-educational group therapies, our expertly trained treatment team provides a structured, supportive environment to facilitate stabilization and step-down to other levels of care, both in our continuum and in home communities.

Survivors of Incest Anonymous (SIA)
Table Number: 11
P.O. Box 190
Benson, MD 21018
Phone: +1-410-893-3322
Email: cathy.siamd@gmail.com
Website: www.siawso.org

SIA is a spiritual, self-help group of women and men, 18 years or older, who have survived childhood sexual abuse and who have not willingly abused any child. We are guided by a set of 12 Steps and 12 Traditions as borrowed from Alcoholics Anonymous (AA.) There are no dues or fees for membership. SIA empowers survivors by creating and distributing SIA information tools (literature, newsletters, electronic media,) and providing information to start SIA groups.

U.S. Army Healthcare
Table Number: 10
6810 Deerpath Road, Suite 400
Elkridge, MD 21075
Phone: +1-410-379-0691
Fax: +1-410-379-6291
Email: jim.austin@usarec.army.mil

The Army Medical Department (AMEDD) has an abundance of opportunities, whether you are involved in direct patient care, research, disease prevention, allied health care fields or veterinary medicine. With great financial benefits and continuing educational programs, you can pursue a successful career in your chosen health care field. Whether you serve full time on Active Duty, or part time in the Army Reserve, you will lead a comfortable and rewarding lifestyle.

Wiley-Blackwell
Table Number: 6
350 Main Street
Malden, MA 02148
Phone: +1-781-388-8544
Fax: +1-781-338-8544
Email: cfeeley@wiley.com
Website: www.wiley.com

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Special Events/Meetings

New Members and First-Time Attendee Gathering – Dover, 3rd Floor
As part of the ISTSS welcome to the 27th Annual Meeting, experienced members of ISTSS will gather to welcome new members and first-time attendees on Wednesday, November 2. This gathering will be held from 5:15 p.m. – 6:15 p.m. While geared toward first-time attendees, all ISTSS participants are invited to join in, ask questions and add comments and insights. Following this gathering, you are invited to attend the Meet and Greet with cash bar.

Cash Bar Meet and Greet – Harborside D, 4th Floor
To provide a meeting place for all conference attendees, there will be a Cash Bar Meet and Greet gathering on Wednesday, November 2, from 8:00 p.m. – 10:00 p.m. Participants are encouraged to ask questions regarding any aspect of the conference and the organization. You will find members accessible, friendly and knowledgeable.

ISTSS Special Interest Groups
Thursday, November 3, 12:30 p.m. – 1:45 p.m. and Saturday, November 5, 12:30 p.m. – 1:45 p.m.
Special Interest Groups (SIGs) provide members with a forum for communication and interaction about specific topic areas related to traumatic stress and provide a means of personal and professional involvement in the activities of the society. See page 35 for a listing of specific SIG meetings for each day. All meeting participants are welcome to attend. ISTSS has arranged for SIG meeting attendees to purchase pre-ordered box lunches for these meetings. Lunch tickets for pre-registered SIG meeting attendees are in your registration envelope. Onsite registrants: there are a limited number of box lunches available for purchase on a first-come, first-serve basis at the registration desk. SIG lunch tickets must be presented in the Grand Foyer (where the box lunches are stationed) prior to the individual SIG meetings. However, you DO NOT need to order lunch in order to attend the SIG meetings.

“Town Hall Meeting” on the Global Relationship Initiative
Grand I & II, 3rd Floor
Thursday, November 3, 6:15 p.m. – 7:00 p.m.
In 2010, the ISTSS Board of Directors identified as one of ISTSS’ strategic goals to “operate within a new business model that is responsive to issues, members and stakeholders from all nations”. In the meantime, the Global Relationships Task Force conducted a number of surveys among the ISTSS membership and its affiliate societies. Based on this data, the task force developed alternative models that will enable the ISTSS to promote effective relationships with affiliate and other organizations in order to fulfill the ISTSS mission. At this “Town Hall Meeting”, various models will be presented and discussed. Everyone is welcome.

Welcome Reception – Harborside A/B/C, 4th Floor
Please join us for an opportunity to welcome attendees to the ISTSS 27th Annual Meeting. The reception will be held Thursday, November 3, from 7:00 p.m. – 9:00 p.m.

ISTSS Student Meeting
Visit with leaders in the field with “SPEED-MEETING” – Harborside D/E, 4th Floor
All students (members and nonmembers) are invited to attend the Student Section meeting at the 27th Annual ISTSS conference on Friday, November 4, from 12:30 p.m. – 1:45 p.m. This lunch meeting provides a wonderful opportunity to meet and network with fellow students and future colleagues as well as leaders in the field of traumatic stress studies from around the world. In addition to introducing the new incoming Student Section leadership and announcing the recipients for the two Student Section awards, this year’s meeting will feature “SPEED-MEETING” – a format based on the idea of speed-dating.

Trauma experts will rotate between tables and provide students with an incredible opportunity to get to know the expert a little, ask their own questions and glean some bits of wisdom and guidance from those who have successfully journeyed the same paths students currently travel. It is our hope that students will learn and grow from this mini-mentorship exercise, feel more comfortable approaching trauma experts (and others) at the meeting and generally feel more a part of the ISTSS family. Pre-registered students will receive lunch paid for by ISTSS. Remember, the Internship and Postdoctoral Networking Fair will be immediately following this lunch meeting. We look forward to seeing you there!

Awards Ceremony/Business Meeting
Grand VI, 3rd Floor
Help us recognize the recipients of this year’s awards from the International Society for Traumatic Stress Studies. Attend the Awards Ceremony/Business Meeting, Friday, November 4, from 6:15 p.m. – 7:30 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 is offering 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 will have the opportunity to recruit potential interns and postdoctoral fellows, while the students will have the opportunity to locate these programs, meet representatives, and ask any questions they have about the experiences offered and the application process. As this event happens in early November, those students who are applying this year for internship and postdoc positions have the opportunity to meet some of the folks they will be seeing within the next month or so at interviews. For many ‘putting a face with a name’ can decrease some of the anxiety that comes with this process. Programs from across the United States will be invited and these programs will represent a diverse set of clinical interests including military and veterans, children, sexual assault, prison populations, refugees and general community. Additionally, a representative will be present at this event to discuss the Fulbright Program and opportunities for international study, training, research, exchange and collaboration.

This networking session will be held on Friday, November 4 from 2:00 p.m. – 3:15 p.m. in Harborside D/E and has been a highlight of past conferences and according to student report has been effective in connecting students with appropriate training sites. This event was coordinated by Lynnette Averill, Student Section Chair.

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

**Organizations Participating in the Internship and Postdoctoral Program Networking Fair**

**Boston Consortium/Veterans Affairs**

**Boston Healthcare System**

**Location:** Boston, Massachusetts, USA  
**Program:** Boston Consortium in Clinical Psychology Internship  
**Program Characteristics:** Children, adults  
**Training Level:** Predoctoral  
**Emphasis:** Clinical, Research  

Twelve scientist-practitioner training opportunities including two directly associated with the National Center for PTSD. Other rotations offer PTSD training experiences as part of broader clinical training. Interns may participate in cognitive processing therapy (CPT) training and ongoing consultation with Dr. Patricia Resick and her associates within the NC-PTSD (Women’s Health Science Division); Seeking Safety training with Dr. Lisa Najavits is another opportunity offered to interns.  

**Contact Persons:** Dr. Keith Shaw; Keith.Shaw@va.gov; Dr. Amy Silberbogen; Amy.Silberbogen@va.gov

**Central Texas Veterans Health Care System**

**Location:** Temple, Texas, USA  
**Population:** Adults  
**Training Level:** Internship and Postdoc  

Central Texas Veterans Health Care System offers 5 positions in its APA-accredited internship program, shared between three training sites in Temple, Austin and Waco. The internship is a generalist program based on a “reflective practitioner” model of scholar-practitioner training. Multiple opportunities exist for training in trauma and PTSD. CTVHCS offers postdoctoral training through: (a) Psychosocial Rehabilitation Fellowships, based in Waco, and part of a national VA program for interdisciplinary training in rehabilitation for veterans with chronic, serious mental illness, and (b) Clinical Research Fellowships through the VISN 17 research Center of Excellence in Waco.  

**Contact Person:** Dr. Andrew Cook; Andrew.Cook@va.gov

**Charleston Consortium Clinical Psychology Internship Program, Medical University of South Carolina**

**Location:** Charleston, South Carolina, USA  
**Population:** Adults & Children  
**Training Level:** Internship  
**Emphasis:** Clinical & Research  

The Charleston Consortium’s mission is to provide interns with training that will enhance their expertise in research, in clinical assessment and treatment, in the integration of science and practice, and in their understanding of cultural and individual differences in our increasingly diverse society, as it relates to science and clinical practice.  

**Contact Person:** Dr. Dean Kilpatrick; kilpatdg@musc.edu

**Cincinnati Veterans Affairs Medical Center**

**Location:** Cincinnati, Ohio, USA  
**Program:** Predoctoral Internship  
**Program Characteristics:** Children  
**Training Level:** Predoctoral, postdoctoral  
**Emphasis:** Clinical, research  

Practitioner-scientist pre-doctoral training program with opportunities for rotations in PTSD, neuropsychology, substance dependence, healthy psychology and psychiatric emergency room.  

**Contact Person:** Dr. Kathleen Chard; Kathleen.Chard@va.gov
Internship and Postdoctoral Program Networking Fair

Edward Hines, Jr. Veterans Affairs Hospital
(Hines Veterans Affairs)
Location: Chicago, Illinois, USA
Population: Adult veteran population
Training level: Intern/Postdoctoral Fellow
Emphasis: Clinical emphasis with opportunities to participate in ongoing trauma-focused research

The Hines Internship and Fellowship program embraces an evidence-based model of training in which science and theory inform practice. Within the Trauma Services Program, trainees can expect to provide individual and group psychotherapy. Current strategies revolve around empirically based treatments, mostly pulling from cognitive behavioral theory. Treatments currently offered include Cognitive Process Therapy (CPT), Prolonged Exposure (PE), Seeking Safety, Mindfulness-Based Coping Skills, Anger Management, and Motivational Interviewing.

Contact Person: Dr. Bernie Sladen; Bernie.Sladen@va.gov

Federal Bureau of Prisons
Location: Atlanta, Georgia, USA
Program: Psychology Doctoral Internship Program
Program Characteristics: Adults
Training Level: Predoctoral, Postdoctoral
Emphasis: Clinical

The Bureau relies upon this program to provide uniquely qualified entry-level psychologists. Interns who are competent and comfortable working within the correctional setting are often recruited by the Bureau.

Contact Person: Joshlyn Levister; jlevister@bop.gov

G.V. “Sonny” Montgomery Veterans Affairs Medical Center
Location: Jackson, Mississippi, USA
Population: Adults
Training Level: Internship
Emphasis: Internship is predominantly clinical, but offers some research as well.

Interns will have the opportunity to work with several programs including the VA Trauma Recovery Program, the South Central MIRECC and the Univ. of Mississippi Medical Center.

Contact Person: Dr. Judith Lyons; Judith.Lyons@va.gov

Hefner Veterans Affairs Medical Center
Location: Salisbury, North Carolina, USA
Population: Adults

The Psychology Internship Program provides comprehensive generalist training to interns from APA-approved clinical and counseling psychology graduate programs in an intellectually challenging and professionally nurturing environment. Our philosophy is that comprehensive generalist skills form the foundation for competent, independent, professional psychology practitioners. As practitioner-scholars, interns are expected to develop a theoretical framework for the application of therapeutic skills. Core competencies include assessment (including using psychometric measures), differential diagnosis, case consultation, and interdisciplinary team functioning. Interns have ongoing supervision, the intensity of which will taper throughout the internship as the intern’s progressive and cumulative training leads toward independent practice. Interns may have opportunities to gain experience in supervision of other psychology trainees.

Contact Person: Dr. Kristen Humphrey; Kristen.Humphrey@va.gov

Iowa City Veterans Affairs
Location: Iowa City, Iowa, USA
Program: Predoctoral Psychology Internship
Program Characteristics: Male and female veterans of all ages
Training Level: Internship
Emphasis: Clinical

Evidence-based treatment approaches (e.g., CPT and PE). Major rotations include PTSD and the Women’s Clinic, the latter of which focuses on work with patients suffering from military sexual trauma and their families as appropriate.

Contact Person: Dr. Doris Stormoen, Doris.Stormoen@va.gov

La Rabida Children’s Hospital
Location: Chicago, Illinois, USA
Programs: Predoctoral Internship, Postdoctoral Fellowship
Population: Children and adolescents
Training Level: Internship/Postdoctoral Fellowship
Emphasis: Clinical

Predoctoral interns receive training in general child clinical psychology, pediatric psychology, and trauma and maltreatment. Postdoctoral fellows receive intensive training in trauma-focused intervention with children who have experienced the full range of potentially traumatic events. Located in one of the most racially and economically segregated areas in the United States, La Rabida primarily serves African American children and families from underserved communities. Supervising staff at La Rabida’s Chicago Child Trauma Center have training in an array of trauma-focused interventions, including Phase-Oriented Trauma-Focused Therapy, Trauma-Focused CBT, ARC (Attachment, Self-Regulation, & Competency), and Child-Parent Psychotherapy.

Contact Person: Dr. Bradley Stolbach; bstolbach@larabida.org

Louis Stokes Cleveland DVA Medical Center
Psychology Service Training Programs
Location: Cleveland, Ohio, USA
Program: Predoctoral Internship
Program Characteristics: Military veterans
Training Level: Doctoral, predoctoral, postdoctoral
Emphasis: Clinical, research
Internship: Four month full-time rotation in PTSD Center for Stress Recovery provides generalist training in mental health.
Residence: One-year full-time program provides training with a variety of trauma subpopulations and intervention modalities.

Contact Person: Dr. Kerry Renner; Kerry.Renner@va.gov
Internship and Postdoctoral Program Networking Fair

International Society for Traumatic Stress Studies

Michael E. DeBakey Veterans Affairs Medical Center Psychology Internship Program
Location: Houston, Texas, USA
Program: Internship
Program Characteristics: Adults
Training Level: Internship, post-doctoral
Emphasis: Clinical

The goal of the Psychology Internship Program is to prepare interns for the practice of professional psychology in a variety of settings with a particular emphasis on preparation for VA and other medical/institutional settings. The primary goal of the MEDVAMC Psychology Postdoctoral Fellowship Program is to provide a foundation in advanced clinical service delivery (and other relevant professional skill areas) to prepare our fellows to become licensed psychologists qualified to work in public sector medical settings.

Contact Person: Dr. Ellen Teng; Ellen.Teng@va.gov

National Center for PTSD—Pacific Islands Division & Veterans Affairs Pacific Islands Health Care System
Location: Honolulu, Hawaii, USA
Population: Adults
Training level: Internship and post-doc
Emphasis: (Internship is predominantly clinical; post doctoral fellowship is 70% clinical and 30% research)

The mission of the Pacific Islands Division of the NCPTSD Clinical Psychology Training Program is to train psychologists who can function effectively in the high priority area of mental health care for culturally diverse veterans, with an emphasis on the assessment and treatment of PTSD and stress-related disorders. The program helps trainees to develop clinical expertise in PTSD and cross-cultural treatment to augment skills required for independent functioning in clinical and research careers. The training program is committed to the scientist-practitioner model of training and training objectives are closely linked to that model.

Contact Person: Dr. Julia Whealin; Julia.Whealin@va.gov

Northwest Georgia Regional Hospital
Location: Rome, Georgia, USA
Program: Northwest Georgia Consortium Internship
Program Characteristics: Children, adults
Training Level: Predoctoral
Emphasis: Clinical

Three organizations consortium including public sector, regional psychiatric, substance abuse and developmental disabilities servicing 2+ million people, a community mental health center for children, adolescents, and adults, and a denominational affiliated children’s residential treatment center.

Contact Person: Dr. Victor Wolski; vwolski@dhr.state.ga.us

Providence Veterans Affairs Medical Center and Brown University
Location: Providence, Rhode Island, USA
Population: Adults
Emphasis: Clinical, Research

Brown Clinical Psychology Training Consortium – Pre-Doctoral Internship - PTSD Rotation at the Providence VA Medical Center:

During this 4-month rotation, the Intern functions as a member of the PTSD clinic, an outpatient service designed to provide assessment and treatment of veterans suffering from PTSD associated with their military experiences as well as other traumatic events. The Intern’s duties include comprehensive assessment of PTSD and delivery of short term psychotherapy with patients diagnosed with PTSD to include individual, family and/or group psychotherapy. Brown Clinical Psychology Training Consortium- Post-Doctoral Fellowship in Stress Disorder at the Providence VA Medical Center: During this one-year placement, the Post-Doctoral Fellow functions as a member of the PTSD clinic. The aims of the fellowship are to provide the Fellow with broad post-doctoral training in the areas of PTSD in an outpatient setting to include: (1) a complete and thorough understanding of the nature of PTSD, Dual-Diagnosis (e.g., alcohol and illegal substance abuse/dependence), and co-morbid psychiatric disorders; and (2) an understanding of the full range of clinical services typically required for the assessment and treatment of PTSD. An additional goal is to provide the Fellow with a strong working knowledge of clinical research conducted with veterans with PTSD and concurrent psychiatric disorders, behavioral, learning, and family problems.

Contact Person: Dr. Ellen Teng; Ellen.Teng@va.gov
Internship and Postdoctoral Program Networking Fair

Sarah A. Reed Children’s Center
Location: Erie, Pennsylvania, USA
Population: Children
Training Level: Internship
Emphasis: Clinical

For more than 140 years, the Sarah A. Reed Children’s Center has been known and respected for high quality treatment of traumatized and “at risk” children throughout Erie County, the state of Pennsylvania, and beyond. We offer a full continuum of care for children and families. We are committed to creating a safe, therapeutic and healing environment to promote positive changes, resiliency and success. Our entire organization, from direct care to administration has committed to adopting the Sanctuary Model of trauma informed care. Sarah Reed offers a wide range of programs and services based at 5 primary locations throughout Erie County. In addition, many of these services can be accessed through our multiple school based sites.

Contact Person: Dr. Eric Schwartz; Eric.Schwartz@sarahreed.org

University of California Davis Children’s Hospital
Location: Sacramento, California, USA
Program: CAARE Center Clinical Psychology Training Program
Program Characteristics: Children
Training Level: Predoctoral, postdoctoral
Emphasis: Clinical

CAARE Center Clinical Psychology Internship Program provides training in empirically supported treatments (PCIT; TF-CBT) and working with maltreated children.

Contact Persons: Dr. Dawn Blacker; Dawn.Blacker@ucdmc.ucdavis.edu; Dr. Georganna Sedlar; Georganna.Sedlar@ucdmc.ucdavis.edu

University of California, San Diego/VA Psychology Internship Training Program
Location: San Diego, California, USA
Population: Adults & Children
Training Level: Internship & Postdoc

The University of California, San Diego School of Medicine, Department of Psychiatry, in affiliation with the Psychology Service, VA San Diego Healthcare System (VASDHS), UCSD Outpatient Psychiatric Services, UCSD Intensive Outpatient Eating Disorders Program, Children’s Outpatient Psychiatry of Children’s Hospital, UCSD Child and Adolescent Inpatient Psychiatric Services, and UCSD Medical Center offers a 12 month, full time, APA approved predoctoral internship in clinical psychology.

Contact Persons: Dr. Sandra Brown; Sandra.Brown@va.gov; Dr. Sean Drummond; Sean.Drummond@va.gov

University of Michigan Medical School and Veterans Affairs Ann Arbor Healthcare System
Location: Ann Arbor, Michigan, USA
Population: Adults and Children
Training Level: Internship and Postdoc

The VA Ann Arbor Healthcare System offers an intensive Clinical Psychology internship program in a hospital setting with inpatient, outpatient and rehabilitation services. Our internship program is APA-approved. The program provides a unique opportunity to work with male and female veterans experiencing a wide range of physical, emotional and interpersonal problems, while receiving careful supervision from a highly-skilled staff. The new Psychology Postdoctoral Fellowship program has been approved for four fellows, two in Mental Health and two in Neuropsychology. The Mental Health positions are each one year. The Neuropsychology positions are each two years.

Contact Person: Dr. Sheila Rauch; sherauch@med.umich.edu

Veterans Affairs Boston Healthcare System
Location: Boston, Massachusetts, USA
Program: VA Boston Psychology Postdoctoral Fellowship Program
Program Characteristics: Adults
Training Level: Postdoctoral
Emphasis: Clinical, Research

Affiliated with Boston University School of Medicine and Harvard Medical School, the program is organized into two APA-accredited programs, Clinical Psychology and Clinical Neuropsychology. It is committed to the scientist-practitioner model in clinical care, clinical research, and professional teaching.

Contact Persons: Dr. Keith Shaw; Keith.Shaw@va.gov; Dr. Amy Silberbogen; Amy.Silberbogen@va.gov

Veterans Affairs Maryland Healthcare System/University of Maryland
Location: Baltimore, Maryland, USA
Program: VA Maryland Healthcare System/University of Maryland Psychology Internship Consortium
Program Characteristics: Children, adults
Training Level: Predoctoral, postdoctoral
Emphasis: Clinical, Research

The Consortium represents the integrated training experience of psychology across three primary sites, including two medical centers and a medical school. Interns at VMHCS are placed into one of four tracks: Comprehensive, Health Psychology, Neuropsychology, or Serious Mental Illness.

Contact Person: Dr. Melissa Decker; Melissa.Decker@va.gov

Veterans Affairs Medical Center-Salem
Location: Salem, Virginia, USA
Program: Salem VA Medical Center
Program Characteristics: Children, adults
Training Level: Predoctoral, postdoctoral
Emphasis: Clinical, Research

A generalist program in psychology with a strong cognitive-behavioral orientation and scientist-practitioner model. Major rotations (4-6 months) occur for 4 days/week. A rotation in Outpatient Psychological Services is required. Behavioral Medicine/Primary Care, Substance Abuse, Neuropsychology and PTSD major rotations are elective.

Contact Person: Dr. Dana Holohan; Dana.Holohan@va.gov
Internship and Postdoctoral Program Networking Fair

Veterans Affairs Palo Alto Health Care System
Location: Palo Alto, California, USA
Program: VA Palo Alto Health Care System Psychology
Training Program
Program Characteristics: Adult veterans and active-duty military personnel
Training level: Internship and Post-doctoral
Emphasis: Clinical

Internship training program at a large, VA medical center with a variety of clinical experiences available, including outpatient and residential treatment of PTSD and related disorders with men and women veterans and active-duty military personnel. Post-doctoral training program with several emphasis areas including PTSD.

Contact Person: Dr. Jeanette Hsu; Jeanette.Hsu@va.gov

Veterans Affairs Pittsburgh Healthcare System
Location: Pittsburgh, Pennsylvania, USA
Program: VA Pittsburgh Healthcare System
Program Characteristics: Adults
Training Level: Predoctoral, postdoctoral
Emphasis: Clinical

APA accredited predoctoral psychology internship and postdoctoral fellowship. Internship offers a rotation in the outpatient PCT clinic and a rotation with the Mood Disorders team that includes experience with military sexual trauma. Program emphasizes assessment of PTSD and evidence-based treatment for PTSD including prolonged exposure and Cognitive Processing Therapy. Fellowship program includes one slot in PTSD, incorporating inpatient and outpatient experiences with the PCT clinic and MST.

Contact Person: Dr. Melissa Marcario; Melissa.Marcario@va.gov

Veterans Affairs Salt Lake City Health Care System
Location: Salt Lake City, Utah, USA
Program: Professional Psychology Training Program
Program Characteristics: Adults
Training Level: Predoctoral, postdoctoral
Emphasis: Clinical

Internship: Full-time, 12-month internship with four three-month major rotations, and one year of outpatient mental health and psychological assessment experiences. Structure allows for breadth and depth of clinical experiences and exposure to a variety of treatment approaches and supervisory styles.

Postdoc: Full-time, 12-month continuous appointment focused on specialty training with the PTSD Clinical Team and Polytrauma Team. It encourages mental health professionals to provide psychological services within the complementary areas of emotional trauma (e.g., military combat, military sexual trauma), physical trauma (e.g., TBI, orthopedic injuries), substance abuse, and couples/family discord, primarily within the OEF/OIF veteran population.

Contact Person: Dr. Thomas Mullin; Thomas.Mullin2@va.gov

Washington D.C. Veterans Affairs Medical Center
Location: Washington, D.C., USA
Program: Trauma Services
Program Characteristics: Adults
Training Level: Predoctoral, Postdoctoral
Emphasis: Clinical, Research

APA accredited internship for three pre-doctoral interns and one post-doctoral fellowship in Trauma Services. Trauma Services is an interdisciplinary team serving veterans with combat PTSD, non-combat military PTSD, military sexual trauma, as well as returning veterans with mental health issues.

Contact Person: Dr. David Cueva; David.Cueva@va.gov
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.

Educational Objectives
The established learning objectives of this meeting are to be able to:
1. Discuss how an early positive attachment to a caregiver or significant individual can facilitate one’s recovery following a traumatic event;
2. Identify two ways you, as a worker in the field of traumatic stress, can improve your own social support and/or connection to the community and;
3. Describe how social support can serve as a protective factor in the face of traumatic stress.

