Presidential Voice
Sylvia Marotta-Walters, Ph.D.

A Timely Convention Program

It’s almost convention time and we have an excellent program awaiting us as participants in the Division’s August annual meeting in Chicago! In the last edition of our newsletter, I wrote about the multiplicity of potentially traumatic experiences (PTE’s) that we read and view daily in popular media. I am excited to report that this year’s convention program has some innovative ways to address PTEs, presented by scientists, practitioners, and policy makers among others. Our division’s membership is diverse, committed, and willing to share their expertise with each of us in Chicago. Let’s make it a great meeting.

As an example of our excellent programming, as we read about migrant children still not reunited with their parents after being separated from them by our government, we will hear about best practices in treating developmental attachment injuries among children in my invited symposium. The symposium will offer continuing education credit for participants. Attachment injuries can produce complex clinical presentations for children and adults. These complexities require individualized treatment plans that go beyond symptom reduction for a specific disorder, as important an issue of society’s most vulnerable groups.

The second program to focus on refugees will address the problem from the community level perspective. It’s helpful to understand that our systems are challenged alongside the many individual sufferers and this can contribute to the problems of individuals. This presentation will show participants how to build resilient communities, thereby strengthening the ecology of refugees, society, and policies that affect all.

There are multiple misconceptions about refugees that we as psychologists can clarify depending on our roles. One of our foundational competencies as psychologists is understanding and accepting diversity and fostering inclusion. This means viewing refugees, who often do not choose the situations that require them to leave their homes and countries, as “us” rather than as “them”. In a world where the vast majority of people experience PTE’s, it is perhaps more helpful to view the issues surrounding refugees from the perspective that we are all In this together as we seek to build a just society. One only has to look at our planet from space to know (Continued on page 3)
Division of Trauma Psychology
Division 56 of the American Psychological Association

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Past-President
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President-Elect
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Secretary (3 years, renewable for one term)
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Awards Committee
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Convention Program Committee
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Disaster Relief Committee
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International Committee
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Liaison Committee
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Carla.stover@yale.edu

APA Refugee Mental Health Resource Network Steering Committee
Elizabeth Carl, Ph.D., Chair
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Dear TPN reader,

Welcome to our summer issue. Below, you will find a directory of Division 56 programming as well as the hospitality suite schedule for the upcoming convention. Next, we present an intriguing feature article on romantic relationships between educators and high school students by authors Nunez, Grant, Ambrose, Tencza, and Dalenberg. In the multicultural section, Dr. Ani Kalayjian discusses a mental health outreach project to the Niger Delta. Later, you will find Dr. Omewha Beaton’s review of the edited volume, PTSD and Mild Traumatic Brain Injury (Vasterling, Bryant, & Keane, 2012). In our student section, we have included a literature review by Ms. Kayleigh Watters on a commonly used sexual assault measure. You will also find a discussion of a recent ATOP Meaningful World event that was hosted by Drs. Diakonova-Curtis, Kalayjian, and Popoff, titled “Women at the Frontier: Healing, Empowering and Nurturing Mindful Leaders.”

Thank you very much for being a reader of TPN and for supporting APA’s Division 56. Please consider sending an article, letter, project update, announcement, poem or photo essay for inclusion in our fall issue. The submission deadline is September 9th.

For all those trekking to Chicago, safe travels & have a great convention!

Best,
Jon

Jonathan M. Cleveland, Ph.D.
Editor-in-Chief

Presidential Voice

(continued from page 1)

that there are no ‘aliens’ inhabiting this beautiful green earth. And that leads us to another one of our foundational competencies, the role of psychologists as advocates for systems change. I am looking forward to an educational and formative program to help us in our professional development.

We announced the results of the Division 56 Election for 2020 on our Listserv in June. We had a strong slate of candidates and you have elected an equally strong slate of division leaders who will begin their service in January 2020. The officers are:

- President-Elect: Tyson Bailey
- Member-at-Large: Lisa Rocchio
- ECP: Katharine Lacefield
- Professional Affiliate: Julia Seng
- Student Representative: Ayli Carrero Pinedo
- Council Representative: Constance Dalenberg

Our new leadership is a blend of psychologists who have served the division in many roles over the years, as well as new leaders who stepped forward to begin their service to the division. We have had a long tradition of encouraging early career psychologists to be in leadership positions, and I’m happy to say that we are continuing that tradition. Welcome to all, and I look forward to working with you all in 2020. You will be entering a leadership community that is strong financially, strong in memberships, and strong in its research, practice, and policy.

For those of you who will be in Chicago, come socialize in our hospitality suite, come do your professional development through our excellent 2019 program (thank you, program chair and co-chairs, Delishia Pittman, Lynsey Miron, and Susan Hannan), and just enjoy hanging out in Chicago.

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<th>Thursday, August 8</th>
<th>Friday, August 9</th>
<th>Saturday, August 10</th>
<th>Sunday, August 11</th>
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<tbody>
<tr>
<td>8-8:50am</td>
<td></td>
<td></td>
<td>A Multidisciplinary Approach to Creating a</td>
<td>Community-centered approached to promoting</td>
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<td></td>
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<td>Trauma-Informed Care System</td>
<td>refugee resilience</td>
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<td>9-9:50am</td>
<td>The Impact of Racism and Trauma on</td>
<td>Invitation Symposium Blending Science and</td>
<td>Invited Symposium Blending Science and Art in</td>
<td>Whole person approaches to working with Trauma</td>
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<td>African-American Men (CE)</td>
<td>Art in Trauma Therapy Outcomes</td>
<td>Trauma Therapy Outcomes</td>
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<td>10-10:50am</td>
<td>Improving preparedness and response to mass</td>
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<td>Male Survivors of interpersonal violence in</td>
<td>Military Culture for Non-Military Psychologists</td>
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<td></td>
<td>casualty events: Lessons learned and next</td>
<td></td>
<td>treatment: Research and Recommendations</td>
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<tr>
<td></td>
<td>steps (CE)</td>
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<td>11-11:50am</td>
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<td>4-4:50pm</td>
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<td>Betrayal Trauma and Interpersonal Functioning</td>
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<td>Across the Lifespan</td>
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<td>8-8:50pm</td>
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</tbody>
</table>
## Division 56 Hospitality Suite Schedule – 2019 APA Convention

