



European Journal of Psychotraumatology

ISSN: (Print) (Online) Journal homepage: https://www.tandfonline.com/loi/zept20

Trauma and Mental Health during the Global Pandemic

Abstract Book of the ESTSS 2021 Virtual Conference Editors: Annett Lotzin, A.A.A. Manik J. Djelantik, Marloes B. Eidhof, Anke de Haan, & Jana Kiralj

To cite this article: (2021) Trauma and Mental Health during the Global Pandemic, European Journal of Psychotraumatology, 12:sup2, 1940588, DOI: <u>10.1080/20008198.2021.1940588</u>

To link to this article: <u>https://doi.org/10.1080/20008198.2021.1940588</u>

© 2021 The Author(s). Published by Informa UK Limited, trading as Taylor & Francis Group.



0

Published online: 29 Nov 2021.

-	
L	
ι	

Submit your article to this journal \square

Article views: 2031



View related articles 🗹

Uiew Crossmark data 🗹

わ

Citing articles: 3 View citing articles



Taylor & Francis

OPEN ACCESS Check for updates

Trauma and Mental Health during the Global Pandemic

Abstract Book of the ESTSS 2021 Virtual Conference Editors: Annett Lotzin, A.A.A. Manik J. Djelantik, Marloes B. Eidhof, Anke de Haan, & Jana Kiralj

Thursday, June 17th, 2021 Day #1 *Parallel sessions #1*

SYMPOSIUM

S1.1

The ESTSS pan-European COVID-19 ADJUST study on stressors, risk and resilience factors, and symptoms of adjustment disorder – Study design and first results from eleven countries

Chair: Evaldas Kazlauskas

Vilnius University, Lithuania

Track: Trauma and stress

The European Society for Traumatic Studies (ESTSS) launched a longitudinal pan-European study on the mental health impact of the current pandemic. The study aims to assess risk and resilience factors of mental health, COVID-19-related stressors, and coping with these stressors across Europe. Findings from the first wave of the *ESTSS study on the mental health effects of the pandemic* in eleven European countries in more than 15,000 participants will be presented in this symposium. The first presentation (Lotzin et al.) of this symposium will examine relationships between COVID-19-related stressors, risk and resilience factors, and symptoms of adjustment disorder, which will provide insights into the relative importance of different risk and resilience factors for mental health. The second presentation (Lenferink et al.) of this symposium will present distinct mental health profiles identified using latent class analysis, revealing the importance of resilience and wellbeing in understanding the effects of the pandemic. The last presentation (Zrnic et al.) will complement quantitative study findings by focusing on qualitative data analysis of personal experiences amid the pandemic in three countries (Austria, Georgia, and Portugal), highlighting both positive and negative

pandemic-related thoughts and emotions. Implications for research and clinical practice of the study findings will be discussed.

The ESTSS pan-European COVID-19 cohort study on stressors, risk and resilience factors, and symptoms of adjustment disorder – Study design and first results from eleven countries

Annett Lotzin^a, Elena Acquarini^b, Marina Ajduković^c, Vittoria Ardino^b, Filip Arnberg^d, Helena Bakic^c, Maria Böttche^e, Maria Bragesjö^f, Małgorzata Dragan^g, Margarida Figueiredo-Braga^{h,i}, Odeta Gelezelyte^j, Piotr Grajewski^g, Xenia Hadjicharalambous^k, Jana Darejan Javakhishvili¹, Evaldas Kazlauskas^j, Chrysanthi Lioupi^k, Brigitte Lueger-Schuster^m, Nino Makhashvili¹, Trudy Moorenⁿ, Luisa Salesⁱ, Irina Zrnic^m, Ingo Schäfer^a

^aUniversity Medical Center Hamburg-Eppendorf, Germany; ^bUniversity of Urbino, Italy; ^cUniversity of Zagreb, Croatia; ^dUppsala University, Sweden; ^eFreie Universität Berlin, Germany; ^fKarolinska Institutet, Sweden; ^gUniversity of Warsaw; ^hUniversity of Porto, Portugal; ⁱUniversity of Coimbra, Portugal; ^jVilnius University, Lithuania; ^kUniversity of Nicosia, Cyprus; ¹Ilia State University, Georgia; ^mUniversity of Vienna, Austria; ⁿUtrecht University, The Netherlands

Background: This presentation will provide an overview of the ESTSS COVID-19 cohort study that examines relationships between COVID-related stressors, risk and resilience factors, and symptoms of adjustment disorder during the current pandemic. Objective: The first crosssectional results of the study will be presented. Method: This longitudinal study is conducted in eleven countries (Austria, Croatia, Georgia, Germany, Greece, Italy, Lithuania, The Netherlands, Poland, Portugal, and Sweden). Participants aged at least 18 years were included in this study and are assessed at two-time points, with a six-month interval using an online survey. A COVID-19 conceptual framework of mental health based on the WHO's framework of health was used to select stressors, risk, and resilience factors that might be related to symptoms of adjustment disorder (ADNM-8), or posttraumatic stress disorder (PC-PTSD-5), respectively. Risk or resilience factors (e.g., age, gender, income, work situation, health condition) are assessed by self-constructed

© 2021 The Author(s). Published by Informa UK Limited, trading as Taylor & Francis Group. This is an Open Access article distributed under the terms of the Creative Commons Attribution-NonCommercial License (http://creativecommons.org/licenses/by-nc/4.0/), which permits unrestricted non-commercial use, distribution, and reproduction in any medium, provided the original work is properly cited.

10:45–11:45

items. Stressors (e.g., crisis communication, fear of contracting COVID-19, restricted physical contact) are measured by four-point rating scales (0 = not atall burdened to 3 = strongly burdened). Results: N =15,564 participants were included in the study. A preliminary cross-sectional regression analysis indicated that risk and resilience factors, such as income, a diagnosis of a mental disorder, and a poor health condition, showed small to moderate associations with symptoms of adjustment disorder. Stressors that are unique to the pandemic, such as poor crisis communication, restricted physical contact, and work-related problems, were also related to symptoms of adjustment disorder. Conclusions: Recommendations to promote mental health during the current COVID-19 pandemic will be discussed.

Latent classes of posttraumatic stress disorder, adjustment disorder, and wellbeing during the COVID-19 pandemic in over 10,000 people across 11 European countries

Lonneke I.M. Lenferink^a, Joanne Mouthaan^b, Suzan Soydas^a, Trudy Mooren^a, Annett Lotzin^c, Elena Acquarini^d, Dean Ajduković^e, Vittoria Ardino^d, Filip Arnberg^f, Maria Böttche^g, Maria Bragesjö^h, Małgorzata Draganⁱ, Margarida Figueiredo-Braga^{j,k}, Odeta Gelezelyte^l, Piotr Grajewskiⁱ, Xenia Hadjicharalambous^m, Jana Darejan Javakhishviliⁿ, Evaldas Kazlauskas^l, Chrysanthi Lioupi^m, Brigitte Lueger-Schuster^o, Nino Makhashviliⁿ, Luisa Sales^k, Irina Zrnic^o, Aleksandra Stevanovic^p, Ingo Schäfer^c

^aUtrecht University, The Netherlands; ^bLeiden University, The Netherlands; ^cUniversity Medical Center Hamburg-Eppendorf, Germany; ^dUniversity of Urbino, Italy; ^cUniversity of Zagreb, Croatia; ^fUppsala University, Sweden; ^gFreie Universität Berlin, Germany; ^hKarolinska Institutet, Sweden; ⁱUniversity of Warsaw, Poland; ^jUniversity of Porto, Portugal; ^kUniversity of Coimbra, Portugal; ^lVilnius University, Lithuania; ^mUniversity of Nicosia, Cyprus; ⁿllia State University, Georgia; ^oUniversity of Vienna, Austria; ^PUniversity of Rijeka, Croatia

Background: The COVID-19 pandemic has a significant psychological health impact globally. A minority may experience negative psychological outcomes, such as posttraumatic stress disorder (PTSD) and adjustment disorder (AD) symptoms, while others experience positive outcomes, such as increases in wellbeing. Examining individual differences in negative and positive outcomes and correlates thereof provides knowledge on people at risk for developing long-term psychological impairment, which may optimize care for the most vulnerable people. Objective: The aim of this study is to examine (correlates of) symptom-profiles of PTSD, AD, and wellbeing in 14,505 European people within the first months of the pandemic. Method: Across 11 European countries, an online survey-study was conducted initiated by the ESTSS (ADJUST study). PTSD (PC-PTSD), AD (ADNM-8), and wellbeing (WHO Wellbeing Index) symptom-profiles were examined using latent class analyses. Correlates of class-membership (e.g., background and pandemic-related characteristics and adverse childhood experiences) were examined using a 3-step approach. Results: Six classes were identified: 1) Low PTSD/Low AD/High wellbeing (36%), 2) Low PTSD/ Low AD/Moderate wellbeing (17%), 3) Moderate PTSD/Moderate AD/High wellbeing (14%), 4) Moderate PTSD/High AD/Low wellbeing (12%), 5) High PTSD/Moderate AD/Moderate Wellbeing (11%), and 6) High PTSD/High AD/Moderate wellbeing (9%). Correlates of classes will be presented at the conference. Conclusions: Six symptom-profiles of PTSD, AD, and wellbeing were found. The most common response to the pandemic was the absence of PTSD/AD symptoms and high wellbeing. Our findings reveal that the presence of PTSD/AD symptoms does not always co-occur with the absence of wellbeing. Taking wellbeing into account when examining post-pandemic distress, therefore, seems important.

Feelings, thoughts and challenges amidst the COVID-19 pandemic – A qualitative approach

Irina Zrnic^a, Brigitte Lueger-Schuster^b, Margarida Figueiredo-Braga^{c,d}, Luísa Sales^{c,e}, Jana Darejan Javakhishvili^f, Lela Tsiskarishvili^f, Annett Lotzin^g

Background: The complex system of stressors related to the COVID-19 pandemic in combination with a worldwide regime of preventive measures affect people worldwide in multiple ways provoking a broad range of psychological reactions. Objective: This study aims to explore diverse experiences, reactions, feelings, and thoughts across three countries, by applying a qualitative approach to highlight various mechanisms to adapt to the challenges. Method: The sample was part of the ESTSS pan-European study. Austrian, Georgian, and Portuguese participants who completed sociodemographic information and responded to the open-ended questions at the baseline assessment were included in the present study (Austria: N = 798; Georgia: N = 722; Portugal: N = 982). The overall sample was dominated by women, constituting between 63.3% and 81.6% of the participants. Age ranged from 18 to 82 years, with means between M = 36 (SD = 14) up to M =46.6 (SD = 12.6). The open-ended questions regarding straining events, positive and negative aspects of the pandemic, and recommendations to deal with the current situation are analysed using qualitative content analysis. MAXQDA software is used to sort and organise the data. Results: Inductively developed categories and supporting quotes will be presented. Conclusions: The variety of answers will reflect the diversity within the participants from three countries, considering different confinement measures as well as different socio-economic and cultural backgrounds forming the participants' responses.

^aFaculty of Psychology, Austria; ^bUniversity of Vienna, Austria; ^cUniversity of Coimbra, Portugal; ^dUniversity of Porto, Portugal; ^eMilitary Hospital, Portugal; ^fIlia State University, Georgia; ^gUniversity Medical Center Hamburg-Eppendorf, Germany

S1.2

Mental health after bereavement due to COVID-19 worldwide: Pioneering empirical studies

Chair: Maarten Eisma

University of Groningen, The Netherlands

Track: Grief and loss

The COVID-19 pandemic is a global health crisis unparalleled in recent history, with more than 100 million confirmed cases and close to 3 million deaths worldwide. Grief researchers were early to recognize the potentially severe emotional consequences for the millions of people bereaved due to COVID-19. For example, experiencing sudden death after intensive care, limited opportunities to engage in grief rituals and obtain social support, and secondary stressors were suggested as factors that could lead to more severe mental health problems in this population. Despite a wild growth of expert opinions on grief during the pandemic in scientific journals and popular media, research on this topic has been slow to develop. This symposium, therefore, provides an overview of pioneering empirical studies on the mental health of COVID-19 bereaved people during the pandemic conducted around the globe. First, dr. Maarten C. Eisma will present a comparison of acute grief levels between Dutch adults bereaved due to natural causes, unnatural causes, and COVID-19. Second, dr. Lauren Breen will present the relation between post-loss mental health problems and functional impairment in American adults bereaved by COVID-19. Third, dr. Sugin Tang will present a first investigation of the prevalence of prolonged grief disorder and a more general investigation of the demographic and loss-related correlates of mental health among COVID-19 bereaved Chinese adults. Together, these contributions will illustrate the variety of severe mental health problems and associated impairment experienced after COVID-19 bereavement worldwide. Clinical implications and directions for future research will be discussed.

Acute grief after deaths due to COVID-19, natural causes and unnatural causes in The Netherlands

Maarten Eisma^a, Aerjen Tamminga^b, Geert Smid^{c,d}, Paul Boelen^{c,e}

Background: The COVID-19 pandemic is an unprecedented health crisis with a high death toll, resulting in millions of bereaved people worldwide. Researchers have suggested that COVID-19 death characteristics (e.g., intensive care admission, unexpected death) and circumstances (e.g., secondary stressors, social isolation) will precipitate a worldwide increase of prolonged grief disorder (PGD) and persistent complex bereavement disorder (PCBD). Since acute grief is a strong predictor of future pathological grief, studying initial grief reactions may shed light on the prevalence of pathological grief among COVID-19 bereaved people in the future. Objective: To compare acute grief levels after bereavement due to COVID-19, natural causes (incl. euthanasia), and unnatural causes (accident, homicide, suicide). Method: Dutch adults bereaved through COVID-19 (n = 49), natural causes (n =1182), and unnatural causes (n = 210), completed self-report measures of demographic and lossrelated characteristics and PGD and PCBD symptoms. Results: COVID-19 bereavement yielded higher symptom levels of PGD (d = 0.42) and PCBD (d =0.35) than natural bereavement (but not unnatural bereavement). Effects held when limiting analyses to recent losses and those who participated during the pandemic. The expectedness of the death explained this effect. Conclusions: Higher acute grief levels occur among people bereaved due to COVID-19 compared to people bereaved due to natural loss. We predict that pandemic-related increases in pathological grief will become a worldwide public health concern.

Psychological risk factors of functional impairment following COVID-19 deaths in the United States

Lauren Breen^a, Sherman Lee^b, Bob Neimeyer^{c,d}

^aCurtin University, Australia; ^bChristopher Newport University, United States; ^cUniversity of Memphis, United States; ^dPortland Institute for Loss and Transition, United States

Background: Functional impairment is an important component of the burden of grief. Ensuring highquality bereavement care in the context of COVID-19 presents unprecedented challenges to settings such as end-of-life care and mental health services. Objective: We aimed to determine how psychological symptoms explain functional impairment. Method: A sample of people bereaved through COVID-19 (N = 307) in the United States completed demographic questions and self-report measures of neuroticism; symptoms of depression, generalized anxiety, posttraumatic stress, separation distress, and dysfunctional grief; and functional impairment due to a COVID-19 loss. Results: Most participants scored in the clinical ranges for generalized anxiety, depression, dysfunctional grief, and functional impairment. Functional impairment scores were not associated

^aUniversity of Groningen, The Netherlands; ^bPsychologen Nederland, The Netherlands; ^cARQ National Trauma Centre, The Netherlands; ^dUniversity of Humanistic Studies, The Netherlands; ^eUtrecht University, The Netherlands

with age, gender, or time since loss but were associated with having been diagnosed with COVID-19, having received professional help with the loss, and having a close relationship to the deceased. A logistic regression model showed that, after controlling for covariates, the odds of functional impairment significantly increased by 27% for higher scores in separation distress, 25% for higher scores in dysfunctional grief, and 13% for higher scores in posttraumatic stress. Conclusions: The predicted worldwide tsunami of grief from this pandemic is likely to be associated with much functional impairment experienced by bereaved persons, particularly for those reporting symptoms of separation distress, dysfunctional grief, and/or posttraumatic stress. Attention to identifying people at risk of functional impairment may be important in facilitating grieving persons' adaptation to loss during and after the pandemic.

Prolonged grief, posttraumatic stress, depression, and anxiety after COVID-19 bereavement in mainland China

Suqin Tang^a, Zhendong Xiang^b, Yi Yu^a, Qianxin Chen^a, Meilong Fan^a, Maarten Eisma^c

^aShenzhen University, China; ^bShenzhen Yishi Huolala Technology Limited Company, China; ^cUniversity of Groningen, The Netherlands

Background: COVID-19 has resulted in an estimated 22 million recently bereaved people worldwide. Pioneering empirical studies show that people bereaved through COVID-19 experience elevated mental health problems. However, no study has reported the prevalence of prolonged grief disorder (PGD). Studies exploring relations between potential risk factors and mental health in the Eastern COVID-19 bereavement population are also lacking. *Objective*: To estimate the prevalence of PGD and to investigate the associations of demographic and lossrelated characteristics with mental health after COVID-19 bereavement. Method: A sample of Chinese adults bereaved due to COVID-19 (N =422) completed demographic and loss-related questions and self-report measures of prolonged grief, posttraumatic stress, anxiety, and depressive symptoms through an online survey. Results: Estimated prevalence of PGD was 38% per ICD-11 criteria. Based on cut-off points, a significant group experienced clinically relevant prolonged grief (49%), posttraumatic stress (22%), depressive (70%), and anxiety symptoms (65%). In four multiple regressions preeach mental health indicator, dicting losscharacteristics (i.e., a shorter time since loss, or loss of a first-degree relative) and subjective loss experiences (i.e., feeling traumatized by the loss, or a close and/or conflictual relation with the deceased) related

most consistently to mental health problems. *Conclusions*: Prevalence of PGD is high among Chinese adults bereaved through COVID-19. A subset of this population experiences severe posttraumatic stress, depressive, and anxiety symptoms. The recent loss of first-degree relatives, feeling traumatized by the loss, and having a close and/or conflictual relationship with the deceased may elevate risks for these mental health problems, which could require indicated psychological treatment.

ORAL PRESENTATIONS

Track: Health care professionals

OP1.1

Did hospital personnel receive adequate help and support to reduce work-related stress during the COVID-19 pandemic? The Norwegian study of hospital personnel

Synne Stensland^{a,b}, Kristina Bondjers^a, John-Anker Zwart^{b,c}, Leiv Arne Rosseland^{b,c}, Hilde Wøien^{d,c}, Dan Atar^{b,c}, Dagfinn Matre^e, Ashley Elizabeth Muller^f, Tore Wentzel-Larsen^{a,g}, Ingebjørg Lingaas^a, Grete Dyb^{a,c}

^aNorwegian Centre for Violence and Traumatic Stress Studies, Norway; ^bOslo University Hospital, Norway; ^cUniversity of Oslo, Norway; ^dOslo University Hospital, Norway; ^eThe National Institute of Occupational Health in Norway, Norway; ^fNorwegian Institute of Public Health, Norway; ^gThe Regional Centre for Violence, Traumatic Stress and Suicide Prevention, Norway

Background: Hospital-based interventions addressing the needs of health care personnel are much needed to ensure a high-quality, sustainable response to the COVID-19 pandemic over time. Yet, knowledge of which organizational factors to target is currently sparse. Objective: The overarching aim of the current paper is to identify potential targets for organizational interventions to reduce stress among hospital personnel. Method: In June (time point 1, T1) and December (T2) 2020, a total of N = 1552 hospital personnel from four large university hospitals participated in a web-based survey. At each time point, participants were asked to range their exposure to work stressors, protection factors, and adverse health outcomes. Hospital provision of need-based help and support to reduce stress in personnel will serve as the main outcome in analyses. Results: Preliminary results of T1 data so far indicate that hospital personnel with higher exposure to COVID-19 patients more frequently experienced inadequate information and training for psychosocial self-care, higher levels of unpredictability in work structure, increased workload, more adverse experiences using personal protection equipment, and a higher sense of unsafety, were more frequently infected by COVID-19, and experienced higher levels of anxiety, depression, somatic and posttraumatic stress symptoms, in

addition to less adequate help and support to reduce stress, as compared to colleagues less exposed to COVID-19 patients. *Conclusions*: The results from T1 and T2 data may help guide organizational efforts to more efficiently reduce stress among hospital personnel at different stages in response to long-term crises.

OP1.2

Moral injury among Israeli healthcare professionals during the COVID-19 pandemic – A Latent Class Analysis approach

Gadi Zerach^a, Yossi Levi-Belz^b

^aAriel University, Israel; ^bRuppin Academic Center, Israel

Background: The COVID-19 pandemic poses unique challenges to healthcare professionals (HCP) who face morally challenging and life-threatening decisions while working with limited human, knowledge and medical resources. Following exposure to events that transgress moral beliefs and expectations, HCP might experience psychological, social, and spiritual problems referred to as Moral Injury (MI). Objective: The present study examined patterns of exposure to potentially morally injurious events (PMIEs) among HCP as well as mental health outcomes and psychological correlates of exposure. Method: A sample of 243 Israeli HCP volunteered to complete a cross-sectional electronic survey with validated self-report questionnaires in 2021. Latent Class Analysis (LCA) was used to identify classes characterized by unique patterns of exposure to PMIEs and compare differences in mental health and psychological variables. Results: Three subgroups were identified: Moral Injury (18.8%), Betrayal-Only (30.3%), and Minimal Exposure (50.9%). Both the moral injury class and the betrayal-only class reported higher levels of perceived stress, posttraumatic symptoms, and more moral injury symptoms as compared to the minimal exposure class. Importantly, only the moral injury class reported lower levels of self-compassion and higher levels of self-criticism relative to those in the minimal exposure class. Conclusions: The study's

findings offer an overview of the complex associations between patterns of exposure to PMIEs and associated outcomes. Clinicians treating HCP coping with the COVID-19 related stress should be aware of the contribution of exposure to PMIEs to HCPs' distress and to the unique constellation of high selfcriticism and low self-compassion among HCP with moral injury and betrayal exposures.

OP1.3

Corona Aftercare, an easily accessible intervention for healthcare professionals

Elisa van Ee

Radboud University, The Netherlands; Reinier van Arkel, The Netherlands

Background: During the COVID-19 pandemic health care professionals are confronted with seriously ill patients and death on a large scale. These experiences can be confronting or even traumatic. Research shows that after a disaster first-responders face a high risk of developing trauma-related symptoms as a result of their experiences. Objective: The objective of this intervention is to alleviate trauma-related symptoms at an early stage to limit the emotional consequences of COVID-19 for the healthcare provider, to strengthen resilience, and prevent dropout from work. Method: A blended intervention consisting of e-health and psychotherapy focused on the professional's narrative, traumatic memories, grief, meaning-making, and reintegration was developed. Themes that are particularly relevant for professionals such as disenfranchised grief, disenfranchised distress, and moral injury are addressed. Results of this intervention are monitored with questionnaires on traumatic grief (Traumatic Grief Inventory), depression (Beck Depression Inventory), and PTSD (PTSD Checklist - DSM 5). Results: During the presentation, the intervention will be demonstrated and the first experiences of health care professionals will be shared. Conclusions: Even in an easily accessible intervention there is a high barrier for health care professionals to enter therapy. When these professionals do enter therapy, they consider the value of the intervention as eminent.

Parallel sessions #2

SYMPOSIUM

S2.1

Exploring the mental health impact of the COVID-19 pandemic: The role of current stressors, double exposure and previous traumatic experiences. ESTSS Pan-European COVID-19 study findings

Chair: Jana D. Javakhishvili

Ilia State University, Georgia

Track: Trauma and stress

The COVID-19 pandemic imposed a complicated system of strains on public mental health across Europe and around the world. From the beginning of the crisis, ESTSS initiated a large-scale pan-European study with participation of 11 European countries to explore mental health sequelae of the pandemic (Lotzin et al, 2020). The aim of the symposium is to shed light on the role of pandemic-related stressors, in the case of one country an additional large-scale disaster, and pre-pandemic traumatic experiences on the mental health wellbeing of affected populations. The three studies to be presented at the symposium are part of an ongoing online ESTSS pan-European prospective cohort study, started in May 2020. These studies focus on: 1) The association between pandemic-related stressors and suicidal ideation, based on a multinomial binary logistic regression analysis of data from Lithuania and Poland; 2) A comparison of the mental health status of people who have lived through double adversity (the COVID-19 pandemic and the earthquake in Croatia); 3) The association between adverse childhood experiences and COVID-19-related stressors, resilience and coping strategies in 10 countries. Based on the findings, we will discuss to what extent pandemic-related stressors facilitate suicidal ideation, interact with the effect of exposure to additional traumatic stressor amid the pandemic and amplify pre-pandemic traumatic experiences. *Corresponding preventive strategies will be reflected on.*

Double adversity and mental health: COVID-19 pandemic and earthquake disaster

Dean Ajdukovic^a, Ines Rezo Bagaric^a, Aleksandra Stevanovic^b, Tanja Franciskovic^b, Helena Bakic^a, Marina Ajdukovic^a

12:00–13:00

Background: The COVID-19 related health concerns, financial uncertainty, and imposed change of life patterns have been shown to increase the risk for mental health. Amid the national lockdown due to the pandemic, a disastrous earthquake of 5.5 magnitude hit the city of Zagreb, Croatia, and its surroundings in March 2020. Objective: To assess and compare the mental health status of people who have lived through double adversity: COVID-19 pandemic and lockdown, and the earthquake disaster. Method: Online cohort survey of the general population was done between 9 and 17 July 2020. The adult sample (18 to 65 years) of 1201 participants nationally representative for age (M = 41.37)years, SD = 12,864), gender (50.1% female), level of urbanization, and country regions was recruited through the online panel. The assessed mental health indicators included depression, anxiety, and stress (DASS-21, PHQ-4), adjustment problems (ADNM-8), posttraumatic symptoms (PC-PTSD), wellbeing (WHO-5), and psychological resilience (RES), as well as a set of pandemic-specific stressors and positive outcomes. Results: The subsample of earthquake survivors (n = 408) was compared to the subsample of participants who were not exposed to the earthquake (n = 793). Groups did not differ on any of the mental health indicators, except the posttraumatic symptom score, where the double exposure group scored higher (p = .009), but were not more likely to meet the PTSD diagnosis (15% in double exposure and 13.1% in pandemic-only exposure group). Conclusions: In contrast, the double exposure made a difference on several positive insights: appreciation of own health, advantages of home working, the potential for increased income, and developing new skills.

The burden of adverse childhood experiences when coping and adjusting to COVID-19 pandemic

Margarida Figueiredo-Braga^{a,b}, Aida Dias^a, Joana Becker^a, João Veloso^a, Luísa Sales^a, Annett Lotzin^c, Elena Acquarini^d, Vittoria Ardino^d, Filip Arnberg^e, Maria Böttche^f, Maria Bragesjö^g, Xenia Hadjicharalambous^h, Małgorzata Draganⁱ, Odeta Gelezelyte^j, Piotr Grajewskiⁱ, Jana D. Javakhishvili^k, Evaldas Kazlauskas^j, Chrysanthi Lioupi^h, Brigitte Lueger-Schuster^l, Lela Tsiskarishvili^k, Trudy Mooren^m, Aleksandra Stevanovicⁿ, Irina Zrnic^l, Ingo Schäfer^c

^aUniversity of Coimbra, Portugal; ^bUniversity of Porto, Portugal; ^cUniversity Medical Center Hamburg-Eppendorf, Germany; ^dUniversity of Urbino, Italy; ^eUppsala University, Sweden; ^fFreie Universität Berlin, Germany; ^gKarolinska Institutet, Sweden; ^hUniversity of Nicosia, Cyprus; ⁱUniversity of Warsaw, Poland; ^jVilnius University, Lithuania; ^kIlia State

^aUniversity of Zagreb, Croatia; ^bUniversity of Rijeka, Croatia

University, Georgia; ¹University of Vienna, Austria; ^mUniversity of Utrecht, The Netherlands; ⁿUniversity of Rijeka, Croatia; ^oUniversity Medical Center Hamburg-Eppendorf, Germany

Background: Adverse Childhood Experiences (ACE) are important stressors, impinging the response to other psychological challenges during life. People exposed to ACE tend to be more vulnerable to develop psychiatric disorders and are more prone to adjustment difficulties when facing the extreme stress, uncertainty, and healthrelated risk of the COVID-19 pandemic. Objective: To disentangle associations between coping strategies, resilience and protective factors, mental health risk, and number and type of ACE. Method: An online survey launched by the ESTSS in eleven countries permits the assessment of protective and resilience factors, coping behaviour, and maladaptive adjustment amidst the COVID-19 pandemic. Evaluation of mental health risk was performed using standardized instruments including measures of depression, anxiety, symptoms of adjustment disorder (ADNM-8), and posttraumatic disorder (PC-PTSD). The presence of ACE was screened in all participants who described the type and number of traumatic experiences experienced during childhood. The analysis will elucidate the presence of ACE in different individuals grouped by demographic characteristics, to foresee: 1) the most predominant variables; 2) if ACE scores relate to mental health-derived risks or resilience. Results: Preliminary results in ten of the participating countries showed variable frequencies of reported ACE in the different populations. The incidence of at least one ACE varies between countries. Conclusions: Childhood adversity may be considered as a cumulative burden and risk for mental disorders and adjustment difficulties when dealing with pandemic-related multiple challenges or may enhance protective mechanisms sustaining the wellbeing of specific subpopulations.