Continuing Medical Education Accreditation
This activity has been planned and implemented in accordance with the Essential Areas and Policies of the Accreditation Council for Continuing Medical Education (ACCMCE) through the joint sponsorship of the 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 educational activity for a maximum of 30 AMA PRA Category 1 Credits™, which includes the author attended posters sessions for Continuing Medical Education (CME) only.* Physicians should claim only credit commensurate with the extent of their participation in the activity.

*Author attended poster sessions are eligible for CME credit. No CE credit is offered for poster sessions. See page 19.

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

DISCLAIMER: THESE MATERIALS AND ALL OTHER MATERIALS PROVIDED IN CONJUNCTION WITH CME ACTIVITIES ARE INTENDED SOLELY FOR PURPOSES OF SUPPLEMENTING CME PROGRAMS FOR QUALIFIED HEALTH CARE PROFESSIONALS. ANYONE USING THE MATERIALS ASSUMES FULL RESPONSIBILITY AND ALL RISK FOR THEIR APPROPRIATE USE. TRUSTEES OF BOSTON UNIVERSITY MAKE NO WARRANTIES OR REPRESENTATIONS WHATSOEVER REGARDING THE ACCURACY, COMPLETENESS, CURETTES, NO INFRINGEMENT, MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE OF THE MATERIALS. IN NO EVENT WILL TRUSTEES OF BOSTON UNIVERSITY BE LIABLE TO ANYONE FOR ANY DECISION MADE OR ACTION TAKEN IN RELIANCE ON THE MATERIALS. IN NO EVENT SHOULD THE INFORMATION IN THE MATERIALS BE USED AS A SUBSTITUTE FOR PROFESSIONAL CARE.

Ethics
The ISTSS Annual Meeting offers some sessions focusing on ethical issues in practice and research. This session has been approved by the continuing education provider to offer credits in ethics. However, please note that ultimately it is the responsibility of the course participant and his/her licensing board to make sure that courses approved for ethics meet his/her specific requirements. In addition, any ethics sessions would not meet California requirements, unless of course, they are specific to California laws/ regulations.

Workshop Presentation: Ethical Decisions Within an Empirical Frame in the Treatment of PTSD
Priscilla Schulz, LCSW1; Amy Williams, PhD2; Tara Galovski, PhD3
1Uniformed Services University of the Health Sciences, Silver Spring, Maryland, USA
2Private Practice, Flower Mound, Texas, USA
3University of Missouri - St. Louis, St. Louis, Missouri, USA

Government- and professionally-generated clinical practice guidelines support the use of empirically-supported treatments (EST) for PTSD (Forbes, et al., 2010). Clinical practice, however, is exceptionally complex. Ethical practitioners must consider multiple issues when making treatment decisions not the least of which are ethical principles such as “take care to do no harm” “practice within areas of competence” and “safeguard the welfare and rights” of patients (APA 2002; NASW 2008). Some practitioners view the promotion of ESTs for PTSD as a benevolent movement informed by research and motivated by a wish to improve standards of care for trauma-exposed, symptomatic individuals. Others have expressed concern that the promotion of ESTs for PTSD is a biased, almost hegemonic, attempt to restrict patient and practitioner choice in mental health care.

In this workshop, the presenters will open with a brief history of the debate between science and practice in PTSD treatment. Next, presenters will review ethical principles that are points of concern among clinicians when making intervention decisions in PTSD. Models for assessing competence in the ESTs for PTSD that are in current use will also be shared. Finally, real-life case scenarios will be used in two ways: (1) to demonstrate ethical decision-making that takes into account the empirical literature, patient characteristics, and clinician variables such as theoretical orientation and extent of EST training; (2) as a way to give audience members an opportunity in small groups to use the proposed decision-making rubric.
Continuing Education Credit (non-MD)

The ISTSS 27th Annual Meeting is co-sponsored by The International Society for Traumatic Stress Studies and The Institute for Continuing Education. Continuing education (CE) credit is offered on a session-by-session basis with full attendance required for attended sessions. Application forms and CE packets will be available onsite. Types of CE credit are listed below.

All CE types offer 26.75 credit hours*. If you have questions regarding continuing education, contact The Institute by phone, +1-800-557-1950; fax, +1-866-990-1960 or email, instconted@aol.com.

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.

** Alcohol/Drug:** The Institute for Continuing Education is accredited by the National Association of Alcohol and Drug Abuse Counselors (NAADAC) to provide continuing education for alcohol and drug abuse counselors. NAADAC Provider No. 00243.

** Social Work:** The Institute for Continuing Education is an organization approved 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.

** Counseling:** The Institute for Continuing Education is an NBCC-approved continuing education provider and a co-sponsor of this event. The Institute for Continuing Education may award NBCC-approved clock/contact hours for programs that meet NBCC requirements. The Institute for Continuing Education maintains responsibility for this program and its content. NBCC Provider No. 5643.

** Psychology:** The Institute for Continuing Education is an organization approved 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.

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

** Continuing Education Registration and Requirements**

A certificate fee of $35 for members and $55 for nonmembers is required and can be applied for by checking the appropriate box on the registration form. You also may pay on site. However, you may not register for credits after November 16, 2011. Continuing education credit will be awarded on a session-by-session basis, with full attendance required for each session attended. To receive continuing education (CE) credit, attendees must sign in/sign out daily and complete the continuing education evaluation packet. 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 CE requirements for licensure renewal.

* The following events/presentations are not available for CE credits: poster sessions**, awards ceremony/business meeting, Internship and postdoctoral networking fair, student lunch, films, town hall meeting and special interest group meetings.

** Author-attended posters sessions are available for CME only.
Disclosure Policy

Boston University School of Medicine asks all individuals involved in the development and presentation of Continuing Medical Education (CME) activities to disclose all relationships with commercial interests. This information is disclosed to CME activity participants. Boston University School of Medicine has procedures to resolve any apparent conflicts of interest. In addition, faculty members are asked to disclose when any discussion of unapproved use of pharmaceuticals and devices takes place. Disclosures for the faculty members who submitted their responses after the printing of this final program will be announced in the meeting addendum included in your on-site registration materials.

Program Committee Disclosures

These program committee members have reported the following financial relationships. No other committee members have financial relationships to report.

Jason DeViva, PhD
Co-author of support book for loved ones of trauma survivors (due out in late Spring)

Mylea Charvat, PhD
Pfizer - Stockholder

Joanne L. Davis, PhD
I wrote a book that was published by Springer on a nightmare treatment and receive royalties from the book.

Cait McMahon
I am employed as a consultant for the Dart Centre for Journalism and Trauma based at Columbia University, New York.

Courtney Landau Fleisher, PhD
I am a minor stock holder in Walgreens.

Melanie D. Hetzel-Riggin, PhD
Grant, DOJ OVW Grants to Reduce Domestic Violence, Dating Violence, Sexual Assault, and Stalking on Campus, advisory board member and program evaluator (total grant amount $300,000).

Charles C. Benight, PhD
BlueSun, Inc. President CEO Equity

Claudia Zayfert, PhD
I receive royalties and author for Guilford Press. I receive consulting fees and royalties for conducting seminars from PESI. I have an ownership interest in PTS, LLC.

Julian D. Ford, PhD
Co-owner with spouse of Advanced Trauma Solutions, Inc.

Paul McLaren,
MB, BS, MA, MSc, MRCPsych
Director OnLine Mental Health; Director Borough Chambers Ltd.; Director Pelham Chambers and; Employee of Priorygroup. None of the above are relevant.

Sonja V. Batten, PhD
I have published a book with Sage Publications.

Sheila Rauch
Soar Technology Consultant

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CIHR, U.S. DoD provide grant support. FRSQ provides a salary award. I am also an occasional consultant to the Quebec board of psychologists.

Diane T. Castillo, PhD
Grant/Research Support

Margaret E. Blaustein, PhD
Guilford Press; royalties on book publication

Judith A. Cohen, MD
Grant funding: NIMH; SAMHSA; Annie E. Casey Foundation. Contracts: PA Department of Mental Health; NY State Office of Mental Health; CA Institute of Mental Health Book royalties: Guilford Press Advisory Board: ADAA; Sesame Street Editorial Board: Journal of Traumatic Stress; Journal of the American Academy of Child and Adolescent Psychiatry.
Disclosure Policy

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Faculty Disclosures

<table>
<thead>
<tr>
<th>Name</th>
<th>Disclosed Relationship</th>
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<tr>
<td>Aker, A. Tamer</td>
<td>Grant/research support</td>
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<td>Alexopoulos, George S.</td>
<td>Grant Support: Forest Stockholder: Johnson &amp; Johnson Speakers Bureau: Forest, Bristol Meyers Squibb, AstraZeneca, Merck, Novartis</td>
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<td>Benight, Charles C.</td>
<td>Both my wife and I are major stock holders in BlueSun, Inc.</td>
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<tr>
<td>Bernardy, Nancy C.</td>
<td>Department of Veterans Affairs Mental Health QUERI Grant Support</td>
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<td>Briere, John</td>
<td>Receive royalties from psychological tests published by Psychological Assessment Resources and will be presenting research using some of these tests.</td>
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<td>Brunet, Alain</td>
<td>CIHR (Canada grant) DoD (US grant), Grants: US Department of Defense – Canada: CIHR</td>
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<tr>
<td>Collie, Claire</td>
<td>My spouse is a salaried employee of Covidien - He is a chemical engineer at their pharmaceutical plant that produces the raw material that other manufacturers purchase to make acetaminophen.</td>
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<td>Danna, Laura</td>
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<td>Davis, Lori L.</td>
<td>Research support from AstraZeneca goes to my institution but not towards my personal salary.</td>
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<td>Douglas Kelley, Susan</td>
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<td>Drake, Robert E.</td>
<td>Dartmouth receives grants from NIMH, NIDA, NIDRR, SSA, SAMHSA and gifts from West Foundation, Segal Foundation, Vail Foundation, Johnson &amp; Johnson Office of Corporate Contributions. I receive no payments from any of these entities.</td>
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<td>Durocher, Rose Marie</td>
<td>Program for Torture Victims</td>
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<td>Foa, Edna B.</td>
<td>I acknowledge support for research from Pfizer, Solvay, Eli Lilly, SmithKline Beecham, GlaxoSmithKline, Cephalon, Bristol Myers Squibb, Forest, Ciba Geigy, Kali-Duphar, American Psychiatric Association. I have also been a speaker for Pfizer, GlaxoSmithKline, Forest Pharmaceuticals, American Psychiatric Association and Jazz Pharmaceuticals. I have been a consultant for Acetelion Pharmaceuticals.</td>
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<td>Goldman Fraser, Jennifer</td>
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<td>Haaland, Kathleen Y.</td>
<td>Department of Defense Grant</td>
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<tr>
<td>Hayes, Andrew F.</td>
<td>Some of the material discussed in the workshop will be contained in a book I am writing for Guilford Press. I have received a grant to assist in the production of the book, and I will receive a percent of sales as royalties after production of the book.</td>
</tr>
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<td>Hembree, Elizabeth</td>
<td>I occasionally receive honoraria for teaching workshops on Prolonged Exposure (PE) and receive royalties from Oxford University Press for sales of PE books (therapist manual and client workbook).</td>
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<td>Hetzel-Riggin, Melanie</td>
<td>Department of Justice Office of Violence Against Women Grant to Reduce Domestic Violence, Dating Violence, Sexual Assault and Stalking on Campus</td>
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<tr>
<td>Holden, Martha J.</td>
<td>I work for Cornell University as a full-time employee. The lessons I am speaking about I have learned through my employment in assisting agencies implement our program model.</td>
</tr>
<tr>
<td>Iverson, Grant</td>
<td>I am a research consultant with Copeman Healthcare Centre (CHC). CHC has designed a personal health online portal for patients. That system was used to collect the archival data that was analyzed for this study. Director of Applied Research at Kognito (paid position)</td>
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<td>Jayasinghe, Nimali</td>
<td>Grant: NIMH K23 MH 090244</td>
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<tr>
<td>Jaycox, Lisa</td>
<td>I am the author of the CBITS program manual, but do not receive royalties.</td>
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Faculty Disclosures

Koenig, Christopher J. Grant/Research support
Lacerdo, Acioly Fundação de Amparo à Pesquisa do Estado de São Paulo (FAPESP), Brazil *** (Grant Research) Eli Lilly *** (Research Grant, Speakers Bureau), Moksha8 (Consultant) Servier *** (Research Grant) AstraZeneca (Research Grant), Abbott (Speakers Bureau)
Lanktree, Cheryl Spouse receives royalties from psychological tests published by Psychological Assessment Resources and will be presenting research using some of these tests.
Lunney, Carole Andrew Hayes (presenter) is my spouse. Portions of the material that will be presented will be published in a book he is writing for Guilford Press, for which he has received a grant to assist in production.
Lynch, Shannon Grant support from the Bureau of Justice Affairs, Department of Justice for this project
Marsac, Meghan I am a co-inventor of the Cellie Coping Kit. The Children’s Hospital of Philadelphia and I have filed a provisional patent for the kit thus hold intellectual property rights. To date, this intellectual property has not resulted in financial gain.
Matthews, Kathleen Grant/Research Support: Research was funded by the American Psychological Association. All funds went directly to research costs.
McFarlane, Alexander NHMRC Program Support Funding from the Australian Department of Defense
McMahon, Cait I am paid as a consultant for Columbia University – Dart Centre for Journalism and Trauma
Meyerowitz, Beth E. The research is funded by a grant from the Templeton Foundation (including some funds for salary/consultation). This funding is to conduct the research and is no way dependent on the findings.
Miller, Donald E. Research is funded by a grant from the Templeton Foundation (including some funds for salary/consultation). This funding is to conduct the research and is no way dependent on the findings.
Morissette, Sandra B. This research was supported by the Department of Veterans Affairs (VA) VISN 17 Center of Excellence for Research on Returning War Veterans, a Merit Award (I01RX000304) to Sandra B. Morissette, PhD, from the Rehabilitation Research and Development Service of the VA Office of Research and Development entitled, “Functional Outcomes in OEF/OIF Veterans with PTSD and Alcohol Misuse”.
Naturale, April Consultant
Pfaff, Danielle L. I am employed by McLean Hospital and am paid through the Shervert Frasier Research Institute.
Rosenblatt, Cirelle K. I am the Director of Neuropsychology at Copeman Healthcare Centre (CHC). CHC has designed a personal health online portal for patients. That system was used to collect the archival data that was analyzed for this study.
Ruzek, Josef I. Grant/Research support, Major stockholder, Board of Directors
Saffer, Boaz Y. I am a research assistant with Copeman Healthcare Centre (CHC). CHC has designed a personal health online portal for patients. That system was used to collect the archival data that was analyzed for this study.
Schafer, Alison World Vision Australia - salary received
Shay, Jonathan Author’s royalty interest in the books *Achilles in Vietnam*, and *Odysseus in America*.
Sheline, Yvette Have served as consultant for Eli Lilly and well as speakers bureau
Shigemura, Jun Speaker: GlaxoSmithKline, Meiji Seika, Otsuka Pharmaceuticals, Pfizer
Shu-Tsen, Liu Grant/Research Support from National Taiwan University Hospital Yunlin Branch
Simon, Naomi Grant: American Foundation for Suicide Prevention Grant: Forest Laboratories Grant: NIMH Speaking/CME: MGH Psychiatry Academy
Slawinski, Tonya T. I own a national crisis response firm which recruits, trains and organizes training for consultants working with first responders. We support the utilization of evidence based practices.
Steinberg, Alan I am a copyright holder for this instrument.
Teng, Ellen Grant/Research Support
Walker, Douglas W. Grant/Research support from SAMHSA.
Wesselmann, Debra I do training and consultation for other therapists in this model of therapy.
Wilcox, Patricia D. Trainer for Risking Connection
Zayfert, Claudia Guilford Press: Royalties from books, Premier Education Solutions: seminar speaker
Zlotnick, Caron Grant research support with Pfizer provided medication (cost less than $10,000) for NIH-funded study
Keynote Addresses

Wednesday, November 2, 6:15 p.m. – 7:30 p.m.
Grand VI, 3rd Floor

We Couldn’t Have Done It Without Them:
Four Pioneers Discuss the Social Bonds that Shaped the Field of Traumatic Stress

Sandra Bloom, MD, Drexel University School of Public Health, Philadelphia, Pennsylvania, USA
Christine Courtois, PhD, Courtois & Associates PC, Washington, D.C., USA
Charles Figley, PhD, Tulane University, New Orleans, Louisiana, USA
Matthew Friedman, MD, PhD, National Center for PTSD, Dartmouth Medical School, White River Junction, Vermont, USA

The specialized field of traumatic stress exists today thanks to the work of many individuals over the last several decades. This panel features four individuals who have played key roles in the creation and evolution of contemporary traumatic stress studies, in deepening our theoretical understanding of trauma and its effects, and in developing and disseminating effective approaches to healing. Without the contributions of these individuals, the trauma field would look very different. Similarly, the contributions of these and other pioneers would not have been possible if not for the people in their lives. Each of the four panelists will talk about the personal, professional and/or clinical relationships that led them to new insights or facilitated their major contributions to the field.

Dr. Sandra L. Bloom is a board-certified psychiatrist, currently associate professor of Health Management and Policy and co-director of the Center for Nonviolence and Social Justice at the School of Public Health of Drexel University in Philadelphia. From 1980 to 2001, Dr. Bloom was the medical director of the Sanctuary programs. Her first book, Creating Sanctuary: Toward the Evolution of Sane Societies described the experience of Dr. Bloom and her colleagues as they learned what it meant to become “trauma-informed”. She currently serves as Distinguished Fellow of Andrus Children’s Center. Dr. Bloom is a past president of the International Society for Traumatic Stress Studies. A new book, Destroying Sanctuary: The Crisis in Human Service Delivery Systems, co-authored with Andrus Children’s Center C.O.O. Brian Farragher, was published by Oxford University Press in 2010. The third volume of the series, Restoring Sanctuary, is due for publication by Oxford University Press in 2011. For more go to www.sanctuaryweb.com, www.cnvsj.org and www.andruschildren.org.

Dr. Charles R. Figley has been a tenured full professor since 1983 (at Purdue University), two years before he would lead the founding of the International Society for Traumatic Stress Studies in 1985. He is currently the Paul Henry Kurzweg, MD, Distinguished Chair in Disaster Mental Health at Tulane University, co-director of the Disaster Resilience Leadership Academy (www.tulanedrla.org), and Associate Dean for Research, Graduate School of Social Work. He won the last Pioneer Award by the Society in 1994 in recognition of his scholarly contributions including his paradigm-changing book in 1978, Stress Disorders among Vietnam Veterans. He served as founding editor of the Journal of Traumatic Stress after serving two years as founding president of the Society. He also founded two other refereed journals (Family Psychotherapy and Traumatology).

Dr. Christine A. Courtois is a psychologist in independent practice in Washington, D.C. She received her PhD from the University of Maryland in College Park, in 1979. Dr. Courtois is president of Division 56 (Psychological Trauma) of the American Psychological Association and has recently published a revision of Healing the Incest Wound: Adult Survivors in Therapy [2010, 1988] and Treating Complex Traumatic Stress Disorders: An Evidence-Based Guide (2009) co-edited with Dr. Julian Ford. She is currently co-authoring a text on the treatment of complex trauma with Dr. Ford (Guilford), scheduled to be published in 2012, co-editing another book with Dr. Ford on the treatment of complex traumatic stress disorders in children (Guilford) to be published in 2012 and co-editing a book with Drs. Donald Walker and Jamie Aten on trauma and spirituality (American Psychological Association Books) to be published in 2013. She is the associate editor of the APA journal, Psychological Trauma: Theory, Research, Practice, & Policy. She is co-founder (in 1990, with Joan Turkus, MD) of The CENTER: Post-Traumatic Disorders Program, Washington, D.C. where she served as clinical and training director for 16 years.

Dr. Matthew Friedman is executive director of the U.S. Department of Veterans Affairs National Center for PTSD and professor of Psychiatry and of Pharmacology and Toxicology at Dartmouth Medical School. He has worked with PTSD patients as a clinician and researcher for 35 years and has published extensively on stress and PTSD, biological psychiatry, psychopharmacology and clinical outcome studies on depression, anxiety, schizophrenia and chemical dependency. He has over 200 publications, including 23 books and monographs. Listed in The Best Doctors in America, he is a Distinguished Lifetime Fellow of the American Psychiatric Association, past president of the International Society for Traumatic Stress Studies (ISTSS), past chair of the scientific advisory board of the Anxiety Disorders Association of America, a member of APA’s DSM-5 Anxiety Disorders Work Group (and chair of the Trauma and Dissociative Disorders SubWork Group). He has served on many VA, DoD and NIMH research, education and policy committees. He has received many honors including the ISTSS Lifetime Achievement Award in 1999 and the ISTSS Public Advocacy Award in 2009. He is a finalist for the 2011 Samuel J. Heyman Service to America Medal in the Career Achievement Division.
**Keynote Addresses**

**Thursday, November 3, 9:30 a.m. – 10:45 a.m.**

**Harborside Ballroom, 4th Floor**

**The Interrupters: A Conversation on the Cycle of Urban Violence and the Potential for Social Connections to Stop It**

**Alex Kotlowitz**, Author of *There Are No Children Here*; Producer, *The Interrupters*, Oak Park, Illinois, USA

**Eddie Bocanegra**, Violence Interrupter, CeaseFire, Chicago, Illinois, USA

In this presentation, Alex Kotlowitz and Eddie Bocanegra, producer and subject of the acclaimed documentary, *The Interrupters*, will share their thoughts about the ways in which trauma shapes the lives of individuals caught up in urban violence, and how social connections may be key in preventing shootings. Kotlowitz will discuss his experiences over the past 20 years reporting and writing on the stubborn persistence of urban violence in America, where shootings in concentrated areas are so pervasive that gun violence forms its own culture, creating its own language, signage and rituals. He will then be joined by Eddie Bocanegra, who works for a Chicago public health program, CeaseFire, and who is a subject of Kotlowitz’s new film, *The Interrupters*. The movie, a collaboration with Director Steve James (*Hoop Dreams*), spends a year with Eddie and two colleagues as they grapple with the violence in their neighborhoods and in their own lives. Together, Kotlowitz and Bocanegra will talk about the effects of the violence on the spirit of both individuals and communities, our tendency to underestimate those effects and the need for solutions that incorporate an understanding and cultivation of the social fabric of affected communities. A screening of the *The Interrupters* for ISTSS conference attendees will be held on the evening of Thursday, November 3, 2011.

**Alex Kotlowitz** is the author of *Never a City So Real*, *The Other Side of the River* and the national bestseller *There Are No Children Here*, which The New York Public Library selected as one of the 150 most important books of the twentieth century. *There Are No Children Here* also received the Carl Sandburg Award, a Christopher Award and the Helen B. Bernstein Award for Excellence in Journalism. *The Other Side of the River* received the Chicago Tribune’s Heartland Prize for Nonfiction.

Kotlowitz, whose stories one reviewer wrote “inform the heart,” is a regular contributor to *The New York Times Magazine* and Public Radio’s *This American Life*. His work has also appeared in *The New Yorker*, *Granta*, *The Washington Post* and the Chicago Tribune, as well as on PBS and NPR. His play *An Unobstructed View* (co-authored with Amy Dorn) premiered in Chicago in June of 2003. He is a writer-in-residence at Northwestern University.

**Eddie Bocanegra** is a violence interrupter for CeaseFire at the University of Illinois at Chicago. He specializes in high-risk mediation and intervention with youth living on the southwest side of Chicago. Bocanegra’s responsibilities include mentoring, court advocacy and development of programs to promote rehabilitation services in the Latino community. His primary objective is conflict resolution. Universities, community schools and businesses have invited Bocanegra to present workshops on violence prevention, gang awareness, conflict resolution and issues on juvenile justice. In addition to his work with CeaseFire, Bocanegra is a renowned artist and participates in different art initiatives in the Latino community. He volunteers with Urban Life Skills, a mentoring program for high-risk youth in the Chicago neighborhood of Little Village. Currently Bocanegra is finishing a social work degree at Northeastern Illinois University and plans on pursuing a doctoral degree.
Keynote Addresses

Friday, November 4, 9:30 a.m. – 10:45 a.m.
Harborside A/B/C, 4th Floor

Throwing Off the Burden of Shame:
Social Bonds and Recovery from the Traumas of Gender-Based Violence

Judith Lewis Herman, MD, Clinical Professor of Psychiatry, Harvard Medical School, Cambridge, Massachusetts, USA

In 1995, the Fourth World Conference on Women in Beijing denounced violence against women as a worldwide obstacle to equality and peace, stating that “in all societies...women and girls are subjected to physical, sexual and psychological abuse that cuts across lines of income, class and culture,” and called on all member states to put an end to this, the most common form of human rights violation. The fact that such a conference could take place was a testament to the development of a worldwide movement for women’s liberation. In the U.S., since the 1970s, feminist mental health professionals have been active in the movement to raise awareness of both the scope of gender-based violence and the profound psychological effects. This lecture will review the epidemiology of this violence and the social context of shame, isolation and secrecy in which it occurs. The concept of complex PTSD, which grew out of clinical work with survivors, will be discussed. Finally, the lecture will focus on pathways to recovery, with special attention to the role of groups in alleviating shame and creating a bridge to new community.

