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(Virtual)



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The abstracts of the 32nd International Congress of Psychology have been typeset from files kindly supplied by the organizing committee. The text of individual presentations is as originally submitted by the authors of the contributions. The arrangement of the presentations in this print volume is in accordance with the planned Congress program at the time the files were passed for publication. Any alterations made between this point in time and the actual date of the Congress will not be reflected in this volume.

hear their voices and understand their points of view, their subjective experiences, and their ways of coping as parents raising children under stressful conditions. Content analysis of the interview transcripts revealed that the parents felt mainly guilt, helplessness, fear, anger, and relief. Manifestations of parental coping included rationalization, compensating their children, and removing the family from the area during attacks. Their perceptions of parenting included being in continuous deliberation and serving as a “protective barrier” for their children. The conclusions were that parents were preoccupied with the inner processing of mainly guilt feelings, and with finding practical ways to help themselves and their children cope. Thus, they were emotionally unavailable to consider other child-rearing issues. Clearly, the coping methods described by parents were intended to address their feelings of guilt and anxiety.

6372

Phase-based psychotherapy as a treatment for dissociative identity disorder co-morbid with major depressive disorder

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The single participant case study highlights the treatment and successful outcome of a 41-year-old Turkish female with a history of complex trauma presenting with Dissociative Identity Disorder (DID) and major depressive disorder and somatization. The treatment included a trauma-informed Phase-Based Psychotherapy (PBT) as recommended by the International Society for the Study of Trauma and Dissociation for treating DID. The patient required an intensive treatment plan for a number of reasons. I completed the treatment in 9 days with intensified interviews. However, there is no published study showing that PBT is being applied extensively. This study determines the efficacy of intensive PBT intervention on DID. Significant symptom improvements were realized post treatment across all measured domains of functioning, including dissociative symptoms, depression and well-being skills and somatization. Moreover, the client no longer met criteria for DID, major depressive disorder and somatization.

6026

Impact of disaster evacuation experiences on parental stress and youth mental health

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Objective: Climate-related disasters are on the rise and may lead to significant distress and psychological impairment in vulnerable populations, such as children and parents. Yet, little is known about the impact of “before the storm” stressors associated with evacuation. Hurricane Irma (2017) led to the largest mass evacuation in US history, with >6.5 million individuals evacuating homes in Florida, and provided an opportunity to evaluate distress associated with evacuation. We examined parents’ reports of the stressfulness of evacuation (Aim1) and whether evacuation stress contributed to youths’ mental health symptoms (Aim 2). Methods: 554 parents of children (<18 years) residing in South Florida (directly affected by Irma) completed online surveys 3-months after the hurricane, assessing their evacuation and hurricane-related experiences and their child’s mental health symptoms (PTSD, anxiety, depression) for youth (7–17 years; $n = 226$). Results: (Aim 1): Analysis of variance revealed that parents who evacuated, and those living in mandatory evacuation zones, reported significantly more stress before and after the storm than those who sheltered in place (p ’s < .05). Before-the-storm stressors regressions, controlling for hurricane-related life-threat and loss-disruption, revealed that children of parents who reported more before-the-storm stress had more symptoms of PTSD ($\beta = .26, p < .001$), anxiety ($\beta = .19, p < .05$), and depression ($\beta = .22, p < .01$), 3 months after the hurricane. Conclusions: Parents and children are vulnerable after disasters. With climate change, more frequent and intense hurricanes, floods, tornadoes, and other disasters are expected, thus mandatory evacuations for large populations are likely to re-occur. Emergency planners should address and mitigate before-the-storm stressors, to address the emotional needs of parents and children. Also, families should be encouraged to develop Family Disaster Plans to reduce evacuation stress for future disasters and consider ways to make the experience less traumatizing.

5009

Adverse childhood experiences among university students in Jamaica

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Although mental health challenges are becoming a worrying concern for Jamaica, seeking therapy for mental health issues is usually a last resort for many Jamaicans including University students. Studies have shown the link between Adverse Childhood Experiences (ACEs) and mental health of university students, but the link with ACE’s and university students use of mental health facilities is understudied. This presentation will communicate the prevalence

of ACEs and their association with mental health facility use among a sample of university students in Jamaica. A convenient sample of ($N = 143$) students were surveyed using the ACEs International questionnaire on a range of ACEs experiences. Descriptive statistics and Pearson’s R Correlation were used to analyze the data. The results show prevalence rates ranging from 19% to 60% depending on the type of childhood adversity experienced. There is a weak positive statistical significance relationship between ACEs score and use of mental health facilities, $r = 0.301, p = .01$. A purposive sample of ($N = 8, 2$ males, 6 females) mental health professionals who provide counselling for clients were surveyed about their knowledge and use of the ACE’s screening tool, 3 of the 8 knew of it and 1 uses the instrument. The study concludes that, childhood trauma should be a central focus of screening for campus and community mental health facilities. It highlights the need for more mental health professionals’ awareness of ACEs screening tool which provides a quick but broader spectrum of childhood adversities to screen for versus other similar instruments. It also indicates the need for include trauma-informed psychosocial interventions and prevention programmes for children and adults.

4716

When those who help, need help: How trauma, danger and stress affects EMS staff in South Africa

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Emergency Medical Service (EMS) professionals experience significant adverse effects on their mental health and internationally, the prevalence of diagnosable Posttraumatic Stress Disorder among this group is estimated between 12% and 64%. They also have an increased risk for burnout, anxiety, depression and suicide. In South Africa trauma exposure of EMS professionals are significantly higher than international averages. “A trauma clinical elective in SA provides an unparalleled exposure to almost all forms of trauma”. Here, doctors who complete a one-year trauma elective, are exposed to more gunshot and stab wounds, than in a lifetime of practice elsewhere. Similar or higher trauma exposure can be expected for EMS professionals, who work under dangerous conditions, where violent crime is encountered daily. The South African murder rate (36.4: 100,000) is approximately six times higher than the global average (6.1 per 100,000). A pilot study on trauma exposure in the South African EMS (2017) found that a significant number of respondents had been victims of crime and violence while on duty: almost half have been assaulted, or shot at; and more than a quarter have been victims of robbery or theft. Correspondingly, more than half of respondents reported nervousness, sleep disturbances and elevated heart rate; more than a