**Location:** Marriot Marquis Hotel - Grand Hospitality Suite (room # TBA)

*Refreshments and Division 56 door prizes will be available for Hospitality Suite program attendees*

<table>
<thead>
<tr>
<th>Time/Day</th>
<th>Thursday (8/8)</th>
<th>Friday (8/9)</th>
<th>Saturday (8/10)</th>
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<tr>
<td>8-8:50</td>
<td></td>
<td><strong>Division 56 Student Networking Breakfast</strong></td>
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<td>9-9:50</td>
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<td>12-12:50</td>
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<tr>
<td>1-1:50</td>
<td></td>
<td><strong>Getting Published: Books and Journal Articles</strong> Kathleen Kendall-Tackett, PhD, IBCLC, FAPA</td>
<td><strong>Is Board Certification in your Future?</strong> Sylvia Marotta-Walters, PhD, ABPP</td>
</tr>
<tr>
<td>2-2:50</td>
<td></td>
<td></td>
<td><strong>The Clinician’s Role in Addressing Pelvic Health Disorders Among Sexual Trauma Survivors</strong> Vanessa Tirone, PhD &amp; Kathryn Carroll, LCSW</td>
</tr>
<tr>
<td>3-3:50</td>
<td></td>
<td><strong>Becoming an APA Fellow</strong> Priscilla Dass-Brailsford, EdD, MPH</td>
<td></td>
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<tr>
<td>4-4:50</td>
<td><strong>Division 56 Business Meeting</strong> <strong>Open to ALL Members</strong></td>
<td></td>
<td><strong>Division 56 Social &amp; Mentoring Sessions</strong></td>
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<td>5-5:50</td>
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<td>6-6:50</td>
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<td></td>
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<tr>
<td>7-7:50</td>
<td><strong>Division 56 Early Career Psychologist Social Hour</strong></td>
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</tr>
</tbody>
</table>
Prevalence and Prevention of Romantic and Sexual Relationships Between High School Students and Educators

Nunez, L., M.A., Grant, T., M.A., Ambrose, J., B.A., Tencza, F., M.A., and Dalenberg, C., PhD.

Using international statistics, up to 17% of boys and up to 33.8% of girls are victims of child sexual abuse (CSA), making CSA a global concern (Barth, Bermetz, Heim, Trelle, & Tonia, 2013; Bouvier et al., 1999). While research suggests that CSA contributes to negative effects in a range of functional domains (e.g., social, psychological, and sexual), definitional ambiguity continues to plague researchers. Given that context influences a particular victim’s perception of sexual contact, identification of types of behaviors (e.g., fondling, intercourse-only, non-contact abuse) in varying domains (e.g., school, parish, home) that reliably relate to negative mental health outcomes poses a challenge. Considerations related to unreported cases are more relevant in the abuse field than other self-report survey areas, as many people choose not to report abuse for numerous reasons (e.g., fear, shame, protection of the perpetrator). As a result, reported prevalence rates of CSA vary widely, with one recent worldwide meta-analysis identifying estimated prevalence rates between 8 and 31% for females and between 3 and 17% for males (Barth et al., 2013), and another indicating 11 to 22% for girls and 4 to 19% for boys (Stoltenborgh, van IJzendoorn, Euser, & Bakermans-Kranenburg, 2011).

It is widely agreed that children who have experienced the most “serious” forms of sexual abuse (e.g., penetration, forceful/threatening sexual contact, and abuse perpetrated by those related to their victims) report elevated levels of psychological distress and symptomatology (e.g., Glover et al., 2010; Lopez-Castroman et al., 2013; Swingle et al., 2016; Yancey, Naufel, & Hansen, 2013). The impact of such maltreatment may include maladaptive coping strategies (e.g., denial, isolation, detachment, premature substance abuse), heightened stress levels, and increased risk of developing adult psychopathology—including posttraumatic stress disorder (PTSD), depression, panic disorder, personality disorders, substance abuse, and anxiety disorders.

Parents, concerned about “stranger danger” and CSA, often carefully vet their children’s caretakers when they are outside of parental supervision. Therefore, schools are the primary setting in which children are cared for by individuals who are largely unknown by parents. Little is known about the prevalence and dynamics of inappropriate relationships between students and educators in this important setting. The United States Department of Education (U.S. DoE) only found 14 published research studies when they commissioned a study to explore the prevalence of educator sexual misconduct in 2004 (Shakeshaft, 2004). The few studies that have been conducted explore allegations within a constricted time frame, in limited U.S. regions, or by specific victims of school sexual abuse. Additionally, virtually all studies have analyzed data related only to educators who have lost their license due to sexual misconduct with a student.