Dr. Judith Lewis Herman is clinical professor of psychiatry at Harvard Medical School and director of training at the Victims of Violence Program at The Cambridge Hospital, Cambridge, Massachusetts. Herman received her medical degree at Harvard Medical School and her training in general and community psychiatry at Boston University Medical Center. She is also a founding member of the Women’s Mental Health Collective in Cambridge, Massachusetts. Her work focuses on the understanding and treatment of psychological trauma, particularly prolonged, repeated, interpersonal trauma. A pioneer in the study of Post-Traumatic stress disorder and the sexual abuse of women and children, she has lectured widely on these subjects. She is the author of two groundbreaking, award-winning books: Father-Daughter Incest (Harvard University Press, 1981), and Trauma and Recovery (Basic Books, 1992), in which she delineated the concept of Complex Post-Traumatic Stress Disorder and its treatment. She is the recipient of the 1996 Lifetime Achievement Award from the International Society for Traumatic Stress Studies and the 2000 Woman in Science Award from the American Medical Women’s Association. In 2001-2002, Herman was a fellow at the Radcliffe Institute for Advanced Study, where she studied how survivors of violent crimes come to terms with those who have abused them. The American Psychiatric Association named Herman a Distinguished Fellow in 2003 and a Distinguished Life Fellow in 2007. In 2010 she received the Alexandra Symonds Award from the American Psychiatric Association for national and international contributions to women’s mental health. Herman’s latest book, with co-authors Michaela Mendelsohn, Emily Schatzow, Melissa Coco, Diya Kallivavalil, and Jocelyn Levitan is The Trauma Recovery Group: A Guide for Practitioners (The Guilford Press, 2011). Throughout her career, Herman’s work has eloquently and powerfully made the case that psychological trauma can only be understood in social context.
Keynote Addresses

**Epigenetic Consequences of Adverse Early Social Experiences in Primates**

Stephen J. Suomi, PhD, National Institute of Child Health & Human Development, National Institutes of Health, U.S. Department of Health and Human Services, Bethesda, Maryland, USA

Early social experiences can have lasting effects on primate bio-behavioral development, especially in the context of subsequent social stress. For example, rhesus monkeys raised in the absence of their biological mother (but with access to peers) or raised by neglectful mothers show relatively normal bio-behavioral development when subsequently maintained in benign social environments, but under socially stressful circumstances (e.g., social separation) they typically exhibit excessive fearfulness and/or aggression, heightened hypothalamic–pituitary–adrenocortical (HPA) activity and reduced serotonin metabolism into adulthood.

Moreover, they differ from monkeys not experiencing such early social adversity in both brain structure and function. Some of these characteristics appear to be transmitted to their offspring via non-genetic (most likely epigenetic) mechanisms. Recent technological advances in genomics have made it possible to examine genome-wide expression, and preliminary analyses suggest that such adverse early experiences affect approximately one fifth of the entire rhesus monkey genome (more than 4,400 individual genes), both in the brain and in white blood cells. Given that many of the behavioral and biological consequences of adverse early social experience are largely reversible following targeted environmental interventions, the question of whether the patterns of gene expression in these monkeys are also reversible is under intense current investigation.

Dr. Stephen J. Suomi is chief of the Laboratory of Comparative Ethology at the Eunice Kennedy Shriver National Institute of Child Health & Human Development (NICHD), National Institutes of Health (NIH) in Bethesda, Maryland. He also holds research professorships at the University of Virginia, the University of Maryland, College Park, the Johns Hopkins University, Georgetown University, the Pennsylvania State University, and the University of Maryland, Baltimore County. Dr. Suomi earned his BA in psychology at Stanford University in 1968, and his MA and PhD in psychology at the University of Wisconsin-Madison in 1969 and 1971, respectively. He then joined the psychology faculty at the University of Wisconsin-Madison, where he eventually attained the rank of professor before moving to the NICHD in 1983.

Dr. Suomi’s initial postdoctoral research successfully reversed the adverse effects of early social isolation, previously thought to be permanent, in rhesus monkeys. His subsequent research at Wisconsin led to his election as Fellow in the American Association for the Advancement of Science “for major contributions to the understanding of social factors that influence the psychological development of nonhuman primates.” His present research at the NICHD focuses on three general issues: the interaction between genetic and environmental factors in shaping individual developmental trajectories, the issue of continuity vs. change and the relative stability of individual differences throughout development and the degree to which findings from monkeys studied in captivity generalize not only to monkeys living in the wild but also to humans living in different cultures.

Throughout his professional career, Dr. Suomi has been the recipient of numerous awards and honors, the most recent of which include the Donald O. Hebb Award from the American Psychological Association, the Distinguished Primatologist Award from the American Society of Primatologists, and the Arnold Pfeffer Prize from the International Society of Neuropsychoanalysis. To date, he has authored or co-authored over 400 articles published in scientific journals and chapters in edited volumes.
The Great Eastern Japan Earthquake: Responses of Japanese Mental Health Professionals and the Japanese Society of Traumatic Stress Studies (JSTSS)

Hiroshi Kato, MD, PhD; Masaharu Maeda, MD, PhD; Toshiko Kamo, MD, PhD; Yoshiharu Kim, MD, PhD; Takako Konishi, MD, PhD; Jun Shigemura, MD, PhD; Tomoko Osawa, PhD; Robert J. Ursano, MD

1Hyogo Institute for Traumatic Stress, Kobe, Japan
2Kurume University, School of Medicine, Kurume, Japan
3Tokyo Women’s University, Tokyo, Japan
4National Center of Neurology and Psychiatry, Tokyo, Japan
5Musashino University, Tokyo, Japan
6National Defense Medical College, Tokorozawa, Japan
7Uniformed Services University of the Health Sciences, Bethesda, Maryland, USA

On March 11, 2011, a magnitude-9.0 earthquake struck the eastern region of Japan. The subsequent tsunamis, fires, and accidents at TEPCO Fukushima Daiichi Nuclear Power Plant brought complexity to this disaster. The damages were devastating; as of June 2011, more than 15,000 individuals were identified dead, over 7,000 were still missing, and about 125,000 people were still in temporary evacuation shelters. The country had faced unprecedented needs for mental health support among the victims as well as the enormous number of disaster workers deployed to the affected regions. This symposium will highlight: 1) responses and future visions of Japanese mental health professionals, with special focus on the Japanese Society for Traumatic Stress Studies (JSTSS), 2) public responses to nuclear fear, and 3) mental health challenges of disaster workers.

Psychological Support After Major Disaster in Japan: From Kobe and Tohoku Experiences

Hiroshi Kato, MD, PhD; Masaharu Maeda, MD, PhD; Toshiko Kamo, MD, PhD; Yoshiharu Kim, MD, PhD

1Hyogo Institute for Traumatic Stress, Kobe, Japan
2Kurume University, School of Medicine, Kurume, Japan
3Tokyo Women’s University, Tokyo, Japan
4National Center of Neurology and Psychiatry, Tokyo, Japan

Japan has been struck by many natural disasters not limited to earthquakes but typhoon, flood, and volcano eruption. From these experiences, the country has built a safety infrastructure such as disaster prevention/reduction schemes and prediction of earthquake. However, it was only in the 1990s when light was shed on the issue of psychological support for the survivors. It all started from the Kobe Earthquake in 1995. The services which were provided then were an application of a regional healthcare system that had been in existence since the 1950s. Due to the stigma attached to psychological issues in the society, mental health support had to be skillfully woven into comprehensive healthcare service. Indeed, this proved to be the most effective and efficient way to provide psychological support services to the Japanese survivor. As a result, after most natural disasters since 1995, the same approach has been utilized from an early stage of post disaster.

The Tohoku Earthquake and Tsunami was an extremely difficult disaster to deal with; it was not only outside of the scope of our assumption, but the destruction caused by it shattered the existing regional healthcare system. Most of the disaster-affected areas are under-populated and both medical and regional healthcare systems were vulnerable from the very start. Most medical institutions and public health systems were directly damaged by the recent disaster, making it extremely difficult to recover the hubs for service provision. On top of that, the nuclear plant accident created thousands of displaced people; lack of future vision about how to put their lives back in order even after half a year since the accident added more stress.

In this presentation, after showing the extent of damage caused by this disaster, efforts made by Japanese professionals since March 11 and future plans for supporting disaster-affected areas will be discussed.
Featured Symposia (continued)

Presenters are underlined and discussants are italicized: If serving in both roles, the are both underlined and italicized.

The Great Eastern Japan Earthquake: Challenging Roles of Disaster Workers

Jun Shigemura, MD, PhD\(^1\); Tomoko Osawa, PhD\(^2\)
\(^1\)National Defense Medical College, Tokorozawa, Japan
\(^2\)Hyogo Institute of Traumatic Stress, Kobe, Japan

Japan’s March 11, 2011, disaster became the worst natural disaster the country had faced in centuries. While the emergency is still evolving, relief efforts have been challenging. The impact has been massive and wide-ranging, with more than 23,000 killed or missing. The local governments were literally swept away, and the majority of local disaster workers were also disaster victims. More than 100,000 uniformed troops were deployed to the affected area, as well as 15,000 medical professionals within the first month post-disaster. Police, fire, and coast guard personnel were also deployed from all over the country to support the local disaster workers. However, their work roles have been unprecedented; they have had to deal with an enormous number of bodies and subsequent grief, along with short- and long-term safety concerns about irradiation.

In Japan, mental health studies of disaster workers have been revealing especially after the 1995 Hanshin-Awaji (Kobe) Earthquake. In a study of firefighters (n = 1096), prior experience of Kobe Earthquake and line of duty death were associated with traumatic outcomes (Osawa, 2007). In a study of Kobe nurses (n = 825), one out of seven subjects exhibited traumatic symptoms ten years after the earthquake (Kawamura, 2006). Workers responding to the 2011 disaster are likely to face similar challenges. In this presentation, the need for and progress toward a comprehensive, long-term support system to provide care to these people will be discussed.

Friday, November 4, 8:00 a.m. – 9:15 a.m.
Grand VI, 3rd Floor

The September 11, 2001 Terrorist Attacks: Ten Years After

Marylene Claitre, PhD\(^1\); Yuval Neria, PhD\(^2\); Alison Holman, PhD, FNP\(^3\); Roxanne Silver, PhD\(^4\); Claude Chemtob, PhD\(^5\)
\(^1\)NCPTSD-Dissemination & Education Div., Palo Alto Healthcare System, Menlo Park, California, USA
\(^2\)Columbia University Department of Psychiatry and New York State Psychiatric Institute, New York, New York, USA
\(^3\)University of California, Irvine, California, USA
\(^4\)NYU School of Medicine, New York, New York, USA
\(^5\)Columbia University, New York, New York, USA

In recognition of the 10th anniversary of the September 11, 2001 (9/11) terrorist attacks on the World Trade Center and the Pentagon, this panel provides clinical, epidemiological and social-genetic perspectives on risk, resiliency and recovery across the 9/11 decade. The panel will report on the results of a nationwide longitudinal study of Post-Traumatic stress across the past 10 years. A detailed analysis of the effects of exposure among adolescents, children and families regarding suicidality and PTSD will be presented. In addition, both clinical and research perspectives and experiences regarding the treatment of PTSD, depression and bereavement will be discussed. Lastly, an analysis of 9/11 as an experience of collective stress will be proposed with a specific focus on the interaction of social constraints and genetic vulnerability on mental health.

9/11 Mental Health: What Have We Learned in the Last Decade

Neria, Yuval, PhD
Columbia University, New York, New York, USA

The September 11, 2001 (9/11) terrorist attacks were unprecedented in their magnitude and aftermath. In the wake of the attacks, researchers reported a wide range of mental and physical health outcomes, with Post-Traumatic stress disorder (PTSD) the most commonly studied. While the association between disaster related trauma, PTSD and depression has gained considerable empirical support, much less is known about the other psychiatric disorders in the wake of 9/11. Moreover, since most 9/11 studies were cross sectional or short term little is known about the long-term course of the attacks. Data from a number of studies conducted among directly exposed adults will be presented. Findings regarding course of illness, relationships between type of trauma and a range of psychiatric disorders (e.g., PTSD, depression, generalized anxiety disorder, functional impairment and complicated grief) will be described. The presentation will discuss the need to extend our understanding of the expected course of illness post disaster, including recovery and persistence of symptoms, to expand the framework of trauma related disorders beyond PTSD, and to develop and test a range of trauma related interventions that will appropriately address trauma and loss related mental health problems in the aftermath of disasters.

Social Constraints, Genetic Vulnerability, and Mental Health Following Collective Stress

Alison E. Holman, PhD
University of California, Irvine, Irvine, California, USA

A repeat-length polymorphism of the serotonin promoter gene (5-HTTLPR) has been associated with depression and Post-Traumatic stress disorder (PTSD) in trauma-exposed individuals reporting unsupportive social environments. We examine the contributions of the 5-HTTLPR genotype and social constraints to Post-Traumatic stress (PTS) symptoms following collective stress in a national sample following the September 11, 2001 (9/11) terrorist attacks. Saliva was collected by mail from 711 respondents [European-American subsample N = 463] of a large national probability sample of 2,592 adults. Respondents completed web-based assessments of pre-9/11 mental/physical health, acute stress 9 to 23 days post-9/11, PTS symptoms, and social constraints on disclosure regarding fears of future terrorist attacks 2-3 years post-9/11. Social constraints were positively associated with PTS symptoms 2-3 years post-9/11. The triallelic 5-HTTLPR genotype was not directly associated with PTS symptoms but it interacted with social constraints to predict PTS symptoms 2-3 years post-9/11: social constraints were more strongly associated with PTS symptoms for individuals with any ‘s’/‘g’ allele than for homozygous ‘a’/‘a’ individuals. Constraints on disclosing fears about future terrorism moderate the 5-HTTLPR genotype-PTS symptom association even when indirectly exposed to collective stress.
**Featured Symposia (continued)**

Presenters are underlined and discussants are italicized: If serving in both roles, the are both underlined and italicized.

**The Aftermath of Terror: A Nationwide Longitudinal Study of Post-Traumatic Stress Across the 9/11 Decade**

**Roxane Cohen-Silver, PhD**
Department of Psychology & Social Behavior, University of California, Irvine, California, USA

Existing research on consequences of the September 11, 2001 (9/11) terrorist attacks indicates that both directly and indirectly-exposed Americans experienced adverse psychological outcomes in the short-term. Little is known about the potential long-term psychological impact of this collective trauma. In December, 2006, we began a three-wave longitudinal study of a nationally representative sample of Americans (N=1613) to examine long-term effects of 9/11. We compared findings to data collected from a representative national sample in the three years following the attacks (N=2054). Results indicate a relatively stable pattern of 9/11-related Post-Traumatic stress (PTS) symptoms for six years following the attacks. Long-term 9/11-related PTS was associated with both direct and indirect (live television) exposure to the attacks. Fear and worry regarding future terrorism seven years post-9/11 was predicted by 9/11-related PTS symptoms five years after the attacks (controlling for demographics, global distress, prior negative life events, and exposure to 9/11). Finally, individuals who reported elevated levels of 9/11-related PTS symptoms five years after the attacks were the most likely to report PTS following a subsequent collective stressor (the 2009-10 economic meltdown), controlling for prior distress levels, economic stressors, and economic hardship. The psychological legacy of 9/11 was apparent among many Americans throughout the decade that followed.

**Intervening with Children and Adolescents Exposed to the World Trade Center Attacks**

**Claude Chemtob, PhD**
New York University School of Medicine, New York, New York, USA

This presentation will report on studies of adolescents and preschool children conducted 2 – 3 years following the World Trade Center (WTC) attacks in New York City. Our studies of adolescents highlighted the importance of focusing on functional impairment in addition to symptoms, the significant mismatch between adolescent level of need for services and services received, and suicidal ideation. With respect to service mismatch, we found that directly exposed adolescents reporting increased substance abuse and functional impairment were less likely to receive services than adolescents without symptoms and impairment. With respect to suicidal ideation in adolescents, we found that exposure to attack-related traumatic events increased risk for both suicidal ideation and PTSD. Findings indicated that probable PTSD was associated with increased risk for suicidal ideation. However, specific types of trauma exposure differentially predicted suicidal ideation and PTSD. Similar data obtained from a large sample of adolescents exposed to terrorism in Israel will be presented. We will also present data regarding the impact of WTC attack direct exposure on preschool children and their mothers. Preschool children with prior trauma exposure showed substantial clinical impairment compared to those similarly exposed to the attacks without a prior history of trauma exposure. Using SEM, we also compared the relative impact on clinical impairment of direct exposure versus exposure to WTC related depression or PTSD in their mothers on preschool children exposed to the attacks, as well as the relative impact of maternal depression versus PTSD on child functioning. Maternal psychopathology had a greater impact on child functioning than direct exposure. Maternal PTSD was associated with greater child behavior problems across more domains than maternal depression. Finally, drawing on parallel Israeli research, we show that the arousal cluster of PTSD accounts for the association of maternal PTSD with child behavior problems.
Featured Presentations

Presenters are underlined and discussants are italicized: If serving in both roles, they are both underlined and italicized.

Thursday, November 3, 11:00 a.m. – 12:15 p.m.
Grand VI, 3rd Floor

Preventing Psychological and Moral Injury in Military Service: Summing Up
Jonathan Shay, MD, PhD
MacArthur Fellow, Newton, Massachusetts, USA

(Prevent, Mil/Vets)  I
Technical Level: Introductory

This presentation is the presenter's summary of 15 years of writing, speaking and working with military organizations on preventing psychological and moral injury in military service. The principles explained here may have broader applications, especially to occupational risks of traumatic stress, such as in journalism, civilian uniformed services, psychological and physical health care, disaster relief, but attendees will have to translate for their own settings. Three things protect the mind and spirit of people who train for and go to war:

- Positive qualities of community in the face-to-face unit (“cohesion” in military speak)
- Expert, ethical and properly supported leadership
- Prolonged, cumulative and highly realistic training for what people have to do and face

The presenter’s work has focused on changing policy, practice and culture within military organizations in ways that remove obstacles to and actively promote the achievement of the aforementioned factors. The presentation will offer concrete examples of the above:

- Train people together, send them into danger together, bring them home together
- Sleep
- Careerism as most destructive leadership ethical malpractice
- Interaction of cohesion and training: “Iron law of cumulative training”

Prevention engages the whole human critter: brain, mind, society, culture and dynamics of mental health both during and after military deployment.

Thursday, November 3, 2:00 p.m. – 3:15 p.m.
Grand VI, 3rd Floor

Mental Health Implications of the Gulf Oil Spill
Joy Osofsky, PhD1; Howard Osofsky, MD, PhD1; Anthony Speier, PhD2; Bernard D. Goldstein, MD3; Nicole Lurie, MD4
1Louisiana State University Health Sciences Center, New Orleans, Louisiana, USA
2Office of Behavioral Health, Baton Rouge, Louisiana, USA
3University of Pittsburgh, Pittsburgh, Pennsylvania, USA
4U.S. Department of Health and Human Services, Washington, D.C., USA

(Social, Disaster)  M
Technical Level: Intermediate

This presentation will focus on the Deepwater Horizon Oil Spill, mental health symptoms soon after the disaster, potential future sequelae and efforts to address symptoms and build individual and community resilience. Louisiana State University Health Sciences Center Department of Psychiatry has been conducting mental health needs assessments in heavily impacted areas for the State Department of Social Services and Office of Behavioral Health. Results show the greatest effects on mental health relate to disruption on lives, work and relationships, including family and social engagement, with increased symptoms of anxiety, depression and post-traumatic stress. For communities impacted by Hurricane Katrina, previous losses, including relationships with family, friends and community were associated with negative mental health outcomes.

Conversely, the ability to rebound after adversity was associated with better mental health outcomes. Current efforts in Louisiana, together with other Gulf States, and the Department of Health and Human Services, including National Institutes of Health, Center for Disease Control and Substance Abuse and Mental Health Services Administration are addressing questions related to mental health, medical, ecological and toxicological concerns. Enhanced understanding of mental health effects following the Gulf Oil Spill will help determine directions for mental health services, contribute to knowledge of complex traumatization during the lifespan and factors, such as social support, that contribute to resilience and the ability to rebound following adversity.
Featured Presentations (continued)

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Thursday, November 3, 8:00 p.m. – 10:30 p.m.
Grand VI, 3rd Floor

Movie: The Interrupters

[Social, Violence] M

An award-winning film from Steve James (Hoop Dreams) and Alex Kotlowitz (There Are No Children Here) that tells the moving and surprising story of three “violence interrupters” in Chicago who with bravado, humility and even humor try to protect their communities from the violence they once employed.

Violence Interrupter Eddie Bocanegra, Producer Alex Kotlowitz and Kartemquin Films Founder and Artistic Director Gordon Quinn will be in attendance at this exclusive screening for conference attendees.

Friday, November 4, 1:00 p.m. – 2:00 p.m.
Laurel A/B, 4th Floor

ISTSS Early Career Panel

Adam Brown, PhD1; Amit Etkin, MD2; Shira Maguen, PhD3; Thomas Neylan, MD2; Angela Nickerson, PhD4

1New York University, New York, New York, USA
2Stanford University, Palo Alto, California, USA
3University of California San Francisco; San Francisco VA Medical Center, San Francisco, California, USA
4VA Boston and the University of New South Wales, Sydney, New South Wales, Australia

[Train/Ed/Dis, Caregvr] I

Technical Level: Introductory

The transition from graduate training and postdoctoral fellowships to a career in the field of traumatic stress brings with it a sense of accomplishment, along with many new challenges and opportunities. This is especially true at a time when mental health professions in general, and the field of traumatic stress in particular, are rapidly changing, and at a time when balancing personal and professional goals can be quite complex. This panel serves as an opportunity to hear speakers from various career paths and stages discuss their personal experiences and offer advice on navigating the many choices faced by those entering this phase of their career. Panelists will discuss how changes in the conceptual framework of PTSD are impacting professional goals and opportunities, obtaining early career funding, living and working internationally, creating work-life balance, mentorship and supervision, and the expectations of principal investigators, departments and institutions. This panel will also serve as an opportunity for early career professionals, as well as students and trainees, to network and discuss their own experiences.

Friday, November 4, 2:00 p.m. – 3:15 p.m.
Grand VI, 3rd Floor

Movie: Prisoner of Her Past Part I: Introduction and Screening

3:30 p.m. – 4:45 p.m.
Grand VI, 3rd Floor

Movie: Prisoner of Her Past Part II: Panel & Audience Discussion

Filmmakers Howard Reich & Gordon Quinn, Harold Kudler, MD, Joseph Albeck, MD, Yael Danieli, PhD, Howard Ososky, MD, PhD, Joy Ososky, PhD

[Clin/Res, Mil/Vets] M

Film screening of the award-winning documentary about the haunting story of a secret childhood trauma surfacing, 60 years later, to unravel the life of Holocaust survivor Sonia Reich, followed by panel and audience discussion.

On a frigid evening in February 2001, a 69-year-old woman packed her clothes into two shopping bags, put on her coat, locked the door to her Chicago area home and fled. She told the police officers who found her and the doctors who evaluated her that someone was trying to kill her. In November 2003, her son, Chicago Tribune jazz critic, Howard Reich, who, had been told as a child to keep his Jewishness a secret, published a widely-read news article linking his mother’s behavior to her childhood Holocaust experiences and suggesting that she suffers a prevalent, but grievously under-recognized, disorder: Late-Onset PTSD. Reich’s article and follow-up book uncovering his mother’s past and exploring his relationship with her have now been transformed into an award-winning documentary by Kartemquin Films, producers of the acclaimed Hoop Dreams. Part I of this presentation of the ISTSS Special Interest Group on Intergenerational Transmission of Trauma and Resilience begins with an introduction by Howard Reich and the film’s producers followed by a screening of Prisoner of Her Past. Part II will feature a panel discussion of the film.

Following the screening of the award-winning documentary, Prisoner of Her Past, in Part I of this presentation of the ISTSS Special Interest Group on Intergenerational Transmission of Trauma and Resilience, Part II features an expert panel which will discuss the film and its implications for the field of traumatic stress. Participating will be child psychologist Joy Ososky and child psychiatrist Howard Ososky whose work with child survivors of Hurricane Katrina is featured in the film; psychiatrist and poet Joseph Albeck whose medical and creative writing are informed by his experience as the child of Holocaust Survivors; and psychologist Yael Danieli whose seminal work on intergenerational transmission of trauma and resilience and on the “conspiracy of silence” surrounding trauma in many families provides a theoretical framework for this session. Following brief comments from each, panelists will engage the filmmakers and the audience in discussion of intergenerational transmission and the concept of Late-Onset PTSD.
Featured Presentations (continued)

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Friday, November 4, from 7:30 p.m. – 9:00 p.m.
Harborside A/B/C, 4th Floor

Kathak Dance Group Performance

Lynn C. Waelde, PhD
Pacific Graduate School of Psychology, Palo Alto University, Palo Alto, California, USA

Forging Social Bonds Through Dance: The Chitresh Das Dance Company in the Red Light District of Kolkata

Join us for a video documentary, lecture and dance demonstration offered by principal dancers of the Chitresh Das Dance Company who have used an Indian classical dance form to empower children of prostitutes in the Red Light District of Kolkata.

