

Work with us to reduce the effects of trauma

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A desirable posting

Pip Weiland is a self-described 'army brat'. As a fourth generation member of the Army, she had a better idea than most of what such a life involved before joining up.

She also knew the effect that the demands of the military could have on people – she'd seen it with family friends – and so she studied psychology before committing herself to a career in the military.

As a military psychologist, Pip has been deployed to Iraq and the Solomon Islands, debriefing Australian troops before they returned home. The deployments gave Pip a small insight to what life in a war zone is like: shelling could be heard as she went about her tasks. She describes the Baghdad experience as "surreal, rather like being in a movie." But it left her determined to become as familiar as possible with the most up-to-date research on preventing and treating trauma-related mental health conditions. This is the reason why Pip has recently begun a two-year posting at ACPMH, a posting that is highly desired and valued among military psychologists.

Pip's role at ACPMH is to become familiar with, and involved in, all Defence-related projects. And she's revelling in the task.

"For anyone interested in trauma-related research, this is the place to be. In normal circumstances, one doesn't have the time to read all the journals and become familiar with the latest findings. It's fantastic to be able to immerse myself in the latest research. And the work that comes out of ACPMH is among the best in the world."

Of course, behind the research is the need for practical outcomes and Pip's desire is that her time at ACPMH will eventually lead to positive changes in the way mental health services are delivered to military personnel.

Increasing understanding

Recent and upcoming presentations

- In November, several ACPMH staff presented papers and panel discussions at the annual conference of the International Society for Traumatic Stress Studies. We also had a strong presence at the World Psychiatric Association International Congress and the Australian Military Medicine Association annual conference, with a particular focus on the PTSD treatment guidelines.
- In March, Mark Creamer gave a keynote address to the International Congress on Women's Mental Health on the topic of PTSD in women. In April, he provided a keynote address to the National Conference on Anxiety and Depression on recent developments in the treatment of posttraumatic stress.
- Also in March, Mark presented training in Hong Kong, providing a two-day workshop for mental health practitioners on cognitive behavioural approaches to the management of PTSD.
- We are currently running a series of Information Sessions around the country on evidence based trauma focused treatments for PTSD – watch our website for more details www.acpmh.unimelb.edu.au



Facilitating a smooth transition



The transition from a combat zone (with a regimented lifestyle and constant threat) back to family life is not always easy for military personnel or their families to manage.

From the Boer War up to the current Afghanistan and Iraq deployments, significant numbers of Australian troops have suffered mental health effects including depression, posttraumatic stress, irritability and sleeplessness after returning home. But improved support for our new veterans and their families is on the way.

The Federal Government has recently announced a Lifecycle Package aimed at improving the transition of Australian Defence Force (ADF) personnel to civilian life. And ACPMH, in partnership with the Department of Veterans' Affairs and the Australian Defence Force, will play a central part in these developments.

Associate Professor John Pead says the importance of such a programme cannot be underestimated. "We can see the consequence of having not done this work in Vietnam veterans. More than three decades after the conflict there are

still veterans who are unable to work as a consequence of their war experiences. They don't sleep properly. They find it hard or even impossible, due to their emotional distress, to be a functioning part of our society."

The package, which has been described as a 'lifecycle approach to ADF mental health', comprises several coordinated initiatives aimed at military personnel, veterans and their families, as well as a major program of competency development for mental health workers, including counsellors, psychologists and psychiatrists.

John Pead points out that "up to 20% of military personnel who return from war service suffer serious problems of adjustment back to civilian life". The expectation is that the initiatives in this package will help to reduce the suffering of future generations of veterans and their families.

Director's message



Welcome to the first issue of *TraumaNews* for 2008. There has been considerable media attention in recent weeks to coincide with the fifth anniversary of the deployment of Australian troops to Iraq. Some of the stories have highlighted the potential mental health effects that come with serving in such a volatile and hazardous environment. Our lead article touches on this issue in its discussion of the Federal Government's Lifecycle Package, which ACPMH will have a leading role in implementing.

Balanced discussions about the mental health effects of military deployments are often hard to achieve. There are some who play down the extent of the problem, arguing that it is not a significant issue for Australian troops, while others present it as being a crisis affecting most personnel. I believe ACPMH's role is to provide objective expert advice on such issues. This often turns out to be somewhere between the more extreme conflicting views and that is certainly the case in this debate.