The role of adjustment problems and pandemic-related stressors on suicide ideation: A general population study in Lithuania and Poland amid the COVID-19 pandemic

Odeta Gelezelyte^a, Malgorzata Dragan^b, Piotr Grajewski^b, Monika Kvedaraite^a, Annett Lotzin^c, Magdalena Skrodzka^b, Auguste Nomeikaite^a, Evaldas Kazlauskas^a

^aVilnius University, Lithuania; ^bUniversity of Warsaw, Poland; ^cUniversity Medical Center Hamburg-Eppendorf, Germany

Background: There is a great concern among experts that multiple stressors related to the COVID-19 crisis could be associated with elevated suicide risk. *Objective*: The present study was a part of a larger pan-European study initiated by the ESTSS (Lotzin et al., 2020). Suicidal ideation was measured in two countries - Lithuania and Poland. The main aim of the current analysis was to identify factors associated with suicidal ideation in Lithuania and Poland, amid the first months of the COVID-19 pandemic. *Method*: The total sample consisted of 2,459 adults in both countries. 57.2% were female; the mean age was 43.45 years (SD = 15.91). The data were collected from June to August 2020. Measures for suicidal ideation (SIDAS), adjustment problems (ADNM-8), and COVID-19 related stressors were used in the current multinomial binary logistic regression analysis. Results: High levels of adjustment problems, loneliness, and burden due to staying more at home were significantly associated with suicide ideation in both Lithuania and Poland during the first months of the COVID-19 pandemic. Conclusions: Adjustment problems, loneliness, and perceived stress due to staying more at home could be important targets for suicide prevention and intervention amid the pandemic. As this is an ongoing study and the second assessment is currently in process, more results based on the analysis of the longitudinal data will be presented during the conference.

SYMPOSIUM

S2.2

Anticipating and meeting the mental health impact of COVID-19 in the UK

Chair: Talya Greene

University of Haifa, Israel

Track: Trauma and stress

This symposium presents the research and guidance developed by the COVID trauma response working group in the UK, and as part of the Global Collaboration on Traumatic Stress. This symposium will first present a mixed-methods study on barriers to effective psychosocial support for frontline UK health and social care staff during COVID-19, examining what was offered, what was actually used, and whether it was actually helpful (Greene et al.). The second presentation in this symposium uses a qualitative approach to understand the experiences of mental health professionals tasked to provide support for health and social care workers, including the potential impact of vicarious trauma (Billings et al.). The final presentation will focus on anticipating the mental health needs of survivors of serious COVID and will present guidance for establishing screen-and-treat programs.

The COVID-19 Trauma Response Working Group Guidance for healthcare workers and survivors of severe COVID-19 illness

Michael Bloomfield^{a,b}, Talya Greene^{c,a}, Jo Billings^a

^aUniversity College London, United Kingdom; ^bTraumatic Stress Clinic, St Pancras Hospital, United Kingdom; ^cUniversity of Haifa, Israel Background: The COVID-19 pandemic poses ongoing threats to global mental health. There are particular groups of people who will be exposed to high levels of psychological trauma. We formed a working group to collate, disseminate and produce immediately accessible, evidence-based, and traumainformed guidance on the psychological response to COVID-19 and conduct research to inform this guidance. Objective: To produce guidance for two key groups at high risk of traumatisation: healthcare workers and survivors of severe COVID-19 illness. Method: Working group members were selected on the basis of relevant multidisciplinary clinical and research experience. We are comprised of clinical academics, clinicians, and researchers in psychiatry and clinical psychology. We rapidly reviewed the research literature. Findings and expert opinion were discussed in the working group and initial recommendations were made. The draft documents were then revised through written feedback and discussion by teleconference until consensus was achieved. Results: For healthcare workers, we recommend both systemic approaches that foster resilience and the provision of Psychological First Aid and highquality evidence-based psychological therapy for individuals. For survivors of severe COVID-19 we recommend the creation of centrally coordinated "screen and treat programmes" to detect, actively monitor and treat survivors who develop post-traumatic stress disorder (PTSD). Conclusions: We urgently need to meet the mental health needs of those who have been traumatised by the pandemic. Our guidance offers a framework to address these needs. Future work is needed to evaluate the impact of our guidance.

Psychosocial support for Frontline UK health and social care staff during COVID-19. What was offered, what was used, and was it helpful?

Talya Greene^{a,b}, Jasmine Harju-Seppänen^b, Camilla Tamworth^b, Zeast Kamal^b, Michael Bloomfield^{b,c}, Jo Billings^b

^aUniversity of Haifa, Israel; ^bUniversity College London, United Kingdom; ^cTraumatic Stress Clinic, United Kingdom

Background: Research shows that COVID-19 has impacted the mental health of frontline workers across the world. In many locations, psychosocial support and interventions were made available. However, there has been little research examining correlates and barriers to psychosocial support use. *Objective*: This study aimed to examine psychosocial support offers and use in UK frontline health and social care staff, to compare the perceived helpfulness of different kinds of supports, and to explore correlates of psychosocial support use. *Method*: A cross-sectional online survey was completed by a convenience sample of UK frontline health and social care staff in May-July 2020 (n = 1194). Participants reported their work roles and settings, PTSD (ITQ), depression (PHQ-9), and anxiety symptoms (GAD-7), which psychosocial supports they had been offered, which they had used, and the extent to which they found them helpful or unhelpful. Results: Participants were more likely to be offered individual support than group support. Despite high levels of mental distress in this sample (nearly 58% met criteria for a mental disorder), many participants did not take up the support that was offered, beyond informal support from a colleague or support from their manager. Furthermore, even when support was taken up, over a quarter of participants reported it to be quite or very unhelpful. Conclusions: There is a gap between the psychosocial support being offered to frontline health and social care staff and the support that is being used. It is important to examine barriers to accessing support.

UK mental health professionals' experiences, views and needs whilst supporting frontline health and social care workers during the COVID-19 pandemic

Jo Billings^a, Camilla Biggs^a, Brian Chi Fung Ching^a, Vasiliki Gkofa^a, David Singleton^a, Michael Bloomfield^{a,b}, Talya Greene^{c,a}

^aUniversity College London, United Kingdom; ^bTraumatic Stress Clinic, United Kingdom; ^cUniversity of Haifa, Israel

Background: The COVID-19 pandemic has had a well-documented impact on the mental health of frontline health and social care workers (HSCWs). However, little attention has been paid to the experiences of, and impact on, the mental health professionals who were rapidly tasked with supporting them. Objective: To explore UK mental health professionals' experiences, views, and needs whilst working to support the wellbeing of frontline HSCWs during the COVID-19 pandemic. Method: We completed interviews with 28 mental health professionals from varied professional backgrounds, career stages, and settings across the UK. Results: We found that mental health professionals were motivated and driven to develop new clinical pathways to support HSCWs they perceived as colleagues and many experienced professional growths. However, this also came at some costs, as they took on additional responsibilities and increased workloads, were anxious and uncertain about how best to support this workforce, and tended to neglect their own health and wellbeing. Many were professionally isolated and were affected vicariously by the traumas and moral injuries that healthcare workers talked about in sessions. Conclusions: We will discuss the urgent need to consider the mental wellbeing, training, and support of mental health professionals who are supporting frontline workers.

ORAL PRESENTATIONS

Track: Trauma and stress

OP2.1

Daily uplifts during the COVID-19 pandemic: What is considered helpful in everyday life?

Rakel Eklund^a, Filip K Arnberg^a, Ida Hensler^a, Kerstin Bergh Johannesson ^a, Maria Bragesjö^b, Kristina Bondjers^c, Josefin Sveen^a

^aUppsala University, Sweden; ^bKarolinska Institute, Sweden; ^cNorwegian Centre for Violence and Traumatic Stress Studies, Norway

Background: Knowledge about what has been experienced as uplifting and helpful during the pandemic could inform sustainable pandemic recommendations. Objective: We explored individuals' views on helpful and uplifting aspects of their everyday life during the COVID-19 pandemic. Method: Participants answered a brief, daily survey via SMS for 14 consecutive days during July-August, 2020. The survey included the question: "During the past 24 hours, is there anything that has made you feel good or helped you in your life?". We used content analysis to compile the responses from 693 participants who provided 4490 free-text answers, which resulted in 25 categories subsumed under 7 themes. Results: Positive aspects during COVID-19 primarily related to social interactions, in real life or digitally, with family, friends, and others. Other important aspects concerned work and colleagues, as well as leisure and recreation activities, such as hobbies and physical exercise. As the data collection took place during the summer, one theme concerned vacation, doing excursions, and being in nature. Nevertheless, maintaining everyday life routines emerged as important. Participants also mentioned health-related factors. Sensations, thoughts, feelings, and activities that benefited wellbeing were frequently reported. Lastly, people were writing about the government strategies for containing COVID-19, and whether to comply with restrictions. Conclusions: Daily uplifts and helpful aspects of everyday life centered around social relationships. During recommendations for social distancing, people find creative ways to maintain their social connections digitally and face-to-face. Social interaction, maintenance of everyday life routines, hobbies and physical activity appears important for wellbeing during pandemics.

OP2.2

Overwhelmed by the pandemic: The effects of the coronavirus pandemic and earthquake stress on psychological well-being in Croatia

Dinka Čorkalo Biruški^a, Iva Kapović^a, Ivan Tomić^b

^aUniversity of Zagreb, Faculty of Humanities and Social Sciences, Croatia; ^bUniversity of Cambridge, United Kingdom

Background: Fundamental beliefs about the world as a safe and predictive place may be severely "shattered" when people experience demanding stressful and traumatic events. Research has shown that those who experience more severe stress may also experience more profound worldview changes and mental health difficulties. COVID-19 crisis has faced the world with circumstances that go well beyond everything we have seen so far. Besides experiencing the pandemic, the citizens of Zagreb, Croatia were additionally challenged by a devastating earthquake in March 2020. Objective: We compared emotional difficulties in those citizens affected by the pandemic only and those who experienced the earthquake as well. We expected a significant cumulative effect of stress on emotional difficulties but also hypothesized that the relationship between the intensity of stress caused by the two major stressors and resulting emotional difficulties would be partially mediated by worldview changes people experienced. Method: An online survey with a probabilistic sample of 1270 Croatian adults (aged 18-74) was conducted and 50.16 % experienced the earthquake in Zagreb. Results: The path analysis suggested that pandemic stress predicted emotional difficulties and the worldview changes partially mediated that relationship. Nevertheless, the mediated relationship was weaker for those more resilient. These results hold true for both participants who experienced the earthquake, and those who did not. However, for those who experienced the earthquake, there was no effect of earthquake stress on emotional difficulties above that produced by the pandemic stress. Conclusions: The results suggest that pandemic stress had a major effect on people's fundamental beliefs and emotional difficulties.

OP2.3

The contribution of posttraumatic growth attributed to prior trauma to peritraumatic reactions during the COVID-19 pandemic

Yael Lahav, Asmaa Abu Hamam, Shai Milo, Inbar Mor, Elit Shaked, Ayala Sultana Eliav

Tel Aviv University, Israel

Background: The COVID-19 pandemic might be traumatogenic, leading to the development of peritraumatic stress symptoms. Evidence suggests that individuals previously exposed to traumatic events and who suffer from posttraumatic stress disorder (PTSD) symptoms may be particularly vulnerable when facing the current pandemic. Nevertheless, the implications of salutogenic outcomes of trauma exposure, known as posttraumatic growth (PTG), when facing additional stressors, are unclear. *Objective*: The current study, conducted among trauma survivors in the midst of the COVID-19 pandemic in Israel, explored the unique contribution of PTG attributed to prior trauma in explaining peritraumatic stress symptoms related to the pandemic, above and beyond background characteristics, COVID-19- related stressors, and PTSD symptoms resulting from past trauma. *Method*: Five-hundred-and-twenty-eight Israeli trauma survivors were assessed for PTG and PTSD symptoms attributed to prior trauma, as well as peritraumatic stress symptoms related to the pandemic, as part of an online survey. Results: Analyses revealed that being younger, female, quarantined, negatively self-rating one's health status, and suffering from PTSD symptoms were associated with elevated peritraumatic stress symptoms. Furthermore, PTG attributed to prior trauma made a significant contribution in explaining elevated intrusion, avoidance, and hyperarousal symptoms, above and beyond background characteristics, COVID-19-related stressors, and PTSD symptoms resulting from prior trauma. Conclusions: The present results point to the need for clinicians to take into account reports of PTG attributed to prior trauma when treating trauma survivors during the current pandemic.

SYMPOSIUM

S3.1

The pandemic in Slovenia: Mental health and emerging issues of selected groups

Chair: Nina Krohne

University of Primorska, Slovenia

Track: Other specific populations (e.g., chronic disabilities, refugees)

During the COVID-19 pandemic, the need to address mental health issues grew as more people faced its aftermath. Certain social groups may, due to their specific characteristics, face diverging challenges and experience the effects of the pandemic more intensely. Since these groups may be overlooked in the studies that focus on the general population, it is important to detect and monitor them due to their vulnerability to developing mental health issues. These groups include young adults (particularly students), people with a history of a COVID-19 infection, and women. In this symposium, we will focus on the mentioned groups and present the findings based on their self-reports, which were carried out in a national survey on the psychological needs of the Slovenian population. These findings provide an insight into the mental health of these selected groups, their specific issues, and their coping with pandemic-related circumstances. Thus, these findings offer a valuable opportunity for addressing the mental health of these groups with evidencebased targeted interventions.

Students as a vulnerable group for developing psychological distress during the pandemic

Tanja Šraj Lebar^{a,b}, Patricija Kerč^{c,b}, Nina Krohne^{c,b}, Mateja Štirn^b

^aUniversity of Ljubljana Faculty of Art, Slovenia; ^bSlovenian Psychologists' Association, Slovenia; ^cUniversity of Primorska Andrej Marusic Insitute, Slovenia

Background: The COVID-19 pandemic has had an impact on different social groups, often in different ways. The emerging concerns associated with the COVID-19 pandemic are based on the uncertain future and actions during the epidemic including social isolation, deprivation of liberty, etc. Because of these concerns, and knowing the characteristics

15:15–16:15

of the developmental period of transition to adulthood, we assumed that students are a vulnerable social group worth paying attention to. Objective: The aim of the study was to compare college students with the general population in terms of stress and coping with pandemic-specific situations, mental health, and worries caused by COVID-19. Method: A questionnaire was developed as part of an action plan for the Psychological Support Task Force in Slovenia. It included the assessment of distress during the pandemic, coping strategies, and other mental health prevention needs. The survey involved 3042 women and 614 men, including 609 students. Results: Compared to the overall sample, we found several specific characteristics that identified students as one of the more vulnerable groups. We found that students have experienced higher levels of distress during the pandemic and cope less successfully. More intense pandemic-related worries were associated with an uncertain (financial) situation, social isolation, and poorer social relationships. Additional distress was particularly associated with an uncertain (financial) future for students who worked alongside their studies. Conclusions: The results indicate that students are one of the more vulnerable social groups that we need to pay special attention to in terms of mental health now and in the future.

The role of interpersonal relationships in the mental health of people with a history of COVID-19 infection Patricija Kerč^{a,b}, Tanja Šraj Lebar^{c,b}, Nina Krohne^{d,b}, Mateja Štirn^b

^aUniversity of Primorska Andrej Marusic Institute, Slovenia, ^bSlovenian Psychologists' Association, Slovenia; ^cUniversity of Ljubljana Faculty of Art, Slovenia; ^dUniversity of Primorska Andrej Marusic Insitute, Slovenia

Background: People with COVID-19 symptoms of varying intensity often suffer from mental health problems, including depression. Healthy relationships with significant others are the key to alleviating mental health problems, as they provide a sense of security, communication, and fulfilment of basic needs. However, people with a confirmed COVID-19 infection can face disruptions of interpersonal relationships due to measures to prevent the spread of COVID-19. *Objective*: To explore the role of interpersonal relationships in the mental health of individuals with a history of COVID-19 infection. *Method*: In December 2020 and January 2021, we recruited 3556 Slovenian adults, aged 18 – 86 years, through an

online survey. Within the obtained sample, we selected individuals with a history of confirmed COVID-19 infection. We used the Personal Health Questionnaire depression scale (PHQ-8) and the Mental Health Continuum Short Form (MHC-SF). Problems they worry about during the epidemic were measured by single items. Results: The prevalence of depression among those with a history of COVID-19 infection was 37%. Deteriorating interpersonal relationships in their personal life and separation from family members are important predictors of experiencing depression. Family separation is negatively related to social well-being. Conclusions: Interpersonal relationships play an important role in maintaining mental health in individuals with a history of COVID-19 infection. Due to the infection, they may experience stigma within their environment; in such circumstances, the family may represent an important source of support. However, there are other factors that could contribute to the development of mental health problems, which should be further explored.

Gendered pandemic: Mental health differences in men and women during the COVID-19 pandemic

Nina Krohne^{a,b}, Patricija Kerč^{c,b}, Tanja Šraj Lebar^{d,b}, Mateja Štirn^b

^aUniversity of Primorska Andrej Marusic Institute, Slovenia; ^bSlovenian Psychologists' Association, Slovenia; ^cUniversity of Primorska Andrej Marusic Insitute, Slovenia; ^dUniversity of Ljubljana Faculty of Arts, Slovenia

Background: From increased work insecurity to increased domestic burdens, women have been recognized as carrying greater socio-economic consequences of the pandemic than men. Objective: This study aims to assess the differences in mental health outcomes and explain them by specifying the predictors. Method: 3042 women and 614 men, aged from 18 to 86 years old (Mwomen = 41.25; Mmen = 41.62), participated in an online survey in December 2020 and January 2021. Participants evaluated the level of distress they felt regarding specific aspects of the COVID-19 pandemic and reported their depressive symptoms on the Patient Health Questionnaire PHQ-8 and their psychosomatic issues on a modified version of the Patient Health Questionnaire PHQ-15. Results: Women experienced more intense depressive symptoms and more frequent psychosomatic issues than men. In both genders, the depressive symptoms and psychosomatic issues were predicted by having children, concerns regarding the possibility of their own infection, concerns regarding isolation, and decreased quality of personal relationships. The depressive symptoms and psychosomatic issues in women were additionally predicted by concerns regarding infection of loved ones, decreased availability of health services, future uncertainty, altered working scope, separation from family, and concerns regarding family-work balance. *Conclusions*: This study provides a valuable insight into the most prominent concerns during the COVID-19 pandemic that negatively affect the mental health of each gender. It revealed that worse mental health outcomes are detected in women, presumably due to increased concerns about health, future, and family welfare.

SYMPOSIUM

S3.2

A national response to health and social care staff mental health and wellbeing in Northern Ireland throughout the COVID-19 pandemic

Chair: Ciaran Shannon

Northern Health and Social Care Trust, United Kingdom

Track: Health care professionals

This symposium outlines a national (Northern Ireland) response to health and social care staff wellbeing during the COIVD-19 pandemic. The policy and clinical context are set by the first paper that describes a framework that was developed and produced with input from all health and social care organisations in Northern Ireland. This framework guided leaders and managers of services to respond positively to the demands being placed on their staff and created a unified national approach to staff wellbeing through the pandemic. The effect of this framework on service provision will be described. The second paper describes a longitudinal survey of all health and social care staff in Northern Ireland in order to assess the wellbeing of health and social care staff in Northern Ireland throughout the COVID-19 outbreak and to check if the psychological supports provided by the health and social care organisations were meeting staff wellbeing needs. The two survey time points to date have found high levels of distress and highlighted the continued need to provide wellbeing support and to innovate to reach more staff. The third paper describes the experience of staff providing wellbeing supports to health care staff during the COVID-19 pandemic. Many psychological professionals were redeployed to provide such staff support. It was largely a valued and positive experience. The symposium highlights the importance of a unified national response to staff support and is

an exemplar of policy, practice, and research working in tandem.

Health and social care staff wellbeing during the COVID-19 pandemic: Longitudinal results from the Staff COVID-19 Wellbeing Survey

Julie-Ann Jordan^a, Ciaran Shannon^a, Kevin Dyer^a, Dympna Browne^b, Emma Carroll^a, Jenny Maguire^c, Keith Kerrigan^a, Sinead Hannan^d, Thomas McCarthy^e

^aNorthern Health and Social Care Trust, United Kingdom; ^bBelfast Health and Social Care Trust, United Kingdom; ^cSouth Eastern Health and Social Care Trust, United Kingdom; ^dSouthern Health and Social Care Trust, United Kingdom; ^eWestern Health and Social Care Trust, United Kingdom

Background: During the COVID-19 pandemic Health and Social Care Trust (HSCT) staff have had to contend with high numbers of hospital admissions and deaths, cancellations of both routine and urgent patient care, and redeployment to other roles. These pressures are likely to have taken a significant toll on staff wellbeing; for example, distress incurred by having to regularly break the bad news to people, and anxiety about protecting their family and patients from infection. Objective: To assess the wellbeing of HSCT staff in Northern Ireland throughout the COVID-19 outbreak, and to check if the psychological supports provided by the HSCTs are meeting staff wellbeing needs. Method: The Staff COVID-19 Wellbeing Survey longitudinal study spans four time points: Time 1 (November 2020; n = 3962), Time 2 (February 2021; n = 2898), Time 3 (May 2021), and Time 4 (August 2021). The survey included four validated psychological wellbeing questionnaires (depression, anxiety, Post-Traumatic Stress Disorder, and insomnia), alongside a broad range of other wellbeing-related measures Results: High levels of distress within the workforce were found (depression 30%; anxiety 26%; PTSD 30%; Insomnia 27%) at Time 1; generally, in excess of levels found amongst healthcare staff in China and the UK general population post-COVID-19. Time 2 & 3 results (available in due course) for these wellbeing measures will also be presented. Conclusions: The high levels of distress within HSCT staff highlight the need to continue to provide wellbeing supports regionally and to innovate in order to reach more staff in need.

Experiences of providing psychological support to health and social care staff during the COVID-19 pandemic: Qualitative and quantitative findings

Kevin Dyer^a, Ciaran Shannon ^b, Julie-Ann Jordan^a, Dympna Browne^c, Emma Carroll ^a, Jenny Maguire^d, Keith Kerrigan^a, Sinead Hannan^e, Thomas McCarthy^f, Luke McCann^g, Sinead Mitchell^a

^aNorthern Health and Social Care Trust, United Kingdom; ^bNorthern Health and Social Care Trust, United Kingdom; ^cBelfast Health and Social Care Trust, United Kingdom; ^dSouth Eastern Health and Social Care Trust, United Kingdom; ^eSouthern Health and Social Care Trust, United Kingdom; ^eSouthern Health and Social Care Trust,

United Kingdom; ^fWestern Health and Social Care Trust, United Kingdom; ^gQueens University Belfast, United Kingdom

Background: In anticipation of the high level of need for wellbeing support amongst Health and Social Care Trust (HSCT) staff, many staff were redeployed on a part-time basis to provide psychological supports, such as drop-ins, helplines, community outreach, hospital in-reach, and other general wellbeing initiatives. Objective: To understand the experience of staff providing wellbeing supports to health care staff during the COVID-19 pandemic. Method: Data collection with psychological support providers occurred from December 2020 to January 2021 and involved a mixed-methods approach: a) a short online survey (n = 84; response rate 40%) with questions relating to demographics, feedback on each provision type, overall experiences of providing support, and suggestions for improvement; b) two focus groups. Results: Survey results showed that high levels of stress before (11%) or while (5%) providing support was uncommon. One-quarter of respondents had difficulty maintaining a work-life balance while providing supports, and this was particularly the case for those with non-adult specialisms and those providing a great number of provision types. Most types of provision were considered useful, with the exception of dropins (only 41% of staff considered these to be useful or very useful. Qualitative results (currently being analysed) will also be presented. Conclusions: Providing psychological supports was generally viewed as a positive experience. The results validate the decision to limit drop-in clinics and concentrate on providing other types of support. Results yielded significant implications for support provision regarding the level of clinician experience, clinical specialism, and optimal service provision job plan.

Creating a policy framework for staff support in Northern Ireland during the COVID-19 pandemic Petra Corr

Northern Health and Social Care Trust, United Kingdom

Background: This paper sets out the policy context in Northern Ireland that underpinned the next two papers. From the beginning of COVID-19, it was evident this would significantly impact the wellbeing of health and social care staff. Prior to the pandemic, one in six UK employees reported mental ill-health. Knowing how to improve wellbeing at work is not always clear, the evidence is inconsistent, and all too often organisations wait until the impact has been felt before responding. Agreeing on a consistent approach to wellbeing during the pandemic was considered by the Department of Health to be a key priority. *Objective*: The aim was to create a national framework for Northern Ireland that would support HSC organisations in their approach to employee wellbeing and thus to mitigate the impact of working through the pandemic on HSC staff and to support safe and effective delivery of care. Method: In order to achieve the goals, a regional group was established including clinical psychologists and professionals working across Human Resources, Occupational Health, and management. This group reviewed the literature, scoped existing models of good practice, and engaged with staff from across the region to consider how best to provide support. Results: The group developed a Framework for Managers to promote workforce wellbeing A series of supporting resources were developed to provide accessible supports to all. Conclusions: The Framework, resources, and supports such as Psychological First Aid Helplines, Drop In Services, and Team Supports were established across HSCNI. The impact of these is evaluated.

ORAL PRESENTATIONS

Track: Children and adolescents

OP3.1

Socio-emotional predictors of PTSD symptoms in reaction to COVID-19 in youth: A longitudinal study

Catherine Raymond, Alexe Bilodeau-Houle, Alexandra Brouillard, Valérie Bouchard, Lisa-Marie Davignon, Félix Duplessis Marcotte, Myriam Beaudin, Jessie Provencher, Marie-France Marin

Université du Québec à Montréal, Canada

Background: The COVID-19 pandemic increased the incidence of distress in youth, including PTSD symptoms. Objective: The purpose of this longitudinal study was to assess the anxiety-related socioemotional predictors of PTSD symptoms in reaction to COVID-19 in youth. To do so, 84 children aged between 9 and 14 who previously participated in a laboratory-based experiment between 2017 and 2019 (T0) were recontacted to take part in this COVID follow-up. They filled online questionnaires in June 2020 (T1: 3 months of home confinement), and September 2020 (T2: back to school), December 2020 (T3). Participants were free of mental illness at T0 and T1. Method: To assess predictors of PTSD symptoms, we measured anxiety sensitivity (Childhood Anxiety Sensitivity Index) at T0, and trait anxiety (State-Trait Anxiety Inventory for Children), intolerance to uncertainty (Intolerance of Uncertainty Scale for Children), and trait rumination (Children's response style scale) at T1. PTSD

symptoms were measured using the Children's Revised Impact of Event Scale at T1, T2, and T3. *Results*: Controlling for sex and age, a linear mixed model revealed a main effect of anxiety sensitivity [F (1,66) = 4.187; p = .046], with children high on anxiety sensitivity presenting increased PTSD symptoms. We also found a quadratic time*rumination effect [F(1,66) = 3.023; p = .008], with high ruminators presenting increased PTSD symptoms at T2 [B = .329, p = .004]. *Conclusions*: Our results suggest that anxiety sensitivity higher symptoms when going back to school after six months of home confinement.