Charlotte Moraga is a Kathak artist, educator and choreographer. She began her training with master Kathak artist and guru Pandit Chitresh Das at San Francisco State University in 1992 and continued to study deeply in the guru-shishya parampara (one-to-one intensive study). Prior to that Charlotte was trained in ballet and jazz dance from the age of nine in Florida, Atlanta and New York. Ms. Moraga was awarded a San Francisco Foundation Shenson Performing Arts Fellowship recognizing her artistic excellence and impact on the field of Kathak in 2007. In 2009, she received a residency for the Performing Diaspora Project at CounterPulse and a CA$H grant to support her original work, a collaboration with saxophonist, Prasant Radhakrishnan. Ms. Moraga is currently director of the Chhandam Youth Dance Company and a senior instructor at the Chhandam School of Kathak Dance. In addition, Ms. Moraga is largely responsible for developing the CDDC’s arts education program. Charlotte has written several articles about Kathak for dance publications such as Dance Spirit, Dance Magazine and In Dance, published by Dancer’s Group and Dance USA’s ejournal.

Rachna Nivas is a soloist, a member of the internationally touring Chitresh Das Dance Company (CDDC), a community leader and senior teacher. She has been studying directly under world-renowned Kathak master, Pandit Chitresh Das, for 13 years. She brings a fierce passion and energy to her performances, displaying the depth of her training under Pandit Das and emerging as a powerful woman in the next generation of Kathak artists.

In particular, Rachna is fast gaining international attention for her exhilarating demonstrations of Kathak Yoga, a groundbreaking innovation by her Guru. She is a pioneer in playing harmonium while simultaneously singing and dancing sophisticated rhythmical mathematics.

Rachna is currently a senior instructor and co-director of the Chhhandam School of Kathak, one of the largest classical Indian dance institutions in the world with over 600 students. In particular, she has been an instrumental community leader in building the Fremont branch of Chhandam, a cornerstone community of 200 students where families study and learn about the rich history, philosophy, and rhythmical mathematics of India through the art of Kathak.

Anjali Nath is a disciple of Kathak maestro, Pandit Chitresh Das and a member of the Chitresh Das Dance Company (CDDC). Anjali was introduced to the dynamic art of Kathak by Gretchen Hayden, senior disciple of Pandit Das, in 1997. Since moving to the Bay Area and joining CDDC in 2003, Anjali has performed in numerous school and community arts education programs, several award-winning company productions and has toured with the company both nationally and throughout India. Anjali directed the San Jose branch of Chhandam for over 6 years and is a senior instructor. She strives to highlight the relevance, universality and overall benefits of the multi-faceted art of Kathak for people of all ages and cultures and help others realize their highest potential through the dance.

Saturday, November 5, 8:00 a.m. – 9:15 p.m.
Grand VI, 3rd Floor

ISTSS Treatment Guidelines for Complex Trauma

Marylène Cloitre, PhD1; Christine Courtois, PhD2; Stuart Turner, MD, MA, FRCP, FRCPsych3; Ruth Lanius, MD, PhD4; Julian Ford, PhD5
1NCPTSD-Dissemination & Education Div, Palo Alto Healthcare System, Menlo Park, California, USA
2Courtois & Associates, PC, Washington, D.C., USA
3Trauma Clinic, London, United Kingdom
4University Hospital, London Health Science Centre, London, Ontario, Canada
5University of Connecticut Health Center, Farmington, Connecticut, USA

Technical Level: Intermediate

The proposed ISTSS treatment guidelines for complex PTSD and related disorders will be presented (Cloitre). The treatment guidelines provide recommendations for the treatment of populations who have been exposed to prolonged and typically multiple forms of interpersonal trauma. Particular attention will be given to the treatment of individuals with early life trauma (Courtois) and to the application of the guidelines to refugees and others who have been exposed to torture, genocide and other forms of organized violence (Turner). Neurobiological evidence for the impact of prolonged trauma on capacity for emotional awareness and modulation as well as social bonds and relational capacities will be presented (Lanius). The panel will conclude with a summary of future directions in the treatment of and research about complex trauma populations (Ford).
Master Clinician Series

Presenters are underlined and discussants are italicized: If serving in both roles, the are both underlined and italicized.

Thursday, November 3, 2:00 p.m. – 3:15 p.m.
Harborside Ballroom, 4th Floor

Treating Trauma: Helping the Entire Human Organism Feel Safe and Live in the Present

Bessel van der Kolk, MD
Justice Resource Institute, Boston, Massachusetts, USA

Technical Level: Intermediate

Trauma affects the entire human organism, which gets stuck in neurobiological, immunological and relational survival modes. Neuroscience research shows that the brain regions most affected by trauma are involved in attention and perception, biasing the organism into perceiving threat and annihilation. These subcortical processes are independent from conscious appraisal or conscious control. This presentation will focus on evidence based treatments that address basic issues of safety, threat appraisal and embodied awareness, illustrated by EMDR, meditation, yoga, theater, martial arts and sensory integration.

Dr. Bessel A. van der Kolk has been active as a clinician, researcher and teacher in the area of post-traumatic stress and related phenomena since the 1970s. He founded the first clinic, The Trauma Center at Justice Resource Institute, which specializes in the treatment of traumatized children and adults in Boston, in 1982. The Trauma Center has been a major training ground for dozens of psychiatrists, psychologists and social workers learning to specialize in the treatment and research of traumatized children and adults, and has been in the forefront of treatment innovation, basic neurobiology research, and developmental impact of trauma.

He was co-principal investigator of the DSM IV Field Trial for PTSD, in which he and his colleagues specifically delineated the impact of trauma across the life span, and the differential impact of interpersonal trauma, such as abuse and neglect, vs. disasters and accidents. He and his colleagues are currently engaged in a field trial for Developmental Trauma Disorder for inclusion in the DSM-5. His clinical research has covered such diverse areas as EMDR, yoga, theater, neurofeedback and sensorimotor therapy for traumatized children and adults.

Dr. van der Kolk is past president of the International Society for Traumatic Stress Studies; professor of psychiatry at Boston University Medical School, and medical director of the Trauma Center in Brookline, Massachusetts. He is director of the Complex Trauma Network of the National Child Traumatic Stress Network.

He has published over 100 peer-reviewed scientific articles and three books. He has taught at universities and hospitals around the world.

Friday, November 4, 11:00 a.m. – 12:15 p.m.
Grand VI, 3rd Floor

Restoring the Protective Shield: Core Concepts from Child-Parent Psychotherapy

Chandra Michiko Ghosh Ippen, PhD
Child Trauma Research Program, San Francisco General Hospital, University of California, San Francisco, California, USA

Technical Level: Intermediate

Children aged birth to five are highly vulnerable to exposure to interpersonal traumas, and trauma exposure at an early age can have long term consequences for development and functioning. Both research and clinical theory highlight the importance of developing and empirically validating trauma-informed relationship-based practices, particularly for young children. Moreover, there is an urgent need to disseminate not only evidence-based practices but the core concepts that underlie these practices to other service systems, including schools, daycare settings and child welfare. This presentation describes core concepts that are critical to working with young children who have experienced traumatic life events. The concepts are derived both from child-parent psychotherapy, a relationship-based treatment with empirical support from five randomized trials, and the National Child Traumatic Stress Network Core Curriculum for Childhood Trauma. The presentation clearly outlines key core concepts, illustrating them with rich clinical material including vignettes and video, and describes ways to integrate these concepts into clinical practice and into other service systems.

Dr. Chandra Ghosh Ippen is associate research director of the Child Trauma Research Program at the University of California, San Francisco and a member of the National Child Traumatic Stress Network. She is a clinician, researcher and trainer. She is co-author of a randomized trial documenting the efficacy of child-parent psychotherapy (CPP), co-author of Guidelines for the Treatment of Traumatic Bereavement in Infancy and Early Childhood (2003), which describes CPP treatment for Childhood Traumatic Grief, author of four chapters related to diversity-informed practice, and has over seven years of experience conducting trainings in CPP and diversity-informed practice. As a first generation East Indian/Japanese American who is fluent in Spanish and past co-chair of the Culture Consortium of the NCTSN, she is committed to examining how culture and context affect perception and mental health systems.

ISTSS 27th Annual Meeting  www.istss.org
**Master Clinician Series** (continued)

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**Saturday, November 5, 2:00 – 3:15 p.m.**
**Grand VI, 3rd Floor**

**Using Compassion-Focused Therapy to Work with Shame-Based Flashbacks in PTSD**

Deborah Lee, PhD  
Consultant Clinical Psychologist and Head of Berkshire Traumatic Stress Service, London, United Kingdom

(Practice, Adult/Cmplx)  
**Technical Level: Intermediate**

Shame-based flashbacks are common in PTSD and are highly distressing and disturbing for most people who experience them. The personal meaning conveyed in the fragmented images and flashbacks is often painful, condemning and shaming. High levels of self-criticism appear to maintain the sense of current psychological threat experienced by individuals with PTSD. Evidence suggests that those who suffer from shame-based PTSD are often very self-critical and have difficulty regulating threat-based emotions with self-soothing.

Current evidence-based treatments for PTSD promote the use of exposure or enhanced reliving to treat flashbacks and other symptoms, yet this is based on an anxiety paradigm where fear is the predominant emotion associated with the trauma. Emerging evidence suggests such treatment approaches are not always suitable for shame-based PTSD, especially when clients are very self-critical and lack skills in self-soothing.

This presentation will introduce attendees to compassion-focused therapy for PTSD and will provide a theoretical and practical understanding of the use of compassion-focused therapy techniques and compassionate images to work with shame-based flashbacks in order to enhance self-soothing and feelings of safeness in the memories and to reduce self-critical maintenance cycles.

Dr. Deborah Lee is a consultant clinical psychologist and head of Berkshire Traumatic Stress Service. She is also an honorary senior lecturer at University College London. She is the veterans champion for Berkshire Healthcare NHS Foundation Trust. Dr. Lee is a board member of the UK Trauma Society and lead for local trauma network groups.

Dr. Lee has worked in the field of trauma for 20 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 widely contributed to the dissemination of her clinical knowledge through writing and delivering over 150 clinical workshops and talks in North America and Europe.
ISTSS 2011 Award Recipients

The ISTSS Awards Committee, chaired by Meaghan O’Donnell, PhD, announces the 2011 ISTSS Award Recipients.

Please join us at the Awards Ceremony/Business Meeting, Friday, November 4 from 6:15 to 7:30 p.m. in Grand Ballroom VI, 3rd floor, to help honor the following distinguished ISTSS award recipients:

**Lifetime Achievement Award**
This award is the highest honor given by ISTSS. It is awarded to the individual who has made great lifetime contributions to the field of traumatic stress.

*2011 Recipient:*
*Mark Creamer, PhD*

**Public Advocacy Award**
This award is given for outstanding and fundamental contributions to advancing social understanding of trauma.

*2011 Recipient:*
*Lisa K. Bernhardt, MPP*

**Chaim and Bela Danieli Young Professional Award**
This award recognizes excellence in traumatic stress service or research by an individual who has completed his or her training within the last five years.

*2011 Recipient:*
*Wietse A. Tol, PhD*

**Robert S. Laufer Award for Outstanding Scientific Achievement**
This award is given to an individual or group who has made an outstanding contribution to research in the field of traumatic stress.

*2011 Recipient:*
*Kerry James Ressler, MD, PhD*

**Sarah Haley Memorial Award for Clinical Excellence**
This award is given to a clinician or group of clinicians in direct service to traumatized individuals. This written and/or verbal communication to the field must exemplify the work of Sarah Haley.

*There are two recipients sharing the 2011 Sarah Haley Memorial Award for Clinical Excellence:*
*Vanessa Kelly, PsyD*
*and the EMDR-Humanitarian Assistance Programs*

**Frank Ochberg Award for Media and Trauma Study**
This award recognizes significant contributions by clinicians and researchers on the relationship of media and trauma.

*2011 Recipient:*
*Stephen J. Cozza, MD*
ISTSS Special Interest Groups

Special Interest Groups (SIGs) provide members with a forum for communication and interaction about specific topic areas related to traumatic stress and provide a means of personal and professional involvement in the activities of the society. All meeting participants are welcome to attend SIG meetings. Pre-ordered box lunches for SIG meetings are offered on the meeting registration form at the cost of $25 each. Only those holding tickets placed in their registration envelope will receive a box lunch. You must pre-order online. Box lunches will not be for sale on site. However, you are NOT REQUIRED to order lunch in order to attend the SIG meetings.

Thursday, November 3, 12:30 p.m. – 1:45 p.m.

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<td>Trauma and Substance Use Disorders</td>
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SIG Endorsed Presentations

The following is a list of presentations that are endorsed by the ISTSS Special Interest Groups (SIG). An endorsement indicates the SIG has determined this presentation is particularly relevant to their specific topic area.

**Child Trauma**
- **Thursday, November 3, 11:00 a.m. – 12:15 p.m.** Paper: Functional Impairment
- **Friday, November 4, 2:00 p.m. – 3:15 p.m.** Symposium: Relational Trauma and the Impact on Children: Assessing Beyond Behavior
- **Saturday, November 5, 8:00 a.m. – 9:15 a.m.** Symposium: Early Interventions for Trauma Exposed Children

**Diversity and Cultural Competence**
- **Thursday, November 3, 11:00 a.m. – 12:15 p.m.** Symposium: Racism, Psychological Distress, and Treatment Seeking in Racially and Ethnically Diverse Trauma Survivors
- **Thursday, November 3, 3:30 p.m. – 4:45 p.m.** Paper: Intergenerational/Historical Trauma
- **Saturday, November 5, 8:00 a.m. – 9:15 a.m.** Panel: Cultural Diversity in Disasters: Lessons Learned

**Family Systems**
- **Wednesday, November 2, 8:30 a.m. – 5:00 p.m.** PMI#3: Strengthening Family Coping Resources: Multi-Family Group for Families Coping with Multiple Trauma
- **Thursday, November 3, 2:00 p.m. – 3:15 p.m.** Workshop: When a Service Member is Wounded, a Family Is Wounded: New DoD/VA Policy and Practice in Engaging and Supporting the Families of Veterans
- **Thursday, November 3, 3:30 p.m. – 4:45 p.m.** Workshop: The REACH Program: Family Psychoeducation for Veterans Living With PTSD and Their Families

**Gender and Trauma**
- **Thursday, November 3, 8:00 a.m. – 9:15 a.m.** Symposium: Military Sexual Trauma: Complex Outcomes and Prevention of Multiple Layers of Betrayal
- **Friday, November 4, 9:30 a.m. – 10:45 a.m.** Keynote: Throwing Off the Burden of Shame: Social Bonds and Recovery from the Traumas of Gender-Based Violence
- **Saturday, November 5, 3:30 p.m. – 4:45 p.m.** Paper Session: Women and Relationships

**Human Rights and Social Policy**
- **Thursday, November 3, 8:00 a.m. – 9:15 a.m.** Panel: ISTSS at the United Nations in 2010-2011
- **Thursday, November 3, 2:00 p.m. – 3:15 p.m.** Case Study: Coercive Control in the Context of Imprisonment and Torture: The Experience of Four Refugees
- **Saturday, November 5, 3:30 p.m. – 4:45 p.m.** Symposium: Rwanda: Lessons from the Field to Improve Social Environments

**Intergenerational Transmission of Trauma and Resilience**
- **Thursday, November 3, 8:00 a.m. – 9:15 a.m.** Panel: History, Healing, and Storytelling: Media Representations of Intergenerational Trauma
- **Thursday, November 3, 3:30 p.m. – 4:45 p.m.** Panel: Broken Bonds: The Impact of Intergenerational Trauma on Safe Parenting
- **Thursday, November 3, 3:30 p.m. – 4:45 p.m.** Paper: Intergenerational/Historical Trauma
- **Friday, November 4, 11:00 a.m. – 12:15 p.m.** Symposium: Intergenerational Legacies of Trauma: Recent Multidimensional Findings Across Species and Among Differing Traumatic Experiences
- **Friday, November 4, 2:00 p.m. – 3:15 p.m.** Media/Movie: Prisoner of Her Past Part I: Introduction and Screening
- **Friday, November 4, 3:30 p.m. – 4:45 p.m.** Media/Movie: Prisoner of Her Past Part II: Panel & Audience Discussion
- **Saturday, November 5, 8:00 a.m. – 9:15 a.m.** Workshop: Family Live: Addressing Intergenerational Trauma Effects on Parenting Capacities
SIG Endorsed Presentations

Internet and Technology
Wednesday, November 2, 8:30 a.m. – 12:00 p.m.  PMI#9: Psychological First Aid for Schools
Thursday, November 3, 8:00 a.m. – 9:15 a.m.  Featured Symposia: The Great Eastern Japan Earthquake: Challenging Roles of Disaster Workers
Thursday, November 3, 11:00 a.m. – 12:15 p.m.  Featured: Preventing Psychological and Moral Injury in Military Service: Summing Up
Thursday, November 3, 2:00 p.m. – 3:15 p.m.  Workshop: When a Service Member is Wounded, a Family is Wounded: New DoD/VA Policy and Practice in Engaging and Supporting the Families of Veterans

Lesbian, Gay, Bisexual and Transgendered Issues
Saturday, November 5, 2:00 p.m. – 3:15 p.m.  Workshop: Using Gay Affirmative Psychotherapy to Treat Lesbian, Gay and Bisexual Trauma Survivors

Media
Thursday, November 3, 8:00 a.m. – 9:15 a.m.  Panel: History, Healing and Storytelling
Thursday, November 3, 9:30 a.m. – 10:45 a.m.  Keynote: The Interrupters: A Conversation on the Cycle of urban Violence and the Potential for Social Connections to Stop It
Thursday, November 3, 3:30 p.m. – 4:45 p.m.  Panel: Disaster, Media and Public Resiliency
Thursday, November 3, 8:00 p.m. – 10:30 p.m.  Movie: The Interrupters Film Screening
Friday, November 4, 2:00 p.m. – 3:15 p.m.  Panel: Prisoner of Her Past Part I: Introduction and Film Screening
Friday, November 4, 3:30 p.m. – 4:45 p.m.  Panel: Prisoner of Her Past Part II: Panel and Audience Discussion
Saturday, November 5, 11:00 a.m. – 12:15 p.m.  Featured Symposium: Exposure to Media Coverage of the Japan Earthquake in France and Canada: A Prospective Study

Psychodynamic Research and Practice
Thursday, November 3, 3:30 p.m. – 4:45 p.m.  Panel: Moving From Competition to Collaboration: Research-Based Approaches in Developing More Effective PTSD Psychotherapies

Research Methodology
Thursday, November 3, 9:30 a.m. – 10:45 a.m.  Symposium: Update on Neuroimaging and PTSD: Evolving Methods and New Directions
Friday, November 4, 9:30 a.m. – 10:45 a.m.  Workshop: NIH Funding Opportunities and Priorities
Friday, November 4, 11:00 a.m. – 12:15 p.m.  Workshop: Beyond Baron and Kenny and MacArthur: A Modern Mediation Analysis Workshop

Terrorism and Bioterrorism
Wednesday, November 3, 1:30 p.m. – 5:00 p.m.  PMI#11: Rapid Evidence-Based Guidance for Post-Impact Disaster Mental Health Response: Trauma Signature (TSIG) Analysis
Friday, November 4, 8:00 a.m. – 9:15 a.m.  Symposium: The September 11, 2011 Terrorist Attacks: Ten Years After
Saturday, November 5, 2:00 p.m. – 3:15 p.m.  Panel: Behavioral Health, Social Connectedness, and Community Resilience: Relations Between Science, Practice, and National Health Security Policy

Trauma Assessment and Diagnosis
Thursday, November 3, 11:00 a.m. – 12:15 p.m.  Panel: The Developmental Trauma Disorder Field Trial Study and the DSM-5: Overview, Clinician Survey Results, and Structured Interview Methodology
Saturday, November 5, 11:00 a.m. – 12:15 p.m.  Symposium: Internet Surveys on Proposed DSM-V Criteria for PTSD
Saturday, November 5, 2:00 p.m. – 3:15 p.m.  Panel: Grief and DSM-5
SIG Endorsed Presentations

**Trauma and Substance Use Disorders**
- Thursday, November 3, 11:00 a.m. – 12:15 p.m. Paper Session: Examining Complex PTSD as a Mediator of the Relationship Between Trauma and Substance Abuse Among Youth
- Friday, November 4, 8:00 a.m. – 9:15 a.m. Symposium: Drug-Facilitated Sexual Assault and PTSD: Drug-Induced Amnesia and Differential Symptom Development
- Saturday, November 5, 11:00 a.m. – 12:15 p.m. Workshop: Concurrent Treatment for Post-Traumatic Stress Disorder and Alcohol Dependence

**Traumatic Grief and Loss**
- Friday, November 4, 2:00 p.m. – 3:15 p.m. Symposium: The Nature, Mechanisms, and Treatment of Grief
- Friday, November 4, 3:30 p.m. – 4:45 p.m. Symposium: Developmental Perspectives on Proposed DSM-5 Bereavement Criteria: Three Longitudinal Studies of Bereaved Children and Adolescents
- Saturday, November 5, 2:00 p.m. – 3:15 p.m. Panel: Grief and DSM-5

*Presentation endorsements were not submitted by the following SIGs: Complex Trauma; Creative, Body, Energy Therapies; Early Intervention; Military and Spirituality.*

**ISTSS Affiliate Societies**

Affiliate Societies of ISTSS are: Argentine Society for Psychotrauma (SAPsi), Association de Langue Francaise pour l'Etude du Stress et du Traumatisme (ALFEST), Australasian Society for Traumatic Stress Studies, (ASTSS), Canadian Psychological Association, Traumatic Stress Section (CPA TSS), Deutschsprachige Gesellschaft Fur Psychotraumatologie (DeGPT), European Society for Traumatic Stress Studies (ESTSS), Japanese Society for Traumatic Stress Studies (JSTSS).

The following is a list of presentations that are endorsed by the Affiliate Societies of ISTSS. An endorsement indicates that the Affiliate Society has determined this presentation is of particular relevance and/or interest to their organization.

**Deutschsprachige Gesellschaft Fur Psychotraumatologie (DeGPT)**
- Thursday, November 3, 11:00 a.m. – 12:15 p.m. Symposium: Cognition, Attention & Memory
- Saturday, November 5, 11:00 a.m. – 12:15 p.m. Symposium: The Interface Between PTSD and Borderline Personality Disorder Psychopathology and Treatment
- Saturday, November 5, 3:30 p.m. – 4:45 p.m. Symposium: Child Sexual Abuse in Switzerland Epidemiologic Data and Insights from the Optimus Study

**European Society for Traumatic Stress Studies (ESTSS)**
- Thursday, November 3, 8:00 a.m. – 9:15 a.m. Panel: Treating Post-Traumatic Stress Disorder in First Responders
- Thursday, November 3, 3:30 p.m. – 4:45 p.m. Panel: Trauma, Self, and Identity
- Thursday, November 3, 3:30 p.m. – 4:45 p.m. Panel: Psychological First Aid: Lessons from Low- and Middle-Income Countries
- Saturday, November 5, 8:00 a.m. – 9:15 a.m. Symposium: Neuropsychological Functioning in PTSD

*The following affiliates did not provide session endorsements: Argentine Society for Psychotrauma (SAPsi); Association de Langue Francaise pour l'Etude du Stress et du Traumatisme (ALFEST); Australasian Society for Traumatic Stress Studies (ASTSS); Canadian Psychological Association, Traumatic Stress Section (CPA TSS) and; Japanese Society for Traumatic Stress Studies (JSTSS).*
Presentation Type Descriptions

**Case Study Presentation**
Sessions that 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 forms of media relevant to traumatic stress, along with discussion.

**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**
Session that includes 3-4 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 opportunities for intensive training on topics integral to the conference program, presented by leaders in the field.

**Symposium**
Session that includes a group of 3-4 sequential presentations, each related to the overall theme of the symposium.

**Workshop Presentation**
Instructional session that aims to help participants increase their understanding and skill in a particular area of interest. Such sessions may include active involvement of the audience.

Presentation Level
All presentations designate the knowledge/skill level required of the participant as either: Introductory (I), Intermediate (M) or Advanced (A). These should be 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.