Through an investigation of the disciplinary records of educators in the U.S., the Associated Press found 2,570 instances between 2001 and 2005 of educators who either surrendered their teaching credentials or had them rescinded, denied, or sanctioned due to sexual misconduct with a student (Tanner, 2007). While this prevalence figure represents a low base rate of sexual abuse within school settings, survey research of children in school settings yields conflicting data. In 2000, the American Association of University Women (AAUW) conducted a survey that revealed 38% of students between 8th and 11th grade reported that they were sexually harassed by school employees (AAUW, 2001); other researchers found that 14% of high school students had engaged in sexual acts with a teacher (Wishnietsky, 1991). The U.S. DoE study also concluded that at least 1 in 10 students had experienced sexual harassment or violence perpetrated by an educator while attending school (Shakeshaft, 2004).
The limited research available is a shortcoming of the field of CSA and could be due to the challenges within this area of study. Beyond the problems posed by under-reporting or over-reporting, researchers face obstacles from parents and institutions with concerns about asking children questions about these interactions. Parents who refuse permission for such a survey may be over-represented in the group of families most likely to shame sexuality in their teens, a key group to target for research. Further, older adolescents may refuse to cooperate with questions about their sexual contacts with adults, particularly if they see such contacts as consensual. Teenagers work to develop their moral compasses by questioning what is “right” and what is “wrong” (Kohlberg, 1971). Still immersed in the process of establishing a personal ethics code, high school students may have difficulty seeing a sexual relationship with a teacher as unacceptable. This can be difficult for teenagers at or above the age of consent in their state who are challenged with an internal debate regarding their understandings of legal and moral limits. For example, in Delaware, 16-year-olds and 17-year-olds are legally allowed to have sexual relationships with adults under age 30 (Del. Code §§ 5-770, 1973); whereas, California state law prohibits all sexual relationships between individuals younger than 18 and adults (Cal. Penal Code § 261.5, 1872).

Educational ethics uniformly judge student-educator relationships as unacceptable, but variations in the law as well as variations in cultural norms will change the acceptability and, thus, the likelihood of relationships at the fringes of educator domain (e.g., young assistant coach, substitute teacher, college student tutor).

The Trauma Research Institute Educator Sexual Abuse Study

In our ongoing study, we have recruited 648 young adults who had recently (within six years) graduated from a U.S. high school. This sample was recruited to capture a more complete range of responses since parental approval to participate would not be required. The age cap of 24 was instituted to capture participants that were likely to have experience with current technological advances in schools and communication modalities, such as the ability to text teachers or befriend them on social media. Respondents provided estimated prevalence rates by answering questions on how often students and teachers had certain interactions, and how often they, themselves, had such interactions with teachers. They were also asked to evaluate proposed system changes intended to prevent student-teacher sexual relationships, judging the likelihood of a positive impact.

As determined by endorsement of either of two questions (“an educator had a sexual relationship with you” and/or “an educator touched you inappropriately”), 5.9% of our sample reported personal sexual abuse. However, approximately 20% indicated knowledge of a peer who had a sexual relationship with an educator. Less than one-quarter indicated that they would “definitely tell” others that their friend was having a sexual relationship with an educator. Only 7.4% of participants believed that their typical peer would disclose such an inappropriate relationship if the victim asked them not to tell. A full third admitted that they would actively conceal the relationship. When asked if they would seriously consider a relationship themselves with an attractive teacher at 16 or 17 years old, 21.4% stated that they “probably” or “definitely” would have done so.

Respondents reported to believe that forbidding staff from being friends with students on Facebook, Instagram, or similar apps was the most important preventative strategy to consider. This finding is consistent with current research, as studies provide support that individuals often experience less discomfort initiating courting behavior while using a form of social media compared to face to face interaction (Lawson & Leck, 2006). Online applications thus could bridge initial moral concerns of an adult contacting a student, increasing the likelihood of an eventual intimate relationship.
Importantly, respondents were willing to cooperate and provide feedback on prevention strategies. Collecting information from students may provide meaningful and unique insights into the problem at hand. Evaluation figures for each of the top ten prevention strategies are presented in Table 1.

Creating a school environment free of student-teacher sexual relations is daunting, given the impracticality of constantly monitoring student-teacher interactions (Horns-Marsh, 1999) and the challenges associated with screening potential abusers prior to hiring. One existing prevention method concerns pre-employment screening techniques. For instance, most if not all educational institutions integrate some form of criminal background checks into their hiring processes to exclude applicants with greater potential for varying types of maltreatment of students from their pool of candidates (Grant, Shakeshaft, & Mueller, 2019; Hall & Kanoy, 1995; Salmans, 2008). However, due to anti-discrimination, privacy, and defamation laws, it can be challenging for schools to implement extensive and invasive prevention methods in identifying potential abusers applying for sensitive positions (e.g., teachers, school counselors,