OP3.2

Socio-emotional and educational development of students in Georgia before and after the school closure related to COVID-19 pandemic

Tina Tsomaia^a, Elene Lomadze^b, Rusudani Zaalishvili^b, Ia Shalamberidze^b

 $^{\rm a}$ Georgian Institute of Public Affairs, Georgia; $^{\rm b}$ The Georgian Society of Psychotrauma, Georgia

Background: Billions of students and millions of teachers worldwide have been affected by the COVID-19 pandemic. Governments and local authorities have differed in their approach to the pandemic, the educational experiences of youth have varied widely as well. Many students have had the experiences of being locked down at home and using virtual learning platforms for months. Others have started to return to school with social distancing and hygiene procedures in place. Objective: The purpose of this research study is to examine the socio-emotional and educational development of students who have experienced lockdown and school closures over the past several months, as well as the possible subsequent reopenings/reclosures that have occurred. The research was interested in how do students assess their own social and emotional development and mental health before and after the school closure. Method: A non-representative survey was carried out in Georgia in two cohorts of different grades (Grade 4-6, Grade 7-9). The sample sizes comprised 400 students. Questioner used: "Then-and-Now" Holistic Student Assessment Retrospective Pre-Post Survey developed by Noam, G., Schüpbach, M., & Bae, S.H. (2020). Results: Preliminary findings of the study suggest that adolescents in Georgia experience significantly higher levels of distress following the school closure due to the COVID-19 pandemic, than before the pandemic. During the school closure, students have mentioned that they missed their friends the most. Conclusions: This highlights the need for innovative approaches to social-emotional

skills learning which has been amplified due to COVID-19 pandemic challenges. Timely action can help lessen the effects of the ongoing isolation and uncertainty.

OP3.3

"Locked in a cage": Experience of COVID-19 quarantine among adolescents in Lithuania

Asta Adler, Ginte Stancaitiene, Rasa Barkauskiene

Vilnius University, Lithuania

Background: COVID-19 pandemic has caused enormous challenges for all age groups but they are quite unique among adolescents (Scott et al., 2021). During quarantine, adolescents experience higher levels of stress (Ellis, Dumas & Forbes, 2020) and are more likely to have high rates of depression and anxiety (Loades et. al., 2020). Thus, understanding the subjective experience of quarantine among adolescents may help to reveal how do they process the challenges and stressors

they face. Objective: To uncover how do adolescents experience quarantine. Method: Adolescents (N = 24)from 13 to 17 years old (M = 15.38; SD = 1.15; 50% females) participated in a study. The Biographical narrative interpretative method (Wengraf, 2008) was chosen and semi-structured interviews were conducted via Zoom platform. Data were analysed using thematic analysis as outlined by Braun and Clarke (2006). *Results*: Four main themes emerged: (1) shock reaction: from euphoria to uncertainty; (2) loss and griefing: no "real contact" with teachers and friends, no school environment and usual routines, and efforts to compensate these via online communications; (3) a whole world at home: family is a place for comfort and substitute for the lost world but also huge tension in case of relational constraints; (4) the need to keep a positive sense of identity as a way of coping with distress, loneliness, and anxiety. Conclusions: Quarantine experience among adolescents represents a process during which youth undergo various changes, face loss, and strong emotions, and need help to keep a positive though a realistic sense of emerging identity.

Parallel sessions #4

SYMPOSIUM

S4.1

Taking care of our students: How the COVID-19 pandemic affects student mental health and wellbeing and how to intervene

Chair: Joanne Mouthaan

Leiden University, The Netherlands

Track: Other specific populations (e.g., chronic disabilities, refugees)

Students may be disproportionally affected by the circumstances and restrictions due to the COVID-19 outbreak. Early adulthood (age 18 to 25) is one of the most vulnerable age periods for developing mental health problems. In the past year, students had to deal with seizure of regular academic and social structures, financial concerns due to loss of livelihood or forced changes in living situations, and uncertainties about academic achievements and career prospects, next to concerns about personal health or that of loved ones. In addition, many students with mental disorders rarely seek treatment, largely because of fear of being stigmatized or a lack of knowledge about how and where to find help (Auerbach et al., 2016). Improving student mental health early on may not only offset far-reaching consequences, such as substance abuse and suicidality (Eisenberg et al., 2009), it may also benefit their economic prospects in the long run, through improved academic performance (Kittelsen Røberg & Helland, 2017). The studies in this symposium present a multifaceted overview of student mental health in the COVID-19 pandemic: the reciprocity of mental health symptoms, being alone and concerns about COVID-19 psychosocial effects through ecological momentary assessment (Papanikolaou), the vulnerability of international students and first-year Bachelor students through followup studies (Mouthaan), and the course and the effects of offering online guided self-help interventions on student mood and stress (Van Luenen).

Does being "the new student" matter? Findings from two longitudinal studies on mental health of novice students during the COVID-19 pandemic

Joanne Mouthaan^a, Liia Kivelä^a, Lonneke Lenferink^b, Niki Antypa^a, Marie-José van Hoof^e, Trudy Mooren^b

16:30–17:30

^aLeiden University, The Netherlands; ^bUtrecht University, The Netherlands; ^cLeiden University, University of Amsterdam, The Netherlands

Background: Starting college or university life comes with major life changes: living separate from family, having to adapt socially, academically, or even culturally. Objective: This may make novice students, incl. international students, more vulnerable to the (socially) restrictive measures of the COVID-19 pandemic, and warrant specific prevention and early intervention strategies for these groups. Method: This presentation highlights findings from two ongoing studies: In Study 1 we examined depressive symptoms, suicidal ideation, alcohol use, anxiety, academic stress, insomnia, and loneliness in 3 consecutive university student cohorts (2020, N = 135; 2019, N = 111; 2018, N = 207). In Study 2 we examined the 6-month prevalence of adjustment disorder (AD), posttraumatic stress disorder (PTSD), and wellbeing in a subcohort of the ESTSS COVID-19 population study: first-year Bachelor students from 4 universities in The Netherlands (n = 879). Results: In Study 1, international students reported more depressive symptoms, suicidal ideation, anxiety, and academic stress than native students in the 2020 cohort. Across time points, international students reported more academic stress, but less loneliness, than native students. In Study 2, at 6 months into the pandemic, students' prevalence of AD and PTSD were lower (both 15%) than in participants from the general population (PTSD: 17%, AD: 26%). However, students also reported lower levels of wellbeing and higher burden due to physical and social restrictions than non-students. Conclusions: In conclusion, while students appear resilient in the face of the COVID-19 pandemic, the mental health of international students and long-term health and wellbeing effects of restrictive measures may warrant more attention - during the pandemic and beyond.

Mental health and social contact during the COVID-19 pandemic: An ecological momentary assessment study in university students

Faidra Papanikolaou^a, Eiko Fried^a, Sascha Epskamp^b

 $^{\mathrm{a}}\mathrm{Leiden}$ University, The Netherlands; $^{\mathrm{b}}\mathrm{University}$ of Amsterdam, The Netherlands

Background: The COVID-19 pandemic caused oncein-a-lifetime disruptions of daily life for many students, such as the closure of the university and campus. Objective: We wanted to study the general frequency of mental health problems, social behaviors, and pandemic-related concerns in the 2 weeks following a university shut down — and whether these variables change and influence each other over time. Method: In March 2020, at the start of the outbreak in The Netherlands, we used Ecological Momentary Assessment to follow 80 bachelor students 4 times per day for 14 days, assessing mental health, social contact, and COVID-19 related variables. Results: Despite rapidly increasing rates of infections and deaths, feelings of anxiety, loneliness, and COVID-19 related concerns decreased, especially in the first few days. Other mental health variables, such as stress levels, remained stable, while depressive symptoms increased. Despite social distancing measures implemented by the Dutch government halfway through our study, students showed no changes in the frequency of in-person social activities. Dynamic network models identified vicious cycles between mental health variables and being alone, which predicted concerns about COVID-19 and was followed by further mental health problems. Conclusions: Our study highlights that the impact of the early onset of the pandemic on mental health in students appears to differ for different aspects of mental health. This emphasizes the importance of monitoring and investigating mental health at a dynamic and fine-grained level.

Monitoring and improving student mental health during the COVID-19 pandemic: Results of the Caring Universities project

Sanne van Luenen^a, Vivian Kraaij^a, Joanne Mouthaan^a, Nadia Garnefski^a, Philip Spinhoven^a, Pim Cuijpers^b, Sascha Struijs^b

 $^{\mathrm{a}}\mbox{Leiden}$ University, The Netherlands; $^{\mathrm{b}}\mbox{Vrije}$ Universite
it Amsterdam, The Netherlands

Background: Mental health problems, like depression and anxiety, are highly prevalent and increasing among university students which may cause severe role impairment. Objective: Caring Universities (CU) is an internationally embedded consortium of four Dutch universities to monitor and improve student mental health. Method: Students receive mental health surveys annually and are offered free online, guided programmes focused on reducing stress, improving mood, reducing procrastination, and dealing with the COVID-19 pandemic. Results: In January 2021, CU sent an online questionnaire to 115,023 students from the four universities, and 10,983 full answers were received up to now. 38.5% of respondents indicate moderate to severe depressive symptoms (PHQ-9 score 10-27), which is a larger percentage compared to earlier cohorts assessed briefly after the first lockdown in 2020 (33.1%) and before the pandemic in 2019 (22.5%). Up to now, 1.315 students started with an

eHealth programme. In general, students are satisfied and show a decrease in symptoms upon completion of the programmes. *Conclusions*: The COVID-19 pandemic and the ongoing measures taken may have a negative impact on student mental health. This must be interpreted with caution because of the low response rate. The use of the CU interventions by students and preliminary results regarding the change in symptoms will be presented in more detail.

SYMPOSIUM

S4.2

The impact of COVID-19 on the development of pathological anxiety and trauma processing: First insights from translational studies on fear learning Chair: Tanja Michael^a

^aSaarland University, Germany

Track: Trauma and stress

Many studies show an increase in distress and anxiety in the general population since the outbreak of the coronavirus disease 2019 (COVID-19). Chronic psychosocial stress is associated with alterations in associative fear learning, which, in turn, increases the risk of developing pathological anxiety and affects coping with traumatic events. Thus, it is crucial to investigate how COVID-19related distress and anxiety might affect fear conditioning processes. In this symposium, three experimental studies will be present on this issue, providing first insights into mechanisms of fear learning during the COVID-19 pandemic. Baas presents findings from a pilot study examining if higher fear of COVID-19 is related to the maladaptive fear acquisition and extinction patterns. Thereafter, Hauck et al. will expand on this issue by reporting on the relationship of COVID-19-related fear and the generalization of fear in a fear conditioning paradigm using aversive film clips. Finally, Friesen et al. will report findings from a study, investigating COVID-19-related distress as a predictor for associative fear learning and analog symptoms related to posttraumatic stress disorder. The symposium will be concluded with a summary of the presented findings and a general discussion on implications for clinical practice.

Is experimentally measured inhibition of fear related to fear of Corona and avoidance of social situations? Johanna M. P. Baas^a

^aUtrecht University, The Netherlands

Background: Throughout the world, efforts to decrease the spread of the coronavirus caused

governments to implement measures that restricted work- and social contacts, and individual mobility. Even though there is a lot of attention for people who ignore measures because they question their necessity, there are many people who isolate to a larger extent than strictly necessary. Objective: Now that more information exists on which situations are relatively safe when taking certain measures, the extent to which people are able to diminish their fears in such situations becomes relevant. Fear conditioning allows the characterization of different aspects of fear learning relevant for individual differences in fear responses. Method: During a fear conditioning experiment, an in-itself neutral stimulus is repeatedly paired with an aversive event, which causes it to acquire an association with the threat (CS+). Two measures of (deficient) fear inhibition can be derived by assessing 1) the strength of fear extinction once the threat is no longer there, and 2) the extent to which fear spreads to stimuli that are not directly related to threat (CS-). In this study, an online fear conditioning and extinction task was developed. Results: Two pilot studies (both n = 99) confirmed the correlation between intolerance of uncertainty and fear of corona and demonstrated that fear of corona predicted the avoidance of the social situation. Neither phenomenon was significantly related to fear learning. Conclusions: Power issues and other limitations are discussed, as well as an ongoing study in a larger sample to investigate all these parameters together.

Fear learning and generalization during pandemic fear: How COVID-19 related anxiety affects classical fear conditioning with traumatic film clips

Alexander Hauck^a, Diana Ferreira de Sa^a, Tanja Michael^a

^aSaarland University, Germany

Background: The COVID-19 pandemic represents a major disruption to our daily lives. Many people are confronted with health, financial and existential fears or even trauma-like or traumatic experiences. Current studies have described an increase in stress, anxiety, and PTSD symptoms in connection with the pandemic. Fear processing and its regulation are central mechanisms in the development and maintenance of PTSD and anxiety disorders. Patients not only commonly show impairments in fear learning but also in fear generalization, a biased fear response to stimuli or situations perceptually similar to the original trauma. A high burden of the pandemic may constitute a risk factor for both enhanced fear acquisition and generalization. Objective: In a preregistered online study with healthy university students, we investigated whether subjective and objective COVID-19 related burden (anxiety and restrictions in daily life) affect learning of fear and fear generalization. *Method*: We used a differential fear conditioning paradigm with a traumatic film clip as the unconditioned stimulus (UCS), and collected UCS-expectancy as the main measure of interest. *Results*: First results show that COVID-19 related anxiety correlates with depression and anxiety symptomatology, as well as perceived stress. Furthermore, participants with higher scores of COVID-19 related anxiety show impaired fear learning (lower fear discrimination), as well as higher fear generalization. *Conclusions*: Final results will be discussed at the meeting.

COVID-19-related distress predicts analog PTSD symptoms after exposure to an analog stressor

Edith Friesen, Tanja Michael, Sarah K. Schäfer, M. Roxanne Sopp

Saarland University, Germany

Background: The long-term impact of the COVID-19 pandemic on mental health is only starting to emerge. Beyond direct effects on mental health, it is crucial to investigate how negative psychological responses to the COVID-19 pandemic might affect the etiological processes of different mental disorders. Objective: In the current online study, we investigated whether a negative psychological response to the pandemic might predispose individuals towards posttraumatic stress disorder (PTSD) development after exposure to a non-COVID-19related traumatic stressor. Moreover, we examined if these effects are mediated by the strength of associative fear learning during trauma. Method: 122 undergraduates took part in an online study from March to July 2020. Subjects completed two questionnaires measuring their psychological responses (distress and rumination) to the COVID-19 outbreak. On a subsequent day, they went through a fear conditioning task, in which two originally neutral stimuli (conditioned stimuli, CSs) were repeatedly paired with the appearance of an aversive film clip (unconditioned stimulus; US). Subjective ratings (US expectancy, fear, arousal, and valence) were assessed as indicators of the strength of associative fear learning. Approximately 28 hours later, participants were asked to document film-related intrusive memories and ruminative, trauma-related thoughts they had experienced in the meantime. Results: We demonstrate that COVID-19-related distress predicts analog PTSD symptoms of a non-COVID-19-related stressor and that these effects are fully mediated by the strength of associative fear learning during exposure to the analog stressor. *Conclusions*: Our findings indicate that negative psychological responses to the COVID-19 pandemic should be considered as an emerging pre-traumatic risk factor.

ORAL PRESENTATIONS

Tracks: Trauma and stress/Grief and loss

OP4.1

Modelling the complexity of pandemic-related lifestyle quality change and mental health: An analysis of a nationally representative UK general population sample

Sarah Butter^a, Jamie Murphy^b, Philip Hyland^c, Orla McBride^b, Mark Shevlin^b, Todd K. Hartman^a, Kate Bennett^d, Jilly Gibson-Miller^a, Liat Levita^a, Anton P. Martinez^a, Liam Mason^e, Ryan McKay^f, Thomas Stocks^a, Frédérique Vallières^g, Richard P. Bentall^a

^aUniversity of Sheffield, United Kingdom; ^bUlster University, United Kingdom; ^cMaynooth University, Ireland; ^dUniversity of Liverpool, United Kingdom; ^eUniversity College London, United Kingdom; ^fRoyal Holloway, University of London, United Kingdom; ^gTrinity College Dublin, Ireland

Track: Trauma and stress

Background: The COVID-19 pandemic has affected the way many individuals go about their daily lives. Objective: This study attempted to model the complexity of change in lifestyle quality as a result of the COVID-19 pandemic and its context within the UK adult population. Method: Data from the COVID-19 Psychological Research Consortium Study (Wave 3, July 2020; N = 1166) were utilised. A measure of COVID-19-related lifestyle change captured how individuals' lifestyle quality had been altered as a consequence of the pandemic. Exploratory factor analysis and latent profile analysis were used to identify distinct lifestyle quality change subgroups, while multinomial logistic regression analysis was employed to describe class membership. Results: Five lifestyle dimensions, reflecting partner relationships, health, family and friend relations, personal and social activities, and work-life were identified by the EFA, while seven classes characterised by distinct patterns of change across these dimensions emerged from the LPA: (1) Better overall (3.3%), (2) Worse except partner relations (6.0%), (3) Worse overall (2.5%), (4) Better relationships (9.5%), (5) Better except partner relations (4.3%), (6) No different (67.9%), and (7) Worse partner relations only (6.5%). Predictor variables differentiated membership of classes. Notably, classes 3 and 7 were associated with poorer mental health (COVID-19 related PTSD and suicidal ideation). Conclusions: Four months into the pandemic, most individuals' lifestyle quality remained largely unaffected by the crisis. Concerningly, however, a substantial minority (15%) experienced worsened lifestyles compared to before the pandemic. In particular, a pronounced deterioration in partner relations seemed to constitute the more severe pandemic-related lifestyle change.

OP4.2

The impact of COVID-19 on anxiety and perceived social status

Siobhan Gormley

University of Cambridge, United Kingdom

Track: Trauma and stress

Background: The COVID-19 pandemic has impacted the population with national lockdowns and social distancing rules. These social changes have led to decreases in GDP, uncertainty in employment as well as loneliness, and lack of social contact. Hence, COVID-19 is not only an infectious disease pandemic but a social one as well. Objective: We, therefore, investigated how the COVID-19 pandemic has affected mental health and perceived social status. Method: 278 participants (185 females, 92 males, 1 other) were surveyed at three separate timepoints. Once before the pandemic (08/05-29/08/2019) and twice during the pandemic (12/05-08/06/2020) (13/ 11/2020-11/12/2020). Participants completed a series of questionnaires relating to mental health, perceived social status, social connectedness, and social distancing compliance. Results: Repeated measures analyses were conducted on the average scores of the mental health and perceived social status questionnaires at the three timepoints. Significant increases in levels of anxiety (BAI), involuntary subordination (ISQ), and interpersonal sensitivity were observed as well as decreases in striving to avoid inferiority when compared to pre-pandemic levels. Multiple linear regressions were used to ascertain if perceived social status and social connectedness predicted changes in mean anxiety scores. The BAI score at timepoints two and three was predicted by the individual's mean ISQ score at baseline as well as the change in ISQ score from baseline. Conclusions: Increases in ISQ across the pandemic indicate greater levels of perceptions of unwanted low status. This research provided novel evidence linking increases in involuntary subordination and anxiety during a period where perceptions of one's own status have decreased for many people.

OP4.3

Unexpectedness of bereavement is a risk factor for prolonged grief disorder

Bettina Doering, Antonia Barke, Hannah Comteße, Anna Vogel, Rita Rosner

Catholic University Eichstaett-Ingolstadt, Germany

Track: Grief and loss

Background: Preliminary evidence suggests that bereavement through COVID-19-related deaths will be experienced as unexpected. Objective: The present study investigated the expectedness of bereavement when losing a parent or partner in a representative population-based sample as a risk factor for the development of prolonged grief disorder (PGD). Method: Out of a representative sample of the German general population (N = 2498), 419 participants (62% female, mean age 60.3±14.4 years) reported the loss of a partner (31%) or a parent at least one year ago (mean time since loss 10.7±9.7 years). Additional measures were prolonged grief symptoms (self-reported Prolonged Grief Disorder-13-R) and ratings of the bereavement as expected (57.5%) or unexpected. The association of unexpectedness of bereavement with intense single symptoms of PGD DSM 5-TR (i.e. symptoms rated as "quite a bit" or "overwhelmingly present") was investigated by χ^2 -tests. *Results*: Unexpectedness of parental or spousal bereavement was significantly associated with a probable diagnosis of PGD (according to DSM 5-TR; $\chi^2(1) = 7.20$, p = .009). All symptoms of PGD DSM 5-TR that were intensely present differed significantly between expected and unexpected bereavements (all $\chi^2 > 4.15$, all p < .05) except for yearning, preoccupation, and emotional pain. Conclusions: Our results suggest that the unexpectedness of spousal and parental COVID-19-related bereavement is likely to increase the prevalence of PGD. The representative data demonstrate that on a symptom level, unexpected bereavement will present differently from expected bereavement. Given that additional stressors accompany COVID-19related bereavements (e.g., enforced isolation), future research is needed to adapt existing grief-specific treatments to target the resulting symptom pattern.

ORAL PRESENTATIONS

Track: E-health interventions

OP4.4

PTSD Coach Sweden: RCT of a trauma-focused selfmanagement app

Ida Hensler, Martin Cernvall, Josefin Sveen, Filip K. Arnberg

Uppsala University, Sweden

Background: Access to face-to-face mental health care may be temporarily restricted during pandemics. Remotely administered interventions, such as selfmanagement apps, can increase reach and complement existing services. However, their benefit is

uncertain. Objective: We investigated whether access to the self-management app PTSD Coach can reduce posttraumatic stress, depressive and somatic symptoms. *Method*: Participants were adults (n = 179: 164 women, mean age = 42.78 years) who had experienced potentially traumatic events in the past 2 years. Common events were sudden, violent death, physical/sexual assault, and life-threatening illness or injury. We recruited participants from social media ads between May 2019 and June 2020 and randomized them to access to PTSD Coach (n = 89) or waitlist (n = 90). Participants rated symptoms before and after 3 months of app access or waitlist. The primary outcome was posttraumatic stress (PTSD Checklist for DSM-5). Secondary outcomes were depressive symptoms (Patient Health Questionnaire-9) and somatic symptoms (Patient Health Questionnaire-15). Outcomes were analyzed per-protocol with linear mixed-effects models for available baseline (n = 179) and follow-up responses (n = 150). Results: Preliminary results indicate that access to PTSD Coach was associated with reduced posttraumatic stress (B = -7.03, p < 0.01) and depressive symptoms (B = -2.37, p < 0.05), but not somatic symptoms (B = -0.70, p > 0.05). Conclusions: Access to PTSD Coach may confer reductions in psychological symptoms. The Swedish PTSD Coach may complement existing face-to-face services for people who have experienced trauma. We discuss the relevance of self-management apps during the pandemic.

OP4.5

"Teletherapy as a lifeline for patients with war- and terror-induced PTSD" Attitudes towards teletherapy in the largest NGO for war- and terror-induced PTSD in Israel

Hana Himi^a, Lee Leshem-Kalif^b

^aBeit Berl Academic College, Israel; ^bNatal, Israel

Background: The COVID-19 pandemic has profoundly impacted populations coping with war- and terror-induced PTSD, as their inner reality is threatened by the reality outside. Alongside their growing distress and need for mental health support is therapists' concern with maintaining therapy continuity and their central role as trauma therapists: connecting and healing during lockdowns. *Objective*: The following study aimed to evaluate patients' and therapists' attitudes towards teletherapy. *Method*: Onehundred-and-eighteen patients and 74 therapists of a mental health NGO supporting war- and terrorinduced trauma patients completed self-report questionnaires about teletherapy perceptions. The questionnaire was administered via cellphones shortly following Israels' first lockdown. Results: The vast majority of patients (87.3%) were in therapy for six months or longer. The most common teletherapy platforms were Zoom (47.5%) and cellphones (356%). Lack of consent and privacy were the most common reasons for patients' negative perceptions towards teletherapy, according to therapists. All in all, the results point to high rates of satisfaction among both therapists and patients regarding several measures, including privacy, setting flexibility, concentration, and effectivity. Half of the patients and a third of the therapists preferred a combination of teletherapy and face-to-face meetings when possible. Conclusions: COVID-19 has created a rare opportunity to evaluate attitudes towards teletherapy. The results suggest that maintaining therapeutic relations remotely serves as a lifeline for patients. The challenges of teletherapy as experienced by patients and therapists can illuminate practical implementations specific to trauma-focused therapy.

OP4.6

The perspective of patients with posttraumatic stress disorder on the COVID-19 pandemic and clinical videoconferencing

Simone de la Rie, Jackie June Ter Heide, Trudy Mooren

ARQ National Psychotrauma Centre, The Netherlands

Background: The COVID-19 pandemic and its consequences may challenge resilience and aggravate complaints of patients in treatment for

Posttraumatic Stress Disorder (PTSD), whereas treatment necessarily shifted to online treatment, i.e. clinical videoconferencing (VCT), but it is unclear to what extent. Objective: The current study examined the patients' perspectives regarding the pandemic and experiences with VCT. Method: Patients at a specialized Psychotrauma institute were asked to participate in a semi-structured interview by phone. Patients were selected through stratified randomization based on representation of the patient group, age, and sex. Qualitative analyses were performed using MAXQDA to elicit themes relevant to the participants. Results: Twenty-two participants (12 male, 10 female) including veterans, police officers, WOII survivors, WO II offspring, and refugees were administered the interview. Results indicated that the pandemic was experienced as stressful and affecting mood, due to fear of Corona, restrictive measures, and social isolation, although patients who were already isolated felt nothing changed. Resilient patients managed to get used to the situation, and tried to focus on positive things. Most participants were offered clinical VCT. Overall patients appreciated the continuity of treatment through VCT and felt safe to stay at home. Disadvantages were mentioned, namely technical problems, distance, the lack of body language and trust, lack of privacy at home, reluctance to discuss trauma at home, and getting distracted easily. Conclusions: Patients felt the Corona-pandemic affected their mental wellbeing, and recommendations for improving resilience were provided. Continuity of treatment through VCT was appreciated, although disadvantages need to be tackled in the future.

Friday, June 18th, 2021 Day #2 Parallel sessions #5

SYMPOSIUM

S5.1

COVID-19 Unmasked Global Collaboration: Longitudinal cohort study to examine the wellbeing of young children and their families during the pandemic

Chairs: Mira Vasileva^a and Meghan Marsac^b

^aUniversity of Melbourne, Australia; ^bUniversity of Kentucky, United States

Track: Children and adolescents

The COVID-19 pandemic has been challenging for children and their families all over the world. Whilst young children are less physically susceptible to contracting or getting sick from the virus, their wellbeing is still at considerable risk of being negatively impacted and this may have long-term consequences for their trajectories across the lifespan. developmental Lockdowns and social distancing measures have disrupted young children's usual social contacts, daily routines, and education. Worries about the widespread health risks, potential life threat, ongoing financial and employment impacts, and social isolation might cause higher distress of caregivers affecting their response to their children's needs. This symposium is dedicated to the COVID-19 Unmasked survey and Global Collaboration. The collaboration was formed between research teams in 8 countries to better understand and compare the different experiences and impact of the pandemic on the mental health of young children and caregivers around the world. The first presentation outlines the formation of the Global Collaboration and the study design and measures. The second presentation describes results from Australia and the USA about the distribution and correlates of emotional and behavioural difficulties in young children during the pandemic. The third presentation focuses on the mediation effect of parental depressive symptoms in the relation between parental worries and parenting based on findings from The Netherlands and the UK. This project will help to identify if and how the COVID-19 pandemic is affecting the wellbeing of young children and parents from different cultures as well as identify risk and protective factors.