Keyword Type Descriptions
Sessions will be presented on a wide variety of topics identified by keywords:

**Primary**
1. Assessment/Diagnosis (Assess Dx)
2. Biological/Medical (Bio Med)
3. Clinical/Intervention Research (Clin Res)
4. Clinical Practice (Practice)
5. Community-Based Programs (Commun)
6. Culture/Diversity (Cul Div)
7. Ethics (Ethics)
8. Global Issues (Global)
9. Media (Media)
10. Prevention/Early Intervention (Prevent)
11. Research Methodology (Res Meth)
12. Social Issues – Public Policy (Social)
13. Technology (Tech)
14. Training/Education/Dissemination (Train/Ed/Dis)
15. Vicarious Traumatization and Therapist Self-Care (Self-Care)

**Secondary**
1. Child/Adolescent (Child/Adol)
2. Survivors and Descendants of Historical Trauma (Surv/Hist)
3. Civilians in War/Refugees (Civil/Ref)
4. Disaster/Mass Trauma Survivors (Disaster)
5. Military/Peacekeepers/Veterans (Mil/Vets)
6. Emergency Services/Aid Workers (Emerg Wrkrs)
7. Older People/Aging (Older)
8. Adult Survivors of Childhood Interpersonal Trauma/Complex Trauma (Adult/Cmplx)
9. Adult Victims of Violence (Violence)
10. Diverse Populations (cultural, ethnic, gender, sexual orientation) (Diverse Pop)
11. Therapists/Caregivers (Caregvrs)
### Daily Schedule – Tuesday and Wednesday

#### Tuesday, November 1

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
<th>Level</th>
<th>Keywords</th>
<th>Room</th>
<th>Floor</th>
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<tbody>
<tr>
<td>4:00 p.m. – 6:00 p.m.</td>
<td>Registration Open</td>
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<td>Grand Rotunda</td>
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#### Wednesday, November 2

<table>
<thead>
<tr>
<th>Time</th>
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<th>Level</th>
<th>Keywords</th>
<th>Room</th>
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<tbody>
<tr>
<td>7:30 a.m. – 8:30 a.m.</td>
<td>Coffee and Tea</td>
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<td>Grand Foyer</td>
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<tr>
<td>7:30 a.m. – 5:00 p.m.</td>
<td>Registration Open</td>
<td></td>
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<td>Grand Foyer</td>
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<tr>
<td>10:30 a.m. – 5:00 p.m.</td>
<td>Bookstore Open</td>
<td></td>
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<td>Grand Foyer</td>
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#### Wednesday, November 2, 8:30 a.m. – 5:00 p.m.

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<tr>
<th>Presentation Number</th>
<th>Title</th>
<th>Level</th>
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<tbody>
<tr>
<td>PMI #1</td>
<td>The Trauma Recovery Group: A Guide for Practitioners</td>
<td>M Practice, Adult/Cmplx</td>
<td>Grand III</td>
<td>3</td>
</tr>
<tr>
<td>(Herman, Mendelsohn, Schatzow, Coco, Kallivayalil, Diya, Levitan)</td>
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<tr>
<td>PMI #2</td>
<td>Cultivating the Strength of Collective Survival: Social Support and Survivor-to-Survivor Support as Elements of Staff Care in Complex Humanitarian Emergencies</td>
<td>M Cul Div/ Disaster</td>
<td>Grand I</td>
<td>3</td>
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<tr>
<td>(Gray, Fawcett)</td>
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<tr>
<td>PMI #3</td>
<td>Strengthening Family Coping Resources: Multi-Family Group for Families Coping with Multiple Trauma</td>
<td>M Practice, Adult/Cmplx</td>
<td>Grand IX</td>
<td>3</td>
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<tr>
<td>(Kiser, Beck)</td>
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<tr>
<td>PMI #4</td>
<td>Research-Derived Practical Skills for Treating Couples After War Zone Deployment</td>
<td>M Practice, Mil/Vets</td>
<td>Grand IV</td>
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<td>(O’Brien, Wills)</td>
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<tr>
<td>PMI #5</td>
<td>Complex PTSD: Complex Diagnosis, Complex Treatment</td>
<td>I Practice, Adult/Cmplx</td>
<td>Grand VI</td>
<td>3</td>
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<tr>
<td>(Courtois, Ades, Marotta, Hensler, Doyle, Sanness, Bauman)</td>
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<tr>
<td>PMI #6</td>
<td>An Introduction to Cognitive Processing Therapy</td>
<td>I Practice, Diverse Pop</td>
<td>Grand VIII</td>
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<tr>
<td>(Resick, Collie, Copland, Morris)</td>
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<tr>
<td>PMI #7</td>
<td>Using the Core Curriculum on Childhood Trauma to Create “Gold Standard” Training</td>
<td>M Train/Ed/Dis, Child/Adol</td>
<td>Dover</td>
<td>3</td>
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<tr>
<td>(Layne, Strand, Abramovitz, Stuber, Ghosh Ippen, Ross, Collins, Henry, Amaya-Jackson)</td>
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#### Wednesday, November 2, 8:30 a.m. – Noon

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<tbody>
<tr>
<td>PMI #8</td>
<td>Building Attachment Across States: Healing Dissociative Symptoms in Children and Adolescents</td>
<td>M Practice, Child/Adol</td>
<td>Grand X</td>
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<tr>
<td>(Silberg)</td>
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<tr>
<td>PMI #9</td>
<td>Psychological First Aid for Schools</td>
<td>M Prevent, Child/Adol</td>
<td>Kent</td>
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<tr>
<td>(Brymer, Watson, Walker, Reyes, Taylor)</td>
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#### Wednesday, November 2, 1:30 p.m. – 5:00 p.m.

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<tbody>
<tr>
<td>PMI #10</td>
<td>Innovative Approaches to the Treatment of Developmental Trauma Disorder in Children and Adolescents</td>
<td>M Practice, Child/Adol</td>
<td>Grand X</td>
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<tr>
<td>(Zelechoski, Warner, Emerson, van der Kolk)</td>
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<tr>
<td>PMI #11</td>
<td>Rapid Evidence-Based Guidance for Post-Impact Disaster Mental Health Response: Trauma Signature (TSIG) Analysis</td>
<td>I Prevent, Child/Disaster</td>
<td>Kent</td>
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<tr>
<td>(Shultz, Kelly, Espinel, Neria)</td>
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<tr>
<td>(Gurwitch, Pearl)</td>
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Daily Schedule – Wednesday and Thursday

Wednesday, November 2

5:15 p.m. – 6:15 p.m. New Member and First-Time Attendee Gathering   Dover 3

6:15 p.m. – 7:30 p.m.
Keynote We Couldn’t Have Done It Without Them: Four Pioneers Discuss the Social Bonds that Shaped the Field of Traumatic Stress (Bloom, Courtois, Figley, Friedman)

8:00 p.m. – 10:00 p.m. Cash Bar Meet and Greet   Harborside D 4

Thursday, November 3

7:00 a.m. – 8:00 a.m. Coffee and Tea   Grand Foyer 3

7:00 a.m. – 5:00 p.m. Registration Open   Grand Rotunda

7:00 a.m. – 6:00 p.m. Bookstore Open   Grand Foyer

7:00 a.m. – 6:00 p.m. Exhibits Open   Grand Rotunda & Grand Foyer

Thursday, November 3, 8:00 a.m. – 9:15 a.m.

Concurrent Session 1

Featured Symposium The Great Eastern Japan Earthquake: Responses of Japanese Mental Health Professionals and JSTSS (Shigemura, Kim)

Psychological Support After Major Disaster in Japan: From Kobe and Tohoku Experiences (Kato, Maeda, Kamo, Kim)

Psychological Effects of the Atomic Power Plants Accident in Fukushima (Kim, Konishi)

The Great Eastern Japan Earthquake: Challenging Roles of Disaster Workers (Shigemura, Osawa)

Symposium From Research to Clinical Innovations and Applications: Implications from Betrayal Trauma Theory (Freyd)

Why and How to Make Hidden Trauma Visible in Developmental Traumatology Research (Becker-Blease)

Is All Trauma Equal? The Role of Betrayal in Understanding Trauma Symptomatology (Gamache, Martin, DeMarni, DePrince, Freyd)

The Influence of Dependency on Reporting Intimate Partner Abuse to the Police (Mitchell, DePrince, Gover)

Betrayal Trauma as a Traumatic Experience of Love (Kahn)

Symposium The Conceptualization of Interpersonal Violence Related Trauma in a Forensic Context (Hughes)

Conceptualization of Complex Trauma and PTSD in Forensic Matters (Hughes)

Conceptualization and Assessment of Sexual Harassment in Civil Litigation (Rocchio)

Conceptualization of Battered Women’s Response to Intimate Partner Violence (Dutton)
### Daily Schedule – Thursday

**Thursday, November 3, 8:00 a.m. – 9:15 a.m.**

#### Concurrent Session 1 (continued)

<table>
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<tr>
<td><strong>Symposium</strong></td>
<td>Military Sexual Trauma: Complex Outcomes and Prevention of Multiple Layers of Betrayal</td>
<td>I</td>
<td>Clin Res, Mil/Vets</td>
<td>Kent</td>
<td>4</td>
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<tr>
<td>(Allard)</td>
<td>Post-Traumatic Sequelae Associated with Military Sexual Assault in Female Veterans Enrolled in VA Outpatient Mental Health Clinics</td>
<td>(Luterek, Bittinger, Simpson)</td>
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<td>Post-Traumatic Stress Symptomatology as a Mediator of the Association Between Military Sexual Assault and Post-Deployment Physical Health in Women</td>
<td>(Smith, Shipherd, Schuster, Vogt, King, King)</td>
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<td>Association Between Trading Sex and Military Sexual Trauma Among Women Veterans</td>
<td>(Strauss, Weitlauf, Calhoun)</td>
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<td></td>
<td>Reengineering Gender Relations in Modern Militaries: An Evolutionary Perspective</td>
<td>(Hannagan, Arrow)</td>
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<thead>
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<tr>
<td>(Daniels, Carll, de Jong, Turner)</td>
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<tr>
<td><strong>Panel</strong></td>
<td>Treating Post-Traumatic Stress Disorder in First Responders</td>
<td>M</td>
<td>Clin Res, Emerg Wrks</td>
<td>Grand VII &amp; VIII</td>
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<tr>
<td>(Weiss, Haugen, Evces, Difede, Best, Nijdam, Gersons)</td>
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<td><strong>Panel</strong></td>
<td>History, Healing, and Storytelling: Media Representations of Intergenerational Trauma</td>
<td>I</td>
<td>Media, Surv/Hist</td>
<td>Laurel C/D</td>
<td>4</td>
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<tr>
<td>(Spratt, Sullivan, McMahon, Rees)</td>
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<tr>
<td>Doing the Benzodiazepine Dance: Challenges for PTSD Prescribers</td>
<td>Doing the Benzodiazepine Dance: Challenges for PTSD Prescribers</td>
<td>A</td>
<td>Practice, Civil/Ref</td>
<td>Grand III &amp; IV</td>
<td>3</td>
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<tr>
<td>(Friedman, Bernardy, Jeffreys, Gibson)</td>
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<th>Level</th>
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<tbody>
<tr>
<td>Trauma and Violence</td>
<td>PTSD Symptomatology and Reactivity to the Pelvic Exam Among Women with a History of Sexual Violence</td>
<td>M</td>
<td>Practice, Violence</td>
<td>Dover</td>
<td>3</td>
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<tr>
<td>(Greene, Khan, Weitlauf)</td>
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<td>Patterns of Violence Against Women in the United States: Associations with Poor Family Support During Childhood and Post-Traumatic Stress Disorder</td>
<td>M</td>
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<td>(Cavanaugh, Martins, Petras, Campbell)</td>
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<td>The Relationship of Disclosure To PTSD Status in a Sample of Adult Sexual Assault Survivors</td>
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<td>(Mills, Marina-Carper, Steenkamp, Salters-Pedneault, Litz)</td>
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<td>First Protect Your Own: Military Sexual Trauma, A National Crisis</td>
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<th>Keywords</th>
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<tr>
<td>Refugees and Survivors of Torture</td>
<td>Does Justice Heal? A Longitudinal Study of the Psychosocial Effects of the Khmer Rouge Trials in Cambodia</td>
<td>M</td>
<td>Global, Surv/Hist</td>
<td>Essex</td>
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<td>(Sons, Gibson, de Jong, Hean, Engl)</td>
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<tr>
<td>Is Complex Post-Traumatic Stress Disorder a Valid Construct in Refugees?</td>
<td>M</td>
<td>Assess Dx, Civil/Ref</td>
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<td>Defining and Measuring Domains of Social Functioning and Circumstances for Survivors of War and Torture</td>
<td>M</td>
<td>Practice, Civil/Ref</td>
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<td>Reported Psychotic Symptoms Amongst Survivors of Torture in Timor Leste: Implications for Understanding Traumatic Stress Responses</td>
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### Daily Schedule – Thursday

**Thursday, November 3, 9:30 a.m. – 10:45 a.m.**

#### Concurrent Session 2

<table>
<thead>
<tr>
<th>Level</th>
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(Kotlowitz, Bocanegra)

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<tr>
<td>Symposium</td>
<td>Update on Neuroimaging and PTSD: Evolving Methods and New Directions</td>
<td>M</td>
<td>Bio Med, Violence</td>
</tr>
</tbody>
</table>

(Engdahl)

- Neural Correlates of Fear Learning in PTSD
  (Brenner, Dent, Fani)
- Exploring Novel Pathways in PTSD Using Positron Emission Tomography
  (Neumeister, Normandin, Bailey, Saxena, Carson, Huang, Yehuda)
- Trauma-Unrelated Emotional Interference in PTSD
  (Offringa, Handwerger Brohawn, Hughes, Pfaff, VanElzakker, Shin)
- Brain Miscommunication Patterns in PTSD as Revealed by Magnetoencephalography (MEG)
  (Georgopoulos, VanKampen, Lewis, Leuthold, Engdahl)

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(Conradi, Markiewicz, Ko)

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<tbody>
<tr>
<td>Paper Session</td>
<td>Treating Veterans</td>
<td>I</td>
<td>Commun, Mil/Vets</td>
</tr>
</tbody>
</table>

(Neylan)

- Measuring Impacts of Volunteering on Returning Post 9/11 Disabled Veterans
  (Matthieu, Smith, Pereria, Yonkman, Greitens)
- Psychological Injury, Treatment Utilization, and Barriers to Care: Results from a National Survey of Iraq and Afghanistan Veterans
  (Elbogen, Wagner, Johnson, Beckham)
- Gender Differences in Post-Deployment Psychological Health: The Impact of Combat Exposure and Predeployment Risk and Protective Factors
  (Poulsny, Kumpula, Meis, Johnson, Erbes)
- Differences in Cortical Volume Between Chronic and Remitted PTSD in Gulf War Veterans
  (Neylan, Chao, Ross, Schuff)

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<tbody>
<tr>
<td>Paper Session</td>
<td>Psychophysiology</td>
<td>M</td>
<td>Bio Med, Adult/Cmplx</td>
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</table>

(Basu)

- Differential Effects of Clinical Diagnoses on Cortisol Outcomes in Victims of Intimate Partner Violence (IPV)
  (Basu, Levendosky, Lonstein, Stansbury)
- Predictors of Salivary Cortisol Levels in Children and Adolescents Exposed to Traumatic Events
  (Goldbeck, Maassen, Kirsch, Kirschbaum)
- Experimental Avoidance and the Relationship Between Child Maltreatment and PTSD Symptoms: Preliminary Evidence
  (Shenk, Putnam, Noll)
- PTSD, COMT Val158Met Genotype, and Anterior Cingulate Volume
  (Woodward, Schulz-Heik, Schaefer, Hallmayer, Kaloupek)
## Daily Schedule – Thursday

### Thursday, November 3, 9:30 a.m. – 10:45 a.m.

**Concurrent Session 2 (continued)**

<table>
<thead>
<tr>
<th>Paper Session</th>
<th>Effects of Conflicts on Noncombatants</th>
<th>Level</th>
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<tr>
<td></td>
<td>(Figley, Cabrera, Pitts Chapman)</td>
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<td>(Herlihy, Rogers, Fox)</td>
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<td></td>
<td>Children Of War — Investigating the Influence of World War II Trauma, Related to Zone of Occupation, Social Support and Resilience on Health and Well-Being in a Sample of Austrian Elderly Adults</td>
<td>M</td>
<td>Global, Civil/Ref</td>
<td>Grand VII &amp; VIII</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>(Lueger-Schuster, Glueck)</td>
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<tr>
<td></td>
<td>Managing, Understanding and Communicating Psychological Issues Among Refugee Applicants</td>
<td>A</td>
<td>Social, Civil/Ref</td>
<td>Grand VII &amp; VIII</td>
<td>3</td>
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<tr>
<td></td>
<td>(Steel, Hunter, San Roque, Tay, Pearson, Frommer, Derrick)</td>
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### Thursday, November 3

**9:30 a.m. – 6:00 p.m. Poster Session 1 Open**

**Grand V 3**

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### Thursday, November 3, 11:00 a.m. – 12:15 p.m.

**Concurrent Session 3**

<table>
<thead>
<tr>
<th>Featured Presentation</th>
<th>Preventing Psychological and Moral Injury in Military Service: Summing Up (Shay)</th>
<th>Level</th>
<th>Keywords</th>
<th>Room</th>
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<tbody>
<tr>
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<td>I</td>
<td>Prevent, Mil/Vets</td>
<td>Grand VI</td>
<td>3</td>
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</tbody>
</table>

**Symposium**

**The Effect of Social Bonds on Immediate and Long-Term Response to Collective Trauma Among Different Cohorts:**

- Adolescents, Adults and Elderly (Tuval-Mashiach)
- Multiple Losses of Social Resources Following Collective Trauma: The Case of the Forced Relocation from Gush Katif (Dekel, Tuval-Mashiach)
- Social Bonds, Stress Inducing Situations and Varying Degrees of Religious Commitment Among Adolescents Before and Following Forced Relocation (Gailly, Sagar)
- The Long-Term Impact of A Collective Trauma on Sense of Belonging to Social Resources (Tuval-Mashiach, Nutman-Shwartz)
- The Psychosocial Effects of Exposure to Collective Trauma on Elderly Persons: Differences in Sense of Belonging and Type of Community (Regev, Nutman-Shwartz)

**Symposium**

**Treatment Outcomes in Victims and Perpetrators of Intimate Partner Violence**

- Johnson
- Treatment of PTSD in Residents of Battered Women’s Shelters (Johnson, Zlotnick, Perez)
- The Effects of MBSR on PTSD Among Low-Income African American Women (Dutton)
- Strength at Home Abuser Intervention for Military Veterans: Pilot Findings (Taft, Monson, MacDonald, Murphy, Maguire, Resick)
- Trauma Exposure, PTSD Symptoms, and Treatment Response Among Perpetrators of Intimate Partner Violence (Murphy, Semiatin, Meis, Poole)
### Daily Schedule – Thursday

**Thursday, November 3, 11:00 a.m. – 12:15 p.m.**

<table>
<thead>
<tr>
<th>Concurrent Session 3 (continued)</th>
<th>Presentation</th>
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<tbody>
<tr>
<td><strong>Symposium</strong></td>
<td><strong>New Frontiers in PTSD Research: Basic and Applied</strong></td>
</tr>
<tr>
<td>(Vermetten)</td>
<td><strong>Level</strong> M, <strong>Keywords</strong> Clin Res, Mil/Vets, <strong>Room</strong> Grand IX &amp; X, <strong>Floor</strong> 3</td>
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<tr>
<td>Military Motion-Based Memory Desensitization and Reprocessing (3MDR): A Novel Treatment for PTSD? (Vermetten)</td>
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<tr>
<td>Default Network Abnormalities in PTSD: A fMRI Investigation (Lanius)</td>
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<tr>
<td>Using Epigenetic and Molecular Changes in PTSD as Therapeutic Targets (Yehuda)</td>
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<tr>
<td>Trauma Exposure and Working Memory Abnormalities (McFarlane)</td>
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</table>

<table>
<thead>
<tr>
<th><strong>Symposium</strong></th>
<th><strong>Racism, Psychological Distress, and Treatment Seeking in Racially and Ethnically Diverse Trauma Survivors</strong></th>
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<tbody>
<tr>
<td>(Ghafoori)</td>
<td><strong>Level</strong> M, <strong>Keywords</strong> Cul Div, Diverse Pop, <strong>Room</strong> Grand III &amp; IV, <strong>Floor</strong> 3</td>
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<tr>
<td>Perceptions of Racist Environment and Race-Related PTSD (Waelde, Pan, Delorearti, Gruen, Harrison)</td>
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<tr>
<td>Racial and Ethnic Differences in PTSD, GAD, and Depression in Trauma Survivors (Ghafoori, Barragan, Palinkas)</td>
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<tr>
<td>Factors Influencing Help-Seeking and Treatment Preferences Among Trauma-Exposed Latina Immigrants: A Qualitative Study (Kaltman, Hurtado de Mendoza, Serrano, Gonzales)</td>
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<tr>
<td>Ethnoracial Differences in Traumatic Stress: The Next Horizons (Trifflemain)</td>
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<table>
<thead>
<tr>
<th><strong>Workshop</strong></th>
<th><strong>Real Life Heroes; A Developmental, Attachment-Centered Intervention for Children with Complex Trauma</strong></th>
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<tbody>
<tr>
<td>(Kagan)</td>
<td><strong>Level</strong> M, <strong>Keywords</strong> Practice, Child/Adol, <strong>Room</strong> Laurel A/B, <strong>Floor</strong> 4</td>
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<table>
<thead>
<tr>
<th><strong>Panel</strong></th>
<th><strong>The Developmental Trauma Disorder Field Trial Study and the DSM-5: An Overview, Clinician Survey Results, and Structured Interview Methodology</strong></th>
</tr>
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<tbody>
<tr>
<td>(Ford, van der Kolk, Spinazzola, Stolbach)</td>
<td><strong>Level</strong> M, <strong>Keywords</strong> Assess Dx, Child/Adol, <strong>Room</strong> Harborside Ballroom, <strong>Floor</strong> 4</td>
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<thead>
<tr>
<th><strong>Panel</strong></th>
<th><strong>A Longitudinal Study of Stress and Mental Health in Humanitarian Aid Workers; Risk and Resilience Factors and Guidelines for Humanitarian Organizations</strong></th>
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<tbody>
<tr>
<td>(Lopes Cardozo, Eriksson, Off, Snider, Simon)</td>
<td><strong>Level</strong> M, <strong>Keywords</strong> Global, Emerg Wrkrs, <strong>Room</strong> Grand I &amp; II, <strong>Floor</strong> 3</td>
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<thead>
<tr>
<th><strong>Panel</strong></th>
<th><strong>Managing Collateral Damage: Expert Perspectives on the Reality of Trauma Work and Maintaining Professional and Personal Well-Being</strong></th>
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<tr>
<td>(Averill, Hembree, Keane, Resick, Turner)</td>
<td><strong>Level</strong> M, <strong>Keywords</strong> Practice, Caregvr, <strong>Room</strong> Dover, <strong>Floor</strong> 3</td>
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<tr>
<th><strong>Paper Session</strong></th>
<th><strong>Functional Impairment</strong></th>
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<tr>
<td>(Allwood)</td>
<td><strong>Level</strong> M, <strong>Keywords</strong> Clin Res, Child/Adol, <strong>Room</strong> Grand VII &amp; VIII, <strong>Floor</strong> 3</td>
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<tr>
<td>Examining Complex PTSD as a Mediator of the Relationship Between Trauma and Substance Abuse Among Youth (Rosenkranz, Henderson, Muller)</td>
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<tr>
<td>Behavioral Problems in Sexually Abused Boys: The Moderating Influence of Family and Peer Context (Elkins)</td>
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<tr>
<td>Functional Impairment in Young Children with Maltreatment (Adewuya)</td>
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<tr>
<td>Lack of Future Orientation as a Mediator in the Relationship Between Adverse Life Events and Delinquent Behaviors in Early Adolescents (Allwood, Baet, DeMarco, Bell)</td>
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### Daily Schedule – Thursday

**Thursday, November 3, 11:00 a.m. – 12:15 p.m.**

#### Concurrent Session 3 (continued)

<table>
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<tr>
<th>Paper Session</th>
<th>Cognition, Attention &amp; Memory</th>
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<td>Level</td>
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<td>[Ehring]</td>
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</table>

- **N400 in PTSD** (Kimble, Batterink, Marks, Ross, Fleming)
- **Attention Biases to Threat, Fear Acquisition and Extinction:** Associations Among Attentional and Conditioned Fear Processes in Post-Traumatic Stress Disorder (Fani, McClure Tone, Bradley, Ressler, Jovanovic)
- **Attentional Control, Attentional Threat Bias, and Post-Traumatic Stress Symptomatology** (Bardeen, Orcutt)
- **Why is Trauma-Related Rumination Dysfunctional?** (Ehring)

**Thursday, November 3, 12:30 p.m. – 1:45 p.m.**

#### Special Interest Groups

<table>
<thead>
<tr>
<th>SIG</th>
<th>Child Trauma</th>
<th>Grand I &amp; II</th>
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<td>Creative Energy and Body</td>
<td>Grand VII &amp; VIII</td>
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<td>Diversity and Cultural Competence</td>
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<td>Family Systems</td>
<td>Grand IX &amp; X</td>
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<td>Gender and Trauma</td>
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<td>Psychodynamic Research and Practice</td>
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<td>Terrorism and Bioterrorism Related Trauma</td>
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<td>SIG</td>
<td>Traumatic Loss and Grief</td>
<td>Falkland</td>
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## Daily Schedule – Thursday