The reality is that most serving personnel do not experience long-term mental health problems. Indeed, many view their experience very positively. However, it is vital that we do not lose sight of the significant minority who have difficulty adjusting and who, along with their loved ones, are affected to various degrees.

Professor Mark Creamer

Bridging the gap

An apparent gap between the development and the implementation of effective trauma-focussed interventions is to be the focus of attention over the next two years for the ACPMH's Anne-Laure Couineau.

Ms Couineau is hoping that her implementation project will lead to increased uptake of the assessment and treatment recommendations from the *Australian Treatment Guidelines for Adults with Acute Stress Disorder (ASD) and Posttraumatic Stress Disorder (PTSD)*. According to Ms Couineau:

“The treatment recommended in the Guidelines is trauma-focussed psychological therapy. Although there are different approaches, they all involve confronting memories of the traumatic event and addressing thoughts and beliefs associated with the experience.”

However, the potentially distressing nature of the process is one reason that many therapists do not currently use trauma-focussed psychological therapy, despite its proven effectiveness.

There are other possible reasons as well, and Ms Couineau is keen to examine all barriers to the implementation of the recommendations. “It may come down to a lack of resources within an organisation, a lack of training, a lack of understanding or other factors that we need to identify.”

Ms Couineau will be working with several organisations throughout the study: the Veterans and Veterans' Families Counselling Service (VVCS) and Centres Against Sexual Assault (CASA). These organisations were chosen because they provide care to veterans and survivors of sexual assault, people who are among those most at risk of developing PTSD. By working with VVCS and CASA, Ms Couineau expects that she will be able to develop a comprehensive documented package that will enable similar organisations to implement the assessment and treatment recommendations with minimal additional assistance.



This particular project highlights the growing importance of evidence dissemination and implementation, and emphasises the importance ACPMH places on using research as a basis to achieving practical outcomes.

Ms Couineau is grateful to the National Health and Medical Research Council for a National Institute of Clinical Studies (NICS) Fellowship that has enabled her to undertake this work. The project clearly meets the objectives of NICS which is to improve health care by getting the best available evidence from health and medical research into everyday practice.

Free information sessions

Australian Guidelines are now available to help people with acute stress disorder (ASD) and posttraumatic stress disorder (PTSD). The Australian Centre for Posttraumatic Mental Health developed the Guidelines in consultation with trauma experts from a range of disciplines, as well as people affected by trauma.

Over the past year, with sponsorship from the Federal Department of Health and Ageing, ACPMH has been conducting free information sessions on the Australian Guidelines around the country.

In the latest of these sessions, leading trauma experts will be in Alice Springs and Darwin in the Northern Territory in May and are expected to be in Townsville

in Northern Queensland in June. There will be separate sessions for health practitioners, and for people affected by trauma, and their families.

Day and evening sessions available in each city.

For practitioners:

1pm–2.30pm and 7.30pm–9pm

For the community:

10.30am–12noon and 5pm–6.30pm

Registration essential:

online: www.acpmh.unimelb.edu.au
or phone: (03) 9496 2922

Where and When?

Alice Springs on 20 May 2008

Ballroom A
Ground Floor, Crowne Plaza
Barrett Drive, Alice Springs

Darwin on 22 May 2008

Brolga Room
Ground Floor, Novotel Darwin Atrium
100 The Esplanade, Darwin

Townsville

Details yet to be announced
Please check our website
www.acpmh.unimelb.edu.au
for further information

Minimising the mental health effects of trauma

The days of sending a team of psychologists to a trauma site to debrief survivors could be over – at least that’s the hope of many trauma treatment professionals, including at ACPMH.

According to Associate Professor John Pead, “some 80% of people who have been in the most common traumatic incidents, such as transport accidents, suffer distress but then recover without professional assistance over just a few days or weeks. Clearly, on-scene counselling and emotional debriefing by mental health professionals is not necessary for most people”. Instead ACPMH is an advocate of psychological first aid provided by emergency personnel and work supervisors, family support,

and a ‘watchful waiting’ approach by health professionals, stepping in with treatment only if it is needed.