10:45–11:45

The COVID-19 Unmasked survey: Study design and global collaboration

Alexandra De Young

Children's Health Queensland Hospital and Health Service, Australia

Background: Early empirical data shows that schoolaged children and adolescents are experiencing elevated levels of anxiety and depression during the COVID-19 pandemic. However, there is only scarce evidence regarding the mental health and wellbeing impact on infants and pre-school-aged children. Objective: This global study aims to (a) describe and compare the COVID-19 related experiences within and across countries; (b) examine mental health outcomes for young children (1 to 5 years) and (c) caregivers over a 12-month period during the COVID-19 pandemic; (d) identify the risk and protective factors for child and caregiver emotional wellbeing. In this presentation, we will outline the background, study design, and measures for global collaboration. Method: We have developed partnerships with eight international sites (Australia, Cyprus and Greece, The Netherlands, Poland, Spain, Turkey, the United Kingdom, and the United States of America). Research partners are collecting data from caregivers of young children aged 1-5 years old on 4 occasions (baseline and 3-, 6- 12-months). Caregivers answer questions online about COVID-19 related exposure and experiences, their child's wellbeing, their own mental health, and parenting. Results: The course of psychological wellbeing and the impact of risk and protective factors will be analysed using multivariate models accounting for nested effects (e.g. region) and repeated measures. Conclusions: The findings from the COVID-19 Unmasked global collaboration will directly translate into mental health promotion and prevention models for the early years by informing public health advice and identifying factors that contribute to positive outcome trajectories.

Young children's mental health during the pandemic: Results from Australia and the USA

Mira Vasileva^a, Meghan L. Marsac^b, Eva Alisic^a, Vanessa E. Cobham^c, Seetha H. Davis^d, Caroline L. Donovan^e, Aimee K. Hildenbrand^f, Elisabeth Hoehn^g, Sonja March^h, Christel M. Middeldorpⁱ, Alisa B. Miller^j, Tess Smith^b, Rachel Wamser-Nanney ^k, Alexandra De Young^g

^aUniversity of Melbourne, Australia; ^bUniversity of Kentucky, United States; ^cThe University of Queensland, Australia; ^dBoston Children's Hospital, United States; ^cGriffith University, Australia; ^fNemours Children's Health System, United States; ^gChildren's Health Queensland Hospital and Health Service, Australia; ^hUniversity of Southern Queensland, Australia; ⁱUniversity of Queensland, Australia; ^jBoston Children's Hospital, United States; ^kUniversity of Missouri-St. Louis, United States

Background: Studies investigating child wellbeing during the COVID-19 pandemic have focused primarily on school-aged children. Objective: This study aimed to describe COVID-19-related experiences and wellbeing of young children during the pandemic. Method: We collected baseline data between May and August 2020 in Australia and between July 2020 and February 2021 in the United States (US) via online surveys. Participants included caregivers of children aged 1-5 years (N = 826 Australia; N = 631US). For each country, we analysed the distribution of indicators of child wellbeing and conducted linear regression models to determine whether an index of COVID-19 related challenges (range 0-60, e.g., job/ income loss, loss of childcare), pre-existing child mental health difficulties, and caregiver distress predicted child wellbeing. Results: Although participants from Australia and the US differed in their direct exposure to COVID-19 itself, the indirect impact due to loss and disruptions to daily life was similar (Australia: M = 18.5, SD = 9.4; US: M = 20.4, SD = 9.6). Between 26.1% and 27.5% of children in Australia and 12.5% and 20.8% of children in the US demonstrated high to very high levels of anger, anxiety, depression, and sleep disturbance. In both countries, greater exposure to indirect impacts of the pandemic was significantly associated with more child emotional and behavioural difficulties ($\beta = .16$ to .27) even when controlling for pre-existing child emotional difficulties and caregiver distress. Conclusions: Findings indicate that the challenges very young children are facing during the pandemic should not be underestimated. Targeted intervention is needed to support young children and their families in coping with the ongoing COVID-19 pandemic.

Parent mental health and parenting during the pandemic: Results from the UK and The Netherlands

Hope Christie^a, Marthe R. Egberts^b, Karen Goodall^a, Willemijn M. van Eldik^b, Trudy T. Mooren^b, Anneloes L. van Baar^b, Paul A. Boelen^b, Mariken Spuij^b

^aUniversity of Edinburgh, United Kingdom; ^bUtrecht University, The Netherlands

Background: Research indicates that a substantial number of parents' report worsening of mental health during the COVID-19 pandemic, which may have subsequent adverse consequences for parenting and the parent-child relationship. However, little is

known about how parental worries about the pandemic may affect parent mental health and parenting in parents of young children. Objective: This study aims to examine (a) the prevalence of parental depressive symptoms, (b) the levels of COVID-19 related parental worries, (c) the relationship between parental worries and parenting, including the potential mediating role of parental depressive symptoms, in two samples of parents of 1- to 5-year-old children. Method: Since late 2020, baseline data have been collected in the UK (N = 454) and The Netherlands (N = 1331) via an online survey. Participants included parents of children aged 1-5 years. Results: We will analyse levels of parental depressive symptoms and the mean levels of COVID-19 related worries through descriptive statistics for both countries separately. In addition, mediation analyses will be conducted for each country, to examine the mediating role of parental depressive symptoms in the relation between parental COVID-19 worries and parenting. Parental warmth and rejection will be used as outcome variables, controlling for pre-existing parental mental health problems, as well as child age and gender. Conclusions: Findings will be discussed in the context of how each country has handled the pandemic, as well as providing insight into the mental health and parenting support needs of families with young children during this time.

SYMPOSIUM

S5.2

Israelis' mental health during the COVID-19 pandemic: Global and local aspects Chair: Avital Laufer

Netanya Academic College, Israel

Track: Trauma and stress

The aim of the symposium is to explore Israel as a test case of reactions to the pandemic with regard to local as well as global aspects. Three cross-cultural studies will be presented. In the first presentation, measures of general psychological distress, trauma history, and COVID-19related PTSD symptoms among Israelis and Americans will be presented. The presentation will engage in the differences between the distress levels of the two cultures and the cultural aspects that might account for these differences, such as collectivism vs. individualism, negative coping, and experience with previous national crises. In the second presentation, the distress levels among Israelis, measured at four time points, will be discussed. The study also compares Israelis' distress levels at Timepoint 1 with distress levels of individuals in the U.S., India, Ecuador, and Colombia. The study findings show stability in COVID-19-related PTSD levels over time. The study also indicates differences between the countries regarding sociodemographic variables and COVID-19related worries that might account for the distress levels. In the last presentation, results from a self-help website using CBT modules will be shown. The website was launched in Hebrew, Arabic, Spanish, Russian, and English versions. Most of the users came from within Israel, 5% from the U.S., and 5% from other parts of the world. The model and the results of the intervention will be discussed.

Coronahelp: Evaluation of an online self-help CBT resource for coping with COVID-19

Sara Freedman^a, Daniel Minkin Levy^b, Tzvi Richman^a, Inbal Roytman^a, Renana Eitan^b

^aBar Ilan University, Israel; ^bThe Hebrew University, Israel

Background: Early in the COVID-19 pandemic studies emerged regarding mental health impacts. Given this preliminary data, we launched a self-help website in March 2020 to assist with coping with the pandemic. The content included standard CBT modules: psychoeducation, relaxation techniques, behavioral and cognitive work. Objective: The aim was to make self-help websites widely available. Method: Given the plethora of web-based tools that have little evidence base, we encouraged users to complete questionnaires and provide an email for follow-up. The site (https://www.help withcorona.org) was launched initially in Hebrew, with Arabic, Spanish, Russian and English versions added. The site and the data collection received ethical approval from Bar Ilan University. Results: The results show that between March 17, 2020, and March 11, 2021, there were 11,139 unique visitors, with 40,477 page visits. The majority (77.5%) accessed the site via their telephone. Visitors came from around the globe: 12,450 home page visits were from within Israel (90%), 672 (5%) from the USA, and 5% from the rest of the world. The most visited content pages were the relaxation and the worry/anxiety modules. 393 people filled out questionnaires, 81.2% were women, average age of 42.5 (14.4). They reported a GAD7 score of 7.7 (3.6); 30.7% reported a GAD7 score over 10, indicating a level of clinical symptoms. Significantly more single people reported clinical levels of anxiety than married or divorced. Conclusions: The use of self-help websites, their constraints, and their advantages and disadvantages, particularly during a pandemic will be discussed.

The global mental health implications of COVID-19: Findings from a 5-country international study

Danny Horesh $^{\rm a,b},$ llanit Hasson-Ohayona, llanit Gordona, Ofer Golana, Adam D. Brown $^{\rm b,c}$

^aBar Ilan University, Israel; ^bNYU School of Medicine, United States; ^cThe New School for Social Research, United States

Background: COVID-19 has massive mental health implications Objective: We present findings from several studies conducted in Israel and abroad, aimed to assess the psychological outcomes of COVID-19, as well as factors associated with vulnerability and resilience. Method: Study 1 included 281 Israeli adults, who were followed across four time points - on March, April, August, and October 2020. Study 2 is an international expansion of study 1. The Israeli study protocol from study 1 was administered among 791 adults from 5 countries: Israel, U.S.A., India, Ecuador, and Colombia. Participants completed self-report questionnaires assessing perceived stress, anxiety, PTSD, emotion regulation, COVIDrelated worries, and more Results: In Israel, participants reported moderate to high stress levels at T1, which remained stable through T4. At T4, over 10% of our sample met the cutoff for a probable COVIDrelated PTSD diagnosis. Elevated levels of distress were associated with female gender, young age, being single, and feeling alone. The Agepsychopathology association was mediated by emotion regulation skills. In the international study, Israel and India were the least distressed countries, while Ecuador reported the highest distress. Multivariate models showed that sociodemographic variables and COVID worries differentially predicted psychological distress for each country. Conclusions: COVID-19 yields considerable distress, which seems to remain stable over time. Mental health professionals should pay closer attention to those most vulnerable to distress, including young individuals, and those who feel more alone. Finally, the psychological effects of COVID-19 are different for each country and may vary according to the ways different societies handle the pandemic.

All in this together? Differential coping patterns between Americans and Israelis mediate psychological outcomes during COVID-19

Rivka Tuval-Mashiach^a, Shalom Jaffe^b, Leib Litman^b, Yael Latze^c, Jonathan Robinson^b, Sarah L. Weinberger-Litman^d

^aBar Ilan University, Israel; ^bLander College, United States; ^cUniversity of Haifa, Israel; ^dMarymount Manhattan College, United States

Background: The psychological impact of the COVID-19 pandemic is profound. Prior research has found elevated levels of psychological distress, anxiety, and depression in response to COVID-19 but the mechanisms underlying these findings are not well-understood. In addition, how these mechanisms function cross-culturally has not been explored. *Objective*: This cross-cultural study seeks to explore the psychological response to COVID-19 as well as

the mechanisms underlying these responses. Method: An online survey of 1788 adults in the United States and Israel measured general psychological distress, trauma history, and COVID-19-related PTSD symptoms. Results: Significant differences were found across all measures with Americans reporting greater distress and PTSD symptoms as well more exposure to previous trauma. Two parallel mediation models used coping strategies as mediators to explore the direct effect of nationality on distress and PTSD symptoms. Consistent with our hypothesis Israeli's engage in lower levels of negative coping which significantly mediates psychological responses. No significant mediation was found for positive or active coping, strategies usually associated with better outcomes, suggesting that coping mechanisms that have been found to mitigate psychological distress in other situations may not be useful given the unprecedented and uncertain nature of the COVID-19 pandemic. Conclusions: Findings are interpreted in the context of cultural differences relating to collectivism and individualism as well as previous experience with national crises.

SYMPOSIUM

S5.3

Young adults amid COVID-19 pandemic: Findings from Lithuania and Japan

Chair: Paulina Zelviene

Vilnius University, Lithuania

Track: Trauma and stress

The COVID-19 global pandemic has a huge impact on social life and mental health. Young adults are particularly vulnerable. First, they are among the risk groups of impaired mental health in general. Second, such COVID-19-related restrictions as national lockdown had a huge impact on the social life and identity development of emerging adults. The current symposium is presenting findings of Lithuanian and Japanese researchers' joint collaboration, addressing the stressful and traumatic experiences as well as identity development among youth. The first presentation (Truskauskaite-Kuneviciene et al.) will address the effects of COVID-19-related burden, specifically, the COVID-19 restrictions-related distress and impaired health, on identity processes. The second presentation (Kazlauskas et al.) will explore the prevalence of COVID-19 related stressors among youth as well as PTSD and CPTSD prevalence in relation to COVID-19, also, the associations of stressors with PTSD/ CPTSD among young adults from Lithuania. The

third presentation (Kamite et al.) will present the effects on mental health, and the risk of PTSD/ CPTSD among Japanese emerging adults in the context of the global pandemic.

COVID-19-related distress and identity processes in young adulthood

Inga Truskauskaite-Kuneviciene^a, Kazumi Sugimura^b, Paulina Zelviene^a, Evaldas Kazlauskas^a

^aVilnius University, Lithuania; ^bHiroshima University, Japan

Background: In face of COVID-19 pandemics, young adults may be among those the most affected by the restrictions. The national lockdown, forbidden public (and personal) social events, restricted the opportunities of socialization, and, possibly, the possibilities to explore identity choices and move towards the integrated self. Objective: In the current study, we aimed to explore the links between COVID-19related stressors and identity processes. Method: In total, 1269 university students aged 18-29 participated in the cross-sectional study. The short form of the Dimensions of Identity Development Scale (DIDS; Luyckx et al., 2008) was used to assess the levels of five identity processes, in particular, four positive identity processes, that is, Exploration in Breadth, Commitment Making, Exploration in Depth, and Identification with Commitment; and negative identity process, that is, Ruminative Exploration. The COVID-19-related distress was measured with five items, representing the levels of burden young adults experienced due to restriction measures as well as impaired health of their own and their loved ones. Results: The results indicated that overall COVID-19-related distress as well as negative effects of restrictions and impaired health were negatively related to identification with commitment and positively linked with ruminative exploration. However, we also found that higher levels of COVID-19-related distress are positively related to exploration in depth. Surprisingly, we did not find the links between COVID-19-related distress and exploration in breadth. The longitudinal links between COVID-19-related distress and identity processes should be explored in future research. Conclusions: The study highlights that COVID-19related distress may contribute to the negative identity development of young adults.

ICD-11 PTSD and Complex PTSD in relation to COVID-19-related negative experiences among young adults in Lithuania

Evaldas Kazlauskas^a, Paulina Zelviene^a, Yuka Kamite^b, Gabija Petrauskaite^a, Inga Truskauskaite-Kuneviciene^a

^aVilnius University, Lithuania; ^bHiroshima University, Japan

Background: The existing evidence suggests that PTSD risk is linked with COVID-19-related stressful experiences (e.g. Conrad et al., 2021), and PTSD rates in young adult samples are higher in comparison to pre-pandemic (e.g. Liu et al., 2020). However, the research on how COVID-19-related restrictions, as well as COVID-19-related health issues, are linked with PTSD and especially, complex PTSD (CPTSD) is still very scarce. Objective: In the current study, we aimed to explore the risk of PTSD and complex PTSD in the sample of traumatized young adults in relation to COVID-19-related burden. Method: In total, 1273 university students aged 18-29 participated in the cross-sectional study. The revised version of the Life Events Checklist (LEC-R; Weathers et al., 2013) was used for the assessment of trauma exposure. The ICD-11 PTSD and CPTSD were assessed with The International Trauma Questionnaire (ITQ; Cloitre et al., 2018). The COVID-19-related burden was measured using the five items, representing the levels of burden young adults experienced due to restriction measures and impaired health of their own and their loved ones. Results: The results indicated that 77.3% of young adults in the study sample were exposed to at least one traumatic event over their lifetime. We found high levels of PTSD and CPTSD among the trauma-exposed youth, 9.3% had probable PTSD and 12.8% had probable CPTSD, based on self-report. Conclusions: PTSD and CPTSD risk were associated with higher levels of COVID-19related distress.

Mental health, PTSD, and Complex PTSD during the COVID-19 pandemic among young adults in Japan

Yuka Kamite^a, Kazuaki Abe^a, Shogo Hihara^a, Evaldas Kazlauskas^b, Inga Truskauskaite-Kuneviciene^b, Yutaka Haramaki^a, Kazumi Sugimura^a

^aHiroshima University, Japan; ^bVilnius University, Lithuania

Background: In Japan, although a strict lockdown has not been implemented, a self-restraint lifestyle continued, in which university students were required to refrain from going out carelessly and not to participate in various social activities. Objective: We aimed to explore the link between COVID-19-related problems and mental health (i.e., depression, anxiety, stress, and well-being), and the risk of PTSD and complex PTSD in the link among Japanese university students. Method: An online survey was conducted with 1,345 university students in February 2021. Participants completed self-report questionnaires, which included socio-demographic questions; items related to physical health and life problems related to Covid-19; Life Events Checklist (LEC); International Trauma Questionnaire (ITQ); Depression, Anxiety, and Stress Scales (DASS-21); and Satisfaction with

Life Scale (SWLS). Results: In this sample, estimated prevalence rates of PTSD and CPTSD were 6.5 and 10.7%, respectively. As for the role of COVID-19, correlation analyses revealed that the COVID-19related physical health problem was positively associated with anxiety and stress. A series of analyses of variance showed that participants exposed to child abuse and those exposed to other traumatic life events scored a lower level of well-being, and higher levels of stress, anxiety, and depression compared to non-trauma-exposed students. In addition, participants exposed to childhood abuse scored high on anxiety when they had a high COVID-19-related physical health problem. Conclusions: The results suggest that youth who have experienced serious trauma in the past may be at increased risk of mental health problems due to the physical health problems related to COVID-19.

ORAL PRESENTATIONS

Track: Specific populations

OP5.1

The psychosocial impact of the COVID-19 pandemic on refugees and migrants

Eva Spiritus-Beerden, An Verelst, Ilse Derluyn

Ghent University, Belgium

Background: Refugees' and migrants' lives are often characterized by numerous stressors, such as discrimination, poor living conditions, and a high risk of developing mental disorders. These disadvantages make them especially vulnerable during the COVID-19 pandemic where health care, support services, and protective systems are overwhelmed and under-capacitated. Objective: Considering this, Apart Together aims to uncover the psychosocial impact of COVID-19 on refugees and migrants across the world. Method: Quantitative data were collected from over 30,000 respondents between April 2020 and October 2020, focusing on five categories: sociodemographic characteristics (1), COVID-19-related situations (2), daily stressors (3), mental health (4), and social well-being (5). A bivariate cross-tabulation analysis and risk analysis were conducted. Results: The majority of the respondents reported a deterioration of feelings of depression, worries, anxiety, and loneliness since the pandemic. Results showed that women were more likely to report a worsening of mental health compared to men. In addition, groups that are particularly at risk to experience a deterioration of their mental health since

COVID-19 are respondents living in asylum centers or on the street or in insecure accommodations and respondents without or with temporary documents. *Conclusions*: The results clearly underline the need and importance of including refugees and migrants in policy responses to COVID-19. Measures are needed to increase refugees' and migrants' access to multi-language information and to health services, both medical and psychological. Efforts need to be taken to improve the mental health services for the most vulnerable groups and to continue the provision of services – also in times of a pandemic.

OP5.2

Migrant adolescents' mental health during the COVID-19 pandemic: What is the role of school belonging?

An Verelst, Nikolett Szelei, Ilse Derluyn

Ghent University, Belgium

Background: Previous research indicated that feelings of school belonging positively impact adolescents' mental health (Scharpf et al., 2020). However, the COVID-19 pandemic drastically changed schooling arrangements, including a shift to online teaching and distance learning. These measures have not only reshaped teaching and learning but also the schools' social processes, raising questions on how this has possibly impacted adolescents' sense of school belonging. Moreover, there is growing awareness on how COVID-19 measures in schools may have further marginalised certain vulnerable groups (EC JRC, 2020), such as migrant and refugee adolescents (Jones et al., 2020), who are already at higher risk of developing mental health problems. Objective: Consequently, we ask how migrant adolescents' mental health has changed during the COVID-19 pandemic, and what role school belonging potentially played herein. Method: Data are drawn from the EUfunded RefugeesWellSchool project that implemented and evaluated school-based interventions promoting mental health among migrant and refugee adolescents. The study was ongoing when COVID-19 measures were implemented in schools; therefore, the scope of the inquiry was extended to exploring the potential impact of COVID-19 on adolescents' mental health in relation to their feelings of school belonging. Longitudinal quantitative data were collected from migrant adolescents (n = 3000) before and after COVID-19 measures have been introduced to schools. Mental health was measured by the SDQ

and CRIES scales, and a one-item question on overall wellbeing. School belonging was measured by the PSSM scale. *Results*: We discuss the potentially changing concept of school belonging during COVID-19 and its role in migrant adolescents' mental health.

OP5.3

The effect of the COVID-19 pandemic on subjective childbirth experience and postpartum post-traumatic stress reactions in women who gave birth in Lithuania

Egle Mazulyte-Rasytine, Ugne Gudzinskaite

Vilnius University, Lithuania

Background: The COVID-19 pandemic has triggered numerous changes to the provision of maternity care worldwide. In many countries, including Lithuania, this resulted in violations of respectful maternity care, e.g. restrictions of labour companionship. Objective: The aim of this study was to evaluate the effect of the COVID-19 pandemic on subjective childbirth experience and postpartum post-traumatic stress (PTS) reactions in women who gave birth in Lithuania. Method: The study sample consisted of 1309 women who gave birth during the COVID-19 pandemic in 2020 and 1389 who gave birth before the onset of the pandemic, mainly in 2019. Women were asked about their childbirth experiences, quality of the received maternity care, and postpartum mental health. This project is funded by EEA Grants through the Active Citizens Fund. Results: Women who gave birth during the pandemic had significantly more postpartum PTS reactions, but not clinically significant postpartum PTSD compared to women who gave birth before the pandemic. More prominent postpartum PTS reactions were associated with caesarean birth, longer separation from the newborn, longer postpartum stay in the facility, restrictions of labour companionship, the experience of obstetric violence (i.e. being bullied, intimidated, and abused), lower sense of safety, subjective experience of childbirth being more traumatic, the higher discrepancy from childbirth expectations, and lower satisfaction with received intrapartum and postpartum care. Regardless of the pandemic situation, postpartum PTS reactions were best predicted by the same factors. Conclusions: The COVID-19 pandemic has exacerbated women's experiences of harmful practices related to maternity care which may lead to poorer mental health outcomes.

Parallel sessions #6

SYMPOSIUM

S6.1

Longitudinal changes in mental health during COVID-19

Chair: Talya Greene

University of Haifa, Israel

Track: Trauma and stress

Since its outbreak over one year ago, the COVID-19 pandemic has had a devastating impact on individuals around the globe. Given the dynamic picture of this pandemic within and between countries, it is crucial to conduct longitudinal studies across the world, to understand how mental health is impacted over time, and in different countries. This symposium presents three longitudinal studies investigating the mental health impact of the pandemic in various countries. The first study (Gilbar et al.) examined risk factors for depression and anxiety during the pandemic in Israel, above and beyond symptom levels reported three years prior to the pandemic. The second study by Armour et al. is a longitudinal three-wave study in a community sample from the UK, which identified heterogeneous trajectories of PTSD, depression, and anxiety symptomatology. The final study (Freedman et al.) presented in this symposium was an international longitudinal study examining risk factors for PTSD, depression, and anxiety during COVID in over 30 countries.

Psychological effects of COVID-19: An international longitudinal study

Sara Freedman^a, Azucena Garcia Palacios^b, Eduardo Fernandez^c, Jonathan Rabinowitz^a, Talya Greene^{d,e}

^aBar Ilan University, Israel; ^bPrimary University of Jaume I, Spain; ^cHospital Psiquiátrico San Juan de Dios de Honduras, Honduras; ^dUniversity of Haifa, Israel; ^eUniversity College London, United Kingdom

Background: Public health responses to pandemics are concerned with physical impacts as well as emotional reactions, and their relationship with long-term illness and psychological outcomes. Studies from previous pandemics are scarce and indicate that quarantine has both short- and long-term psychological consequences. Emerging studies from COVID-19 paint a similar

12:00-13:00

picture. Most studies have examined individuals either before or following a potential pandemic, thus limiting the understanding of the changes in symptoms over time. Objective: The object of the current study was to collect a large global longitudinal online data using weekly assessments, in the early stage of COVID-19 (March - June 2020), with a follow-up assessment at one year. Method: The questionnaires were available in English, Spanish, Italian, and Hebrew using the Qualtrics platform. The first assessments took place in the second half of March 2020 and were followed by 12 weekly assessments. Participants answered questions regarding demographics, COVID-19 symptoms, and diagnosis, quarantine, worry about COVID-19, social media use regarding COVID-19, anxiety (GAD7), depression (PHQ9). PTSD symptoms relating to COVID-19 were assessed at the first and last assessments (PCL5). Results: In total, 1750 participants from over 30 countries answered the initial assessment. Follow-up assessments were completed by approximately 10% of each language group. Risk factors for distress over time will be presented. Conclusions: Implications for mitigating psychological distress during COVID-19 will be discussed.

Risk factors for depression and anxiety during COVID-19 in Israel: A two-wave study before and during the pandemic

Ohad Gilbar^a, Marc Gelkopf^a, Rony Berger^{b,c}, Talya Greene^{a,d}

^aUniversity of Haifa, Israel; ^bTel Aviv University, Israel; ^cCenter for Compassionate and Mindful Education, Israel; ^dUCL, United Kingdom

Background: Research indicates that mental health problems increased across the globe after the outbreak of the COVID-19 pandemic. However, there is a need for research examining specific risk factors for mental health problems, while accounting for symptoms before the pandemic. Objective: The current presentation focuses on a study that examined risk factors for depression and anxiety symptoms among Israeli adults following the first wave of the COVID-19 pandemic in Israel, above and beyond depression and anxiety symptoms reported three years before the pandemic. Method: We performed a two-wave 3-year longitudinal study (W1 July-September 2017; W2 May-June 2020). The final sample included 578 participants who completed anxiety and depression self-report questionnaires during both waves. W2 additionally included being considered highrisk or living with someone considered high-risk for COVID, and measures regarding loneliness, perceived stress, and COVID-19 worries. *Results*: Both anxiety and depression symptoms were significantly higher at W2 during the pandemic. Worries related to COVID-19, perceived stress, and loneliness predicted depression and anxiety in W2. In addition, being younger and female were associated with W2 anxiety. *Conclusions*: The study highlights risk factors for psychological distress in light of the COVID-19 pandemic. The attention of clinicians and policymakers should be given to the important role of loneliness when screening and treating people during this pandemic.

Longitudinal analysis of the UK COVID-19 psychological wellbeing study: Trajectories of anxiety, depression and post-traumatic stress symptomology

Cherie Armour^a, Kerri E. McPherson^b, Kareena McAloney-Kocaman^b, Emily McGlinchey^a, Pia Faeth^b

Background: There is evidence that COVID-19 has had a negative impact on the mental health of individuals. *Objective*: The aim of this study, from the COVID-19 Psychological Wellbeing Study, was to identify trajectories of anxiety, depression, and PTSD symptomology during the first UK national lockdown. We also sought to explore risk and protective factors. Method: This was a longitudinal, three-wave survey of UK adults conducted online. Analysis used growth mixture modelling and logistic regressions. Results: Data was collected from 1958 adults. A robust 4-class model for anxiety, depression, and PTSD symptomology uniquely distinguished participants in relation to the severity and stability of symptomology. Classes described low and stable and high and stable symptomology and symptomology that improved or declined across the study period. We identified a number of risk and protection factors that predicted membership of classes with elevated and clinically significant mental distress at some point during the study. These included mental health factors, sociodemographic factors, and worries related to COVID-19. Conclusions: Limitations: The sample was not representative of the UK population and data was self-reported. Online data collection may have excluded participants with limited digital engagement. Conclusions: This is the first study to report trajectories describing a differential impact of COVID-19 on the mental health of UK adults. Some adults experienced mental distress throughout, some were more vulnerable in the early weeks, and for others, vulnerability was delayed. These findings emphasise the need for appropriate mental health support interventions to promote improved outcomes in the COBID-19 recovery phase and future pandemics.

SYMPOSIUM

S6.2

Addressing the COVID-19 pandemic related mental health needs in LMICs: A case of Georgia Chair: Nino Makhashvili

Ilia State University, Georgia

Track: Trauma and stress

The struggle of one of the low and middle resource countries as Georgia to address the mental health sequel of the COVID-19 pandemic is presented. The aim of the symposium is to highlight how the Georgian trauma community is dealing with these challenges at population, policy, and service levels. The three studies to be presented at this symposium: i. Prevalences of clinical and subclinical conditions of stress-related disorders as PTSD and Adjustment Disorder (AjD). ii. Prevalences of such conditions in one of the vulnerable groups – internally displaced persons (IDPs), namely among their youth; iii. Study on effectiveness of mental health and psychosocial services delivered during pre and peri-pandemic times and challenges of service modification to the remote mode. The presenters will discuss the policy implications, based on gathered evidence, lessons learnt, and strategies to address challenges in the limited resource country.