**Thursday, November 3, 2:00 p.m. – 3:15 p.m.**

### Concurrent Session 4

<table>
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<th>Featured Presentation</th>
<th>Title</th>
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<th>Room</th>
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<tr>
<td>Mental Health Implications of the Gulf Oil Spill</td>
<td>(Osofsky, Osofsky, Speier, Goldstein, Lurie)</td>
<td>M</td>
<td>Prevent, Disaster</td>
<td>Grand VI</td>
<td>3</td>
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<tr>
<td>Master Clinician</td>
<td>Treating Trauma: Helping the Entire Human Organism Feel Safe and Live in the Present</td>
<td>M</td>
<td>Practice, Child/Adol</td>
<td>Harborside Ballroom</td>
<td>4</td>
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</table>

### Symposium

**Social Bonds Noir: The Role of Trauma in the Origins and Outcomes of Interpersonal Aggression**

(Warren)

- Killing in Combat, Mental Health Symptoms, and Suicidal Ideation in Iraq War Veterans
  (Maguen, Luxton, Skopp, Gahm, Rege, Metzler, Marmar)
- The Role of Seeing Violence and Being Hurt Violently as a Child in the Association Between Personality Disorder Diagnoses and Violence in Adulthood
  (Warren)
- The Impact of Killing and Injuring Others on Mental Health Symptoms Among Police Officers
  (Komarovsky, Maguen, McCaslin, Metzler, Madan, Brown, Galatzer-Levy, Henn-Haase, Marmar)
- Relationships Among Anger, Aggression and PTSD in First Responders Following Hurricane Katrina
  (Brown, Komarovsky, Antonius, Henn-Haase, Marmar, Chemtob)

### Symposium

**Enhancing Innovation & Impact in Trauma-Focused Intervention Development & Implementation**

(Zatzick, Wagner, Ruzek, Jaycox)

- Enhancing Reach, Engagement and Population Impact of Early Trauma Focused Interventions
  (Zatzick, Koepsell)
- Behavioral Activation as an Accessible and Acceptable Early Intervention for Trauma-Related Problems
  (Wagner, Jakupcak)
- Dissemination Infrastructures and Continuous Dissemination of Best Practices in PTSD Care
  (Ruzek)
- Reaching Children Exposed to Trauma Through Schools
  (Jaycox, Stein, Kataoka, Wong, Langley)

### Symposium

**Genes, Gender And Communities: Building a Multi-Level, Bio-Psycho-Social Model of Trauma-Related Risk and Resilience**

(Bradley)

- Gender and Genetic Risk Markers for PTSD
  (Ressler, Gillespie, Mercer, Jovanovic, Conneely, Almlin, Smith, Smith, Bradley)
- Chronic Stress, Sleep Related Biomarkers, and Resilience and Vulnerability to PTSD
  (Mellman, Hall Brown, Lavela, Huntley, Kobayashi)
- Integrating Positive Developmental Experiences into Developmental Models of Vulnerability and Resilience
  (Bradley, Smith, Cross, Jovanovic, Ressler)
- Child Maltreatment Increases Vulnerability to Problematic Drinking in Adverse Social Contexts: Neighborhood Disorganization and Incident Binge Drinking in Detroit
  (Keyes)

### Symposium

**Understanding Complex Patterns of Trauma Exposure and Clinical Needs Among Children and Adolescents: Evidence from the Large-Scale Core Dataset of the National Child Traumatic Stress Network**

(Kisiel)

- The UCLA Trauma History Profile
  (Steinberg, Pynoos)
- The Complexity of Clinical Profiles Among Children and Adolescents Exposed to Multiple and Chronic Caregiver-Related Traumas
  (Kisiel, Spinazzola, Liang, Belin, Stolbach)
- The Contribution of Psychological Maltreatment to Child and Adolescent Outcomes
  (Spinazzola, Hodgdon, Liang, Suvak, Kisiel, Ford, Layne, Stolbach, van der Kolk)
### Daily Schedule – Thursday

#### Thursday, November 3, 2:00 p.m. – 3:15 p.m.

**Concurrent Session 4 (continued)**

<table>
<thead>
<tr>
<th>Workshop</th>
<th>Presentation</th>
<th>Level</th>
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<tbody>
<tr>
<td><strong>Workshop</strong></td>
<td>When a Service Member is Wounded, a Family is Wounded: New DoD/VA Policy and Practice in Engaging and Supporting the Families of Veterans</td>
<td>M</td>
<td>Train/Ed/Dis, Mil/Vets</td>
<td>Grand I &amp; II</td>
<td>3</td>
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<tr>
<td><strong>Workshop</strong></td>
<td>The Role of Social Bonding in the Development and Healing of Combat Post-Traumatic Stress Disorder: A Decade of Practice-Based Evidence</td>
<td>M</td>
<td>Practice, Mil/Vets</td>
<td>Laurel A/B</td>
<td>4</td>
</tr>
<tr>
<td><strong>Panel</strong></td>
<td>Future Directions for Targeting Traumatic Memories in PTSD Treatment: Mechanisms and Implications Across Diverse Intervention Approaches</td>
<td>I</td>
<td>Clin Res, Diverse Pop</td>
<td>Grand IX &amp; X</td>
<td>3</td>
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<tr>
<td><strong>Paper Session</strong></td>
<td>Social Support and Healing</td>
<td>Grand VII &amp; VIII</td>
<td>3</td>
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<tr>
<td><strong>Paper Session</strong></td>
<td>Parents and Teachers</td>
<td>Essex</td>
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#### Thursday, November 3, 3:30 p.m. – 4:45 p.m.

**Concurrent Session 5**

<table>
<thead>
<tr>
<th>Symposium</th>
<th>Trauma, Self, and Identity</th>
<th>M</th>
<th>Practice, Diverse Pop</th>
<th>Dover</th>
<th>3</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Symposium</strong></td>
<td>A Double-Edged Sword: Construing a Traumatic Event as Central to Identity and PTSD and Post-Traumatic Growth</td>
<td>M</td>
<td>Res Meth, Child/Adol</td>
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</tr>
<tr>
<td><strong>Workshop</strong></td>
<td>The REACH Program: Family Psychoeducation for Veterans Living with PTSD and Their Families</td>
<td>M</td>
<td>Practice, Mil/Vets</td>
<td>Grand I &amp; II</td>
<td>3</td>
</tr>
<tr>
<td><strong>Panel</strong></td>
<td>Disasters, Media and Public Resiliency in the Asia Pacific Region: Perspectives from Current Crises</td>
<td>I</td>
<td>Media, Disaster</td>
<td>Grand VI</td>
<td>3</td>
</tr>
</tbody>
</table>
Daily Schedule – Thursday and Friday
Thursday, November 3, 3:30 p.m. – 4:45 p.m.

Concurrent Session 5 (continued)

<table>
<thead>
<tr>
<th>Panel</th>
<th>Presentation</th>
<th>Level</th>
<th>Keywords</th>
<th>Room</th>
<th>Floor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Panel</td>
<td>Moving from Competition to Collaboration: Research-Based Approaches in Developing More Effective PTSD Psychotherapies (Kudler, Gilboa-Schechtman, Haugen, Evces, Adler Nevo, Weiss)</td>
<td>M</td>
<td>Res Meth, Caregvrs</td>
<td>Grand VII &amp; VIII</td>
<td>3</td>
</tr>
<tr>
<td>Panel</td>
<td>Broken Bonds: The Impact of Intergenerational Trauma on Safe Parenting (Chemtob, Urquiza, Tullberg)</td>
<td>M</td>
<td>Clin Res, Adult/Cmplx</td>
<td>Essex</td>
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<tr>
<td>Panel</td>
<td>Theoretical Approaches for Trauma Adaptation: Clinical Research Applications (Benight, Hobfoll, Kaniasty, Pysczcynski)</td>
<td>I</td>
<td>Res Meth, Disaster</td>
<td>Laurel A/B</td>
<td>4</td>
</tr>
<tr>
<td>Panel</td>
<td>Psychological First Aid: Lessons from Low- and Middle-Income Countries (Snider, Bisson, Schafer, Baron, van Ommeren)</td>
<td>M</td>
<td>Global, Disaster</td>
<td>Laurel C/D</td>
<td>4</td>
</tr>
<tr>
<td>Case Study</td>
<td>A Twenty Year Follow-Up of the Hostage Victims of Altaview Hospital (Panos, Ochberg, Dulle)</td>
<td>M</td>
<td>Clin Res, Violence</td>
<td>Grand III &amp; IV</td>
<td>3</td>
</tr>
<tr>
<td>Case Study</td>
<td>Trauma Narratives: Functions, Memory Processes, and Reconstruction in Therapy and Video Testimonies (Peri, Dor, Tuval-Mashiach)</td>
<td>M</td>
<td>Clin Res, Diverse Pop</td>
<td>Kent</td>
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Paper Session

<table>
<thead>
<tr>
<th>Paper Session</th>
<th>Intergenerational/Historical Trauma (Yellow Horse Brave Heart)</th>
<th>Grand IX &amp; X</th>
<th>3</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Ethnic Identity, Intergenerational Conflict and Mental Health Outcomes of Somali Refugee Adolescents Resettled in the United States (Miller, Abdi, Ellis)</td>
<td>M</td>
<td>Cul Div, Child/Adol</td>
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<tr>
<td></td>
<td>Wicasa Was’aka: Addressing Historical Trauma with American Indian and Alaskan Native Men and Boys (Yellow Horse Brave Heart, Elkins, Tafaya, Bird, Salvador)</td>
<td>I</td>
<td>Practice, Diverse Pop</td>
</tr>
<tr>
<td></td>
<td>Epigenetics and Intergenerational Complex Trauma (Doughty)</td>
<td>I</td>
<td>Bio Med, Adult/Cmplx</td>
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<td></td>
<td>Healing Through Community: A Grounded Theory Model for the Protection of Children from Abuse in Rwanda (Costillo, Williams, Bustrum, Chege, Reimer)</td>
<td>M</td>
<td>Commun, Child/Adol</td>
</tr>
</tbody>
</table>

Thursday, November 3

5:00 p.m. – 6:00 p.m. | Poster Session 1/Cash Bar | Grand V | 3 |
6:15 p.m. – 7:00 p.m. | Town Hall Meeting | Grand I & II | 3 |
7:00 p.m. – 9:00 p.m. | Welcome Reception | Harborside A/B/C | 4 |
8:00 p.m. – 10:30 p.m. | The Interrupters Film Screening | Grand VI | 3 |

Friday, November 4

7:00 a.m. – 8:00 a.m. | Coffee and Tea | Grand Foyer | 3 |
7:00 a.m. – 5:00 p.m. | Registration Open | Grand Rotunda | 3 |
7:00 a.m. – 6:00 p.m. | Bookstore Open | Grand Foyer | 3 |
7:00 a.m. – 6:00 p.m. | Exhibits Open | Grand Rotunda & Grand Foyer | 3 |
### Daily Schedule – Friday
**Friday, November 4, 8:00 a.m. – 9:15 a.m.**

<table>
<thead>
<tr>
<th>Concurrent Session 6</th>
<th>Featured Symposium</th>
<th>The September 11, 2001 Terrorist Attacks: Ten Years After</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Symposium</strong></td>
<td>Mental Health</td>
<td>9/11 Mental Health: What Have We Learned in the Last Decade</td>
</tr>
<tr>
<td></td>
<td>Genetic Vulnerability</td>
<td>Social Constraints, Genetic Vulnerability, and Mental Health Following Collective Stress</td>
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<td></td>
<td>Aftermath of Terror</td>
<td>The Aftermath of Terror: A Nationwide Longitudinal Study of Post-Traumatic Stress Across the 9/11 Decade</td>
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<tr>
<td></td>
<td>Children</td>
<td>Intervening with Children and Adolescents Exposed to the World Trade Center Attacks</td>
</tr>
<tr>
<td><strong>Symposium</strong></td>
<td>Adherence in Psychotherapy and Pharmacotherapy for PTSD</td>
<td>Early Intervention in the Immediate Aftermath of Trauma</td>
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<tr>
<td></td>
<td>Pharmacotherapy</td>
<td>Behavioral Activation as an Alternative Treatment for PTSD Among Returning Veterans</td>
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<td></td>
<td>PTSD</td>
<td>How Does Medication Nonadherence Impact Clinical Outcomes in Persons with PTSD?</td>
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<tr>
<td></td>
<td>Medication</td>
<td>Understanding Treatment Dropout and Adherence from the Perspective of Patient Preferences</td>
</tr>
<tr>
<td><strong>Symposium</strong></td>
<td>Attachment and Oxytocin: Protective for Recovery from Trauma?</td>
<td>Exogenous and Endogenous Stimulation of the Oxytocin System in Recently Traumatized Humans: Lessons from the Prairie Vole Model</td>
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<td></td>
<td>Protective</td>
<td>Oxytocin Administration in The Prairie Vole: Feed-Forward Effects in the Context of Stress</td>
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<td></td>
<td>Recovery</td>
<td>Effect of Primed Attachment Security and Oxytocin on Processing of Trauma-Related Stress</td>
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<tr>
<td></td>
<td>from Trauma</td>
<td>Childhood Traumatic Experiences, and Oxytocin Response to a Psychosocial Challenge in Adulthood. The Role of Attachment Representations and of Different Types of Traumatic Events</td>
</tr>
<tr>
<td><strong>Symposium</strong></td>
<td>Enhancing Medical, Forensic, Psychiatric, and Social Support for Victims of Drug-Facilitated Sexual Assault: Unique Symptom Patterns, Treatment Needs, and an Integrated Care Model</td>
<td>An Urban Drug-Facilitated Sexual Assault Epidemic? Incidence, Characteristics, and an Integrated Care Model</td>
</tr>
<tr>
<td></td>
<td>Forensic</td>
<td>Formal and Informal Help-Seeking After Drug-Facilitated Sexual Assault: Medical, Forensic, Psychiatric, and Social Support</td>
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<td></td>
<td>Psychiatric</td>
<td>Drug-Facilitated Sexual Assault and PTSD: Drug-Induced Amnesia and Differential Symptom Development</td>
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<td></td>
<td>Social</td>
<td>Developing a Brief Manualized Therapy for Victims of Drug-Facilitated Sexual Assault</td>
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</tbody>
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ISTSS 27th Annual Meeting  www.istss.org
Daily Schedule – Friday
Friday, November 4, 8:00 a.m. – 9:15 a.m.

Concurrent Session 6 (continued)
Symposium: Evidence for a New, Distinct Construct Within PTSD's Symptom Criteria
- Support for “Dysphoric Arousal” Across Trauma-Exposed Samples
  (Elhai)
- Assessing the Five-Factor Model of PTSD with Medical Patients and Military Veterans:
  Is Dysphoric Arousal Differentially Related to Anxiety and Depression?
  (Elhai)
- Assessing PTSD's Latent Structure in European Trauma Victims: Evidence for a
  Five Factor Dysphoric and Anxious Arousal Model
  (Armour)
- Evidence for a Unique PTSD Construct Represented by PTSD's D1-D3 Symptoms
  (Biehn)
- Post-Traumatic Stress Disorder Symptom Structure in Chinese Adolescents Exposed
  to a Deadly Earthquake
  (Wang)

Workshop: Design, Implementation and Evaluation of Psychosocial Interventions for
Violence-Affected Children in Low- and Middle-Income Countries:
Introductory Workshop on Integrating Research and Practice
(Jordans, Kohrt, Murray, Wietse)

Panel: What I Wish I Knew Before: Seasoned Advice on Networking, Developing
Mentoring Relationships, and Career Planning in Psychology
(Ja Bash, Keane, Monson, Batten)

Case Study: Engaging with Military Families in a Community Setting: Lessons Learned
(Newman, LeBron, Labruna, Vogel)

Paper Session: Secondary Trauma
(Social Connectedness and Therapist Wellness:
A Case Study in Trauma Treatment
(Comeau, Genovese)

Primary and Secondary Trauma Exposure in Clinicians:
Lessons Learned from Hurricane Katrina and 9/11
(Tosone)

The Nature and Emotional Impact of Traumatic Exposure Among
South African Emergency Care Practitioners
(Basedau)

Training for Community-Based Mental Health Workers
(Lloyd)

Paper Session: Creative Interventions
(Soldiers’ Poetry and the Undoing of Language During War
(Ben-Tovim)

Masks in Group Work with Female Trauma Survivors
(Keats)

Evaluating the Healing Power of Art and Play:
A Cross-Cultural Investigation of Psychosocial Resilience in
Child and Adolescent Survivors of the Sichuan
Earthquake in the People’s Republic of China
(Fu)

Project HEAL: An Internet-Based Self-Management Intervention for
Preventing Prolonged Grief
(Delaney, Litz, Au, Prigerson, Block)

Friday, November 4, 9:30 a.m. – 10:45 p.m.

Concurrent Session 7
Keynote: Throwing Off the Burden of Shame: Social Bonds and
Recovery from the Traumas of Gender-Based Violence
(Herman)
Daily Schedule – Friday

Friday, November 4, 9:30 a.m. – 10:45 p.m.

Concurrent Session 7 (continued)

<table>
<thead>
<tr>
<th>Symposium</th>
<th>Traumatic Brain Injury Among Veterans: Identification, Symptoms, and Treatment Response</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>[Iverson]</td>
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<tr>
<td></td>
<td>Concordance Rates of Established TBI Diagnostic Criteria with</td>
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<td></td>
<td>Department of Veterans Affairs Clinical Judgment</td>
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<td></td>
<td>(Pogoda, Iverson, Baker, Krengel, Meterko, Stolzmann, Lew, Hendricks)</td>
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<tr>
<td></td>
<td>Do OEF/OIF Veterans Who Experience Both MST and Deployment-Related TBI</td>
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<td></td>
<td>Face More Mental Health Problems Than Those with Deployment-Related TBI Only?</td>
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<tr>
<td></td>
<td>(Iverson, Kimerling, Pogoda, Stolzmann, Meterko, Baker, Krengel, Hendricks)</td>
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<td></td>
<td>Affective Attention Shifts with Worsening PTSD Symptom Severity in</td>
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<td></td>
<td>OEF/OIF Veterans with Mild Traumatic Brain Injury</td>
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<td>(Amick, Rasmusson, Fortier, Milberg, McGlinchey)</td>
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<td></td>
<td>Psychophysiological Reactivity in Combat Veterans With PTSD and With or Without mTBI</td>
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<td>(Spira)</td>
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<table>
<thead>
<tr>
<th>Workshop</th>
<th>NIH Funding Opportunities and Priorities</th>
</tr>
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<tbody>
<tr>
<td></td>
<td>(Borja, Boyce, Kahana, Maholmes)</td>
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<table>
<thead>
<tr>
<th>Panel</th>
<th>Creating a New Matrix for First Responder Early Intervention</th>
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<tbody>
<tr>
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<td>(Gist, Taylor, Watson, Saunders, Slawinski)</td>
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<table>
<thead>
<tr>
<th>Case Study</th>
<th>Prolonged Exposure for PTSD Resulting from Multiple and Severe Traumatic Experiences Over the Lifespan</th>
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<tbody>
<tr>
<td></td>
<td>(Brinen, Sposato, Hembree)</td>
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</tbody>
</table>

Friday, November 4

9:30 a.m. – 6:00 p.m. Poster Session 2 Open

Friday, November 4, 11:00 a.m. – 12:15 p.m.

Concurrent Session 8

<table>
<thead>
<tr>
<th>Master Clinician</th>
<th>Restoring the Protective Shield: Core Concepts from Child-Parent Psychotherapy</th>
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<tbody>
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<td>(Ghosh Ippen)</td>
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</table>

<table>
<thead>
<tr>
<th>Symposium</th>
<th>Beyond Simple Risk and Resilience: Methodological and Theoretical Advances in the Study of Outcome Heterogeneity in Response to Potentially Traumatic Events</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(Galatzer-Levy)</td>
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<tr>
<td></td>
<td>Predicting Trajectories of PTSD Symptomatology Following Exposure to Critical Incidents Among a Large Cohort of Police Officers</td>
</tr>
<tr>
<td></td>
<td>(Henn-Haase, Galatzer-Levy, Madan, Neylan, Marmar)</td>
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<tr>
<td></td>
<td>Acoustic Startle Eyeblink Reflex Under Low, but Not High, Threat Differentiates Longitudinal Profiles of Resilient and Symptomatic Police Officers</td>
</tr>
<tr>
<td></td>
<td>(Madan, Galatzer-Levy, Pole, Metzler, Marmar)</td>
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<tr>
<td></td>
<td>Heterogeneous PTSD Symptom Profiles Predict PTSD Related Functioning Better Than Aggregated PTSD Symptoms</td>
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<td></td>
<td>(Galatzer-Levy, Brown, Henn-Haase, Marmar, Chemtob, Galatzer-Levy)</td>
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<tr>
<td></td>
<td>Trajectories of Sleep Disturbances and its Relation to Stress Related Symptomatology</td>
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<td>(Neylan)</td>
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<table>
<thead>
<tr>
<th>Symposium</th>
<th>Intergenerational Legacies of Trauma: Recent Multidimensional Findings Across Species and Among Differing Traumatic Experiences</th>
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<tbody>
<tr>
<td></td>
<td>(Danieli)</td>
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<td></td>
<td>Risk, Resilience and Gene-Environment Interplay in Primates</td>
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<td></td>
<td>(Suomi)</td>
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<td>Evidence of Epigenetic Alterations in Holocaust Offspring</td>
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<td></td>
<td>(Yehuda, Bierer, Flory)</td>
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<td></td>
<td>Parental Exposure to Trauma and Child Mental Health: Preliminary Findings on Highly Exposed Families in NYC and the Tel Aviv Area</td>
</tr>
<tr>
<td></td>
<td>(Duarte, Teichman, Teichman, Wu, Hoven)</td>
</tr>
</tbody>
</table>
Daily Schedule – Friday
Friday, November 4, 11:00 a.m. – 12:15 p.m.

Concurrent Session 8 (continued)

<table>
<thead>
<tr>
<th>Symposium</th>
<th>Cognitive Processing Therapy Out of the Box (Elwood)</th>
<th>M</th>
<th>Clin Res, Violence</th>
<th>Dover 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Additive Benefits of a Brief Sleep Treatment Prior to Cognitive Processing Therapy in Interpersonal Violence Survivors with PTSD (Elwood, Mott, Galovski)</td>
<td></td>
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<tr>
<td>Gender Similarities and Differences in Outcomes Following a Course of Cognitive Processing Therapy in Survivors of Interpersonal Trauma (Galovski, Blain)</td>
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<tr>
<td>A Multisite Randomized Controlled Effectiveness Trial of CPT for Australian Veterans with PTSD (Forbes, Lloyd, Nixon, Bryant, Varker, Creamer)</td>
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<tr>
<td>Reductions in PTSD and Postconcussive Symptoms Following Treatment in a PTSD/TBI Residential Program Based on CPT-C (Walter, Kiefer, Chard)</td>
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<table>
<thead>
<tr>
<th>Symposium</th>
<th>Dissemination of Evidence-Based Psychotherapies for use with Military Personnel (Riggs)</th>
<th>M</th>
<th>Practice, Mil/Vets</th>
<th>Essex 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dissemination Efforts at the Center for Deployment Psychology (Riggs)</td>
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<tr>
<td>Dissemination of Prolonged Exposure Therapy to Military Behavioral Health Providers (Domenici, Brim)</td>
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<tr>
<td>Dissemination of Cognitive Processing Therapy for PTSD with Military Personnel (Schulz, Copland)</td>
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<tr>
<td>Trauma and Sleep Disturbance: Epidemiology and Treatment Approaches for Military Veterans (Brim)</td>
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<table>
<thead>
<tr>
<th>Workshop</th>
<th>Beyond Baron and Kenny and MacArthur: A Modern Mediation Analysis Workshop (Hayes, Lunney)</th>
<th>M</th>
<th>Res Meth, Mil/Vets</th>
<th>Laurel C/D 4</th>
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<tbody>
<tr>
<td>Are You Brave Enough? Managing Institutional Secondary Traumatic Stress (Naturale, Pulido)</td>
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<table>
<thead>
<tr>
<th>Panel</th>
<th>Trauma-Informed Approaches to Public Health Problems: Lessons from City of Brotherly Love (Purtle, Bloom, Corbin, Rabinowitch)</th>
<th>M</th>
<th>Prevent, Adult/Cmplx</th>
<th>Grand III &amp; IV 3</th>
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</thead>
<tbody>
<tr>
<td>Individual Placement and Supported Employment for Veterans with PTSD (Davis, Drebing, Leon, Toscano, Drake)</td>
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<table>
<thead>
<tr>
<th>Paper Session</th>
<th>Trauma and Relationships (Meehan)</th>
<th>M</th>
<th>Clin Res, Adult/Cmplx</th>
<th>Kent 4</th>
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</thead>
<tbody>
<tr>
<td>Reflective Function in Psychotherapy Patients with Chronic PTSD (Meehan, Markowitz, Palicova, Neria)</td>
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<tr>
<td>Attachment Trauma and Interpersonal Relationships of Child and Adolescent Inpatients (Szymanski, Springer)</td>
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<tr>
<td>Adult Attachment: The Role of Intimate Social Bonds in Predicting Long-Term Outcome Following Childhood Trauma (Petretic, Chaissen, Karlsson)</td>
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<td>School Bullying: A Cross-Cultural Study of Prevalence and Psychological Consequences (Elklit)</td>
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# Daily Schedule – Friday

**Friday, November 4**

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
<th>Room/Floor</th>
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<tbody>
<tr>
<td>12:30 p.m. – 1:45 p.m.</td>
<td>Student Lunch Meeting</td>
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<tr>
<td>1:00 p.m. – 2:00 p.m.</td>
<td>ISTSS Early Career Panel</td>
<td>Laurel A/B 4</td>
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<tr>
<td>(Brown, Etkin, Maguen, Neylan, Nickerson)</td>
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<tr>
<td>2:00 p.m. – 3:15 p.m.</td>
<td>Student Internship and Postdoctoral Program Networking Fair</td>
<td>Harborside D/E 4</td>
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</tbody>
</table>

**Friday, November 4, 2:00 p.m. – 3:15 a.m.**

### Concurrent Session 9

#### Featured Presentation

**Prisoner of Her Past Part I: Introduction and Film Screening**

* Reich, Quinn, Kudler, Albeck, Danielli, Ososfsky

#### Symposium

**The Nature, Mechanisms, and Treatment of Grief**

* Bryant

  - Information Processing of Emotional Information in Complicated Grief
    * Maccallum
  - Complicated Grief and Deficits in Expressive Flexibility
    * Bonanno
  - The Extent and Impact of Traumatic Loss Among Deployed Marines
    * Marino-Carper, Litz, Nash, Baker, Goldsmith
  - Is Exposure Necessary for Treating Complicated Grief?
    * Bryant

#### Symposium

**Relational Trauma and the Impact on Children: Assessing Beyond Behavior**

* Richardson

  - Psychosocial Consequences of Relational Trauma: Preliminary Findings from the NCTSN Core Data Set
    * Briggs-King
  - Relational Trauma and Children: The Co-Occurrence of Trauma Within the Caregiving Relationship and Neurodevelopmental Delays in Children
    * Richardson
  - Relational Trauma and Resilience: Child, Parent, and Family Relationship Factors Promoting Positive Outcomes Among a Sample of Physically Abused Children
    * Carmody, Hasket, Loehman

#### Workshop

**Treating Military Related PTSD and Comorbidity in Veterans Across the Lifespan**

* Richardson, Smith

#### Panel

**Individual, Family and Social Challenges to the Implementation of Early Interventions to Promote Mental Health After Trauma and Disaster**

* O’Donnell, Zatzick, Kassam-Adams, Brewin, Bisson

#### Panel

**The Use of Peer Consultation and Support for Trauma Clinicians Working with Military Service Members and Veterans**

* Collie, Roberts, Aasved, Holohan, Bates

#### Panel

**Moral Injury: Theory, Evidence and Intervention**

* Nickerson, Stein, Steenkamp, Joscelyne, Litz

#### Case Study

**The RAP Club: A Trauma-Focused Group Delivered by Adolescent and Young Adult Peer Leaders**

* Tandon, Tucker, Gbalazeh, Nole, Habib
Daily Schedule – Friday
Friday, November 4, 2:00 p.m. – 3:15 a.m.