### Table 1

<table>
<thead>
<tr>
<th>Evaluation of Ideas for Preventing Sexual/Romantic Student-Teacher Relationships</th>
<th>Good Idea</th>
<th>Maybe</th>
<th>Probably Not</th>
<th>Bad Idea</th>
</tr>
</thead>
<tbody>
<tr>
<td>Staff not allowed to be friends with students on Facebook/Instagram/similar apps ($n=673$)</td>
<td>51.9%</td>
<td>23.8%</td>
<td>16.6%</td>
<td>7.7%</td>
</tr>
<tr>
<td>Staff and students only allowed to meet when the room’s door is open ($n=673$)</td>
<td>39.7%</td>
<td>33.0%</td>
<td>18.4%</td>
<td>8.9%</td>
</tr>
<tr>
<td>Staff and students only allowed to text on a monitored system ($n=674$)</td>
<td>39.5%</td>
<td>28.8%</td>
<td>18.5%</td>
<td>13.2%</td>
</tr>
<tr>
<td>Train peers who can discuss these issues with staff who know what to do ($n=673$)</td>
<td>38.9%</td>
<td>39.8%</td>
<td>15.9%</td>
<td>5.3%</td>
</tr>
<tr>
<td>Create a box that students can anonymously add notes to when they have known information or rumors about students and staff ($n=671$)</td>
<td>33.7%</td>
<td>26.8%</td>
<td>26.8%</td>
<td>12.7%</td>
</tr>
<tr>
<td>Students must sign up to see staff for tutoring or meetings so that the administration can monitor who signs up a lot ($n=673$)</td>
<td>26.7%</td>
<td>32.7%</td>
<td>23.6%</td>
<td>16.9%</td>
</tr>
<tr>
<td>Develop a video on YouTube where kids who have been through relationships with staff can encourage other kids to say no to staff who pursue them ($n=673$)</td>
<td>20.2%</td>
<td>41.5%</td>
<td>26.6%</td>
<td>11.7%</td>
</tr>
<tr>
<td>To be alone with a staff member, students must go to a specific room that is monitored periodically ($n=672$)</td>
<td>18.8%</td>
<td>32.0%</td>
<td>26.8%</td>
<td>22.5%</td>
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<tr>
<td>Staff randomly roam the halls and just walk in on various classrooms ($n=671$)</td>
<td>14.5%</td>
<td>24.7%</td>
<td>31.3%</td>
<td>29.5%</td>
</tr>
<tr>
<td>Have a play or seminar at the beginning of school year warning kids not to get involved with adults ($n=673$)</td>
<td>12.3%</td>
<td>31.8%</td>
<td>30.6%</td>
<td>25.3%</td>
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coaches, and volunteers), such as evaluation of actual attraction to children, as part of a screening process (Hall & Kanoy, 1995).

In the context of the present study, the typical young adult indicated that most of the proposed techniques to prevent student-educator relations (e.g., rules against individual students being alone with teachers, school education programs, avenues for anonymous disclosure) would not be effective or feasible. Although the degree of honest respondent cooperation cannot be confidently identified in studies of this kind, particularly given that limited malingering measures were included in the current investigation, it might be useful to garner further student involvement regarding the development of prevention methods. We recommend, for instance, more in-depth student interviews, representative national surveys, and involvement of school administrators, sexual abuse experts, and experienced teachers. Given the difficulties related to screening for sexual abusers in the school system, consulting with students is essential in advancing both research on prevention methods for student-teacher relationships and implementation of these methods. Generally, additional student-focused research is needed to develop effective educator sexual abuse prevention measures that are legally and ethically acceptable and practical for implementation, including those that can be incorporated into the hiring process and those that may be integrated into already existing school-safety measures.

References

Ms. Lisa Nunez, M.A. is a Clinical Psychology Doctoral Candidate at the California School of Professional Psychology, San Diego and a member of the Trauma Research Institute headed by Dr. Constance Dalenberg. Her work focuses on the research, assessment, and treatment of various types and degrees of sexual abuse. Currently, Ms. Nunez is focused on researching the psychological impact of victimization by revenge pornography and the general public’s recommendation of sentencing for perpetrators of revenge pornography. Her clinical interests are centered around trauma treatment in the young adult population, with a propensity towards working with sexual abuse victims.

Ms. Tysheann Grant, M.A. is a Clinical Psychology Doctoral student at Alliant International University, California School of Professional Psychology. She is a member of the Trauma Research Institute, which is led by Dr. Constance Dalenberg Ph.D. Tysheann’s current research interest is in identity development in the African American Community. As a Forensic Emphasis student, Tysheann aims to work within the criminal justice system to pursue her clinical interests in trauma and severe and persistent mental illness and improve the psychological well-being of current and formerly incarcerated people, as well as at risk youth populations.

Mr. Jacob Ambrose, B.A., is currently a Clinical Psychology Doctoral student at the California School of Professional Psychology at Alliant International University in San Diego, CA and a member of the Trauma Research Institute headed by Dr. Constance Dalenberg. Originally from Louisiana, he attended the University of Louisiana Lafayette (UL) where he received a Bachelor of Arts in psychology. While attending UL he led his undergraduate class as Psi Chi president. Jacob’s current research interests include cross racial rejection sensitivity, rejection resiliency, and...
Francesca Tencza, B.A., is a Clinical Psychology Doctoral student with a Trauma-Focused Forensic emphasis at Alliant International University, San Diego's California School of Professional Psychology, where she is involved in the Trauma Research Institute facilitated by Dr. Constance Dalenberg. Prior to enrolling at CSPP, she completed her Bachelor’s degree in Psychology with Honors from the University of San Francisco while volunteering with the wonderful team at UCSF’s Laboratory for Educational Neuroscience (brainLENS). Francesca is interested in clinical and research topics concerning child maltreatment (namely psychological abuse) and complex PTSD, in addition to custody disputes and forensic evaluations involving child abuse.

Dr. Constance Dalenberg is a clinical and forensic psychologist. She is a Distinguished Professor of Psychology at Alliant International University, where she proudly directs the Trauma Research Institute. She is former President of Division 56 and Associate Editor for Psychological Trauma. Her work has focused on treatment, assessment and consequences of trauma, and her seminars on countertransference and treatment of trauma have been presented nationally and internationally. Professional recognition has included the Morton Prince Award for Scientific Achievement from the International Society for the Study of Trauma and Dissociation, and the Lifetime Achievement Award from Division 56, American Psychological Association.