COVID-19 mental health influence: Subclinical PTSD and adjustment disorder

Jana D. Javakhishvili^a, Tamar Bolkvadze^a, Keti Pilauri^a, Bayard Roberts^b, Nino Makhashvili^a

^aIlia State University, Georgia; ^bLondon School of Hygiene and Tropical Medicine, United Kingdom

Background: Since the beginning of the COVID-19 pandemic, studies have revealed an elevated prevalence of stress-related and other mental health problems among populations. Less attention is paid to the subclinical conditions, whereas recent studies show the association between subclinical PTSD symptoms and poorer physical and mental health outcomes. Adjustment disorder (AjD) is even less studied in this regard. Objective: The aim of the study was to examine: (1) prevalence of subclinical PTSD and AjD conditions among the surveyed sample in Georgia, and (2) factors associated with subclinical manifestations of PTSD and AjD. Method: The method used was the secondary data analysis of the data of the cross-sectional internet-based survey of non-probabilistic sampling design implemented among 2,088 respondents in Georgia aged 18 and above from May 25 to June 25, 2020 (Makhashvili

^aQueen's University Belfast, United Kingdom; ^bGlasgow Caledonian University, United Kingdom

et al., 2020). The criteria for the subclinical condition of PTSD - measured by ITQ - were defined as having (a) one symptom of minimum 2 clusters and (b) at least one functional impairment item. The criterion for the subclinical condition of AjD – measured by ADNM8 – was defined as having a score from 16 to 18.5. Results: 11.8% of the study sample was meeting the criteria of the subclinical condition of PTSD (in comparison to 11.9% of clinical diagnosis of PTSD) and 17.2% - had sub-clinical symptoms of AjD (in comparison to 39.4%). Gender differences are revealed between the groups of the patients with the clinical manifestations and subclinical PTSD and AD. Conclusions: Factors associated with the conditions and recommendations for preventive-intervention will be presented.

War affected youth and COVID-19 stress consequences on mental health in Georgia

Nino Makhashvili, Natela Tsiramua

Ilia State University, Georgia

Background: Prevalence of mental disorders, including stress-related disorders is particularly high among war-affected populations. War trauma caused longterm mental health effects among internally displaced persons (IDPs) in Georgia as well (Makhashvili et al., 2014). International and local evidence indicates increased mental health burden arising from COVID-19 stressors. The psychosocial effects of the pandemic disproportionately affect young people (Power et al., 2020; UNICEF, 2020). Objective: The aim of the study was to explore the impact of COVID-19 related stressors on the mental health of young internally displaced persons (IDPs) in Georgia. Method: The mixed research method was used with online quantitative survey and face-to-face qualitative interviews. 2 main groups of IDPs aged 18-25 were studied - those who were displaced due to the 90's conflict and IDPs from the 2008 war. Results: The study shows that the young IDPs are meeting diagnostic criteria of anxiety (50%), depression (34%), and PTSD (38%) and comorbidity is high. The 2008 IDPs youths - who witnessed war - have higher rates of depression and PTSD. Qualitative data indicate tendencies of alienation and feeling of danger in interpersonal relations; IDPs note some disturbing similarities between war and pandemic experiences that are triggering their mental health problems.

Conclusions: COVID-19 related stressors negatively affect the mental health of IDPs youth. This impact is almost twice higher than in the general population's same age groups. The policy and service recommendations to protect and promote young IDPs mental well-being will be discussed during the presentation.

Transforming mental health and psychosocial services in response to COVID-19: Georgian case study

Ketevan Pilauri^a, Jana D. Javakhishvili^a, Nino Makhashvili^a, Ivdity Chiqovani^b, Maia Uchaneishvili^b, Lela Sulaberidze^b, Natia Shengelia^b, Jonathan Bisson^c

^aIlia State University, Georgia; ^bCuratio International Foundation, Georgia; ^cCardiff University, United Kingdom

Background: The ongoing pandemic has increased the demand for mental health services all over the world. In LMIC countries, in the face of scarcity of services, the increased burden has brought about the need to modify and diversify mental health services. We describe the experience of transforming a transdiagnostic psychosocial service for traumatized adolescents and young people aged 14 to 25, in response to COVID-19-related needs. Objective: Comparing the effectiveness of faceto-face and online mental health and psychosocial support (MHPSS) services. Method: To assess the dynamics of mental health problems, at the intake phase, at the end of the service, and three months after the end of the service, all service users are routinely administered the screening tools for depression (PHQ-9), anxiety (GAD-7) and health status (EQ-5D-5L); PTSD rates are measured by ITQ and adverse childhood experiences are assessed by WHO ACEs questionnaire. Data from May 2019 to March 2020 have been collected through paper-based questionnaires, data collection since the announcement of lockdown is altered to online. The statistical data from the service database has been analysed to examine the effectiveness of the remote service delivery vs the TAU. Results: According to the preliminary analysis of clinical outcomes, the effectiveness of remote service is almost identical to the previous - face to face - mode of counselling; The vast majority of service users show improvement according to key outcomes. Conclusions: The presentation will discuss the service transformation process, development of shorter modules of psychosocial counselling, challenges and benefits of remote mental health services, and the corresponding lessons learnt.

SYMPOSIUM

S7.1

Challenges and innovations in the treatment of Complex PTSD to multiple trauma during the global pandemic

Mary Robertson

Camden & Islington NHS Foundation Trust, United Kingdom

Track: Best practice and lessons learned from clinical care

The COVID-19 pandemic has necessitated rapid and profound transformations in the delivery of clinical care. Delivering evidence-based trauma-focused interventions to patients with Complex PTSD during the pandemic poses several challenges. Although online treatments for PTSD have been developed, working with survivors of complex trauma, including survivors of torture, human trafficking, and childhood abuse, poses additional challenges that must be considered in the delivery of remote treatments. This symposium presents how our specialist service for the treatment of complex PTSD has had to adapt our model to meet the needs of clients in light of the pandemic. The first paper gives an overview of how the pandemic differentially impacts clients with Complex PTSD and outlines special considerations in delivering evidence-based therapy protocols for this vulnerable group in the current circumstances. The latter two papers showcase innovative solutions developed in our service to improve access to traumafocused interventions at this time. Clients with Complex PTSD present with longstanding difficulties with trust and very strongly value face-to-face contact and the ability to see their therapist's face. We describe the development of a pilot study of delivering trauma-focused treatment outdoors and share best practices in adapting PTSD treatments for delivery in an outdoor setting. The final paper presents special considerations in adapting individual and group-based trauma-focused treatments for Complex PTSD for remote delivery. We share

best practices and suggest evidence-informed modifications so that clients with Complex PTSD can continue to benefit from trauma-focused interventions during the COVID-19 pandemic.

Adapting trauma interventions for delivery during the global pandemic: Special considerations in the treatment of Complex PTSD

Julia Gillard

Camden & Islington NHS Foundation Trust, United Kingdom

Background: The COVID-19 pandemic and associated social restrictions may have serious implications for individuals with pre-existing complex posttraumatic stress disorder (PTSD). Although some trauma-focused therapies have been adapted for remote delivery, there are no guidelines for mental health providers considering whether to initiate trauma-focused therapy for Complex PTSD during the pandemic and whether and how to adapt treatment. Objective: Our aim is to explore key interactions between the COVID-19 pandemic and Complex PTSD and outline special considerations in delivering evidence-based therapy protocols for this vulnerable group under the current circumstances. Method: This paper presents a theoretical overview of how the COVID-19 pandemic differentially impacts clients with Complex PTSD. We illustrate these using examples drawn from clinical practice in a specialist Complex PTSD trauma clinic in London, UK. Results: Key considerations for implementing traumafocused treatment with clients with Complex PTSD the Covid pandemic are presented. during Recommendations are made with regards to overall strategies for adapting treatment for complex trauma, including how to ensure safety, continuity, and confidentiality. Conclusions: The COVID-19 pandemic continues to pose enormous challenges for patients with Complex PTSD and mental health care providers charged with their treatment. We hope the key considerations presented here will help guide providers in systematically assessing the appropriateness and safety of attempting trauma-focused therapy for Complex PTSD and support their effective adaption.

Delivering trauma-focused psychological therapy for PTSD outdoors

Eileen Walsh

Camden & Islington NHS Foundation Trust, United Kingdom

Background: Over the last few decades, a number of highly effective psychological treatments for posttraumatic stress disorder (PTSD) have been developed. However, many patients are currently unable to access these due to the COVID-19 pandemic and its associated social restrictions. There is preliminary evidence for talking therapy in natural outdoor spaces. However, no studies of adapting trauma-focused therapy for delivery outdoors currently exist. Objective: To describe the development of a pilot study of delivering trauma-focused treatment outdoors, and share best practices in adapting PTSD treatments for delivery in an outdoor setting. Method: This clinical practice article reviews considerations in deciding whether and how to deliver commonly used evidence-based treatments for PTSD outdoors. It describes core interventions and how to adapt them for outdoor working. We consider some challenges of trauma-focused work outdoors and offer suggestions of how to address them. We ground these in examples from a pilot study of outdoor trauma-focused psychological treatments for Complex PTSD in London, United Kingdom. Results: The paper describes how to engage patients safely in outdoor trauma-focused therapy, and suggests adaptations to core interventions including memory-focused techniques, then vs now discrimination, managing risk, and working with dissociation. Results of our pilot study suggest trauma-focused treatments can be safely delivered outdoors and are acceptable to clients. Conclusions: Trauma-focused therapies are highly effective in the treatment of PTSD and in our experience can be delivered safely in an outdoor setting, using the same treatment components as face-to-face delivery and in their usual order, with some adjustments.

Adapting remote trauma-focused therapy for complex PTSD during the COVID-19 pandemic

Livia Ottisova

Camden & Islington NHS Foundation Trust, United Kingdom

Background: Delivering trauma-focused psychological therapies for PTSD during the COVID-19 pandemic poses several challenges. Whereas online traumafocused therapies for PTSD that overcome some of these barriers have been developed, working with survivors of complex trauma poses additional challenges that must be considered in the delivery of remote treatments. It is not clear to what extent existing remote PTSD treatments are effective with more complex PTSD presentations and how they may need to be adapted for this client group. Objective: To identify key considerations in the remote delivery of trauma-focused interventions and illustrate these drawing on clinical examples. Method: Articles on the remote delivery of trauma-focused interventions for clients with complex PTSD were reviewed. Findings were synthesised and illustrated with clinical case examples of individual and group-based traumafocused treatments for Complex PTSD. Results: Clients with complex and multiple trauma histories including torture, human trafficking, and childhood sexual abuse can present with additional symptoms that complicate the remote delivery of traumafocused work, including difficulties trusting others and therefore developing a therapeutic alliance online, chronic emotional regulation difficulties, and high levels of dissociation. We present a range of considerations that can be used by practitioners when deciding whether initiating remote traumafocused work with clients with complex PTSD is indicated. Evidence-informed modifications to existing remote treatments are presented and illustrated using clinical case examples. Conclusions: Remotely delivered trauma-focused therapies are effective in the treatment of PTSD. There is emerging evidence they can be safely adapted for use with more complex PTSD presentations in specific circumstances.

SYMPOSIUM

S7.2

Differential impacts of the COVID-19 and racism syndemic on trauma- and stressor-related symptoms in a representative United States sample

Chairs: Viann Nguyen-Feng^a, Annett Lotzin^b

^aUniversity of Minnesota, Duluth, United States; ^bUniversity Medical Center Hamburg-Eppendorf, Germany

Track: Trauma and stress

The COVID-19 pandemic has had devastating effects on the lives of adults across the world. Emerging research exists on COVID-related depression and anxiety symptoms in the general population. Yet, the literature on trauma and stressor-related disorders in the general population is minimal, with most of the research focusing on college-aged adults. Further, the COVID-19 pandemic has revealed long-existing health disparities, particularly racial disparities, that remain under-recognized. Our symposium explores COVIDrelated stressors, posttraumatic stress symptoms (PTSS), and adjustment disorder symptoms in nationally representative US sample а and

disadvantaged groups within the sample. We examine the differential impacts of the COVID-19 and racism pandemic on trauma- and stressor-related symptoms among persons of color and families with children under 18 in the home. Our first presentation reports on the prevalence of COVID-related stressors, posttraumatic stress disorder symptoms, and adjustment disorder symptoms in a representative United States sample. Our second presentation discusses the racial disparity of PTSS in the context of COVID-19 as well as the mechanisms through which PTSS racial disparity exists. We then close with a presentation on relationships between pandemic-related stressors at the intersection of parental status, race/ethnicity, and age. We propose the need for clinical considerations among diverse groups while acknowledging PTSS due to nontraditional definitions of traumatic events.

Racism, posttraumatic stress symptoms, and racial disparity in the US COVID-19 syndemic

Xiang Zhou^a, Viann Nguyen-Feng^b, Rachel Wamser-Nanney^c, Annett Lotzin^d

^aPurdue University, United States; ^bUniversity of Minnesota, Duluth, United States; ^cUniversity of Missouri, St. Louis, United States; ^dUniversity Medical Center Hamburg-Eppendorf, University of Hamburg, Germany

Background: The COVID-19 syndemic, with a disproportionately higher impact on communities of color, will likely exacerbate the already existing health disparities in trauma symptomatology between People of Color (POC) and White Americans. Objective: Grounded in ecological theory and racial trauma framework, we investigated the racial disparity in PTSS with a large US national sample. Method: Data were drawn from the first wave of a longitudinal panel study. Participants (N = 2,019) closely mirror US demographics in terms of residency, race (59.7% White), gender (51.1% men), income, and educational attainment. The Primary Care-Posttraumatic Stress Disorder-5 was adapted to measure PTSS. Pandemic stress was measured using three top stressors from a COVID-19 stress scale developed by the international study team. Vicarious racism stress was assessed with the Vicarious Discrimination Scale. Using structural equation modeling, we tested whether PTSS between White Americans and POC could be explained by COVID-related and/or vicarious racism stress, controlling for sociodemographics and interpersonal trauma history. Results: We found POC reported higher levels of PTSS compared to Whites. By examining stressors of COVID-19, direct racism, and indirect vicarious racism as potential mediators, we found that PTSS racial disparity was accounted more by racism stressors than by COVID-Additional fine-grained analyses 19 stressors. for Hispanic/Latinx Americans (n = 283), Black/

African Americans (n = 279), and Asian American and Pacific Islanders (n = 123) were provided. *Conclusions*: Our findings highlighted the deleterious impact of the ongoing racism pandemic as a public health crisis in addition to the COVID-19 pandemic.

Pandemic-related stressors, inequities, and treatment utilization and perceptions among parents

Rachel Wamser-Nanney^a, Viann Nguyen-Feng^b, Annett Lotzin^c, Xiang Zhou^d

^aUniversity of Missouri, St. Louis, United States; ^bUniversity of Minnesota, Duluth, United States; ^cUniversity Medical Center Hamburg-Eppendorf, University of Hamburg, Germany; ^dPurdue University, United States

Background: Many parents of children under 18 face additional COVID-19 parenting-related stressors and increased distress; however, we have yet to investigate parents' levels of posttraumatic stress symptoms (PTSS) and adjustment disorder symptoms. Further, COVID-19 has served as a reminder of public health disparities, and it is critical to identify risk factors for poorer clinical outcomes in families. Objective: The present study aims to: 1) determine whether parents are reporting higher levels of pandemic-related stress, PTSS, and adjustment disorder symptoms than controls; 2) identify individuallevel factors that may relate to higher levels of stress and symptoms among parents. Method: We used a nationally representative sample (N = 2,019) from Qualtrics panels. The subsample of parents (N = 514) were, on average, 38.64 (SD = 10.45), and 59.7% identified as women. The Primary Care-Posttraumatic Stress Disorder-5 and the Brief Adjustment Disorder-New Module were used. Results: Younger parents and parents who were persons of color reported higher levels of pandemic-related stress, PTSS, and adjustment disorder. Parents endorsed higher levels of stress, PTSS, and adjustment disorder symptoms, particularly younger parents. Further, 38.3% of parents reported PTSS above the clinical cut-off. Conclusions: Individual-level risk factors (e.g., age, minority status) are important to consider when understanding COVID-19 stress and psychological difficulties among parents. Parents may be a particularly high-risk group for pandemic stress, PTSS, and adjustment disorder symptoms. Clinical intervention efforts should prioritize trauma-focused treatments for parents, especially those who are younger and identify as a person of color.

Prevalence of COVID-related stressors, posttraumatic stress symptoms, and adjustment disorder symptoms in a representative United States sample

Viann Nguyen-Feng^a, Xiang Zhou^b, Rachel Wamser-Nanney^c, Annett Lotzin^d, Alexa Asplund^a, Jacob Moore^a, Megan Sundstrom^a, Isabela Machado de Silva^e

^aUniversity of Minnesota, Duluth, United States; ^bPurdue University, United States; ^cUniversity of Missouri, St. Louis, United States; ^dUniversity Medical Center Hamburg-Eppendorf, University of Hamburg, Germany; ^eUniversidade de Brasília, Brazil

Background: With ample evidence of heightened levels of posttraumatic stress symptoms (PTSS) across samples of healthcare workers, infected individuals, and the general public following a multitude of pandemics, COVID-related PTSS and adjustment disorder symptoms warrant immediate consideration. Objective: This study aimed to quantify COVID-related stressors and describe the prevalence of clinically significant PTSS and adjustment disorder symptoms in the United States. Method: Data from a nationally representative sample (N = 2,019) were collected through Qualtrics panels in July 2020. Participants were 47.43 (SD = 17.63) years old on average and located throughout all 50 states, the District of Columbia, and Puerto Rico. Considering modal participant characteristics, 50.77% of the sample identified as men; 60.77% White/ European descent; 36.65% completed an associates degree, technical school, or some college; and 30.61% reported household income between \$26,000-59,000. Participants completed a 58-item stressors rating form, the Primary Care-Posttraumatic Stress Disorder-5, and the Brief Adjustment Disorder-New Module. These data are the first wave of a longitudinal study. Results: The highest-rated pandemic stressors were: fear of oneself or loved ones contracting the virus, inadequate government response, and feelings of uncertainty. In sum, 28.12% reported symptoms suggesting PTSS, and 14.88% of participants met criteria regarding adjustment disorder symptoms. Conclusions: The study emphasizes the prevalence of COVID-specific stressors and demonstrates elevated rates of clinically significant PTSS and adjustment disorder symptoms in the United States. PTSS outside of DSM-5 Criterion A definitions of traumatic events also warrant clinical consideration.

SYMPOSIUM

S7.3

The body as a resource: Body-oriented approaches and their significance in times of crisis

Chair: Sabine Nunius

TSY ingradual, Germany

Track: Interventions

Since the beginning of the pandemic, the world has been in a state of exception. This has profound consequences on both the physical and mental dimensions of our health. Confronted with fear, death, loss, extreme stress (e.g. in the health sector), and limited personal contacts, people of all ages feel cut off from elemental, sensual experiences. The general feeling of insecurity and threat is exacerbated by a perceived lack of agency and helplessness. This can result in both primary and vicarious traumatisation - and possibly even collective traumatisation on a global scale. This situation calls for quick, easy-to-implement, and effective interventions. A focus on body-oriented methods such as therapeutic dance and traumasensitive yoga proves highly promising. Dance has been known to have a profound effect on the body and psyche in all cultures. In dance meditation, we strengthen the bidirectional effects between body and psyche, psyche and the HAP axis, as well as psyche and the immune system. By (re)gaining freedom of movement, the body becomes a resource for emotion and tension regulation, dissociation stop, mindfulness, and resilience. Trauma-sensitive yoga (TSY) offers a perception-oriented, individually adapted approach aimed at experiencing stability and safety. TSY improves the ability to sense and enables practitioners to recognise the different states of the autonomic nervous system. In this way, excessive reactions can be regulated and sustainably changed. Trauma-sensitive yoga takes place in both individual and group settings and is extremely well suited for integration in institutional contexts (eg. prisons, refugee shelters, psychiatric wards, etc.).

The body supplies resources: The neurophysiological basis for dance meditation

Margarethe Philipp

Herz Jesu Hospital, Germany

Background: The coronavirus pandemic has raised stress levels in almost all individuals, with feelings of helplessness, signs akin to the traumatic freeze (no fight, no flight), and higher arousal. Objective: Many people who have been subject to (complex) trauma live at an inner distance from their own bodies. Dance reaches deep and wide into human existence, across all the world's cultures. Dance meditation is a nonverbal approach that lays the groundwork for therapy (where speech cannot reach, dance begins to speak). It elicits alternatives to the traumatic freeze and this impacts both movement and posture. Method: Searching the literature and using dance meditation as an example, we analysed the neurophysiological basis for the effectiveness of body-based processes in psychotrauma therapy. Results: We found an increase in bidirectional effects between body and mind, and between mind and the hypothalamic-pituitaryadrenal axis. Dance meditation promotes topdown regulation. It improves self-regulation in cases of stress, tension, and dissociation. It also has a positive influence on body image. Winning over or winning back the body's freedom of movement allows it to supply resources for selfregulation and mindfulness and strengthen our resilience. The body becomes habitable once more.

Conclusions: In conclusion, we found that the use of body-focused processes which can be learned easily and practised independently provide a good opportunity to self-regulate and experience selfefficacy. Body-oriented processes such as dance meditation are a meaningful, necessary enhancement of psychotrauma therapy; they strengthen our resilience during the pandemic.

Trauma, body sensations and the autonomous nervous system – stabilisation and regulation via traumasensitive yoga

Angela Dunemann, Sabine Nunius

TSY ingradual, Germany

Background: The onset of the COVID-19 pandemic has had a profound effect on many people's lives. It has also been reported to cause large-scale traumatisations of different types. These range from primary traumatisation, e.g. due to living in a constant climate of fear or due to suffering from a (long) COVID-19 infection to vicarious traumatisation by exposure to certain reports and (visual) material. Objective: The resulting traumatic stress heavily affects the interaction between body sensations and the autonomous nervous system (ANS). Drawing upon the polyvagal theory and related neurological research, a preliminary interview study has been designed to further investigate this interplay. Method: With the help of a questionnaire, participants were asked to report body sensations they personally experienced in three ideal-typical, colour-coded states of the ANS (red = dorsal vagus/hypo-arousal, amber = sympathetic/hyper-arousal, green = ventral vagus/balanced state). In a second step, responders were asked to list exercises and activities from traumasensitive yoga which they perceived as helpful in either regulating a state (red, amber) or maintaining it (green). Results: The lecture will present the first findings from the series of interviews. Conclusions: We aim to demonstrate which body sensations tend to predominate in which states of the ANS and how they can be directly influenced by specific forms of (physical) activity and breathing techniques. Special attention will be paid to how body-oriented approaches such as traumasensitive yoga focussing on perception and sensation can be employed for effective stabilisation and (co-)regulation with additional side benefits on, for instance, the immune system.

Practice part: Trauma-sensitive Yoga

Joachim Pfahl^a, Diana Ivanovna^b

^aTSY ingradual, Germany; ^bDivanova, Germany

Background: The current situation has a direct, adverse effect on many people's lives. In order to prevent traumatisation as well as to provide quick and effective help in cases of hypo- and hyperarousal, interventions are needed that can be practiced everywhere and by everybody. Objective: This presentation will provide two examples of effective, easy-to-implement interventions. Part one: Grounding exercise: Trauma-sensitive Yoga on a Chair Part two: Trauma-sensitive breathing exercises: Providing self-regulating support in states of hyper- and hypo-arousal. Method: The presentation offers a brief demonstration of trauma-sensitive yoga in practice. It will give you the opportunity to directly experience the benefits of trauma-sensitive yoga and familiarise yourself with its characteristic features. Results: Body-oriented approaches such as traumasensitive yoga have a number of benefits. They prove especially helpful in promoting stabilisation and selfregulation. Conclusions: Advantages and Benefits of Trauma-sensitive Yoga:

• Can be done everywhere.

• Particularly well-suited for people working in the home office at the moment and feeling the strain of both sitting all the time and having to deal with the additional stress of the Corona situation.

• Gives you the opportunity to observe how your own breath, body, and muscles work.

• Brings you back into contact with your body through feeling and awareness.

ORAL PRESENTATIONS

OP7.1

Exposure to media pandemic coverage, psychological burden, and perception of health services efficiency

Diana Andringa^a, Margarida Figueiredo-Braga^{b,a}, Aida Dias^a, Camila Borges ^a, Joana Becker^a, João Veloso^a, Annett Lotzin^c, Luísa Sales^a

^aUniversity of Coimbra, Centre of Social Studies, Portugal; ^bFaculty of Medicine, University of Porto, Portugal; ^cUniversity Medical Center Hamburg-Eppendorf, Germany

Track: Trauma and stress

Background: The need for information during the COVID-19 pandemic augmented individual exposure to the media when seeking knowledge about health risks and protection. The link between media exposure and anxiety, depression, and post-traumatic stress disorder symptoms has been described during recent epidemics and catastrophes. *Objective*: To study the association between time allocated to media consumption during the pandemic and symptoms of depression,
adjustment problems, and posttraumatic symptoms. Secondary aims were to explore the relationship between media exposure and appraisal of health services, coping, and resilience mechanisms. Method: Depression, (PQH-9), adjustment problems (ADNM-8), and posttraumatic symptoms (PC-PTSD) were evaluated in the Portuguese population through a pan-European study launched by the ESTSS in eleven European countries. The online survey retrieved information on the amount of time allocated by individuals to the pandemic media broadcast. Open-ended questions identified media news as negative and occasionally traumatic experiences. Resilience (RES) and coping (Brief COPE) were evaluated through standardized questionnaires. Pandemic media coverage was calculated through the number and content of pandemicrelated news in national television channels and newspapers. The mixed-method analysis permits an examination of the patterns of use and impact of media news, and how they are related to symptoms of stress-related disorders and wellbeing indicators. Results: Previous reports showed an association between time of media contact, psychological distress, and well-being during COVID-19. Conclusions: Public recommendations will be useful to prevent media coverage to represent a stress factor associated with the different challenges during this pandemic.

OP7.2

Posttraumatic stress and posttraumatic growth in a non-clinical sample of the UK during the COVID-19 pandemic

Charlotte Wall, Michelle Lowe, Jerome Carson, Gill Brown

University of Bolton, United Kingdom

Track: Trauma and stress

Background: In December 2019, in Wuhan China, COVID-19 was first identified (Dutheil et al, 2020). This infectious disease was soon classified as a global pandemic which had the potential to cause psychological distress for all (Taylor, 2019). As this pandemic affected not just a select few but the global population, understanding and addressing the psychological aspects was important (Kazak, 2020). Objective: The aim of this research was to assess both PTSD and PTG, whilst including the roles of intrusive and deliberate rumination and coping strategies in a nonclinical sample. Method: Participants were members of the public, recruited from social media between May and June 2020 to complete a survey. The overall sample size was 509, 91.7% were female and 48% were between the ages 45-64. Participants completed the Impact of Event Scale-Revised (IES-R), PostTraumatic Growth Inventory (PTGI), The Event-Related Rumination Inventory (ERRI), and the Brief COPE Scale. Results: High rates of approach coping, deliberate rumination, and growth were present, with 86.4% of the sample indicating probable PTSD. Both Probable PTSD and growth had associations with each other plus intrusive and deliberate rumination, avoidant and approach coping. On further analysis, intrusive and deliberate rumination alongside approach and avoidant coping significantly predicted PTSD, all except avoidant coping predicted growth. Conclusions: During COVID-19 in a non-clinical sample, probable PTSD and PTG were found. Reporting of both PTSD and growth implied they alluded to intrusive rumination, deliberate rumination, approach, and avoidant coping. This in turn suggested that rumination and coping had both maladaptive and adaptive functions.