Concurrent Session 9 (continued)

Presentation

<table>
<thead>
<tr>
<th>Paper Session</th>
<th>Psychotherapy Outcomes</th>
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<td>Trauma-Focused Cognitive Behavioral Therapy (TFCBT) vs. Treatment as Usual (TAU) in Routine Clinical Care: Results from an RCT Study in Norway (Jensen, Egeland, Holt, Hukkelberg, Ormhaug)</td>
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<td>A Meta-Analysis of Psychotherapy for PTSD in Adult Survivors of Childhood Interpersonal Trauma (Ehring)</td>
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<td>Yoga as a Complimentary Treatment for Chronic PTSD (Stone, Spinazzola, Sharma, Suvak, van der Kolk)</td>
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<td>The Relationship Between Treatment Fidelity and Clinical Outcomes in the Implementation of CPT in VA Settings (Wiltsey Stirman, Calloway, Monson, Resick, McDonald)</td>
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<thead>
<tr>
<th>Paper Session</th>
<th>Predictors of Impairment</th>
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<tr>
<td></td>
<td>Joint Effect of Childhood Abuse and Family History of Depression on Risk for PTSD (Flory, Yehuda, Passarelli, Siever)</td>
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<td>The Role of Adverse Childhood Experiences in the Factor-Based Dimensions of Psychopathy Among Criminally Involved Men and Women (Komarovskaya, Warren)</td>
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<td>Is Childhood Adversity Associated with Homelessness Even After Adjusting for Axis I &amp; II Disorders? Results from a Nationally Representative Sample (Roos)</td>
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<td></td>
<td>Predictors of Suicidal Behavior in Veterans of the Afghanistan and Iraq Wars (Gradus, Street, Resick)</td>
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</table>

Friday, November 4, 3:30 p.m. – 4:45 p.m.

Concurrent Session 10

<table>
<thead>
<tr>
<th>Featured Presentation</th>
<th>Prisoner of Her Past Part II: Panel and Audience Discussion</th>
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<tbody>
<tr>
<td>(Media)</td>
<td>(Kudler, Osofsky, Osofsky, Albeck, Danieli)</td>
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</table>

Symposium

| Response to Trauma Across the Lifespan: The Role of Peritraumatic Reactions (Kerig) |
| Peritraumatic Distress and Peritraumatic Dissociation Across Lifespan (Rodgers, Bui, Arbuz, Birmes) |
| The Relationship of Child and Parental Peritraumatic Reactions and Post-Traumatic Stress Disorder (Bui, Brunet, Birmes) |
| Trauma Exposure, Peritraumatic Reactions, and PTSD Symptoms Among Juvenile Justice Involved Youth (Kerig, Bennett) |
| Response to Trauma Across the Lifespan: The Role of Peritraumatic Reactions (Brunet) |
### Concurrent Session 10 (continued)

#### Symposium Challenges and Successes in Evaluating Community-Based Interventions to Improve Outcomes for Children Exposed to Violence and Trauma

- (Jaycox)
- National Evaluation of the Safe Start: Promising Approaches to Children Exposed to Violence Initiative (Jaycox, Schultz, Hickman, Barnes-Proby, Kracke)
- Role of Evaluation in State-Wide, Community-Based Implementation of Trauma-Focused Therapy for Children (Gewirtz, Reckinger)
- Evaluation in the Support of Training and Consultation to Improve Therapists’ Effective Use of CBT (Berliner, Dorsey, Lyon)

#### Symposium Developmental Perspectives on Proposed DSM-V Bereavement Criteria: Three Longitudinal Studies of Bereaved Children and Adolescents

- (Layne)
- Developmental Considerations for DSM-V Bereavement-Related Disorders (Kaplow, Layne, Pynoos)
- Do Traumatic Circumstances of the Death Matter? Predicting the Longitudinal Course of Grief in Adolescents (Layne, Olsen, Kaplow, Pynoos)
- Loss in the Context of Social Ties: Mental Health Trajectories of War-Affected Youth in Sierra Leone (Betancourt, Newnham)

#### Symposium Advances in the Neurobiology Underlying Symptomatology and Recovery in Post-Traumatic Stress Disorder

- (Marman, Castro)
- Neurobiology of Implicit Emotion Regulation: Avenues for Understanding Psychopathology and its Treatment (Etkin)
- Functional and Structural Abnormalities in Childhood Sexual Abuse-Related PTSD: Implications for Characterization and Treatment (Brown, Root, Perez, Teuscher, Pan, Cloitre, LeDoux, Silbersweig, Stern)
- Neural Mechanisms and Treatment Predictors in Post-Traumatic Stress Disorder (Felmingham, Bryant, Malhi)

#### Workshop The Harm and Healing of Betrayal Trauma: A Researcher/Clinician Dialogue

- (Freyd, Kahn, Cromer, Platt)

#### Panel Looking Through the Lens of Local Culture: Implications for the Assessment and Treatment of Post-Conflict Populations

- (La Bash, De Jong, Silove, Friedman)

### Paper Session Veterans and Their Families

- (Wade)
- A Controlled Trial of an Intervention for Family Members of Veterans with Combat-Related PTSD (Courtney, Malta, Voss, Kennedy)
- Impact of an Online Post-Traumatic Stress Disorder Training Game on Families of Returning Veterans (Albright)
- A Learning Collaborative to Improve Mental Health and Family Supports to Medically Discharging Australian Defense Force Members (Wade, Pead)
- Familial and Non-Familial Networks, Trauma and Psychiatric Outcomes: A 30-Year Longitudinal Study of Vietnam Veterans (Price, Widmer)
Daily Schedule – Friday and Saturday

Friday, November 4, 3:30 p.m. – 4:45 p.m.

Concurrent Session 10 (continued)

<table>
<thead>
<tr>
<th>Paper Session</th>
<th>Presentation</th>
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</table>
| **Civilian Survivors of Conflicts**
  (Meyerowitz) | Resilience and Social Ties: The Missing Pieces of Post-Conflict Interventions?  
  (Suarez) | M  Cul Div, Civil/Ref |
| | Do Measures of Distress Need to be Culturally Specific?  
  (Jayawickreme, Jayawickreme, Atanasov, Goonasekera, Foa) | M  Global, Civil/Ref |
| | Social Support, Religiosity, and Trauma Among Survivors of the 1994 Rwandan Tutsi Genocide  
  (Ng, Miller, Meyerowitz) | I  Global, Civil/Ref |
| | Traumatic Stress and Comfort as Responses to Reminders of the 1994 Rwandan Tutsi Genocide Among Orphaned Survivors  
  (Meyerowitz, Ng, Taylor-Ford, Miller) | M  Global, Civil/Ref |
| **Disaster Response**
  (Shultz) | A Cross-Cultural Investigation of Protective Factors that Fostered Resilience in Chinese Youth After the Sichuan Earthquake in The People's Republic of China  
  (Fu) | M  Cul Div, Disaster |
| | The Development of Pathology in Children Following a Natural Disaster: A Prospective Study of the 2010 Middle Tennessee Flood  
  (Felton, Cole, Martin) | M  Clin Res, Child/Adol |
| | Peer-Provided Mental Health Services in Post-Earthquake Haiti: Theory, Implementation, and Preliminary Results  
  (James, Noel, Solon) | I  Global, Disaster |
| | Examining the Trauma Signature of the Japan Tsunami/Nuclear Crisis  
  (Shultz, Espinel, Kelly, Neria) | I  Prevent, Disaster |

Friday, November 4

5:00 p.m. – 6:00 p.m. Poster Session 2 Presentations/Cash Bar  
Grand V  3
6:15 p.m. – 7:30 p.m. Awards Ceremony and Business Meeting  
Grand VI  3
7:30 p.m. – 9:00 p.m. Kathak Dance Performance  
Harborside A/B/C  4
9:00 p.m. – 10:00 p.m. Reception for VA and DoD Employees  
Waterview Lobby Level

Saturday, November 5

7:00 a.m. – 8:00 a.m. Coffee and Tea  
Grand Foyer  3
7:00 a.m. – 2:00 p.m. Exhibits Open  
Grand Rotunda & Grand Foyer  3
7:00 a.m. – 5:00 p.m. Registration Open  
Grand Rotunda  3
7:00 a.m. – 5:00 p.m. Bookstore Open  
Grand Foyer  3
### ISTSS 27th Annual Meeting

**Daily Schedule – Saturday**

Saturday, November 5, 8:00 a.m. – 9:15 a.m.

<table>
<thead>
<tr>
<th>Concurrent Session 11</th>
<th>Presentation</th>
<th>Level</th>
<th>Keywords</th>
<th>Room</th>
<th>Floor</th>
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</thead>
<tbody>
<tr>
<td><strong>Featured Presentation</strong></td>
<td>ISTSS Treatment Guidelines for Complex Trauma</td>
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<tr>
<td>(Cloitre, Courtois, Turner, Lanius, Ford)</td>
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<td>I</td>
<td>Practice, Caregivers</td>
<td>Grand VI</td>
<td>3</td>
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<tr>
<td><strong>Symposium</strong></td>
<td>Neuropsychological Functioning in PTSD</td>
<td>M</td>
<td>Assess Dx, Diverse Pop</td>
<td>Grand VII/VIII</td>
<td>3</td>
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<tr>
<td></td>
<td>Neuropsychological Functioning in Children with PTSD</td>
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<td>(Samuelson, Krueger, Wilson)</td>
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<td></td>
<td>Executive Function in PTSD: Relationship to Neural Responses During Affective Anticipation</td>
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<td>(Aupperle, Allard, Grimes, Simmons, Flagan, Cissell, Thorp, Norman, Paulus, Stein)</td>
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<td></td>
<td>Verbal Memory as a Predictor for Treatment Success in Trauma-Focused Psychotherapy</td>
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<td>(Nijdam, de Vries, Gersons, Olff)</td>
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<td></td>
<td>Traumatic Memory Inconsistency is Associated with a Poor Prognosis in PTSD</td>
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<td>(Brunet, David, Dickie)</td>
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<tr>
<td><strong>Symposium</strong></td>
<td>Novel Therapeutic Approaches in PTSD: Glucocorticoid Alterations and Other New Targets</td>
<td>A</td>
<td>Clin Res, Violence</td>
<td>Grand IX &amp; X</td>
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<td></td>
<td>Augmentation of Prolonged Exposure with Cortisol Treatment</td>
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<td>(Yehuda, Bierer, Pratchett, Malowney)</td>
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<td></td>
<td>A Pilot Study of Mifepristone in Veterans with PTSD</td>
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<td>(Golier, Yehuda)</td>
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<td></td>
<td>A Selective Neurokinin-1 Receptor Antagonist in Chronic PTSD: a Randomized, Double-Blind, Placebo-Controlled, Proof-of-Concept Trial</td>
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<td>(Mathew)</td>
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<td>Are There Golden Hours in PTSD? A Pilot Study with Hydrocortisone</td>
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<td>(Zohar, Cohen)</td>
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<tr>
<td><strong>Symposium</strong></td>
<td>PTSD and Relationship Functioning in Military Couples: Mediators, Moderators, and Treatment</td>
<td>M</td>
<td>Clin Res, Mil/Vets</td>
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<td></td>
<td>Disclosure of Emotions and Combat Events Following Deployment: Effects Among OEF/OIF Veterans</td>
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<td>(Hoyt, Renshaw, Pasupathi)</td>
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<td></td>
<td>PTSD Symptom Clusters and Relationship Adjustment Over Time in National Guard Veterans from Operation Iraqi Freedom</td>
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<td>(Erbes, Meis, Polusny, Arbisi)</td>
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<td></td>
<td>Perceptions of Service Members’ Deployment Experiences Moderate Associations Between Service Members’ PTSD-Related Avoidance and Spouses’ General Distress</td>
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<td>(Renshaw, Campbell)</td>
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<td></td>
<td>Cognitive-Behavioral Conjoint Therapy for PTSD Among US Military Veterans</td>
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<td>(Schumm, Friedman, Monson)</td>
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<tr>
<td><strong>Symposium</strong></td>
<td>Do Attachment and Parenting Buffer the Effects of Trauma in Young Children?</td>
<td>M</td>
<td>Clin Res, Child/Adol</td>
<td>Essex</td>
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<td></td>
<td>Parent-Child Communication and Psychological Symptoms in Parentally Bereaved Children</td>
<td></td>
<td>(Shapiro, Kaplow, Wardecker)</td>
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<td></td>
<td>The Role of Maternal-Infant Bonding on Infant Trauma Exposure</td>
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<td>(Waxler, Richardson, Thelen, Muzik)</td>
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<td></td>
<td>Attachment and Maternal Sensitivity as Buffers for the Effects of Prenatal IPV on Children’s Functioning</td>
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<td>(Levendosky, Bogat)</td>
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### Daily Schedule – Saturday

**Saturday, November 5, 8:00 a.m. – 9:15 a.m.**

#### Concurrent 11 Session (continued)

<table>
<thead>
<tr>
<th>Symposium</th>
<th>Early Interventions for Trauma-Exposed Children</th>
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<tbody>
<tr>
<td>(Nugent)</td>
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<tr>
<td><strong>Presentation</strong></td>
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<tr>
<td>Level: M</td>
<td>Keywords: Prev El, Child/Adol</td>
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<tr>
<td>Room: Laurel C/D</td>
<td>Floor: 4</td>
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</tbody>
</table>

- **The Child and Family Traumatic Stress Intervention:** Secondary Prevention for Youth at Risk of PTSD (Berkowitz)
- **Trauma-Focused CBT for Child PTSD Following Accidental Injury:** An Early Intervention Model (McDermott, Kenardy, March, Cobham, Nixon)
- **Development and Evaluation of an Age-Appropriate Early Intervention for Children Aged 2-16 Years After Road Traffic Accidents or Burns** (Landolt, Kramer)
- **Acute Pharmacologic Prevention for PTSD in Pediatric Injury** (Nugent, Christopher, Ostrowski, Delahanty, Nugent)

<table>
<thead>
<tr>
<th>Workshop</th>
<th>Troubleshooting Tips for Implementing Exposure Therapy for PTSD</th>
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<tbody>
<tr>
<td>(Zayfert, DeViva)</td>
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<tr>
<td><strong>Practice, Adult/Cmplx</strong></td>
<td><strong>Grand III &amp; IV</strong></td>
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<tr>
<th>Workshop</th>
<th>FamilyLive: Addressing Intergenerational Trauma Effects on Parenting Capacities</th>
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<tr>
<td>(Gardner, Loya, Hyman)</td>
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<tr>
<td><strong>Clin Res, Adult/Cmplx</strong></td>
<td><strong>Laurel A/B</strong></td>
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<tr>
<th>Panel</th>
<th>Cultural Diversity in Disasters: Lessons Learned</th>
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<tr>
<td>(Alexander, Aker, Klein, Yilmaz, Ufuk)</td>
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<tr>
<td><strong>Commun, Disaster</strong></td>
<td><strong>Grand I &amp; II</strong></td>
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<td><strong>Floor: 3</strong></td>
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<tr>
<th>Case Study</th>
<th>Post-Traumatic Stress Symptoms &amp; Trauma Focused CBT in a Minority Pediatric Sexual Abuse Client - Challenges, Response, and Considerations</th>
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<tbody>
<tr>
<td>(King, Jones)</td>
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<tr>
<td><strong>Assess Dx, Diverse Pop</strong></td>
<td><strong>Kent</strong></td>
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**Saturday, November 5, 9:30 a.m. – 10:45 a.m.**

#### Concurrent Session 12

<table>
<thead>
<tr>
<th>Keynote</th>
<th>Epigenetic Consequences of Adverse Social Experiences in Primates</th>
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<tbody>
<tr>
<td>(Suomi)</td>
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<tr>
<td><strong>Bio/Med</strong></td>
<td><strong>Harborside Ballroom</strong></td>
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<td><strong>Floor: 4</strong></td>
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<thead>
<tr>
<th>Symposium</th>
<th>Traumatic Stress, Coping and Health Outcomes in Children Facing Medical Events</th>
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<tr>
<td>(Kassam-Adams)</td>
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<tr>
<td><strong>Clin Res, Child/Adol</strong></td>
<td><strong>Grand IX &amp; X</strong></td>
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<td><strong>Floor: 3</strong></td>
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- **Patterns of Health Outcomes In Children with Traumatic Brain Injury and PTSD** (Kenardy, Le Brocque, Anderson, McKinlay, Charlton, Kenardy)
- **Post-Traumatic Stress Reactions in Children Following Pediatric Intensive Care Unit Admission:** Examination of Prevalence and Risk Factors Following Critical Care (Le Brocque)
- **Predictors of Posttrauma Reactions in Preschool Children with Burns** (De Young, Kenardy, Cobham, Kimble)
- **Promoting Adjustment to Pediatric Cancer: Initial Development of An Innovative, Developmentally Sensitive Tool** (Marsac, Hildenbrand, Kohser, Banerjee, Barakat, Alderfer)
### International Society for Traumatic Stress Studies

#### Daily Schedule – Saturday

**Saturday, November 5, 9:30 a.m. – 10:45 a.m.**

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<thead>
<tr>
<th>Concurrent Session 12 (continued)</th>
<th>Level</th>
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<tbody>
<tr>
<td>Symposium</td>
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<tr>
<td>Strategies to Improve the Assessment and Management of Trauma, PTSD and Comorbid Conditions in Primary Care</td>
<td>I</td>
<td>Clin Res, Mil/Vets</td>
<td>Laurel A/B</td>
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<tr>
<td>Increasing Access to Mental Health Care For Iraq and Afghanistan Veterans: Outcomes Of Embedding PTSD Psychologists in Primary Care</td>
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<tr>
<td>(Seal, Cohen, Cohen, Maguen, Daley, Bertenthal)</td>
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<td>Clinicians’ Perspectives on Integrating Mental Health Within Primary Care: A Qualitative Study</td>
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<tr>
<td>(Koenig, Cohen, Daley, Maguen, Seal, Koening)</td>
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<td>Online PTSD Training for Primary Care Providers</td>
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<td>(Samuelson, Choucroun, Medina, Seal)</td>
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<td>A Post-Traumatic Stress Intervention to Improve Care in an Integrated VA Primary Mental Health Clinic</td>
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<td>(Goldstein, Harmon, Shines, Bernardy)</td>
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<tr>
<td>Workshop</td>
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<td>Self-Care, Caregvs</td>
<td>Dover</td>
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<tr>
<td>Care for the Caregivers: A Program of Retreat and Renewal for Military Chaplains</td>
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<td>(Heber, Mackenzie, Sharpe)</td>
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<td>Panel</td>
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<td>Clin Res, Civil/Ref</td>
<td>Essex</td>
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<td>Evidence Based Practices with Refugees: Challenges and Adaptations</td>
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<tr>
<td>(Birman, Rydberg, Gewirtz, Jaycox, Yaylaci, Mohammed, Reckinger)</td>
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**Saturday, November 5**

9:30 a.m. – 6:00 p.m.  **Poster Session 3 Open**

**Grand V**

**Saturday, November 5, 11:00 a.m. – 12:15 p.m.**

**Concurrent Session 13**

<table>
<thead>
<tr>
<th>Symposium</th>
<th>M</th>
<th>Assess Dx, Violence</th>
<th>Dover</th>
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<tbody>
<tr>
<td>Exposure to Media Coverage of the Japan Earthquake in France and Canada: A Prospective Study</td>
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<tr>
<td>(Brunet, Rogers, Hebert, Franko, Simon, Birmes, Bui)</td>
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<tr>
<td>Exposure to Media Coverage of the Japan Earthquake in France and Canada: Rationale and Methods</td>
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<td>(Herbert, Bui, Rogers, Brunet)</td>
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<tr>
<td>Media Coverage of the Japan Earthquake, Peritraumatic Reactions and Sleep Disturbance</td>
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<tr>
<td>(Bui, Rodgers, Herbert, Simon, Brunet)</td>
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<tr>
<td>An Exploration of Exposure to Media Coverage of the Japan Earthquake as a Predictor of PTSD Symptoms and Disordered Eating</td>
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<tr>
<td>(Rogers, Bui, Herbert, Franko, Brunet)</td>
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<th>Symposium</th>
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<th>Assess Dx, Violence</th>
<th>Grand VI</th>
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<tbody>
<tr>
<td>Internet Surveys on Proposed DSM-V Criteria for PTSD</td>
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<tr>
<td>(Friedman, Miller, Kilpatrick, Resnick)</td>
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<tr>
<td>Update on Proposed DSM-V Criteria for PTSD</td>
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<td>(Friedman)</td>
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<td>Pilot Study of a DSM-V Internet Survey Instrument in a U.S. Department of Veterans Affairs PTSD Sample</td>
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<td>(Miller)</td>
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<tr>
<td>An Examination of Proposed DSM-V Criteria for PTSD in a Civilian Sample Exposed to Assault and Other Potentially Traumatic Events</td>
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<td>(Kilpatrick, Resnick)</td>
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</table>
### Daily Schedule – Saturday