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Association for Trauma Outreach & Prevention
Mental Health Outreach Project to Nigeria & Niger Delta: Healing, Peace Building & Mindful Leadership

Dr. Ani Kalayjian

A Call to Responsible Action

The Federal Republic of Nigeria, commonly referred to as Nigeria, is a federal republic in West Africa, bordering Niger in the north, Chad in the northeast, Cameroon in the east, and Benin in the west. Its coast in the south is located on the Gulf of Guinea in the Atlantic Ocean. The federation comprises 36 States and 1 Federal Capital Territory, where the capital Abuja is located. Nigeria is officially a democratic secular country, founded on October 01, 1960, with a population of 174.51 million (per 2013 reports) and GDP of 4397.47 Billion USD (per 2018 reports). Although English is the official language in the country, Nigeria’s large population is responsible for its linguistic diversity which is like a microcosm of Africa as a whole.

Despite the efforts made by the Nigerian government and international groups, Nigeria is still in great need of emotional healing. The political conflict has been going on for over a decade. In November 2010 the federal government pledged to deploy more resources to the communities of the Niger Delta to boost development and help restore and sustain peace. The Niger Delta is a prominent region of the southern part of Nigeria. It is 70,00 square kilometers comprised of the following states: Delta, Bayelsa, Rivers, Akwa Ibom, Cross Rivers, as well as Edo, Abia, Imo and Ondo States. About one third of the land is made up of wetlands, swamp, mangrove forest and meandering waterways that stretch for 300 miles from the Benin River in the west to the Cross River in the east. It is Africa’s largest Delta and the world’s third largest mangrove (Taylor, 2007).

Violence Against Women & Political Unrest

Analyzing the genesis of modern-day brutality against people, especially women, in the Niger Delta area of Nigeria, scholars have pointed to the beginning of exploration and exploitation of oil in the area. According to these community the exploitation of oil resources in the Niger Delta has resulted in economic and environmental conflicts, with the women bearing the brunt of the situation. Studies have shown that oil provides over 90% of Nigeria’s foreign exchange earnings, yet the people of the Niger Delta, especially the women are among the poorest in Nigeria.

Available evidence indicates that women in the Niger Delta area were subjected to all kinds of violence including sexual (i.e., rape), physical (i.e., beating, maiming and murder), and the destruction of property. They have suffered unimaginable human right abuses for which redress is unattainable because their husbands and sons have been killed or maimed in the conflict and women have had to assume burdensome responsibilities as heads of households (Akubor & Emmanuel, 2011).

Urgent help in post trauma healing is needed in the Niger Delta area. Many residents of the region have been victimized and traumatized by the ongoing conflicts. While a lot of attention has been devoted to stabilizing oil production, little has been done to address the mental health needs of the residents of this region.

Nigerian Culture, Literacy, Health, Religion & Politics

Nigerian’s culture is influenced by several different ethnic groups, who all determine the country’s food, clothing, and overall culture. With around 250 ethnic groups, Nigeria has extensive and diverse list of traditions and customs. Education is extremely important and valued: adult literacy rate is 59.6% in 2015 up from 51.1% in 2008. Nigeria has one of the most complicated healthcare systems in Africa. Health standards, as measured by life expectancy, in Nigeria have increased since 1950, although progress has not been steady. Maternal mortality rate appears to have increased between 1990 and 2010. According to the latest World Health Organization (WHO, 2018) data, life expectancy in Nigeria is 54.7 years for men and 55.7 years of women with a total life expectancy of 55.2 years. This gives Nigeria a world life expectancy ranking of 178. Religion is an important phenomenon in contemporary Nigeria as it affects every segment of the Nigerian society. There are three primary religions in Nigeria: Christianity (53%), Islam (45%), and African Traditional Religion (2%).
Politically, Nigeria has 68 political parties with the most popular being the People’s Democratic Party (PDP), the All Progressive Congress (APC), and the Social Democratic Party (SDP).

**ATOP Meaningfulworld Goals**

*The Association for Trauma Outreach & Prevention (ATOP) Meaningfulworld* (www.meaningfulworld.com) is an international charitable organization devoted to fostering a meaningful, peaceful, and just world. ATOP has planned a Mental Health Outreach Project (MHOP) to the Niger Delta region, set for the middle of June 2019. ATOP team members are trained in the 7-Step Integrative Healing Model, which will be implemented. Peace building and conflict transformation trainings are scheduled to take place at several universities, orphanages, older age homes, police, Ministries of Health, Education and Social Welfare, and other community centers.


**Our Collaborators**

Our collaborators are the University of Lagos, Department of Peace and Ethnic Studies, UN Agencies in Lagos, Centre for Human Development & Social Transformation (CHDST), Positive Change Alliance, a coalition of NGOs, as well as the King Agada IV, Ekpetiama Kingdom in Bayelsa State.

ATOP Meaningfulworld has spearheaded humanitarian missions in the past 30 years in over 46 countries and 25 States in USA, in response to both human-made and natural disasters. This humanitarian mission is being spearheaded by Dr. Kalayjian, Founder and President of ATOP Meaningfulworld.

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PTSD and Mild Traumatic Brain Injury: A Book Review

By Omewha Beaton, PhD


PTSD and Mild Traumatic Brain Injury, edited by Vasterling, Bryant, and Keane, is a comprehensive compilation of works by leading experts in the fields of posttraumatic stress disorder (PTSD) and mild traumatic brain injury (mTBI). PTSD and mTBI have garnered enhanced interest from the scientific community over recent years, due to the increased number of military personnel returning from the wars in Iraq and Afghanistan with trauma related injuries that met the PTSD or mTBI diagnostic criteria.

The volume consists of 12 chapters organized into five substantive parts: the background and conceptual framework, the clinical presentation and mechanisms, the commonly associated conditions, the clinical management, and the conclusion. Within these chapters, the editors discuss the complexities associated with caring for patients with mTBI and PTSD comorbidity.