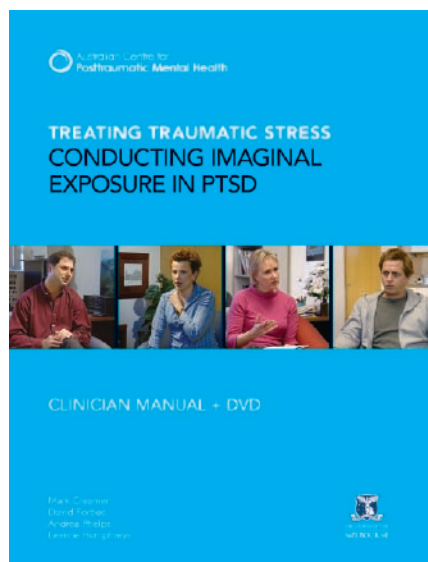
Associate Professor John Pead and his colleague Andrea Phelps have recently advised Queensland Rail on how to minimise the mental health effects of rail trauma adopting this approach. The final recommendations are helping Queensland Rail to develop practices that will reduce the magnitude, duration and number of people suffering the mental health consequences of passenger rail trauma.

Acclaimed package re-released

A desire to ensure that people with posttraumatic stress disorder (PTSD) receive the best available psychological treatment for their condition is at the heart of ACPMH’s decision to repackage its *Treating traumatic stress: conducting imaginal exposure in PTSD* package.

This internationally endorsed, easy to follow training package was first released in 2004 as an A4 spiral bound manual, a CD-ROM and a video enclosed in a 210mm x 340mm x 60mm container. But four years down the track, ACPMH does not believe the package is being distributed as widely as possible and a major part of the problem could be that the original packaging is just too cumbersome.

The latest version is far more compact, comprising an A5 clinician manual with key learning activities, and an accompanying DVD modelling therapy demonstrations.



This version is also more user-friendly and easier to distribute.

Imaginal exposure therapy was given the highest level of recommendation for the treatment of trauma in *The Australian Guidelines for the Treatment of Adults with Acute Stress Disorder and Posttraumatic Stress Disorder* and it is hoped that the re-packaged *Treating traumatic stress: conducting imaginal exposure in PTSD* will provide even more practitioners with the knowledge and skills they need to confidently use this treatment.

Increasing understanding

Recent publications

Broomhall, L., Clark, R., McFarlane, A., O’Donnell, M., Bryant, R.A., Brooks, R., & Creamer, M. (In Press). Early Stage Assessment and Course of Acute Stress Disorder following Mild Traumatic Brain Injury. *Journal of Nervous and Mental Disease*.

This research showed that many people with a mild traumatic brain injury report high rates of psychological symptoms. While some of these symptoms may be explained by a post-concussive syndrome, higher levels of avoidance suggest that this group is at risk for poor long term mental health adjustment.

Bryant, R.A., Mastrodomenico, J., Felmingham, K., Hopwood, S., Kenny, L., Kandris, E., Cahill, C., & Creamer, M. (In Press). Treatment of Acute Stress Disorder: A Randomized Controlled Trial. *Archives of General Psychiatry*.

This trial compared exposure therapy, cognitive restructuring and a wait-list condition for treating people with ASD. Exposure therapy did not lead to higher dropout rates, but it did result in lower rates of PTSD post-treatment and 6-month follow-up.

Creamer, M. & Parslow, R. (In Press). Trauma Exposure and Posttraumatic Stress Disorder in the Elderly: A Community Prevalence Study. *American Journal of Geriatric Psychiatry*.

This analysis of data from the National MH Survey revealed that, surprisingly, reported lifetime exposure to trauma declines with age – this could be a reporting bias, or simply a reappraisal of what people consider traumatic. In this sample, PTSD was almost non-existent in the elderly although many still reported unpleasant intrusive memories of prior trauma.

Phelps, A., Forbes, D., & Creamer, M. (In Press). Understanding Posttraumatic Nightmares: An Empirical and Conceptual Review. *Clinical Psychology Review*.

Posttraumatic nightmares are a prevalent and distressing symptom of PTSD. Current models of PTSD only account for nightmares that accurately replay the trauma, not those that are symbolic of the event. This paper proposes three alternate explanatory models that explain the full range of nightmares following trauma.