OP7.3

Sense of coherence buffers the effect of COVID-19 on mental health: Findings from a longitudinal study in the German general population

Sarah K. Schäfer^{a,b}, M. Roxanne Sopp^b, Dominic Bläsing^a, Anja S. Göritz^c, Tanja Michael^b

^aGreifswald University Medicine, Germany; ^bSaarland University, Germany; ^cUniversity of Freiburg, Germany

Track: Trauma and stress

The COVID-19 Background: pandemic is a multidimensional long-term stressor. Consequently, research demonstrates a negative impact of COVID-19 on public mental health. Identifying factors that modulate this impact constitutes an important research agenda. To this end, we investigated the impact of sense of coherence (SOC) - as the key component of the salutogenesis framework - on mental health during the pandemic. First analyses of the current sample indicated that SOC buffers the short-term effect of the pandemic on public mental health. Objective: The current study aims at extending previous findings by examining the long-term buffering effect of SOC on public mental health. Method: The study assessed psychopathology and SOC before the outbreak of COVID-19 in Germany (February 2020) and at five critical time points during the pandemic in the German general population (n = 2,162). Bivariate latent change score modeling was used to analyze changes in psychopathology and SOC along with their interaction. Results: A model allowing for bidirectional coupling between SOC and psychopathology fitted well (RMSEA = .025). Psychopathology showed a small yet significant increase over time (z = 2.14, p = .032). Previous SOC predicted changes of psychopathology (z = -21.00, p < .001) and

vice versa, whereby higher levels of SOC and psychopathology were associated with more stable SOC and psychopathology. *Conclusions*: Our findings demonstrate that a stronger SOC predicts changes in mental health during the pandemic and buffers the pandemic's mental health consequences. Therefore, SOC promoting training may be a promising approach to strengthen individual resilience.

Flash talk presentations

Thursday, June 17th, 2021 Day #1 Parallel sessions #1

FLASH TALKS

F1.1

The effect of belief in a just world on psychological distress during the COVID-19 pandemic

Gabriel Nudelman

The Academic College of Tel Aviv-Yaffo, Israel

Track: Trauma and stress

Background: Although the COVID-19 pandemic has affected mental health worldwide, not all people were affected to the same degree. A trait that demonstrated consistent positive associations with subjective wellbeing and negative associations with depression is the Personal Belief in a Just World (PBJW). It maintains that people get what they deserve, thus providing a buffer against stress and anger as well as psychological protection from unjustified consequences. Objective: we expected higher PBJW to be related to lower levels of psychological distress during the COVID-19 pandemic. Moreover, this relationship was expected to persist over and above demographic variables and COVID-19 perceptions. Method: A representative sample of the Israeli population completed online self-report questionnaires at baseline (n = 917) and again at six-week follow-up (n = 917)711). The measures included demographic variables (age and gender), COVID-19 perceptions (probability, severity, and self-efficacy), PBJW, and depression, anxiety, and stress. Results: Stronger PBJW was significantly associated with lower levels of depression, anxiety, and stress at baseline (-.35, -.24, and -.25, respectively) and follow-up (-.29, -.16, and -.21, respectively). Moreover, PBJW significantly explained unique variance in depression, anxiety, and stress over and above demographic variables and COVID-19 perceptions, both at baseline (11%, 4%, and 5%,

respectively) and follow-up (8%, 2%, and 4%, respectively). *Conclusions*: The findings support the role of PBJW in explaining psychological distress beyond demographic and situational characteristics, and thus stress the role of just-world beliefs as protective factors against negative emotions during global pandemics.

10:45-11:45

F1.2

The effectiveness of instructed emotion regulation flexibility in reducing negative affect following exposure to COVID-salient images

Philippa Specker, Angela Nickerson

University of New South Wales, Australia

Track: Trauma and stress

Background: Emotion Regulation (ER) Flexibility is thought to be critical to adaptive psychological functioning. Despite this, very little research has tested the effectiveness of ER Flexibility in managing dynamic stressors, such as the abundance of COVID-related images in contemporary media. Objective: This was the first study to develop and validate a novel experimental paradigm to investigate the effectiveness of instructed ER Flexibility. Method: 109 adults with differing levels of anxiety were recruited via MTurk. Similar to the ER Choice paradigm (Sheppes et al., 2011), participants were taught how to use reappraisal and distraction techniques to reduce negative affect in response to negative images. Participants were then randomized to either an inflexible or flexible ER condition. Next, participants viewed 30 COVID-related images that differed in negative emotional intensity, and participants were instructed to use either reappraisal or distraction while viewing each image. Participants in the inflexible conditions utilised a single strategy

throughout the task, while participants in the flexible conditions switched between the two strategies to match changes in image intensity. Negative affect was rated after each image. Results: ANCOVA with planned contrasts revealed that, among highly anxious participants, those in the ER flexible conditions reported significantly lower negative affect than those in the inflexible conditions (p = .024). Conclusions: Our findings suggest that highly anxious individuals benefitted from adopting a flexible ER approach when exposed to stressors. Our findings are the first to demonstrate a causal link between instructed ER Flexibility and improved psychological functioning among anxious individuals, which has important clinical implications.

F1.3

Relationship of sleep quality, stress, depression, and anxiety in ongoing times of COVID-19 in adults

Maren-Jo Kater, Anika Werner, Arnold Lohaus, Angelika A. Schlarb

University Bielefeld, Germany

Track: Trauma and stress

Background: The Coronavirus Disease (COVID-19) pandemic has become a global health emergency resulting in high psychological burdens. Along with mental health, sleep often is impaired by stress, although good sleep quality is crucial for the individual well-being. Objective: In this study, we explore the relationship between COVID-19related stress, sleep quality, and symptoms of stress, depression, and anxiety in two different time periods. Method: Therefore, two similar online surveys were conducted, the first, from April to June 2020 in a period with assumed high stress and uncertainty and, a second, in an assumed low-stress period from mid-July to mid-October 2020 in Germany. The following questionnaires were answered by 993 participants (M = 33.7 years, SD = 12.7) in the first and by 641 participants (M = 36.65 years, SD = 12.2) in the second study: COVID-19 Pandemic Stress Scale (CPSS), Pittsburgh Sleep Quality Index (PSQI), and Depression Anxiety Stress Scale (DASS-21). Results: In both surveys, higher COVID-19-related stress was associated with worse sleep quality and higher levels of overall stress but not with depressive symptoms. Interestingly, higher anxiety was only associated with higher levels of COVID-19related stress in the first study. Descriptively, COVID-19-related higher stress levels were reported in the first study, while participants in

the second study reported more impaired health, e.g., worse sleep quality, more stress, and depressive and anxiety symptoms. *Conclusions*: Our findings indicate that due to the enduring burdens of the pandemic, numbers of sleep problems and mental health problems may further increase, emphasizing the urgent need for large-scaled public interventions.

F1.4

Associations between adjustment difficulties and suicidal ideation in the course of the COVID-19 pandemic

Augustė Nomeikaitė^a, Odeta Geležėlytė^a, Annett Lotzin^b, Evaldas Kazlauskas^a

^aVilnius University, Lithuania; ^bUniversity Medical Center Hamburg-Eppendorf, Germany

Track: Trauma and stress

Background: The COVID-19 pandemic is associated with many stressors such as quarantine, various life changes, social distance, and isolation, which can lead to adjustment difficulties, that may affect suicide rates. At the beginning of 2020, ESTSS initiated a large-scale study conducted in 11 European countries, including Lithuania, on COVID-19-related stress experiences and mental health indicators. Objective: To investigate the relations between adjustment difficulties and suicidal ideation in Lithuania in the course of the COVID-19 pandemic. *Method*: The Suicidal Ideation Attributes Scale (SIDAS) and The Brief Adjustment Disorder New Module-8 scale (ADNM-8) were used in this study. The analysis included 200 participants from Lithuania, aged 19 to 75 years (M = 37,42, SD = 13,49), of which 83% were women. Participants filled in an online survey at two time points with a six-month interval: June-August, 2020 (T1) and from December 2020 to February 2021 (T2). Results: Compared to T1, the level of adjustment symptoms increased significantly at T2. Meanwhile, the level of suicidal ideation did not differ significantly over time, but at T2, the number of subjects with suicidal ideation increased significantly. A cross-lagged panel model was used to explore the associations between adjustment difficulties and suicidal ideation over time. Adjustment difficulties and suicidal ideation correlated moderately at T1 and T2. Results indicate that suicidal ideation at T1 predicted change in adjustment difficulties at T2. Whereas adjustment difficulties at T1 did not significantly predict change in suicidal ideation at T2. Conclusions: Findings of longitudinal associations between suicidal ideation and adjustment difficulties during the COVID-19 pandemic are discussed.

F1.5

Conducting an RCT during a pandemic: Clinician and researcher experiences and results of a crosssectional study on COVID-19 related distress

Arne van den End, Aishah Snoek, Inga Aarts, Matthijs Blankers, Aartjan Beekman, Jack Dekker, Kathleen Thomaes

University of Amsterdam, The Netherlands

Track: Trauma and stress

Background: The PRediction and Outcome Study on PTSD and PERsonality disorders (PROSPER) is a research project consisting of two parallel RCTs comparing trauma-focused treatment with integrated trauma and personality disorder treatment in patients with PTSD and comorbid borderline or cluster C personality disorder (PD). When the COVID-19 emergency hit The Netherlands in March 2020, we decided to continue both RCTs, partly through online treatments. *Objective*: The objective of this presentation is to share our experiences and to present results on dropout, treatment duration, and COVID-19related psychological distress within our sample. Method: A total of n = 50 patients filled out questionnaires measuring PTSD severity and COVID-19related distress. PD symptoms were measured using a structured clinical interview. Hierarchical regression analysis was used to test the associations between PTSD severity, PD symptoms, and COVID-19-related distress. Length of treatment and percentage dropout during the pandemic versus prepandemic will be compared. Results: Hierarchical regression analysis revealed a significant positive association between COVID-19-related distress and PTSD severity, independent of PD symptoms. Results for treatment duration and dropout will be presented for both RCTs. Conclusions: Continuing an RCT during the COVID-19 pandemic faced us with unique challenges. Moreover, COVID-19-related distress was significantly associated with PTSD severity. Current findings indicate that patients with pre-existing PTSD and PD pathology should be considered as a vulnerable population in the COVID-19 pandemic and require timely and appropriate mental health care.

15:15–16:15

FLASH TALKS

F3.1

Group-based compassion-focused therapy (CFT) for Prolonged Grief Disorder (PGD): A randomized controlled trial

Maja O'Connor

Aarhus University, Denmark

Track: Grief and loss

Background: Clinically relevant symptoms of PGD are present in 1:10 bereaved adults. With the ongoing pandemic, more losses and more severe grief reactions due to extreme circumstances are expected. CFT addresses human suffering in terms of guilt, anger, shame, and self-criticism that are likely to be central in grief. Yet, the efficacy of CFT on PGD is largely unknown. Objective: The present study evaluates the efficacy of group-based CFT on PGD-symptoms in adults following a spousal or parental loss. Method: Adults reporting >25 on the PGD-scale (PG-13) 11 months post-loss were identified from The Aarhus Bereavement Study. Eighty-three individuals participated (mean age = 60.45; women = 67.5%; partner-loss = 83.1%; PG-13 baseline = 31.7) and were randomized to an 8-week, group-based CFT for PGD-program (n = 42) or a wait-list control (n = 41). Symptoms of PGD, PTSD, depression, and anxiety were measured at pre, post-intervention, 3 and 6 months follow-up. Results: Across all time-points, statistically significant interaction effects were found for PTSD (p = .040, Cohen's d = .49), while none of the remaining outcomes reached statistical significance (ps = 0.252 - 0.589;Cohen's ds: 0.13-0.30). Conclusions: Possible interpretations include that CFT cultivates sensitivity towards suffering and engaging kindly in alleviating this, which may need more sessions to have its effect on PGD-symptoms. Moreover, CFT may be too cognitively demanding for older bereaved adults, who often experience mild cognitive difficulties. Identification and treatment of PGD are especially important in a pandemic. Potential treatments for complicated grief reactions should be addressed. Adaptions of CFT for PGD

should be tested in future research before being recommended for PGD.

F3.2

Police officers are also first responders: Are they burning out after one year of pandemic?

Bárbara Sousa, Patrícia Correia-Santos, Diogo Morgado, Ângela Maia

University of Minho, Portugal

Track: Trauma and stress

Background: Pandemic intensified the number of stressors among police officers. Diminished time-off, overwork, and public scrutiny have been associated with an increased risk of burnout. Furthermore, the risk of SARS-COV2 (COVID-19) infection is an additional threat that endangers officers' health. Objective: To understand if fear of COVID and the factors that are associated with this fear will impact burnout, we tested the mediating effect of operational stressors on the relationship between fear of COVID-19 and burnout, specifically on cognitive fatigue. Method: Participants were 160 police officers aged between 23 and 58 years old (M = 40.81; SD = 6.83) who filled the Fear of Operational Stress COVID-19 Scale, Police Questionnaire, and Shirom-Melamed Burnout Measure. Results: Results showed that 20% of these professionals reported cognitive fatigue problems and 87% reported moderate or high operational stress. The direct effect of fear of COVID-19 on cognitive fatigue was $\beta = 0.08, 95\%$ CI [.038, .119], t = 6.69, p < .001 but when the mediation of operational stressors is included, the direct predictive effect of fear of COVID-19 on cognitive fatigue decreases ($\beta = 0.044$, 95% CI [.361, .664], t = 6.69, p < .001) which corresponds to a partial mediation. Conclusions: The constant amendments and uncertainty associated with fear of COVID-19 increased cognitive fatigue for these workers. Individually this is associated with worse mental health, causing difficulties in reasoning, concentration, and decision-making. At the work level, it may affect performance and precipitate inappropriate interactions such as the use of excessive force, which may put themselves, peers, and communities at risk.

F3.3

(Fire)fighting the pandemic – Predicting latent classes of stress-related symptomatology in Dutch firefighters

Yoki L. Mertens^a, Lonneke I.M. Lenferink^{b,c}, Miriam J.J. Lommen^a

^aUniversity of Groningen, The Netherlands; ^bUtrecht University, The Netherlands; ^cUniversity of Twente, The Netherlands

Track: Trauma and stress

Background: Firefighters are a relevant population to investigate the impact of the COVID-19 pandemic on mental health for several reasons: On the one hand, firefighters, often acting as first responders, are more exposed to highly stressful situations and therefore may be more vulnerable to deteriorating mental health during the pandemic. On the other hand, firefighters may depict increased resilience in the face of potentially traumatic events given their experience in dealing with them in their occupational activities. Objective: The present study aims to explore underlying classes of stress-related symptomatology, namely posttraumatic stress (PTS) and depressive (DEP) symptoms in Dutch firefighters. Furthermore, we want to test if classes are predicted by factors related to the pandemic (e.g., loneliness) and pre-pandemic symptom levels assessed prior to the pandemic. Method: This research is part of an ongoing longitudinal study examining stress and resilience trajectories in a Dutch firefighter cohort. Selfreport and interview-based data were collected in N =150 firefighters pre-pandemic (in Sep 2019) and during the pandemic (May-Sep 2020). The latent class analysis will be employed. As a first step, we will explore latent classes based on interview-based PTS and DEP symptoms assessed during the pandemic. Secondly, it will be tested whether pre-pandemic stress symptomatology and current self-reported levels of pandemic-related factors predict the extracted latent classes. Results: Results and the implications of the findings will be presented at the conference. Conclusions: Extracting latent classes within longitudinal stress research can help identify vulnerable subgroups and inform mental health policies specially targeted towards first responders during a pandemic.

F3.4

Complex posttraumatic stress disorder and different types of postmigration living difficulties in a treatment-seeking sample of refugees in times of the COVID-19 pandemic: A network analysis

Jennifer Schieß-Jokanovic, Matthias Knefel, Viktoria Kantor, Dina Weindl, Brigitte Lueger-Schuster

University of Vienna, Austria

Track: Other specific populations (refugees)

Background: Refugees and asylum seekers are at increased risk of developing mental health problems due to exposure to traumatic events and numerous postmigration living difficulties (PMLDs). The current COVID-19 pandemic might further deteriorate the mental health of refugees. The network approach to mental disorders defines symptoms as directly and causally influencing each other. Furthermore, symptoms interact with external factors such as stressors. The complex interplay of PMLDs and CPTSD has not yet been investigated from a network perspective. Objective: To explore the network structure and the complex interplay of ICD-11 CPTSD symptoms, PMLDs, and pandemic-associated anxiety. Method: A sample of 93 treatment-seeking Afghan refugees and asylum seekers was assessed through a fully structured and interpreter-assisted interview. When the COVID-19 pandemic started, we included items on pandemic-associated anxiety, subsequently scored by 28 participants. We conducted a network analysis and correlated pandemic-associated anxiety with PMLDs and CPTSD. Results: Preliminary results suggest a strong positive connection between affective dysregulation and the PMLD factor "conflicts and discrimination". Further associations between the PMLD factors and negative self-concept, re-experience, and avoidance were identified. Pandemic-associated anxiety and the symptoms of CPTSD and PMLDs showed a small positive correlation. Conclusions: Affective dysregulation might play a major role in the experience of PMLDs. Experiencing conflicts and discrimination might form a downward spiral with the inability to regulate one's emotions. Improving affect regulation capacities could thus reduce distress due to conflicts and discrimination. Pandemic-associated anxiety seems to have a negative impact on asylum seekers' and refugees' mental health.

F3.5

Trajectories of anxiety and depressive symptoms in response to the COVID-19 pandemic: Protective effect of gender-roles on women

Maryse Arcand^a, Robert-Paul Juster^a, Marie-France Marin^b

^aUniversity of Montreal, Canada; ^bUniversité du Québec à Montréal, Canada

Track: Trauma and stress

Background: The COVID-19 pandemic has contributed to anxiety and depression that may be

experienced differently by sex/gender. Critically, the chronicity of these psychiatric symptoms might promote the development of psychopathology over time. As a result, it is important to explore individual differences associated with the maintenance of anxious and depressive symptoms. Beyond sex differences, psychosocial gender roles contribute to the prevalence of these psychiatric symptoms. To date, studies that have examined the associations among masculine/feminine gender roles were all crosssectional and assessed overall symptoms without considering a specific stressor. Objective: This study aims to determine the effects of sex and gender roles on anxious and depressive symptom trajectories in adults during the COVID-19 pandemic. Method: Following the confinement measures of March 2020 in Montreal, anxiety, and depression were assessed

every 3 months with the DASS-21 (from June 2020 to March 2021) in 104 women and 51 men. Data were analyzed using growth curve models. Femininity and masculinity scores were assessed with the Bem Sex Role Inventory before the pandemic and were added as predictors along with sex. Results: Results showed that women with high feminine traits had fewer anxiety symptoms across the different timepoints compared to men with high feminine traits. Also, women with high masculine traits had lower depression scores relative to men with high masculine traits. Conclusions: Results demonstrate a protective effect of high femininity and masculinity traits only in women. These findings suggest that sex and gender contribute to heterogeneous trajectories of anxiety and depressive symptoms in the context of the COVID-19 pandemic.

Friday, June 18th, 2021 Day #2 Parallel sessions #8

FLASHTALKS

F6.1

Child and parental well-being and concerns during the COVID-19 pandemic: A longitudinal cohort analysis

Melanie Ehrler, Beatrice Latal, Cornelia Hagmann, Markus Landolt, Oliver Kretschmar, Flavia Wehrle

University Children's Hospital Zurich, Switzerland

Track: Children and adolescents

Background: The COVID-19 pandemic has a substantial impact on society beyond its immediate medical consequences. Objective: This study examines child and parental well-being and concerns in the course of the ongoing pandemic. Method: Families of 73 typicallydeveloping children, 54 children born very preterm, and 73 children with congenital heart disease (CHD) were assessed prior to, during the 1st and the 2nd wave of the pandemic. Child and parental psychological wellbeing were assessed with validated questionnaires and changes over time were tested with mixed-effect regression models. Parental concerns related to medical and academic implications of the pandemic were compared between groups with Mann-Whitney-U-tests. Results: For children, a u-shaped trajectory of well-being was observed: Compared to before the pandemic, child wellbeing dropped during the 1st and subsequently recovered during the 2nd wave (time effect: p < 0.001), while parental well-being dropped during the 1st wave without a subsequent sufficient recovery (time effect: p = 0.001). Overall, well-being did not differ between the three groups (all p > 0.08). Parents of children with CHD were more concerned about their child becoming infected with SARS-CoV-2 than other parents (p = 0.03) and parents of both at-risk groups were more concerned about potential negative effects of the school-closure than parents of typically-developing children (p < 0.001). Conclusions: While parental well-being remained low in the course of the ongoing pandemic, the well-being of typically-developing and at-risk children recovered during the 2nd wave. Potentially, the reopening of schools has benefited this process. The concerns of parents of children with CHD or born very preterm may require particular attention as this pandemic evolves further.

F6.2

Elementary school lockdown during the COVID-19 pandemic and the influence on the mental health of vulnerable children: Case vignettes and lessons learned

Sanne Spronk^a, Marnix Loer^a, A.A.A. Manik J. Djelantik^{b,c}

^aReinaerde-KOOS, Utrecht, The Netherlands; ^bUniversity Medical Centre Utrecht, Psychiatry, The Netherlands; ^cAltrecht GGZ-KOOS, Youth, The Netherlands

Track: Best practice and lessons learned from clinical care

During the pandemic The Background: in Netherlands, the elementary schools were closed two times for 6 to 8 weeks. Children were home-schooled, partly by parents and partly online. Research warns that the impact of school closing indicates a high risk for negative impact on physical and mental health wellbeing, such as increased child stress and loneliness and a lack of detection and support in situations of family violence. However, at our community-based mental health care facility for children and adolescents (KOOS Utrecht) we have noticed that vulnerable children and their families may react in very different ways. Objective: In this study, we planned to explore the different reactions that have occurred in the families in our neighborhood and we aimed to gain a deeper understanding of which factors are in play for a more positive or a negative impact on their mental wellbeing. Method: First, we conducted a literature search to explore how school lockdown periods may influence child mental health and their families. Next, we conducted focus groups with our mental health professionals to gather clinical experiences and case descriptions. With qualitative thematic analysis, we explored the differences and similarities between the families who experienced a positive or a negative

impact of the school lockdown. *Results*: In this presentation, we will present case vignettes of affected families in our neighborhood. *Conclusions*: Furthermore, we will present the lessons that we have learned in taking care of vulnerable families with children with mental health issues in times of an elementary school lockdown because of COVID-19.

F6.3

A phenomenological study of low-income 11–14-year -old girls' wellbeing and relationships with teachers in Mumbai, India, and the implications for traumainformed care in high-poverty schools

Nomisha Kurian

University of Cambridge, United Kingdom

Track: Children and adolescents

Background: While child wellbeing is prioritised in global policy, scarce research exists on high-poverty schools in India, where children experience high rates of interpersonal and collective trauma. This data aims to help address this gap. Objective: By gathering qualitative data on 11-14-year-old children's lifeworlds and meaningmaking processes in an underresearched setting, the research aims to develop culturally contextualised frameworks for schools to nurture child wellbeing. Method: 2 months of ethnographic fieldwork were conducted at a high-poverty school in Mumbai, India. Using interpretative phenomenological analysis (Eatough & Smith, 2008), which utilises a small sample for in-depth understandings of lived experience, 3 sets of interviews were conducted with 7 children and 7 teachers. Six criteria were used to recruit participants: age, household income, ethnicity, religion, caste, and length of time spent at the school. These criteria helped make the sample representative of a highly multicultural, diverse nation. Participants' life histories were analysed through thematic coding and 'thick description' (Geertz, 1973). Results: Children's traumas included gender-based violence, forced displacement, bullying, caregiver bereavement, and violent conflict. Post-pandemic, lockdowns have heightened children's interpersonal and collective traumas, from domestic violence to pressure towards child marriage. Conclusions: Children's self-reports about the nature and outcomes of relationships with teachers suggest that trauma-informed care is most effective when teacher support is tailored to culturally relevant vulnerabilities (such as child marriage and casteism). This data reveals the protective factors and risk factors undermining child wellbeing in a developing country and helps address gaps in trauma-informed literature around the social-ecological context of non-Western communities.

F6.4

One size does not fit all – Mental wellbeing of Dutch parents and adolescents during the first lockdown of the COVID-19 pandemic

Marie-Louise Kullberg, Loes Janssen, Lisanne van Houtum, Mirjam Wever, Noa van Zwieten, Bart Verkuil, Bernet Elzinga, Wilma Wentholt

Leiden University, The Netherlands

Track: Children and adolescents

Background: As they strive to become more independent, adolescents and their families may be particularly affected by the COVID-19 pandemic and the associated measures which enforced to stay at home as much as possible. Objective: In this ecological momentary assessment study, we investigated if the COVID-19 pandemic affected the positive and negative affect of Dutch parents and adolescents and parenting behaviors (warmth and criticism) during the first lockdown (March 2020 onwards) in The Netherlands. Additionally, we examined possible explanations for the hypothesized changes in affect and parenting and explored daily difficulties and helpful activities during the COVID-19 pandemic linked to their well-being. Method: To do so, we compared daily reports that were gathered during two periods of 14 consecutive days, once before the COVID-19 pandemic (2018-2019) and once during the first lockdown (April 2020). Results: We found that only parents' negative affect increased as compared to the period before the pandemic (and not adolescents' negative affect, nor positive affect and parenting behaviors. Intolerance of uncertainty (IU) was linked to adolescents' and parents' negative affect and adolescents' positive affect. However, IU, nor any pandemic-related characteristics were linked to the increase of parents' negative affect during COVID-19. Conclusions: The presence of substantial heterogeneity in the data suggests that individuals and families differed to what extent the COVID-19 pandemic influenced their affect and (perspective of) parenting behavior. Implications for policymakers and mental health professionals will be discussed during the presentation.

F6.5

Adolescence mental health and COVID-19: Exploring changes during pandemic

Ieva Daniunaite^a, Inga Truskauskaite-Kuneviciene^a, Siri Thoresen^b, Paulina Zelviene^a, Evaldas Kazlauskas^a

^aVilnius University, Lithuania; ^bNorwegian Centre for Violence and Traumatic Stress Studies, Norway

Track: Children and adolescents

Background: The coronavirus (COVID-19) pandemic and the countermeasures can have a significant impact on the well-being of children and adolescents. *Objective*: This longitudinal study aimed to examine the changes in adolescents' functioning and mental health during, compared with before the COVID-19 pandemic. *Method*: A sample of 331 adolescents, aged 12-16 at T1 (2019) participated in the follow-up study (October 2020). The Strengths and Difficulties Questionnaire (SDQ) was used to measure psychosocial functioning and mental health, in particular, prosocial behavior, hyperactivity/inattention, emotional symptoms, conduct problems, and peer-relationship problems. A latent class change approach was used for data analysis. *Results*: A significant increase in hyperactivity/inattention, emotional symptoms, and prosocial behavior from before to during the pandemic was found in the study sample. By using latent change analysis, three change profiles of mental health indicators were identified: 1) 'Vulnerable adolescents' with the significant increase in problems of socio-emotional functioning (70.7% of participants); 2) 'peer problems' with the increase only of peer relationship problems (19.6%); 3) 'adaptive' with the increase of prosocial behavior and decrease in peer-problems (9.7%). *Conclusions*: The study found a substantial negative impact of the COVID-19 pandemic on mental health in adolescence. These findings highlight the importance to identify and support adolescents in the time of the pandemic more effectively.

Poster Presentations

Track: Trauma and stress

1-001

Building sisterhood immunity during COVID-19: A virtual support group for spouses of military veterans with PTSD

Anat Zakai, Yifat Yeger, Tamar Lavi

Natal, Israel

Background: Current research suggests that the COVID-19 pandemic and the social isolation and economic recession associated with it have had adverse effects on the well-being and mental health of veterans coping with PTSD. However, little is known about how these effects impact their relationships and their spouses: whether there is a cumulative impact on the spouses' already well-documented daily struggles, or whether the pandemic has offered opportunities individually and/or for couples. Objective: The aim of this pilot virtual intervention was to offer these women immediate emotional support and promote adaptive coping styles. Method: The participants were thirteen spouses of veterans, ten married for 4-22 years, eight with children. The virtual support group consisted of two phases: 1. 10 immediate-intervention meetings. 2. 26 bi-weekly meetings. All meetings were documented and analyzed. Results: The talk will present results found in two significant areas: 1. Spouses' COVID-19 experiences and reactions in light of changes in male partners' symptom expression (most specifically, changes in spouses' accommodation behaviors). 2. Challenges and opportunities related to virtual care, most specifically ethical concerns, and issues regarding setting (i.e., participants joined group sessions from their homes, resulting in spillover between therapeutic and domestic spheres). Conclusions: COVID-19 and the social/economic recessions associated with it specifically the lockdowns and the vast disruption of daily routines - have created unique challenges for spouses of veterans with PTSD symptoms. The authors will discuss the effects and point to recommended clinical implications.