The first part of the volume lays the foundation for the book, by providing an overview and a conceptual framework of the intersection between mTBI and PTSD. Also addressed in this section are the operational definitions of mTBI and PTSD. The definitions of mTBI and PTSD individually can be vague. To reduce the ambiguity and standardize the claims in this volume, Vasterling, Bryant, and Keane operationalized PTSD according to the criteria outlined in the Diagnostic and Statistical Manual of Mental Disorders-IV-Text Revision (DSM-IV-TR), while mTBI was operationalized based on two criteria: (1) the loss of consciousness (LOC) not exceeding 30 minutes, coupled with (2) post-traumatic amnesia (PTA) not exceeding 24 hours.

The second part of the volume explores the clinical expressions and neurobiological underpinnings of mTBI and PTSD. The first half of this section addresses the importance of neuroimaging in advancing our knowledge of mTBI, the mechanism of neural injury, and the course of recovery from mTBI. An evaluation of the literature suggests that disconnection, of some form, is the root of the neuropathology of mTBI. The latter half of the section discusses the biological, environmental, and psychological etiologies of PTSD, which can be useful in the discovery of targeted treatment. Additionally, evidence suggests that the neurocognitive mechanisms of mTBI and PTSD overlap, which may result in common symptomatology.

In the third part of the volume, the researchers highlight the challenges clinicians are confronted with because of associated conditions. It also emphasizes the importance of taking these associated conditions into consideration when assessing or treating individuals with co-morbid mTBI and PTSD. This section focuses on two associated conditions: chronic pain and substance use disorder. However, there are many more associated conditions (such as mood disorders and sleep disorders) that may hinder the assessment and treatment of comorbid mTBI and PTSD, mainly because of their shared symptoms.

The fourth part of the volume addresses the clinical management of comorbid mTBI and PTSD. The assessment, treatment, and cost of delivering care to sufferers are presented in this section. The contributors note two efficacious treatments for the individual disorders: cognitive rehabilitation therapy (CRT) for mTBI symptoms and cognitive behavioral intervention (CBI) for PTSD symptoms. However, there is no mention of a specific intervention for patients with both mTBI and PTSD.

In the fifth part of the volume, the researchers reiterate how the potential mechanisms underlying comorbidity influence recovery, and explain the assessment and intervention challenges clinicians face while caring for patients with comorbid mTBI and PTSD. Vasterling, Bryant, and Keane conclude this volume by stressing the need to identify and manage reactions occurring at the intersection of mTBI and PTSD.

I believe this volume succinctly synthesizes the knowledge and impact of mTBI and PTSD comorbidity from an array of experts. Consequently, this is an essential reference guide for a wide array of audiences, specifically: students, trauma specialists, and mental health professionals. This is a timely resource, as we deal with the vexing problems associated with the complexities of comorbid mTBI and PTSD. This book is a must-read reference tool for everyone treating PTSD and mTBI populations.
The Limitations of Sexual Assault Assessment

By Kayleigh Watters

Introduction

Sexual assault can be a life-changing traumatic event that can lead to posttraumatic stress or posttraumatic stress disorder (PTSD; Smith & Pick, 2015). In one undergraduate sample, 22% of students reported experiencing sexual assault at some point during college (Mellins et al., 2017). The #MeToo movement has increased awareness of the impact of sexual violence (MeToo, 2018). However, for many, sexual assault assessments are still a difficult format in which to disclose their experiences (Cook et al., 2011). In this literature review, I examine one assessment measure of sexual victimization, the strengths and limitations of this measure, and sexual assault assessments for minority groups.

Definition of Sexual Assault

The broad definition of sexual assault makes it difficult to create a universal assessment for sexual victimization. The Rape, Abuse & Incest National Network (RAINN, 2019) defines sexual assault as: “sexual contact or behavior that occurs without the consent of the victim.” This includes attempted rape, unwanted sexual touching, rape, or other sexual acts such as oral penetration. However, sexual assault assessments and research studies do not always accurately encompass these prevailing definitions.

Another difficulty is that most of the studies in this area focus on college students or veterans; this makes it difficult to generalize to community populations (for reviews, see Owens et al., 2005; Mellins et al., 2017; Littleton et al., 2018; Anderson et al., 2018). Furthermore, no matter the assessment instrument selected, participants may not disclose for a multitude of reasons: they do not feel their experiences are representative within the question; discomfort with the interviewer; shame; and fear surrounding confidentiality and consequences of disclosure (e.g., stigma, blame, or disbelief; Testa, Livingston, & Koss, 2004).

With the aforementioned issues and other concerns in detecting sexual victimization in assessments and interviews, researchers need to focus on validating measures of sexual assault with empirical techniques (Cook et al., 2011). It has been observed that approximately 41% of violence (including sexual violence) researchers will create their own assessment without providing psychometric data on the measure or disclosing information regarding the definitions for the assessment’s constructs (White, Yuan, & Cook, 2013). This approach makes it difficult to replicate these studies and reliably use their measures. Despite the importance of sexual assault assessments and associated research, there are few validated and reliable scales widely used in studies. I will explore one of the more researched assessment tools, the Sexual Experiences Survey (SES; Koss et al., 1982) and its revision (Koss et al., 2007) further.

Sexual Experiences Survey

The SES (Koss et al., 1982) was considered the “gold standard” for assessing sexual experiences by using behavioral questions. This approach of using behavioral questions rather than asking direct questions requiring participants to label their experiences as an assault has been shown to be a more reliable way of assessing for sexual assault (Anderson et al., 2018; Littleton et al., 2018; Davis et al., 2014). The original SES has strong internal consistency (α = .74 women; α = .89 men) and test-retest reliability within a two-week period of 93% (Koss & Gidycz, 1985). The survey consists of 10 items in a yes/no format and includes female victimization and male perpetration.