**Saturday, November 5, 11:00 a.m. – 12:15 p.m.**

#### Concurrent Session 13 (continued)

<table>
<thead>
<tr>
<th>Symposium</th>
<th>The Interface Between PTSD and Borderline Personality Disorder – Psychopathology and Treatment</th>
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</thead>
<tbody>
<tr>
<td>(Schmahl)</td>
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<tr>
<td></td>
<td>Borderline Personality Disorder in U.S. Military Veterans at High Risk for Suicide:</td>
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<tr>
<td></td>
<td>A Preliminary Study of Dialectical Behavioral Therapy (Maza, New, Goodman, Sasso, Boussi)</td>
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<tr>
<td></td>
<td>Neuroimaging Social Emotional Processing in PTSD: fMRI Study (Frewen, Lanius)</td>
</tr>
<tr>
<td></td>
<td>Influence of Emotional Distraction on Working Memory in PTSD and Borderline Personality Disorder (Elzinga, Krause, Veer, Oei, Rombouts, Schmahl, Bohus, Spinchoven)</td>
</tr>
<tr>
<td></td>
<td>Dialectical-Behavior-Therapy for Severe Post-Traumatic Stress Disorder After Childhood Sexual Abuse: A Randomized Controlled Trial (Bohus, Schmahl)</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Workshop</th>
<th>Ethical Decisions Within an Empirical Frame in the Treatment of PTSD (Schulz, Williams, Galovski)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Workshop</td>
<td>Concurrent Treatment for Post-Traumatic Stress Disorder and Alcohol Dependence (Yusko, McLean)</td>
</tr>
<tr>
<td>Workshop</td>
<td>Cross-Cultural Assessment and Intervention: Lessons from the United States and Rwanda (Fabri, Piwowarczyk, Hastings, Bolton)</td>
</tr>
<tr>
<td>Panel</td>
<td>The Impact of Sexual Abuse on Female Development: Lessons from a Multigenerational, Longitudinal Research Study (Trickett, Noll, Putnam, Haraldson)</td>
</tr>
<tr>
<td>Panel</td>
<td>Children Parents and Community: Circles of Building Resilience in Different Cultural Contexts (Vogel, Pat-Horenczyk, Brom, Baum, Pfefferbaum)</td>
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<tr>
<td>Panel</td>
<td>The Things They Carry: The Bonds of 9/11 First Responders (Barrett, Demaria, Melkumov, Smith, Banks)</td>
</tr>
<tr>
<td>Case Study</td>
<td>Acceptance &amp; Commitment Therapy with a Veteran with Military Related PTSD: The Value of Valuing (Smith)</td>
</tr>
<tr>
<td>Paper Session</td>
<td>Military and Social Support (Vinson)</td>
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<tr>
<td></td>
<td>Does Social Support Help Recovery? A Moderator Analysis of the Relationships Between Social Connections and Improvement in Depression, Anxiety, and PTSD for War and Torture Survivors (Vinson)</td>
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<tr>
<td></td>
<td>The Role of Social Support in PTSD Diagnosis and Course in National Guard Troops Following Return from Iraq or Afghanistan (Shea, Johnson, Reddy)</td>
</tr>
<tr>
<td></td>
<td>Attachment Styles, Social Functioning, Guilt, and PTSD in War Veterans (Malta, Huber, Courtney, Kennedy)</td>
</tr>
</tbody>
</table>
### Daily Schedule – Saturday

**Presentation**

**Saturday, November 5, 12:30 p.m. – 1:45 p.m.**

**Special Interest Groups**

<table>
<thead>
<tr>
<th>SIG</th>
<th>Level</th>
<th>Keywords</th>
<th>Room</th>
<th>Floor</th>
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<tbody>
<tr>
<td>SIG Complex Trauma</td>
<td>Grand III &amp; IV</td>
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<tr>
<td>SIG Early Intervention</td>
<td>Grand I &amp; II</td>
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<tr>
<td>SIG Human Rights and Social Policy</td>
<td>Grand VI</td>
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<tr>
<td>SIG Intergenerational Transmission of Trauma and Resilience</td>
<td>Grand VII &amp; VIII</td>
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<tr>
<td>SIG Spirituality</td>
<td>Essex</td>
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<tr>
<td>SIG Trauma and Substance Use Disorders</td>
<td>Grand IX &amp; X</td>
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</tbody>
</table>

**Saturday, November 5, 2:00 p.m. – 3:15 p.m.**

**Concurrent Session 14**

**Master Clinician**

- Using Compassion Focused Therapy to Work with Shame-Based Flashbacks in PTSD
  (Lee)

**Symposium**

- Helping to Heal Torture Survivors with Evidence-Based Mental Health Programming: Processes and Results from Controlled Trials in Iraq
  (Murray)

  - Results from a Randomized Controlled Trial of Two Specific Mental Health Interventions for Torture and Chemical Attack Survivors in Erbil and Suleimaniya, Northern Iraq
  (Bolton)

  - Results from a Randomized Trial of a Non-Specific Counseling Intervention for Torture Survivors in Dohuk, Northern Iraq
  (Mohammad, Thekra, Sabir, Bolton, Bass, Murray)

  - A Components-Based Therapy Approach with Torture Survivors in Southern Iraq
  (Murray, Dorsey)

**Symposium**

- Couples Issues and Interventions in Trauma Populations
  (Kachadourian)

  - Cognitive-Behavioral Conjoint Therapy for PTSD:
    Results from a Randomized Controlled Trial
    (Monson, Fredman, MacDonald, Schnurr, Resick, MacDonald, Adair, Vorstenbosch, Wagner)

  - Couple-Based Treatments for PTSD in OEF/OIF Veterans
    (Glynn, Sautter, Armelie, Wielt, Casselli, Diaz)

  - Strength at Home Couples Program to Prevent Partner Aggression: Pilot Findings
    (Taft, Monson, Howard, MacDonald, Krill, Murphy, Resick)

  - Associations Between Infidelity and Post-Deployment Mental Health Functioning in a Sample of OEF/OIF Veterans
    (Kachadourian, Smith, Vaughn, Vogt)

**Symposium**

- Trauma Among Child Soldiers Across Nations: Risks, Protective Factors, and Interventions
  (Kerig)

  - Complex Trauma Symptoms in Former Ugandan Child Soldiers
    (Klassen, Metzner, Gehrke, Okello, Alipanga, Ravens-Sieberer)

  - A Longitudinal Study of Risk And Protective Factors Influencing Post-Traumatic Stress Reactions in Sierra Leonean War-Affected Youth
    (Betancourt, Newnham)

  - Socioecological Supports of Former Child Soldiers in Nepal: Psychosocial Wellbeing and Function and the Ecological Impact During the Post-Reintegration Stage
    (Morley, Kohrt)

  - Supporting Reintegration of Former Female Child Soldiers in Northern Uganda: A Multilevel and Integrated Approach
    (Annan, Green, Brier)
Daily Schedule – Saturday
Saturday, November 5, 2:00 p.m. – 3:15 p.m.

Concurrent Session 14 (continued)

<table>
<thead>
<tr>
<th>Symposium</th>
<th>A Unique Study of Post-Traumatic Mental Health: An Epidemiological Study of Serving Australian Defense Force Personnel (McFarlane)</th>
<th>Level</th>
<th>Keywords</th>
<th>Room</th>
<th>Floor</th>
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<tbody>
<tr>
<td></td>
<td>The Challenges of Surveying Military Personnel Across a Land Larger Than Europe; The Australian Defence Force Mental Health Prevalence Study (Hodson, Verhagen, Van Hooff, McFarlane)</td>
<td>I</td>
<td>Commun, Mil/Vets</td>
<td>Kent</td>
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<tr>
<td></td>
<td>The Challenge of Making Accurate Epidemiological Estimates in Defense Populations (Verhagen)</td>
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<tr>
<td></td>
<td>The Prevalence of Mental Health Disorders in the Australian Defense Force; The Healthy Worker Effect Versus a Risky Employment Environment (Hodson, Verhagen, Van Hooff, McFarlane)</td>
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<td></td>
<td>Combat Exposure and Non-Military Trauma as a Cause of Psychiatric Disorder in the Australian Military (Hodson, Verhagen, Van Hooff, McFarlane)</td>
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<thead>
<tr>
<th>Workshop</th>
<th>Enhancing Social Connections in Integrated Trauma and Addiction Treatment (Litt)</th>
<th>M</th>
<th>Practice, Adult/Cmplx</th>
<th>Grand III &amp; IV</th>
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</thead>
<tbody>
<tr>
<td>Workshop</td>
<td>Social Support and School-Based Mental Health Care Post-Hurricane Katrina: A Five-Year Synopsis (Walker, Danna)</td>
<td>M</td>
<td>Commun, Caregvrs</td>
<td>Dover</td>
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<tr>
<td>Workshop</td>
<td>Using Gay Affirmative Psychotherapy to Treat Lesbian, Gay, and Bisexual Trauma Survivors (Alessi, Johnson, Glenn)</td>
<td>M</td>
<td>Practice, Diverse Pop</td>
<td>Laurel C/D</td>
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<thead>
<tr>
<th>Panel</th>
<th>Grief and DSM-5 (Bryant, Cozza, Pynoos, Bonanno)</th>
<th>M</th>
<th>Assess Dx, Older</th>
<th>Harborside Ballroom</th>
<th>4</th>
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<tbody>
<tr>
<td>Panel</td>
<td>Behavioral Health, Social Connectedness, and Community Resilience: Relations Between Science, Practice, and National Health Security Policy (Donato, Goodie, Kaul)</td>
<td>M</td>
<td>Social, Disaster</td>
<td>Grand I &amp; II</td>
<td>3</td>
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<tr>
<td>Case Study</td>
<td>Coercive Control in the Context of Imprisonment and Torture: The Experience of Four Refugees (Evans)</td>
<td>M</td>
<td>Assess Dx, Civil/Ref</td>
<td>Essex</td>
<td>4</td>
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Saturday, November 5, 3:30 p.m. – 4:45 p.m.

Concurrent Session 15

<table>
<thead>
<tr>
<th>Symposium</th>
<th>Clinical and Neurobiological Aspects of Complex Trauma Disorders (Courtois)</th>
<th>Level</th>
<th>Keywords</th>
<th>Room</th>
<th>Floor</th>
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<tbody>
<tr>
<td></td>
<td>How Understanding the Neurobiology of Complex PTSD Can Inform Clinical Practice (Lanius, Frewen)</td>
<td>M</td>
<td>Clin Res, Adult/Cmplx</td>
<td>Grand III &amp; IV</td>
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<td></td>
<td>Results of a Longitudinal Naturalistic Study of Treatment Outcome for Patients with Dissociative Disorders [TOP DD Study] (Brand, McNary, Myrick, Classen, Lanius, Loewenstein, Pain, Putnam)</td>
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<td>Daily Monitoring Outcomes of Affect Regulation Therapy for Women with Complex PTSD (Ford, Tennen)</td>
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<td></td>
<td>FMRI Study of Altered Self-Referential Processing in PTSD Related to Childhood Trauma (Frewen, Lanius)</td>
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</table>
### Symposium: Child Sexual Abuse in Switzerland – Epidemiologic Data and Insights from the Optimus Study

- Child Sexual Abuse in Switzerland: A Multimodal Data Gathering Approach
  - Schnyder, Landolt, Maier, Meidert, Mueller-Pfeiffer, Mohler-Kuo

- Life-Time Prevalence and Annual Incidence of Child Sexual Abuse in Switzerland: A School Survey
  - Landolt, Mohler-Kuo, Maier, Meidert, Schnyder

- Annual Incidence of Disclosed Cases of Child Sexual Abuse in Switzerland: The Optimus Agency Study
  - Maier, Schnyder, Jud, Mohler-Kuo, Landolt, St. Gallen-North

- Perpetrators of Child Sexual Abuse in Switzerland: Results from a Nation-Wide Survey
  - Mueller-Pfeiffer, Maier, Mohler-Kuo, Schnyder, Landolt

### Symposium: Dissociation in PTSD: Assessment and Treatment Implications

- Dissociation in PTSD: Syndrome or Subtype?
  - Wolf, Miller, Reardon, Ryabchenko, Freund, Castillo

- Validation Studies of the Traumatic Dissociation Scale: A Measure of Dissociation Associated with Traumatic Stress
  - Carlson, Waelde, Palmieri, Smith, McDade, Gauthier

- Dissociation as a Moderator of Treatment Response in a Dismantling Study of Cognitive Processing Therapy for PTSD
  - Suvak, Resick, Iverson, Mitchell, Johnston

### Symposium: Rwanda: Lessons from the Field to Improve Social Environments

- The Impact of Exposure to Domestic Violence on Children in Rwanda
  - Rutembesa

- Promoting Healthy Parent-Child Relationships and Parenting in the Face of Genocide and HIV
  - Betancourt

- Addressing Long-Term Trauma Consequences Through Integrative Care in Rwanda
  - Fabri, Bamukunde, Mukanyonga, Cohen

### Symposium: Intimate Partner Abuse: Appraisals, Decision-Making, and Responses to Intervention

- The Impact of Appraisal Processes on Readiness to Leave an Abusive Relationship
  - Matlow, DePrince

- A Qualitative Analysis of College Women’s Leaving Processes in Abusive Relationships
  - Edwards, Murphy, Tansill, Myrick, Probst, Corsa, Gidycz

- Outcomes and Correlates of a Specialized Cognitive Trauma Therapy for IPV Victims
  - Allard, Norman, Thorp, Stein

- Community-Coordinated Response Following Intimate Partner Abuse: A Randomized Clinical Trial
  - DePrince, Labus, Belknap, Buckingham, Gover

### Symposium: Insights From Neuroimaging Research: Probing Emotional Circuitry and Identifying Longitudinal Neural Changes

- Resting State and Activity - Induced fMRI Differences with Behavioral Measures
  - Sheline

- The Neurocircuitry of PTSD: An fMRI Study of Fear Extinction
  - Neria

- Developments in Identifying PTSD-specific Biomarkers and Understanding Treatment Interventions Through the Imaging and Causal Manipulation of Neural Circuitry
  - Etkin
Daily Schedule – Saturday
Saturday, November 5, 3:30 p.m. – 4:45 p.m.

Concurrent Session 15 (continued)

<table>
<thead>
<tr>
<th>Workshop</th>
<th>Disturbances of Regulation in Young Children: Frequencies of Co-Occurring Symptomatology (Black-Pond, Atchison)</th>
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<td>Level</td>
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<td>Keywords</td>
<td>Assess Dx, Child/Adol</td>
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<tr>
<th>Workshop</th>
<th>Cognitive-Behavioral Conjoint Therapy (CBCT) for Post-Traumatic Stress Disorder (PTSD) in Military Couples (Hernandez, Malach, Monson, Donahue)</th>
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<tr>
<td>Level</td>
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<tr>
<td>Keywords</td>
<td>Train/Ed/Dis, Mil/Vets</td>
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<thead>
<tr>
<th>Panel</th>
<th>Torture and Maltreatment in the War on Terror: Rupturing Professional and Clinical Bonds (Keller, Porterfield, Xenakis)</th>
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<tr>
<td>Level</td>
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<tr>
<td>Keywords</td>
<td>Social, Diverse Pop</td>
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<td>Room</td>
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<thead>
<tr>
<th>Paper Session</th>
<th>Women and Relationships (Widera Wysoczanska)</th>
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<tr>
<td>Level</td>
<td>Prevent, Adult/Cmplx</td>
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<td>Prevent, Adult/Cmplx</td>
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<tr>
<td>Room</td>
<td>Grand I &amp; II</td>
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Becoming Resolute as a Recovery Process for Women Surviving Childhood Maltreatment: A Narrative Study (Hall)

The Positive Effects of Relationships and Encounters in the Lives of Women Thriving Despite Childhood Maltreatment (Roman, Diebold, Hall)

Partner Relationships by Women Victimized as Children (Widera Wysoczanska)

Complex Trauma, Intimate Partner Relationship and Support Networks in Female Victims and Non-Victims of Intimate Partner Violence (Cáceres-Ortiz)

Saturday, November 5

5:00 p.m. – 6:00 p.m. Poster Session 3 Presentations/Cash Bar Grand V 3

6:00 p.m. Meeting Adjourns
ISTSS 27th Annual Meeting
Social Bonds and Trauma
Through the Life Span

Grand Ballroom

Session 1: Thursday, November 3
Poster Set-up: 7:30 a.m. – 9:30 a.m.
Poster Display: 9:30 a.m. – 6:00 p.m.
Poster Presentation: 5:00 p.m. – 6:00 p.m.
Poster Dismantle: 6:00 p.m.

Session 2: Friday, November 4
Poster Set-up: 7:30 a.m. – 9:30 a.m.
Poster Display: 9:30 a.m. – 6:00 p.m.
Poster Presentation: 5:00 p.m. – 6:00 p.m.
Poster Dismantle: 6:00 p.m.

Session 3: Saturday, November 5
Poster Set-up: 7:30 a.m. – 9:30 a.m.
Poster Display: 9:30 a.m. – 6:00 p.m.
Poster Presentation: 5:00 p.m. – 6:00 p.m.
Poster Dismantle: 6:00 p.m.

Poster Dismantle
Immediately following your scheduled poster session, display materials must be taken down and removed.

Items not removed by the appointed poster dismantle time will be disposed of and are not the responsibility of ISTSS.
Poster Presentations – Session 1

**Thursday, November 3, 5:00 p.m. – 6:00 p.m.**
Grand Ballroom V, 3rd Floor

**Poster Organization**
Each poster is scheduled for either Poster Session 1 on Thursday, Poster Session 2 on Friday or Poster Session 3 on Saturday and includes a one-hour time period when the presenting author is available to answer questions.

Posters are organized within the Final Program by poster number on each day. The presenting author is listed first. In addition, the index provided at the rear of the Final Program includes all of the authors. A floor map showing the layout of posters is available in the poster hall and on page 66.

**Session 1: Thursday, November 3**
Grand Ballroom V, 3rd Floor
Poster Set-up: 7:30 a.m. – 9:30 a.m.
Poster Display: 9:30 a.m. – 6:00 p.m.
Poster Presentation: 5:00 p.m. – 6:00 p.m.
Poster Dismantle: 6:00 p.m.

**Poster Dismantle**
Immediately following your scheduled poster session, display materials must be taken down and removed. Items not removed by the appointed poster dismantle time will be disposed of and are not the responsibility of ISTSS.

**Poster Presentations – Session 1**

**Thursday, November 3, 5:00 p.m. – 6:00 p.m.**
Grand Ballroom V, 3rd Floor

The Role of Social Contexts and Age in Treatment of Children Disaster Survivors: A Meta-Analysis
Poster # T100 (Clin Res, Child/Adol)
(Kirlic, Tett, Biden, Nelson, Liles, Brandi, Newman, Pfefferbaum)

Understanding Interpersonal Violence and Its Impact on Common Psychiatric Disorders: A Systematic Review of the Literature
Poster # T101 (Res Meth, Diverse Pop)
(DiGangi, Koenen, Galea, Cerda)

An Assessment of the Moderating Effect of Firearm Violence Between Adolescent Psychological Abuse and PTSD Symptoms: A Nationwide Sample
Poster # T102 (Social, Child/Adol)
(Giammertorio, McCloskey, Calvert, Maxwell, Lauterbach)

A Diagnostic Utility Analysis of the PTSD Checklist in Active Duty Marines
Poster # T103 (Assess Dx, Mil/Vets)
(Dickstein, Marino-Carper, Weathers, Goldsmith, Baker, Litz)

How Can We Increase Our Understanding of the Links Between Social Support and Post-Traumatic Stress Disorder?
Poster # T104 (Res Meth, Diverse Pop)
(Nachar, Guay, Lavoie, Marchand, O’Connor)

Attachment-Style Mediates Childhood Maltreatment and Suicidality Among African American Women
Poster # T105 (Clin Res, Adult/Cmplx)
(Zimmerman, Woods, Carlin, Hill, Santorelli)

Examining the Relationship Between Social Support and Mental Health: A Longitudinal Study of Hurricane Katrina
Poster # T106 (Clin Res, Disaster)
(Chan, Lowe, Rhodes)

Perceptions of Lack of Social Support and Transient Spikes in Depression Symptoms Over the Course of PTSD Treatment
Poster # T107 (Clin Res, Violence)
(Keller, Feeny, Zoelldner)
Post-Er the Future: Mental Health of a Community Sample of Children Living in the Gaza Strip

Poster # T108 (Commun, Child/Adol)
(Caccappolo, Aboagye, D’Andrea, Bergholz)

PTSD and Parenting: Maternal Hyperarousal, Parenting Style, and Child Abuse Potential

Poster # T109 (Res Meth, Adult/Cmplx)
(Cross, Williams, Smith, Kamkwala, Samples, Jovanovic, Bradley)

Investigating Brief Exacerbations in Reexperiencing Symptoms Across Imaginal Exposures

Poster # T110 (Clin Res, Violence)
(Post, Feeny, Zoellner)

Post-Traumatic Distress and the Presence of Post-Traumatic Growth Following a Mass Shooting: The Role of Experiential Avoidance

Poster # T111 (Assess Dx, Disaster)
(Miron, Hannan, Varkovitzky, Orcutt, Moss)

Social Support, Social Constraints, and PTSD in Treatment-Seeking Trauma Survivors

Poster # T112 (Clin Res, Diverse Pop)
(Wong, Dimmitt, Hawkins, Hernandez, Shapiro, Weinkam)

Symptom Persistence and Memory Deficits in Post-Traumatic Stress Disorder: A Gene X Environment Study

Poster # T113 (Bio Med, Diverse Pop)
(David, Thakur, Akerib, Rouleau, Brunet)

Cultural Correlates of Resiliency in African American Battered Women

Poster # T114 (Cul Div, Violence)
(Kramer, Johnson, Zucosky)

The Importance of Subjective Experience in Understanding Trauma

Poster # T115 (Assess/Dx, Caregvs)
(Dewey, Schuldberg)

Post-Trauma Risk Checklist as a Practical Screening Tool During Psychological First-Aid

Poster # T116 (Assess Dx, Disaster)
(Joo, Ahn)

Mental Health Risks, Resilience, and Interaction Paradigm Among OEF/OIF Veterans

Poster # T117 (Assess Dx, Disaster)
(Youssef)

Symptom Structure of Post-Traumatic Stress Disorder in White and Hispanic Female Veterans

Poster # T118 (Assess Dx, Diverse Pop)
(Nason, C’d de Baca, Castillo)

Personality Profiles of Intimate Partner Violence Offenders with and Without PTSD

Poster # T119 (Assess Dx, Violence)
(Hoyt, Wray)

Comparing Linguistic Correlates of PTSD in Survivors of a Technological and Natural Disaster

Poster # T120 (Assess Dx, Disaster)
(Brown, D’Andrea)

Confirmatory Factor Analysis of the Detailed Assessment of Post-Traumatic Stress (DAPS) in Trauma-Exposed College Students

Poster # T121 (Assess Dx, Violence)
(Talbert, Carter, Witte, Weathers, Pruneau)

Brief Grief Questionnaire: Validation for a Japanese Sample

Poster # T122 (Assess Dx, Violence)
(Ito, Nakajima, Konishi, Shirai, Ishimaru, Kim)

Traumatized Self-System in Adults Repetitively Exposed to Interpersonal Trauma

Poster # T123 (Assess Dx, Adult/Cmplx)
(Jang)

Linking Childhood Maltreatment Characteristics to Mental Health Symptoms in Adolescence: The Role of Emotion Regulation Difficulties

Poster # T124 (Assess Dx, Child/Adol)
(Sundermann, DePrince, Chu)

The Structure of PTSD Before, During, and Following Deployment to Iraq

Poster # T125 (Assess Dx, Mil/Vets)
(Meis, Erbes, Kaler, Arbisi, Polusny)

PTSD, Combat Exposure, and Traumatic Brain Injury as Predictors of Neuropsychological Performance and Functional Impairment Among Iraq and Afghanistan War Veterans

Poster # T126 (Assess Dx, Mil/Vets)
(Meyer, Woodward, Kruse, Kimbrel, Morissette, Gulliver)
Poster Presentations – Session 1

Responses of Children to Parental Death: A Report and Comparison of Military and Civilian Caregivers

*Poster # T127 (Assess Dx, Mil/Vets)*
(Cozza, Schmidt, Fullerton, Feerick, Harris, Ursano)

Combat Related PTSD and Intimate Relationship Difficulties Among Soldiers and Spouses: The Role of Attachment and Emotion Regulation

*Poster # T128 (Assess Dx, Mil/Vets)*
(Lambert, Clinton)

The Role of PTSD Severity, Depression, and Perceived Social Support in Predicting Quality of Life After Interpersonal Trauma

*Poster # T129 (Assess Dx, Violence)*
(Chappuis, Kouchy, Galovski)

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Grand Ballroom V, 3rd Floor

Poster Organization
Each poster is scheduled for either Poster Session 1 on Thursday, Poster Session 2 on Friday or Poster Session 3 on Saturday and includes a one-hour time period when the presenting author is available to answer questions.

Posters are organized within the Final Program by poster number on each day. The presenting author is listed first. In addition, the index provided at the rear of the Final Program includes all of the authors. A floor map showing the layout of posters is available in the poster hall and on page 66.

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Grand Ballroom V, 3rd Floor
Poster Set-up: 7:30 a.m. – 9:30 a.m.
Poster Display: 9:30 a.m. – 6:00 p.m.
Poster Presentation: 5:00 p.m. – 6:00 p.m.
Poster Dismantle: 6:00 p.m.

Poster Dismantle
Immediately following your scheduled poster session, display materials must be taken down and removed. Items not removed by the appointed poster dismantle time will be disposed of and are not the responsibility of ISTSS.

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**Poster Organization**
Each poster is scheduled for either Poster Session 1 on Thursday, Poster Session 2 on Friday or Poster Session 3 on Saturday and includes a one-hour time period when the presenting author is available to answer questions.

Posters are organized within the Final Program by poster number on each day. The presenting author is listed first. In addition, the index provided at the rear of the Final Program includes all of the authors. A floor map showing the layout of posters is available in the poster hall and on page 66.

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Grand Ballroom V, 3rd Floor
Poster Set-up: 7:30 a.m. – 9:30 a.m.
Poster Display: 9:30 a.m. – 6:00 p.m.
Poster Presentation: 5:00 p.m. – 6:00 p.m.
Poster Dismantle: 6:00 p.m.

**Poster Dismantle**
Immediately following your scheduled poster session, display materials must be taken down and removed. Items not removed by the appointed poster dismantle time will be disposed of and are not the responsibility of ISTSS.

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