1-002

Past exposure to trauma and mental health during the COVID-19 global pandemic

Eleonora Bartoli, Mariam Fishere

Goethe University Frankfurt am Main, Germany

Background: In response to the COVID-19 outbreak, unprecedented measures have been taken worldwide, which daily overcharge people with stress and uncertainty. Under these circumstances, psychopathological aftermaths, including trauma-related ones, are constantly lurking. This can be particularly true for people with previous exposure to potentially traumatic events at different life stages. Nevertheless, only a minority of trauma survivors develop PTSD, suggesting that individuals vary in predispositions. Hence, the importance of understanding risk factors for suffering among individuals. Objective: The study aims at exploring the relationship between previous exposure to traumatic events, perceived stress, and fear of the pandemic. Method: Data was collected from 547 adult participants recruited online, living in Egypt, Germany, or Italy. Participants were divided into groups according to their previous exposure to traumatic events, as assessed with the Adverse Childhood Experiences Checklist, Primary Care PTSD Screen for DSM-5, and PTSD Checklist for DSM-5. Perceived stress and fear of the pandemic were measured with the six-items version of the Perceived Stress Scale and the Fear of COVID-19 Scale, respectively. Results: Results show higher perceived stress in participants who were exposed to traumatic events during their childhood, than in later stages of their lives and never. Groups exposed to traumatic experiences, either in childhood, adulthood, or both, expressed more Fear of COVID-19 than participants without experience of traumatic events, but the difference was not significant. Conclusions: Since stress and fear are risk factors for more severe psychopathological conditions, understanding their perception in different individuals can help to address specific populations with appropriate prevention and intervention programs.

1-003

Psychological impact among SARS-COV-2 hospitalized patients after discharge

Nathalie Garcia Manitz, Alicia Álvarez Garcia, Joan Deus Yela

Universitat Autonoma de Barcelona, Spain

Background: The SARS-COV-2 pandemic has been a global mental health challenge. There are groups that are at higher risk to develop mental health disorders during this crisis. Being hospitalized during an infectious disease has been found as one of the specific probable risk situations to develop psychological disorders. Objective: Evaluate the psychological impact among Hospitalized SARS-COV-2 patients after discharge. Method: We have conducted a study among (N = 22) SARS-COV-2 discharged patients. The study has been conducted in Badajoz, Spain. Subjects from the study have answered selfadministered questionnaires to screen psychological comorbidity, concretely we used SCL-90-R, HADS, DTS, PSS-10, and the SF-36. We expected that a high percentage of the sample presented symptoms that correspond with psychological disorders. Results: The results found were consistent with our hypothesis and a high number of the sample presented symptoms. Those outcomes are similar to what was found during other infectious disease crisis, and to results found among other populations during the current pandemic, but our sample have higher rates than other populations which is also consistent with previous research, where, being hospitalized, was found as a predictor of high distress. Conclusions: A high proportion of patients who have been hospitalized because of SARS-COV-2 presented psychological comorbidity. There is a need to develop interventions to assess psychological symptomatology among that population.

1-004

Comparison of negative emotional states in the three data collection times: A longitudinal study of Indonesian university students

Lusi Ardhiani, Amalia Rahmandani, Salma Salma

Universitas Diponegoro, Indonesia

Background: Students in a special situation as emerging adults who are pursuing higher education have also been affected by the COVID-19 Pandemic. As a result, negative emotional states (NES) have the potential to cause dysfunction in everyday life. Objective: This study aims to describe the differences in NES (depression, anxiety, and stress) among Indonesian University student samples during the COVID-19 Pandemic at three measurement times. Method: Subjects were 78 college students from faculty of psychology at Diponegoro University (Male = 20.5%), age range 18-25 (*MAge* = 19.97; SDAge = 1.044). The instrument was Depression Anxiety Stress Scale (DASS-21, $\alpha = .871$). Data were analyzed using the Dependent Sample t-test (and Wilcoxon Signed Ranks t-test), in addition to other statistical tests used to get a comprehensive explanation. Results: In general, the results of this study suggest that changes in NES are more likely to occur in stress levels than anxiety, more so than depression. Without intending to ignore subjects with major and very severe levels of depression, increased stress and anxiety seem to go hand in hand with adjustment efforts so that there is very little chance of impacting depression levels. These results are supported by the prevalence values in the three types of NES. Conclusions: Although the differences in all scores between men and women (M_{Male}) $< M_{\text{Female}}$) were not significant, differences between the three measurement times were carried out separately by sex and indicate a further elaborated difference in results. The limitations and implications of this study are discussed further.

1-008

Impact of comorbid personality disorders on psychotherapy for post-traumatic stress disorder: Systematic review and meta-analysis Aishah Snoek

Amsterdam University Medical Center, The Netherlands

Background: Although personality disorders are common in PTSD patients, it remains unclear to what extent this comorbidity affects PTSD treatment outcome. Objective: This constitutes the first metaanalysis investigating whether patients with and without comorbid personality disorders can equally benefit from psychotherapy for PTSD. Method: A systematic literature search was conducted in PubMed, EMBASE, PsychINFO, and Cochrane databases from inception through 31 January 2020, to identify clinical trials examining psychotherapies for PTSD in PTSD patients with and without comorbid disorders (PROSPERO reference personality CRD42020156472). Results: Of the 1830 studies identified, 12 studies reporting on 918 patients were included. Effect sizes were synthesised using a random-effects model. Patients with comorbid personality disorders did not have significantly higher baseline PTSD severity (Hedges' g = 0.23, 95%CI – 0.09 - 0.55, p = .140, nor were at higher risk for

dropout from PTSD treatment (RR = 1.19, 95% CI 0.83 – 1.72, p = .297). Whilst pre- to post-treatment PTSD symptom improvements were large in patients with comorbid PDs (Hedges' g = 1.31, 95%CI 0.89 – 1.74, p < .001) as well as in patients without comorbid PDs (Hedges' g = 1.57, 95% CI 1.08 – 2.07, p < .001), personality disorders were associated with a significantly smaller symptom improvement at post-treatment (Hedges' g = 0.22, 95% CI 0.05 – 0.39, p = .010). Conclusions: Although the presence of personality disorders does not preclude a good treatment response, patients with comorbid personality disorders might benefit less from PTSD treatment than patients without comorbid personality disorders.

1-010

The effect of anxiety sensitivity on alcohol use during the first COVID-19-related lockdown in Quebec

Félix Duplessis-Marcotte^{a,b}, Raphaël Lapointe^{a,b}, Alexandra Brouillard^{a,b}, Myriam Beaudin^{a,b}, Jessie Provencher^{a,b}, Lisa-Marie Davignon^{a,b}, Marie-France Marin^{a,b}

^aUniversité du Québec à Montréal, Canada; ^bResearch Center, Institut universitaire en santé mentale de Montréal, Canada

Background: Studies have reported a surge in COVID-19-related mental distress around the globe. Although distress is in and of itself an issue worth investigating, it can also increase risky behaviours, such as alcohol use. Objective: We aimed to describe how alcohol use changed following the public health measures in response to COVID-19 and to identify the predictors of these alcohol use changes. Method: At the end of May 2020 (three months following the Quebec lockdown), 157 participants aged 18 to 55 years old filled out online questionnaires documenting alcohol use habits, socioemotional traits (e.g., Anxiety Sensitivity Index), and psychological distress measures (e.g., Depression Anxiety Stress Scale). Results: Only participants who reported drinking (75%) were kept for the analyses. In our final sample, 36.4% increased their alcohol consumption since the lockdown. Our logistic regression analysis, controlling for sex, age, and job status, revealed that anxiety sensitivity and psychological distress interacted to predict alcohol use. For people low in anxiety sensitivity, the odds of drinking more during the lockdown were greater as distress increased. However, people with high anxiety sensitivity had greater odds of increasing their alcohol use, no matter their level of distress. Conclusions: Our study builds on the emerging literature about the behavioural consequences of the pandemic. With more than a third of our sample increasing their alcohol use and

considering that anxiety sensitivity is a known risk factor for developing substance use disorders, our results highlight the importance of further investigating the long-term effects of COVID on alcohol use.

Track: Grief and loss

2-001

Internet-based and therapist-assisted intervention program for bereaved individuals at risk for prolonged grief disorder: study protocol for a randomized controlled trial

Samet Baş, Orçun Yorulmaz

Dokuz Eylul University, Turkey

Background: Internet-based interventions, which are effective in the treatment of many psychological problems, also offer an important treatment alternative for Prolonged Grief Disorder (PGD; ICD-11/ DSM-5). Especially, worldwide restrictions during the COVID-19 pandemic, have increased the need for internet-based applications. It is also predicted that PGD may be an important health problem worldwide due to sudden and unexpected deaths. Objective: We have developed an internet-based and therapist-supported self-help intervention program for individuals at risk for PGD. The program consists of text-based 10 sessions and lasts 6 weeks. At the end of each session, individuals are given written feedback by the therapist via e-mail. The aim of the study is to test the efficacy and feasibility of the intervention program on prolonged grief and related symptoms with a randomized controlled design. Method: At least 60 participants meeting the criteria will be randomly assigned to the intervention and wait-list control condition. Self-report measurements will be taken four times; before, after the intervention, and during the 1st and 3rdmonth follow-up. Results: Primarily, it is expected that the severity of grief symptoms will decrease, and the meaning-making will increase, following the intervention. Secondarily, depression, anxiety, stress symptoms, and violation of global beliefs and goals are expected to decrease. Conclusions: Results will show the effectiveness of an internet-based intervention applied to the Turkish bereaved for the first time. In this way, bereaved individuals with severe symptoms will access an effective and economical psychological intervention without time and space limitations. The results will also contribute to the spread of internet-based applications.

2-002

Comparable levels of grief and posttraumatic stress after death due to COVID-19 and after other causes during the pandemic in Sweden

Josefin Sveen^a, Filip Arnberg^a, Ida Hensler^a, Maria Bragesjö^b, Rakel Eklund^a, Kerstin Bergh Johannesson^a, Kristina Bondjers^c

^aUppsala university, Sweden; ^bKarolinska institutet, Sweden; ^cNasjonalt kunnskapssenter om vold og traumatisk stress, Norway

Background: Bereavement due to COVID-19 can lead to elevated levels of acute or prolonged grief and posttraumatic stress as compared to other natural losses. Objective: The aim of this study was to examine grief and posttraumatic stress in bereaved adults after a loss during the COVID-19 pandemic and to compare death due to COVID-19 and other losses during the pandemic. *Method*: We report on responses from an online survey collected between January to March 2021 from 277 recently bereaved Swedish adults (82 % female; mean age = 55 years) who had a mean time since the loss of 5 months (range 0-12 months). Questionnaires included the Prolonged Grief Disorder 13 revised (PG-13-R) and the Primary Care PTSD Screen for DSM-5 (PC-PTSD -5). Results: Of the 277 bereaved, 87 individuals had lost at least one person due to COVID-19. The mean score on PG-13-R was 17 (SD = 8.0) for COVID-19 loss and 16 (SD = 6) for other loss. The point prevalence of probable prolonged grief disorder as determined by a cutoff score was 9% and 4%, respectively. The mean score on PC-PTSD-5 was 1.2 (SD = 1.6) for COVID-19 loss and 1.0 (SD = 1.4) for other loss and the prevalence of probable PTSD was 21% and 19%, respectively. Differences between groups were not statistically significant. Time since the loss was not found to be associated with either grief or posttraumatic stress. Conclusions: The findings provide preliminary evidence that levels of grief and posttraumatic stress are comparable among adults who lost someone due to COVID-19 or other causes during the COVID-19 pandemic.

Track: Children and adolescents 3-001

Development of an online version of cognitive processing therapy for youth during the COVID-19 pandemic

Akiko Katayanagi^a, Misari Oe^b, Akiko Kikuchi^{c,a}, Masaya Ito^a, Kiyoshi Makita^{d,a}, Ayako Kanie^a, Satomi Nakajima^{e,a}, Masaru Horikoshi^a

Background: During the 2020-2021 COVID-19 pandemic, youth suicide increased in Japan (NPA, 2021). With the spread of digitalization, youth increasingly use the internet to compensate for loneliness. It has been suggested that such unsupervised use of the internet might increase exposure to sexual exploitation and cyberbullying (Yang, 2021). Trauma care for youth exposed to these pandemic circumstances is needed. Objective: We aimed to develop an online program based on the theory behind cognitive processing therapy for adolescents and young adults with post-traumatic stress symptoms that could allow youth to undergo trauma care equally without regional disparity, with the aim of preventing youth suicide. Method: We developed a beta version of cognitive processing therapy for youth by referring to previous studies. We subsequently asked four trauma experts to use the program in various clinical settings. Through the iteration of these processes, we developed the online version of the program. Results: We summarized the characteristics of the Japanese traumatized youth as dissociation symptoms, selfharm/suicidal behaviours, and repeated harm. Taken into these characteristics, this program was designed to prevent self-harm and suicide by inclusion of emotional control and coping skills to ensure safety. Furthermore, the online design is also intended to provide extensive care for youth, who have a low medical consultation rate. Conclusions: This program is expected to contribute to the care of youth. A preliminary trial will be needed to further examine the feasibility and safety of the program.

3-002

When multidisciplinary clinical practice and research meet: Quality development in the Danish National Children Centres

Sille Schandorph Løkkegaard, Maria Louison Vang, Ask Elklit

University of Southern Denmark, Denmark

Background: Approximately 4.1% of Danish children experience child abuse (CA) and clinical experience suggests that the number of cases of physical abuse of children is on the rise during the COVID-19 lockdown. In Denmark, the Nordic Barnahus model is implemented to support cross-sectional collaboration in cases of suspected child abuse and the Danish National Centre for Psychotraumatology (NCP) has supported the development and implementation of the Danish version of the Nordic Barnahus model (DCC) since 2013. *Objective*: To describe and discuss the collaboration between a national multidisciplinary clinical practice, the DCCs, and research at the

^aNational Center of Neurology and Psychiatry, Japan; ^bKurume University School of Medicine, Japan; ^cNational Center of Neurology and Psychiatry, National Institute of Mental Health, Japan; ^dAichi Gakuin University, Japan; ^eMusashino University, Japan

NCP to simultaneously qualify research and practice in child psychotraumatology. Method: The DCCs and the NCP originally collaborated to develop a valid assessment battery to support the DCC's task of screening for trauma-related symptoms and disorders following exposure to physical or sexual CA. This formed the basis for a continued collaboration including the foundation of a database on psychological outcomes following child abuse as well as initiatives in education and supervision. Results: Currently, data has been collected for 2000+ children and provides opportunities for validating updated developmentally sensitive measures and examining characteristics of children exposed to CA from a national sample. Conclusions: The collaboration and integration of research into clinical practice improve both fields. The DCC works with an updated evidence-based assessment of vulnerable children, and the NCP gains access to a unique and large cohort of children to generate knowledge on physical, sexual, and psychological CA.

EUROPEAN JOURNAL OF PSYCHOTRAUMATOLOGY (+) 51

Maslach Burnout Inventory (MBI). Results: In German healthcare professionals, a higher number of ACEs was correlated with a higher EE score. ACEs were correlated with the majority of assessed COVID-19 associated problems. An increasing number of ACEs predicted higher EE scores. The association between ACEs and EE was mediated significantly by many of the assessed COVID-19 associated problems. These included maladaptive coping strategies such as increased smoking, drinking, and use of antidepressants/tranquillizers, feeling less protected by measures of the employee or the state, a greater feeling of being burdened by COVID-19 associated problems, and greater exhaustion and sleep problems. Conclusions: Our findings suggest ACEs as a significant risk factor for EE in German healthcare professionals. The current pandemic means a significant burden that further escalates this risk.

4-002

Track: Health care professionals

4-001

The interplay between adverse childhood experiences, COVID-19 associated burden and emotional exhaustion: Results of the egePan - VOICE Study

Maximilian Kempf^a, Vera Clemens^b, Petra Beschoner^a, Katja Weimer^a, Eva Morawa^c, Franziska Geiser^d, Christian Albus^e, Susan Steudte-Schmiedgen^f, Harald Gündel^a, Jörg M. Fegert^b, Lucia Jerg-Bretzke^a

^aUlm University Medical Center, Germany; ^bUlm University, Germany; ^cUniversity Hospital of Erlangen, Germany; ^dUniversity Clinic of Bonn, Germany; ^eUniversity Hospital of Cologne, Germany; ^fTechnische Universität Dresden, Germany

Background: Background/Objective: Adverse childhood experiences (ACEs) increase the risk for mental health problems. However, there is a lack of data targeting the role of ACEs for one of the most prevalent mental health problems in healthcare professionals: burnout. Therefore, we aimed to assess the relationship between ACEs and the core burnout dimension "emotional exhaustion" (EE). Objective: As healthcare professionals have been facing particular challenges during the COVID-19 pandemic, we furthermore aimed to assess the role of COVID-19 associated burden in the interplay between ACEs and EE. Method: During the first lockdown in Germany, a total of 2503 medical healthcare professionals were questioned in a cross-sectional online survey (egePan/ NUM project). Questions targeted, among others, sociodemographics, ACEs, COVID-19 associated problems, and emotional exhaustion, measured by the

Is it all bad? – Sense of accomplishment among healthcare workers during the COVID-19 pandemic

Kristina Bondjers^a, Ingebjørg Lingaas^a, Synne Stensland^{a,b}, Hilde Vøien^{c,d}, Ashley Elizabeth Muller^e, Dan Atar^{b,d}, John-Anker Zwart^{f,d}, Grete Dyb^{a,d}

^aNorwegian centre for violence and traumatic stress studies, Norway; ^bOslo University hospital, Norway; ^cOslo university hospital, Norway; ^dUniversity of Oslo, Norway; ^eNorwegian Institute of Public Health, Norway; ^fOslo University Hospital, Norway

Background: The COVID-19 pandemic has put great pressure on healthcare workers across the world, with reports from several countries that emphasize the substantial impact on well-being and mental health. However, there is unclarity as to what factors – if any - have been perceived as positive or attainable during the pandemic. Objective: To gain insight into what experiences and achievements have promoted a sense of accomplishment and pride among healthcare workers during the COVID-19 pandemic. Method: In June (T1) and December (T2) 2020, healthcare workers (N = 1552) at four Norwegian hospitals were invited to participate in a survey, assessing work-strain, psychological health, and support during the pandemic. The survey included the open-ended question "what have you been feeling proud of achieving at work during the past two weeks". Responses to this item will be analyzed using content analysis (Hsieh & Shannon, 2005). Results: In total, 897 participants (77% female) gave a free-text response at T1 (484) or T2 (498). At T1, the mean age was 44 years, 60% were nurses, 20% medical doctors, 13% had another clinical profession, and the remaining worked non-clinically. At T2, the mean age was 43 years, 42% were nurses, 16% medical doctors, 25% had another clinical profession, and

the remaining worked non-clinically. Results of the content analysis will be presented at the conference. *Conclusions*: The assessment of factors that promoted feelings of accomplishment in hospital staff during the pandemic could potentially aid in the design of preventative measures against adverse outcomes, and thus help maintain a sustainable working environment over time.

Track: Other specific populations (e.g., chronic disabilities, refugees)

5-001

Psychological burden, academic adjustment and coping in Portuguese university student's during COVID-19 pandemic

Margarida Figueiredo-Braga $^{\rm a,b},$ Diana Moura $^{\rm c,d},$ Sofia Isabel Almeida $^{\rm e}$

^aUniversity of Porto, Faculty of Medicine, Portugal; ^bi3S-Institute for Research and Innovation in Health, University of Porto, Portugal; ^cCoimbra Hospital and University Centre, Portugal; ^dUniversity of Coimbra, Faculty of Medicine, Portugal; ^eUniversity of Porto, Faculty of Medicine, Portugal

Background: The COVID-19 pandemic has relevant repercussions on the physical and psychological health of University students. Besides the threats to health and financial difficulties, changes in academic routines and reduction of social interaction impact heavily on students' lives. Conversely personal characteristics and coping behaviours may enhance their ability to resist pandemic adversities. Objective: The main objective of this study was to evaluate the psychological impact of the COVID-19 outbreak in Portuguese university students and to uncover individual behaviours and traits associated with anxiety and depressive symptoms. Method: We used a crosssectional approach through an online questionnaire to characterize students' psychological state, academic activities, information consumption about the pandemic, and coping styles during the pandemic. Results: From the 1751 surveys received, 1447 were included in the analysis. The prevalence rates for anxiety, depressive symptoms, and low resilience scores were 66.7%, 37.3%, and 24.9%, respectively. Medical students reported significantly higher resilience levels compared to the other areas of formation. Architectures/Arts, Sciences, and Humanities scored significantly higher on the depression scale. Lower distress levels were found in male participants, and when problem-focused (studying, working, performing extracurricular activities) and emotion-focused (physical exercise and relaxing activities) behaviours were reported. In contrast,

spending more time watching the news, difficulties in online academic activities, and isolation from family and friends were associated with worse psychological indicators. *Conclusions*: The COVID-19 outbreak had a considerable impact on the psychological state of Portuguese university students, mainly regarding anxiety and depression. Students also showed a noteworthy ability to resist pandemic stress and use adaptative coping strategies.

5-002

Transgender sex-workers experiences, needs and resilience during the COVID-19 in Georgia

Ketevan Lezhava

Ilia State University, Georgia

The COVID-19 Background: pandemic is a difficult period for everyone and changed a lot of people's everyday life, including transgender sex workers. On one side there is a fear of being infected and on the other side, adaptation to a radically changed environment such as lockdown, curfew, limitation of gathering, etc. In Georgia, the restrictions damaged and were stressful for transgender sex workers. They lost their job, the main source of income for living. Objective: The study aimed to explore the experiences, resilience, and needs of support of Georgian transgender sex workers during the COVID-19 pandemic. Method: For the study, a purposive sampling method was used, and for data collection, in-depth interviews were conducted. The interviews were transcribed and interpreted by the quantitative content analysis method. Results: The research reveals that transgender-sex workers' resilience was based on community support and self-imagination of a strong person. A crucial role was made by local LGBTQ organizations to support them, to increase their knowledge about their rights, and to provide material assistance. In-depth interviews conducted with 16 participants revealed that this period was also beneficial for them. The transgender sex workers reported that the crisis encouraged them to think more about stable income and do some explorations in their lives. Conclusions: In conclusion, the results showed that transgender sex workers have needed a different kind of support during the period, from the government and community. The crisis led them to explore new ideas, attitudes, and feelings as well as some expectations toward the nearest future that withstand them.

Track: Interventions

6-001

Push the Button: A study protocol of the development and evaluation of personalized trauma-focused psychotherapy for refugees with Complex PTSD

Lisa Groenberg Riisager^a, Jakob Eg Larsen^b, Thomas Blomseth Christiansen^b, Stine Bjerrum Moeller^a

^aUniversity of Southern Denmark, Denmark; ^bTechnical University of Denmark, Denmark

Background: The coronavirus has exposed millions of people to a new threat, potentially causing more people to seek international protection. Due to having experienced multiple traumatic events, refugees are at risk of developing Complex PTSD (CPTSD). At present, there is no evidence-based treatment available. To address the fluctuation of the disorder, natural symptom a personalized approach to therapy is needed. Ecological momentary assessment (EMA) allows continuous collection of an observed experience. An EMAbased self-tracking instrument was created to collect the subjective experience of CPTSD-related symptoms at the moment they occur. Building on EMA data, clinicians can personalize evidence-based interventions to the triggers as they occur during the patient's daily life. *Objective*: In the current study we develop the treatment format of a novel personalized trauma-focused psychotherapy for refugees with CPTSD integrating the use of a selftracking instrument, and test its effectiveness. At present, no psychotherapeutic treatment has integrated the use of a self-tracking instrument in therapy making this study the first of its kind. Method: Using a multiple baseline case series design, 40 refugees diagnosed with CPTSD using the International Trauma Questionnaire (ITQ) will be included and will receive 20 weekly sessions (duration of 60-90 minutes). The primary outcome is ITQ (monthly assessed). Secondary outcomes are PTSD symptoms, well-being, depression, emotion regulation, and social functioning. Semi-structured interviews exploring patients' and clinicians' experiences with the integration of a self-tracking instrument into psychotherapy will be conducted. Results: None. Conclusions: By offering refugees with CPTSD a personalized treatment, we seek to improve treatment outcome through bettertargeted interventions.

6-002

Supporting parents with PTSD in their parenting role: Development of a preventive blended care intervention

Laurien Meijer

Sinai Centrum, The Netherlands; Utrecht University, The Netherlands

Background: The pressure placed on families by COVID-19 'stay at home'-orders may be even greater in families in which a parent has PTSD. Even before the pandemic, parents with PTSD experienced challenges such as increased parenting stress. Parents with PTSD are on average more likely to apply negative parenting practices such as hostility and overcontrol. These parenting impairments play an important role in the intergenerational transmission of trauma, placing children of parents with PTSD at risk for trauma exposure within the family, PTSD, and other mental illnesses. The increased pressure on parents and on youth mental health caused by the COVID-19 pandemic makes the preventive intervention of intergenerational transmission of trauma even more pertinent. Objective: This presentation outlines the ongoing development of a preventive intervention for parents with PTSD, aimed at preventing mental health problems in offspring by improving parenting competence. The intervention will be based on an existing Dutch e-health intervention for parents with mental illness or substance abuse disorders, 'KopOpOuders'. We will adapt KopOpOuders in three ways: adding PTSD-specific content; expanding from e-health to blended care, and increasing inclusivity by actively seeking and integrating the perspectives of parents with PTSD and their children. Method: The intervention will be tested in an RCT, planned to begin in early 2022. Results: Results are expected in 2024. Conclusions: In this presentation, we share a first look at the intervention and its rationale, and discuss how we approach challenges such as integrating e-health into clinical practice and combining PTSD treatment with preventive intervention.

6-003

Acceptability of the videoconference-based SOLAR program to reduce subclinical distress in trauma survivors – a pilot study conducted during the COVID-19 pandemic

Laura Kenntemich^a, Imke Hinrichsen^a, Winnie Lau^b, Meaghan O'Donnell^b, Annett Lotzin^a

^aUniversity Medical Centre Hamburg-Eppendorf, Germany; ^bPhoenix Australia Centre for Posttraumatic Mental Health, The University of Melbourne, Australia

Background: SOLAR (International Program for Promoting Adjustment and Resilience) is a brief intervention developed by international disaster- and trauma experts to reduce persistent subclinical distress following disaster and trauma. Online-based delivery seems crucial in times of a pandemic where face-toface contact is not feasible. *Objective*: This pilot study examined the acceptability of SOLAR, delivered in a video-conferencing format, in trauma survivors with subclinical distress. Method: Single group pre-post pilot study conducted during the first weeks of the pandemic in Germany. N = 13 survivors of trauma (PTSD) A-criterion of DSM-5) with subclinical levels of depression (PHQ-9 = 5-15), anxiety (GAD-7 = 5-15) or posttraumatic stress disorder (PCL-5 = 5-32), or functional impairment (PHQ-9: functional impairment scale = 1-3), but no current mental disorder except adjustment disorder (MINI Plus 7), were included. Participants' acceptability was measured by the number of completed sessions and by satisfaction with SOLAR (CSQ-8) postintervention. Psychological distress (K10+) was assessed pre-and post-intervention as a secondary efficacy outcome. Results: Mean number of completed sessions was M = 3.23 (SD = 1.30). Nine out of eleven participants reassessed at post-intervention were "largely" (*n* = 6, 54.55%) or "very satisfied" (*n* = 3, 27.27%) with SOLAR, two participants (18.18%) were "slightly unsatisfied". A small effect size (Cohen's d = .23) was found for the reduction of distress. Conclusions: The results indicate first evidence for acceptability of SOLAR in survivors of trauma delivered via videoconferencing during the COVID-19 pandemic. The efficacy of SOLAR to reduce distress should be further tested in a larger trial.