The measure was restructured in 2007 (SES-R; Koss et al.) to be gender neutral with a more detailed description of coercion tactics that a perpetrator may use during sexual assault. While the questions are intended to be primarily gender-neutral, there are questions that reference non-universal genitalia, e.g., vaginal penetration (Koss et al., 2007). The questions are behaviorally described based on various forms of specific assault, e.g. “Someone fondled, kissed, or rubbed up against the private areas of my body (lips, breast/chest, crotch or butt) or removed some of my clothes without my consent (but did not attempt sexual penetration).” Other improvements included language revisions, distinctions between different types of assault, frequency of assault, and alcohol or drug-facilitated assaults. The assessment focuses on the type of assault (i.e., unwanted sexual contact, attempted but not completed non-consensual penetration, completed rape) and the method of assault (i.e., verbal coercion, physical force, incapacitation through use of drugs/substances, and threat or use of physical harm). The assessment also delineates age of victimization by asking participants to indicate if the assault occurred after the age of 14 or within the past 12 months.
Strengths

The SES-R performs moderately well when assessing individuals with sexual assault histories (Littleton et al., 2018). This instrument has also been used to assess sexual victimization of battered women compared to the Revised Conflict Tactics Scale (CTS2; Moreau et al., 2014). The SES-R’s behavior-oriented questions have also been helpful in combating underreporting of sexual victimization that is a challenge among other sexual assault measures.

It is important to note that the SES-R has allowed researchers to study the effects of alcohol use on sexual victimization while incapacitated, the type of perpetration that is most seen when under the influence of substances. Incapacitation is the most common type of perpetration reported within a college sample, regardless of gender (Mellins et al., 2017). The SES-R is able to capture these events that may otherwise go unacknowledged by the victim.

Limitations

Even though the SES-R is used frequently in research, there are several limitations. One limitation involves inconsistency; including participants endorsing specific items on the SES-R but not necessarily at follow-up (one to four weeks re-test; Littleton et al., 2018). This pattern does not appear when responding to rape or sexual assault questions that include physical force (Littleton et al., 2018). Another limitation is the lack of psychometric data for culturally diverse populations (Gillmore et al., 2016), despite the high prevalence of victimization among minority groups (e.g., Edwards et al., 2015; Bryant-Davis, Ullman, Tsong, Tillman, & Smith, 2010) and the need for unmet care among these individuals. Furthermore, scoring the SES-R may not account for the wide range of experiences that women report (Davis et al., 2014).

Conclusion

The #MeToo movement has increased the amount of public attention on sexual assault and has allowed for people to discuss their experiences more openly. The SES-R, which is widely used in research, provides a measure to assess for a wide range of sexual assault experiences. However, there are issues with the SES-R of which administrators need to be aware. Sexual assault assessment measures tend not be normed with diverse samples and minority populations are typically not used to validate assessment measures despite the high prevalence of violence in these groups. Future research should continue to explore and improve the psychometric properties of these measures with older adults and minority groups.

References


Kayleigh Watters received her master’s degree from Pepperdine University in clinical psychology with an emphasis in marriage and family therapy. She is now a second-year doctoral student at Palo Alto University’s PhD clinical psychology program where she is beginning her training as a trauma-focused researcher and clinician. Currently, she is working at a dual diagnosis substance use and mental health clinic as a psychology doctoral student.
ANNOUNCEMENTS

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Women at the Frontier: Healing, Empowering, and Nurturing Mindful Leaders

Dr. Daria Diakonova-Curtis, Dr. Ani Kalayjian, Dr. Leslie Popoff

The 63rd session of the United Nations (UN) Commission of the Status of Women gathered thousands of community leaders, non-profit organization participants and activists to New York City from over 193 countries to discuss issues pertaining to this year’s priority theme: social protection systems, access to public services and sustainable infrastructure for gender equality and the empowerment of women and girls. On March 12, 2019, the Association for Trauma Outreach & Prevention (ATOP) Meaningfulworld was honored to present a parallel event, titled “Women at the Frontier: Healing, Empowering and Nurturing Mindful Leaders.” This parallel event took the form of a panel discussion with speakers whom have been promoting gender equality in different sectors. Each of the speakers shared their experiences and motivation as well as success stories to which their organizations have contributed. The audience had the opportunity to ask questions and learn how to get involved with the promotion of gender equality from our panelists. The ambiance was warm and welcoming with candles, original paintings of Patrick Amazon depicting women displayed around the auditorium, and special essential oil infusion. The event began with a talented saxophonist, Steve Carrington, providing a musical interlude while guests gathered in the auditorium. Then ATOP Meaningfulworld United Nations Coordinator, Dr. Leslie Popoff welcomed all to the exciting session and introduced Dr. Ani Kalayjian, Founder, President of ATOP Meaningfulworld. Dr. Kalayjian opened the session by sharing her poem, “Gratitude to Mother Earth” here is the conclusion:

Thank you, Mother Earth, on this
63rd Anniversary of the Commission on Status of
Women.
Just like you, we all possess
The power to choose, to Be, to care, and
To watch our emotions with detachment and love.

You show me how to become whole
By Being, and not as Descartes once said by thinking.
I am because I am a human being,
Not a human doing; I don’t identify with my negative
thoughts,
Nor do I identify with my negative emotions. I am
Because I love unconditionally, and I create joy and peace
Within me as well as all around me.

A moment of silence followed to help center and calm
participants. Further, Dr. Kalayjian introduced ATOP Meaningfulworld’s work around the world and its commitment to serving marginalized women and girls. Dr. Kalayjian discussed how a “Managing your Emotions” handout is used in the field to help men and women understand their sources of anger, and how this anger is used to perpetuate horizontal violence against women. Session participants were asked to look at the handout and identify which emotions might fuel their own anger. Participants identified: fear, worry, sadness, anxiety, which in fact are the four most frequently expressed feelings driving anger. Dr. Kalayjian encouraged all to continue to measure our levels negative emotions daily, as if we had “an emotional thermometer,” to prevent built up and unmanaged emotional outbursts.

The next speaker was Mr. Carl Murrell, who has been working with the Baha’i Spiritual International Community for 30 years. He is also the Representative to the UN from the Baha’i community in the United States. Mr. Murrell explained that he became involved with groups of men who were challenging other men to talk about violence against women, particularly challenging toxic masculinity (anger, force, and violence) and working toward healthy masculinity (empathy, caring, and gaining emotional intelligence). He invited participants to view a Ted Talk featuring Tony Porter, titled “Man box,” which illustrates what happens when one’s humanity is reduced to the patriarchic norm.

Next, Dr. Kalayjian provided summary remarks and stated that the key for equality and equity is healing: “if you don’t take care of your wound, you will be bleeding on someone else, who did not cause it.” Usually it is the women who suffer from men who do not take care of their wounds, but as a society, everyone is responsible for taking care of their own and each other’s wounds.

Next, Sowmya Kshtriya, ATOP Meaningfulworld’s United Nation’s Fellow, introduced a film about a Humanitarian Outreach program in Haiti, and Dr. Kalayjian provided remarks about current political unrest in Haiti and ways that women and girls are affected by political violence and rape. She highlighted the following Meaningfulworld sustainable programs in Haiti: Peace & Forgiveness Gardens, sewing lessons and machines for the orphanages, having water pipes fixed so that they could have running water in the orphanage, sponsoring 10 children, and purchasing mattresses for the orphans, who were sleeping on floors.

The last panelist, Ms. Anye Young, was only 17 years old and a senior in high school. Ms. Young wrote a book last year, titled, Teen Guide to Living with Incarcerated
Parents, and spoke about the absence of her father and the toll it took on her. Ms. Young had both parents until she was nine years old, when her father, an African-American man was sentenced to 12 years in prison for stealing clothes. Ms. Young revealed that before she wrote the book, she had abandoned all hope and faith, but putting pen to paper helped her to forgive her father for his decisions and provided healing by offering hope to other teens. Ms. Young is a passionate young woman who has turned hardship into healing and help for others, and she now speaks out against the mass incarceration crisis.

Following this presentation, Dr. Kalayjian discussed the power of herbs for calming our nervous systems and allowed participants to inhale herbal lavender to feel calm and at peace after an emotional presentation offered by Living doTERRA. Dr. Kalayjian then presented the 2019 Meaningfulworld Woman of Year Award to Chirlane I. McCray. The award was received by Aisha Doris, Director of ThriveNYC, a program that provides mental health in the city of New York. Ms. Doris mentioned that ThriveNYC provides free training to any adults in Mental Health First Aid to be a first responder in their community and recognize first signs of emotional distress. Dr. Kalayjian concluded the session by relating the panelists’ work to the UN Sustainable Development Goals, including the work that ATOP Meaningfulworld conducts around the world to support gender equality through the 7-Step Integrative Healing Model. Dr. Kalayjian stated that the Head-Heart-Hand must be aligned in order to nurture a peaceful, just, meaningful world and alleviate the suffering of ourselves and others. Finally, participants were reminded of the importance to educate and involve men in this work because they are often the ones writing laws and policies. The choice is ours: we can blow up buildings and hurt one another or lift one another up.

In closing, Dr. Ani Kalayjian led the group in a moving Heart-to-Heart-Circle of Love and Gratitude for attendees to experience a sense of connectedness with each other, with women across the globe, and humanity at large.

Special gratitude to our sponsors: ATOP Meaningfulworld, Armenian Constitutional Rights Protective Center, Psychology Coalition at the United Nations (PCUN), Institute for Multicultural Counseling & Educational Services (IMCES), Armenian General Benevolent Union of America (AGBU), Nicole Howerton, Cristin Como, Vision League, Dr. Peter E. Nnaemeka, and Patrick Amazon.
Be Part of the Conversation

Division 56 was founded to keep trauma and its effects at the forefront of the conversation within the American Psychological Association. We are focused on bringing together clinicians, researchers, educators, and policy makers to ensure this goal is met across all domains of practice. Join us and contribute to this conversation by submitting to one of our publications, posting on social media, participating in one of our committees, or running for a leadership position.

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<td>September 9</td>
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<td>Summer</td>
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<td>Late July</td>
</tr>
</tbody>
</table>

**ACCURACY OF CONTENT AND COPY INFORMATION**

In an effort to minimize the publication of erroneous information, each chair of a committee/advisory section is responsible for getting correct facts to us on anything related to their committee. The newsletter Editors and the Division’s Web Master will only accept materials coming from those chairs. Anything else will be sent back to the chair in question for fact checking. Authors of independent articles and submissions are responsible for their own fact checking; this will not be the responsibility of the editorial staff.

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**Ad Size**       | Rate*  
<table>
<thead>
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<tbody>
<tr>
<td>Inside Back Cover (full page)</td>
<td>$700</td>
</tr>
<tr>
<td>Full page</td>
<td>$500</td>
</tr>
<tr>
<td>Half page</td>
<td>$300</td>
</tr>
<tr>
<td>Quarter page</td>
<td>$200</td>
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