Track: Best practice and lessons learned from clinical care

7-001

Psychological support during COVID-19 pandemic on a national level: Case report

Matej Vinko^a, Matej Štirn^b, Tanja Šraj Lebar^c, Nina Krohne^d, Patricija Kerč^d

^aNational Institute of Public Health of Slovenia, Slovenia; ^bSlovenian Psychologists Association, Slovenia; ^cFaculty of Arts, Slovenia; ^dFaculty of Mathematics, Natural Sciences and Information Technologies, Slovenia

Background: Following the first wave of the COVID-19 pandemic, Slovenia adopted a renewed National Protection and Rescue Plan in the Event of an Epidemic (NPRP), setting the framework for the Psychological Support Task Force (PSTF) in the Event of an Epidemic and providing psychological support to the general public. Objective: To present the process of establishment and governance of the PSTF and highlight the importance of interdisciplinary collaboration in addressing people's psychosocial needs during the pandemic. Method: A review of the PSTF operations and impacts. Results: The first wave of the pandemic in Slovenia lead to the establishment of a psychological support helpline through the

combined efforts of various governmental and nongovernmental organizations (NGOs). Following their success, an establishment of the PSTF was envisioned in the updated NPRP. In October 2020 PSFT was convened and shortly after an action plan, focused on transparent and inclusive governance, mental health needs assessment, and provision of psychological support was prepared. The latter was implemented by establishing a free of charge 24/7 psychological support helpline, providing psychosocial support to critical infrastructure employees, conducting psychoeducational activities, and training or supervising psychological support providers. Since its establishment, the PSTF has conducted regular needs assessments using data gathered from a national survey on people's psychological needs and other activities mentioned above. Conclusions: The PSFT performed as a platform for synergistic collaboration, with short and long-term impacts. The effectiveness depends on the engagement and resources of the PSTF members, as well as resources earmarked for the PSFT operations.

7-002

Behind the mask of breast cancer: A qualitative study of patient experience during the pandemic

Justine Fortin^a, Marjolaine Rivest-Beauregard^b, Mélissandre Leblanc^a, Lunie Louis^a, Carol-Anne Roy^c, Alain Brunet^b, Marjorie Montreuil^b, Marie-France Marin^d

^aUniversité de Montréal, Canada; ^bMcGill University, Canada; ^cUniversité du Québec en Outaouais, Canada; ^dUniversité du Québec à Montréal, Canada

Background: Since March 2020, the COVID-19 pandemic has caused offloading and changes in treatment plans for many patients, including individuals suffering from breast cancer. These complications add to the stress of the disease itself and may contribute to deteriorating the patients' mental health. Objective: The main purpose of this qualitative study was to document the experiences of patients who received a diagnosis or treatment for breast cancer during the pandemic. We also aimed to collect strategies to enhance the patients' experience within the healthcare system. *Method*: Eighteen patients identifying as women (M = 47.05 years, SD = 9.07) participated in a semi-structured interview. The verbatims were analyzed by two qualified graduate students using both inductive and deductive approaches. Results: Descriptive analyses provided a thematic guide with self-explanatory themes: COVID experience; diagnosis-treatment experience; COVID-related delays/ modality changes in healthcare services; integration

of patients' needs to care and support. Strategies to improve patients' experience were suggested including offering psychological services to all patients regardless of whether they show signs of distress or not (n = 18) and allowing for the patient to be accompanied at the time of diagnosis and for the first chemotherapy/radiotherapy session (n =16). Conclusions: These results provide a better understanding of the impact that the pandemic has on individuals who also have to deal with a very stressful life event, that is a breast cancer diagnosis and/or treatments. Moreover, the proposed strategies reflect the patients' needs and could be applied in order to improve the mental health of individuals diagnosed with breast cancer.

Track: Mental health assessment

8-001

Overcoming digital exclusion for treatment of Complex PTSD: A case study

Noor Al-Huda El Amin, Julia Gillard

Camden & Islington NHS Foundation Trust, United Kingdom

Background: In a time of rapid technological change, digital equipment and skills have become increasingly important to connect people to information, opportunities, and each other. This growth potentially excludes some communities and individuals with complex mental health difficulties and multiple levels of deprivation, who face a heightened risk of digital exclusion. Objective: To explore in detail the reasons for digital exclusion in traumatised clients awaiting Complex PTSD treatment and report on an innovative intervention to facilitate digitally excluded clients' access to remote treatment. *Method*: A qualitative case study describing the development of a community-based participatory intervention to reduce digital inclusion in clients awaiting Complex PTSD treatment in a secondary mental health service in London, United Kingdom. We report themes relating to historical and current reasons for digital exclusion and describe the process of designing an intervention to increase access to technology, digital literacy, and client self-efficacy to facilitate access to remote Complex PTSD treatment. Results: Major reasons that appeared to maintain digital exclusion included being unable to access the necessary technology, a perceived lack of knowledge, overcrowded housing and lack of privacy, and economic deprivation. Facilitators for overcoming digital exclusion included clients' intrinsic motivation, enabling access to the necessary technology, and facilitating access to individualised learning of IT skills. *Conclusions*: Multiple factors contribute to digital exclusion among mental health service users, including material deprivation and low levels of digital literacy. Efforts to overcome digital exclusion must address the multiple deprivations individuals may face in the offline world in addition to their individual mental health needs.

8-002

Online assessment of PTSD and CPTSD with the novel International Trauma Interview (ITI): A qualitative study

Odessa Gelezelyte^a, Monika Kvedaraite^a, Jonathan J. Bisson^b, Agniete Kairyte^a, Neil P. Roberts^{b,c}, Evaldas Kazlauskas^a

^aCentre for Psychotraumatology, Institute of Psychology, Vilnius University, Vilnius, Lithuania; ^bNational Centre for Mental Health (NCMH), Division of Psychological Medicine and Clinical Neurosciences, Cardiff University School of Medicine, Cardiff, UK; ^cDirectorate of Psychology and Psychological Therapies, Cardiff & Vale University Health Board, Cardiff, UK.

Background: Restrictions amid the COVID-19 pandemic brought to light a need for remotely delivered mental health services. The present study is aimed at validation of the International Trauma Interview (ITI; Roberts et al., 2019) used for the assessment of ICD-11 PTSD and CPTSD symptoms. The objective of the current analysis was to explore the experiences of participation in the interview online. Method: The sample consisted of 52 adults. 40 (76.9%) were female; average age 34.4 years (SD = 9.7). Six (11.5%) participants met diagnostic criteria for PTSD and 10 (19.2%) - for CPTSD. Participants were asked to report their experiences of participation in the interview via video meeting. The data were processed using thematic analysis (Braun & Clarke, 2006). Results: Around one third (36%) of the participants reported only positive aspects of participation in the interview online (saves time, feeling safer at home, etc.), a quarter (25%) - only negative sides of online interviewing in comparison to face-to-face contact (lack of privacy at home, prefers face-to-face contact, etc.). 31% of the sample expressed both, positive and negative, aspects of an online interview. 8% of the participants were neutral about being interviewed online. Participants meeting diagnostic criteria for CPTSD were significantly more likely to report safety at home as a positive aspect of online interview than the remaining sample. Conclusions: Online diagnostic interview of PTSD and CPTSD was positively received by the participants. However, challenges of online assessment within specific groups should be further investigated.

Keynotes and Other Invited Sessions

Wednesday, June 16th, 2021 Pre-Conference Workshops

The implications of psychological wounding in children & adolescents during the COVID-19 pandemic - from an EMDR perspective

Susan Darker-Smith

Child Trauma Therapy Centre, United Kingdom

This practical-based workshop will address the types of psychological wounding emerging in children and adolescents as a direct or indirect result of the COVID-19 pandemic, with a view on treatment from an EMDR perspective. It will cover: (1) Understanding the forms of psychological wounding affecting young people and parents during the COVID-19 pandemic, (2) The impact of family dynamics and challenges in stabilisation and trauma resolution, during COVID times, (3) Stabilisation at a time when the world seems so unpredictable, (4) Target selection for EMDR, (5) Delivering EMDR therapy and building a therapeutic relationship online via virtual means, (6) Working with complex presentations and attachment wounding via virtual means.

Treating posttraumatic stress disorder remotely with cognitive therapy for PTSD

Anke Ehlers

University of Oxford, United Kingdom

Delivering trauma-focused cognitive behavioural therapy to patients with PTSD during the COVID-19 pandemic poses challenges. The therapist cannot meet with the patient in person to guide them through traumafocused work and other treatment components, and patients are restricted in carrying out treatmentrelated activities and behavioural experiments that involve contact with other people. Cognitive therapy for PTSD (CT-PTSD) is a trauma-focused cognitive behavioural therapy that is acceptable to patients, leads to high rates of recovery, and is recommended as a first-line treatment for the disorder by international clinical practice guidelines. The workshop will describe how to deliver core interventions of CT-PTSD remotely, including updating memories, trigger discrimination, and behavioural experiments, and present video illustrations.

Thursday, June 17th, 2021 DAY #1 Opening Ceremony 09:15 – 09:30

Evaldas Kaslauskas, Manik Djelantik, Marloes B. Eidhof, Anke de Haan, Annett Lotzin

Presidential opening of the 17th ESTSS Conference "Trauma and Mental Health during the Global Pandemic" with a word of welcome by ESTSS president Evaldas Kaslauskas. This opening includes the Young Minds in Psychotraumatology Award Ceremony.

Keynote #1 09:30 - 10:30

COVID-19 pandemic - not like any other?

Sir Simon Wessely

Chair of Psychiatry, Institute of Psychiatry, Psychology and Neurosciences, King's College London, United Kingdom

The problem with abstracts is that they have to be printed out before the conference itself. I don't know about you, but I rarely get to think about what I am going to say until I am on the plane. Anyone remember planes? I thought not. I also gave up using PowerPoint many years ago – whilst PowerPoint and Zoom are definitely the work of the devil. So, I will be talking about COVID-19 and mental health, it will inevitably be biased by our experiences in the UK, and may include some new and unexpected findings from our large study of health care workers. I will also be saying why the word "new normal" should be banned, and finally explain what is the wicked thing about pandemics that nothing else in the world of trauma shares.

Parallel sessions #1 10:45 - 11:45

INVITED SYMPOSIUM

11.1

The European Journal of Psychotraumatology Special Issue: The Coronavirus Pandemic and Traumatic Stress Chairs: Meaghan O[´]Donnell^a, Talya Greene^{b,c} Speakers: Jennifer Wild^d, Nasser F. BinDhim $^{\rm e,f,g}$, Mira Vasileva^h, Ruth Pat-Horenczykⁱ

^aPhoenix Australia Centre for Posttraumatic Mental Health, The University of Melbourne, Australia; ^bUniversity of Haifa, Israel; ^cUniversity College London, United Kingdom; ^dDepartment of Experimental Psychology, Oxford University, United Kingdom; ^eScientific Affairs Department, Sharik Association for Health Research, Riyadh, Saudi Arabia; ^fCEO Office, Saudi Food and Drug Authority, Riyadh, Saudi Arabia; ^gPublic Health Department, College of Medicine, Alfaisal University, Riyadh, Saudi Arabia; ^hChild and Community Wellbeing Unit, Melbourne School of Population and Global Health, University of Melbourne, Australia; ⁱPaul Baerwald School of Social Work and Social Welfare, Hebrew University of Jerusalem, Israel

Early in the pandemic, the European Journal of Psychotraumatology invited submissions to a Special Issue on the Coronavirus Pandemic and Traumatic Stress. There was a clear need for high-quality research on the potentially traumatic impact of quarantine and social isolation, on the distress and specific needs of vulnerable groups, on which interventions would be needed at different phases of the pandemic and how best to deliver them, and on how to communicate about the pandemic and its consequences - taking culture, gender and age aspects into account.

The resulting EJPT COVID Special Issue is a collection of research conducted over the first 18 months of the pandemic and tracks both the development of research and the impact of the pandemic as it occurred in real time. Initially, we published commentary and literature reviews. This was followed by crosssectional research, and eventually longitudinal and intervention studies. The research covered prevalence of trauma-related symptoms and psychopathology within specific vulnerable populations such as healthcare workers, students, children, managers, or more broadly at a country level. In addition, a second research theme was around interventions that targeted COVID-related mental health issues.

In this session, together with four authors that contributed to this special issue, we will reflect on what we know about COVID and trauma as a result of this research. The panellists will share some lessons learned about conducting research during a global crisis, and will discuss what they would do differently with the benefit of hindsight.

Parallel sessions #2 12:00 - 13:00

MASTERCLASS

M2.1

Researching with children during the COVID-19 pandemic

Suja Somanadhan, Harry Shier, Helen McAneney

University College Dublin, Ireland

Background: Recently, research has evolved to be conducted with rather than simply on children, utilising participatory health research as a guiding paradigm, especially the right to be heard. However, the COVID-19 pandemic has placed significant disruption to a child's everyday life with imposed restrictive social measures of isolation, social distancing, and school closures, making their participation in research problematic. Many are researching the effect of COVID-19 on children, but we want to learn about the impact and resilience of children on COVID-19. Objective: To critically systematise the various challenges involved in meaningful participation in researching with children across multiple continents. Method: This masterclass will frame a collaborative process involving work in partnership with children during COVID-19, utilising participatory health research as a guiding paradigm. COVISION is an international research project focused on 'harnessing the creative expertise of children to address practical and psycho-social challenges of the COVID-19 pandemic' with children (10-17 years) engaged as co-researchers. Results: Globally inclusive research brings about great potential but also logistical barriers to implementation. Issues of various time zones of our partners and child advisors have been overcome through planned alternative meetings with the central core team and multiple advisory groups across various time zones being commissioned. Conclusions: This masterclass will increase the understanding of ways to promote child's right based participation in research during the pandemic in a more meaningful way. Moreover, this masterclass will identify ways in which children's actions contribute to the capacity of others to adjust to the changes arising from the pandemic.

Extracurricular activities 13:00 – 13:30

MEET THE EXPERT

EA1

Expert: Dean Adjukovic^a

Expert: Angelina Fusco^{b,c}

^aFaculty of Humanities and Social Sciences, University of Zagreb; ^bChair of the Dart Centre Europe; ^cformer TV News Editor at BBC Northern Ireland

"Meet the Expert" provides a unique opportunity to engage with leading experts in the trauma field. The sessions are limited to 15 participants per expert to allow lively discussions and the opportunity for everyone to ask the experts questions about research and clinical experiences during COVID-19, research in general, career advice, and anything else that comes to mind. Attendance is possible on a first-come-first-served-basis, so make sure you enter these exciting sessions on time!

14:00 - 15:00

SPECIAL INTEREST GROUP

EA2

Special Interest Group Traumatic Grief: Action needed

A.A.A. Manik J. Djelantik^{a,b}, Don R. Robinaugh^c

^aUniversity Medical Centre Utrecht, Psychiatry, Utrecht, The Netherlands; ^bAltrecht GGZ – KOOS, Youth, Utrecht, The Netherlands; ^cMassachusetts General Hospital/ Harvard Medical School, Psychiatry, Boston, United States

Background: Action is needed to reach a consensus about the clinical relevance of traumatic grief in diagnoses and treatment. *Objective*: In order to achieve these goals, we think that greater collaboration between clinicians and researchers internationally is needed to derive a shared conceptualization of natural and pathological grief. Method: The ESTSS supports the idea of creating a platform in which clinicians and researchers from all over Europe (and also other parts of the world) get to know each other, exchange ideas, collaborate, and share knowledge about traumatic grief. Results: In this first meeting of the ESTSS Special Interest Group Traumatic Grief, we will provide an overview of the history (both in diagnoses and treatment) of the traumatic grief conceptualized by clinicians and researchers till now. We then will have an interactive discussion about the current themes in our field, and possible future directions. Conclusions: Along the way, there will be time to get acquainted to each other and to start building a network of relationships.

GLOBAL COLLABORATION

EA3

Making traumatic stress data FAIR: Work by the Global Collaboration on Traumatic Stress

Nancy Kassam-Adams^{a,b}, Talya Greene^c, Lonneke Lenferink^d

^aUniversity of Pennsylvania; ^bChildren's Hospital of Philadelphia, United States; ^cUniversity of Haifa, Israel; ^dUtrecht University, The Netherlands

The movement toward a more open science also requires that we make research data more Findable, Accessible, Interoperable, and Re-usable or "FAIR" (Wilkinson et al., 2016). Our ability to understand and address the impact of trauma can be enhanced by embracing data sharing, preservation, and re-use (Kassam-Adams & Olff, 2020). However, the traumatic stress field is just beginning to address FAIR data practices. This session will provide an overview of FAIR Data principles for traumatic stress researchers. We will describe ongoing work by the Global Collaboration on Traumatic Stress (GC-TS) to help make traumatic stress research data more FAIR. The GC-TS FAIR Data workgroup has recently launched an international survey open to any traumatic stress researcher or research trainee. The survey is available in 7 languages and captures experiences, views, and current practices with regard to data sharing and re-use. Survey results will provide a benchmark of current practice and will guide development of new tools and resources. Work by the GC-TS FAIR Data workgroup also includes data archiving projects (in traumatic grief and child trauma) that are making harmonized, deidentified participant-level data accessible and reusable for integrated cross-study analyses, as well as an online index of traumatic stress data resources and a planned toolkit to help traumatic stress researchers implement FAIR data practices across the research lifecycle.

References

- Wilkinson M.D., Dumontier M., Aalbersberg I.J., et al. The FAIR Guiding Principles for scientific data management and stewardship. *Scientific Data*. 2016;3:160018. doi: 10.1038/sdata.2016.18
- Kassam-Adams, N. & Olff, M. (2020). Editorial: Embracing data sharing, preservation, and re-use in traumatic stress research. European Journal of Psychotraumatology, 11(1): 1739885. doi: 10.1080/ 20008198.2020.1739885

LIVED EXPERIENCES

EA4

Lived experiences: Music therapy during COVID-19 in refugee camps

Wytske de Vries

Leiden University, The Netherlands

It is in music we recognize ourselves. For this important reason "Connect by Music" offers support for displaced populations, living in the unstable environment of a refugee camp. "Connect by Music Greece" is a Non-Governmental Organization, providing psychosocial support to refugees living in Greek refugee camps. Its mission is to use music therapy and music education as a means to improve overall well-being and mental health of refugees who are affected by migration trauma and loss. The "Connect by Music" program provides a customized approach creating a safe space and sense of belonging in the community where students can grow and develop. Listening to music has shown to reduce stress and enhance emotional responses, such as joy, peacefulness and calmness (Koelsch, 2013). Playing an instrument can cause activity in brain areas that are connected to emotion regulation and social response (Beck et al., 2018). During the session, de Vries will showcase the methods used in the program, and she will discuss the impact of the COVID-19 pandemic on this vulnerable population.

References

Beck, B. D., Lund, S. T., Søgaard, U., Simonsen, E., Tellier, T. C., Cordtz, T. O., Laier, G. H., & Moe, T. (2018). Music therapy versus treatment as usual for refugees diagnosed with posttraumatic stress disorder (PTSD): study protocol for a randomized controlled trial. *Trials*, *19*(1). https://doi.org/10.1186/ s13063-018-2662-z

Koelsch, S. (2013). Emotion and Music. In J. Armony & P. Vuilleumier (Eds.), *The Cambridge Handbook of Human Affective Neuroscience* (pp. 286–303). Cambridge: Cambridge University Press. https://doi.org/10.1017/ cbo9780511843716.016

Parallel sessions #3 15:15 - 16:15

MASTERCLASS

M3.1

Trauma-informed dance therapy during COVID-19

Ilene A. Serlin

California Institute of Integral Studies, United States

The unprecedented syndemic threats of COVID-19 refugees, population displacement, climate change, and intergenerational trauma require effective and fast therapies. This article describes and introduces mental health professionals to the use of dance movement therapy as a modality that can be helpful at this time. The method of dance movement therapy, KinAesthetic Imagining (KI) described in this article addresses trauma that is in the body, that is a crisis of mortality, meaning, and identity, that brings mindfulness and integration, and creates individual and collective connections. KI helps individuals ground themselves, find stability and balance, and build resilience. The use of imagination and symbol helps people imagine a future and find hope. Therapeutic outcomes from the use of KI with trauma can help heal the mind/body split from dehumanizing terror, bridge multicultural contexts, be a creative means for containing, discharging and channelling aggression, strengthen individual and community resilience and connections, and decrease compassion fatigue and caregiver burnout.

Parallel sessions #4 16:30 - 17:30

PANEL

P4.1

Expert panel: Dealing with the COVID-19 pandemic across Europe

Experts: Annett Lotzin^a (Central Europe), Filip K. Arnberg^b (Northern Europe), Evaldas Kazlauskas^c (Eastern Europe), Miguel Xavier^d (Southern Europe), Neil Greenberg^e (Western Europe)

Chair: Jana Javakhishvili^f, immediate past ESTSS president

^aUniversity Medical Center Hamburg-Eppendorf, Germany; ^bUppsala University, Sweden; ^cVilnius University, Lithuania; ^dUniversity de Nova of Lisboa, Portugal; ^eKings College London, United Kingdom; ^fIlia State University, Georgia

Background: The COVID-19 pandemic and measures concerned with its management have changed public mental health realities in Europe and worldwide. In these new circumstances, there is emerging evidence that stress and trauma-informed responses to the pandemic are of paramount importance. Objective: This panel of experts in the field of trauma and public mental health from various European countries will reflect on the effects of the pandemic on mental health. Experts will discuss the COVID-19 related situation and responses from their respective countries, concentrating on trauma as a public health issue and the role of traumatic stress societies and mental health experts in responding to the crisis. Results: The panellists will shed light on the extent to which policymakers and various service providers succeed in taking into consideration public mental health needs, including special needs of at-risk groups, and how they utilize stress and traumainformed strategies amid the pandemic. Barriers and facilitative factors will be identified. Conclusion: The experts will jointly reflect on lessons learned from these diverse experiences and way forward to mainstream stress and trauma-informed strategies in the management of the pandemic.

Friday, June 18th, 2021 DAY #2

Keynote #2 09:30 – 10:30

Mental health outcomes of COVID-19 and resilience: Moving beyond the volume of data to best practice approaches

Soraya Seedat

Stellenbosch University, South Africa

This presentation, against the background of global data on rapidly emerging longitudinal evidence of the mental health outcomes of COVID-19 including traumatic stress-related outcomes, will highlight recent data from low- and middle-income countries, including South Africa. In resource-constrained settings, where access to and coverage of psychosocial interventions was poor prepandemic, effective implementation of interventions to mitigate the adverse mental health sequelae in the general population and in health care workers has been a particular challenge during the pandemic. Experiences of setting up a resiliency clinic for frontline workers in an LMIC against the backdrop of low mental health literacy levels and high mental health stigma will be discussed. Lessons leveraged from both high- and low- and middleincome countries can be complementary in informing best practice and in tailoring interventions to different contexts.

Parallel sessions #5 10:45 - 11:45

EA5

Group discussion on a framework of good clinical practice for care to health care workers during the COVID-19 pandemic

Chairs: Elisa van Ee and Marloes B. Eidhof

Radboud University, The Netherlands; Reinier van Arkel, The Netherlands

During the COVID-19 pandemic clinicians and researchers felt the urgency to develop mental health care for health care workers or to investigate their mental problems. At a fast pace, without much time for reflection, interventions and research projects were implemented. The ESTSS Virtual Conference 2021 offers the perfect opportunity to look back and reflect on our experiences and lessons learned. Participants in this session are encouraged and given the means to join in the discussion. The aim of this group discussion is to start a first formulation of an international framework of good clinical

practice for care to health care workers during a global pandemic.

Extracurricular activities 13:00 – 13:30

MEET THE EXPERT

EA6

Expert: Dominic Murphy^{a,b}

Expert: Marit Sijbrandij^{c,d}

^aKing's Centre for Military Health Research, King's College London, United Kingdom; ^bCombat Stress, Research Department, United Kingdom; ^cWHO Collaborating Centre for Research and Dissemination of Psychological Interventions, Vrije Universiteit Amsterdam, The Netherlands; ^dFaculty of Behavioural and Movement Sciences, Vrije Universiteit Amsterdam, The Netherlands

"Meet the Expert" provides a unique opportunity to engage with leading experts in the trauma field. The sessions are limited to 15 participants per expert to allow lively discussions and the opportunity for everyone to ask the experts questions about research and clinical experiences during COVID-19, research in general, career advice, and anything else that comes to mind. Attendance is possible on a first-come-first-served-basis, so make sure you enter these exciting sessions on time!

YOUNG MINDS LUNCH

EA7

Chair: Anke de Haan^{a,b}

^aUniversity of Cambridge, United Kingdom; ^bUniversity of Zurich, Switzerland

Entry to this session is restricted to the ESTSS Young Minds that were invited and/or attended the Young Minds School 2021. Attendees will discuss ways to build an international network and foster collaborations during the early stages of their (research) career, with special insight into the work of the "ESTSS Future International Leadership Group". There will be time to chat, catch up, and discuss the impact of COVID-19 on the professional work of aspiring trauma researchers and clinicians.

Parallel sessions #7 14:00 - 15:00

PANEL

P7.1

Expert panel: Traumatic grief research and care in the aftermath of the COVID-19 pandemic

Experts: Paul Boelen^{a,b}, Eric Bui^c, Maja O'Connor^d, Rita Rosner^e, Naomi Simon^f

Chair: A.A.A. Manik J. Djelantik^{g,h}

^aUtrecht University, The Netherlands; ^bARQ Psychotrauma Centre, The Netherlands; ^cUniversity of Caen Normandy, France; ^dAarhus University, Denmark; ^eCatholic University Eichstaett-Ingolstadt, Germany; ^fNYU Grossman School of Medicine, United States; ^gUniversity Medical Centre Utrecht, Psychiatry, Utrecht, The Netherlands; ^hAltrecht GGZ – KOOS, Youth, Utrecht, The Netherlands

Background: Traumatic grief care and research in the aftermath of the COVID-19 pandemic. Objective: The impact of the COVID-19 pandemic can be immense for bereaved family members and intimates by the coronavirus. In many cases, there were restrictions around visiting the loved one in hospital settings. Possibilities for interactions between family members and their suffering loved ones were restricted by protective masks and gloves. Ill patients deteriorated so fast that there were no options for notifying family members before the patient had to be intubated. Saying last goodbyes and comforting each other, so necessary in these times, were only limitedly possible. Funerals for bereaved individuals had to be organized with none or only a small number of visitors, and rituals could not always be performed. Method: Experts will discuss the impact of these restrictions on grief reactions in bereaved individuals and reflect on the societal attitude towards grieving from their respective countries. Results: Improvements for the detection and treatment of disordered grief will be proposed. Conclusions: Lastly, they will analyze the current barriers in doing research in the traumatic grief field and look forward to future directions for traumatic grief care and research in the aftermath of the COVID-19 pandemic.

The end of trauma (as we know it)

George Bonanno

Columbia University, Teachers College, United States

The ways people respond to aversive and potentially traumatic events, including the COVID pandemic, is far more heterogeneous than suggested by the conventional dichotomy of PTSD versus no PTSD. Rather, as several decades of research have shown, responses to these events are best explained in terms of prototypical outcome trajectories, including a stable trajectory of healthy functioning, or resilience. Numerous correlates of these trajectories have been identified. However, the effects of these correlates are generally so modest that even when combined they predict a paradoxically small portion of the outcome variance. To resolve this paradox, I consider the nature of small effects in the context of ongoing behavioural adaptation necessitated by traumatic stress. Next, I introduce the concept of flexible self-regulation to help explain how modest effects can lead to salubrious outcomes. Finally, I consider new research directions for this approach.

Closing ceremony 16:15 - 16.30

Evaldas Kaslauskas, Dominic Murphy, Manik Djelantik, Marloes B. Eidhof, Anke de Haan, Annett Lotzin

Presidential closing of the 17th ESTSS Conference "Trauma and Mental Health during the Global Pandemic" with a reflection on the conference by ESTSS president Evaldas Kaslauskas. This closing ceremony includes the Poster award ceremony and the announcement of the next ESTSS conference in Belfast in 2023.