

#Abstract 1: Teresa Pirro et Rachel Langevin

Title: Examining the Mediating Effects of Dissociation in Maternal Histories of Maltreatment and Mother-Infant Bonding

Child maltreatment (CM) is a worldwide concern. It is important to understand the intergenerational cycles of CM, pregnancy and the perinatal period, since this is a period that overlaps the mothers' history of CM with that of their infant. The aim of this study was to examine how maternal dissociation potentially mediates the association between maternal histories of CM (total and by subtypes) and mother-infant bonding at 3 months postpartum. Pregnant women between the ages of 18 to 29 partook in this study by completing online surveys at two time points (Time 1 n=85, and Time 2 n=57). A mediation model was tested using SPSS Process. CM was associated with maternal dissociation prenatally. Maternal dissociation was also associated with postnatal mother-infant bonding. Models for the four CM subtypes (i.e., neglect, physical abuse, emotional maltreatment, and sexual abuse) yielded similar results. Ultimately, this study bridged some of the gaps in the literature related to longitudinally examining the associations between maternal histories of different subtypes of CM, dissociation, and early mother-infant bonding.

Learning Objectives: During this poster session, the audience will learn about the impacts of maternal histories of child maltreatment (CM) on mother-infant bonding through the mediator of maternal dissociation. A focus will be on explaining the direct and indirect paths for the complete CM model, as well as the four models for the subtypes of CM (i.e., neglect, physical abuse, emotional maltreatment, and sexual abuse).

#Abstract 2: Myriam Tanguay-Sela, Alexandra Thérond, Vanessa McGrory et Pascale Brillon

Title: Exploring the Impact of Trauma Coping Self-Efficacy and Negative Beliefs on the Mental Health of Homicidally Bereaved Individuals

Losing a loved one to homicide is a traumatic event known for its potentially severe mental health consequences. In this study, we investigated the link between the negative beliefs held by individuals bereaved by homicide and their distress symptoms, encompassing post-traumatic stress disorder, prolonged grief disorder, and major depressive disorder. Using mediation modeling, we explored whether trauma coping self-efficacy (i.e., a person's belief in their ability to cope with their traumatic grief), could explain the relationship between negative beliefs and distress symptoms in 102 family members of homicide victims. The analyses revealed that self-efficacy entirely mediated the relationships between negative beliefs and symptoms of post-traumatic stress disorder, prolonged grief disorder and major depressive disorder when accounting for participant age, gender, and time since the loss. These findings underscore the significance of self-efficacy in understanding the distress experienced by homicidally bereaved individuals, which highlights the need for interventions to improve self-efficacy.

Learning objectives:

1. Understand the way in which trauma coping self-efficacy influences the association between the negative beliefs held by individuals bereaved by homicide and their mental health consequences.
2. Describe the relationship between the negative beliefs of homicidally bereaved individuals and their degree of trauma coping self-efficacy.
3. Highlight the significance of focusing on trauma coping self-efficacy as a clinical approach to enhance the mental well-being of homicidally bereaved individuals.

#Abstract 3 : Justine Cinq-Mars et Isabelle Blanchette

Titre: Fuir son pays pour atteindre la sécurité : Impacts sur la mémoire autobiographique

Le trouble de stress post-traumatique (TSPT) peut s'accompagner d'une altération de la mémoire autobiographique. Les personnes réfugiées présentent un risque accru de développer un TSPT étant donné leur exposition à plusieurs événements traumatisques. La présente étude a examiné l'association entre la spécificité de la mémoire et les symptômes du TSPT chez deux groupes de personnes réfugiées : 1) ayant été exposé directement à la guerre ($n=14$), 2) ayant fui pour d'autres raisons que la guerre (persécutions et menaces, $n=13$). Nous avons administré la Tâche de Mémoire Autobiographique avec cinq mots-clés positifs et cinq mots-clés négatifs. Dans le groupe sans exposition à la guerre, la sévérité du TSPT était associée à une spécificité de mémoire réduite pour les mots-clés négatifs. Dans le groupe exposé à la guerre, le schéma inverse est apparu. Les résultats sont discutés en tenant compte des modèles cognitifs de la mémoire autobiographique et des possibles différences culturelles.

Objectifs d'apprentissage :

1. Comprendre la pertinence de la mémoire autobiographique auprès des personnes réfugiées.
2. Explorer les effets des traumatismes sur la mémoire autobiographique, en tenant compte des différences culturelles.
3. Approfondir notre compréhension des facteurs cruciaux à considérer lors de la réalisation d'études auprès de personnes réfugiées.

#Abstract 4 : Youssouf Aidara, Brendan Flores, Mya Dockrill et Guido Simonelli

Titre : Rêver d'Équité : Le Sommeil chez les Groupes Minoritaires

Cette étude vise principalement à recenser la recherche sur les problèmes chez les groupes minoritaires au Canada afin d'adapter les interventions visant à améliorer leur sommeil. Comme des évidences scientifiques suggèrent que les symptômes de TSPT sont une cause potentielle des difficultés de sommeil chez ces populations, un objectif secondaire de cette revue est d'évaluer les évidences sur cette étiologie. En suivant les directives de PRISMA, une recherche systématique fut conduite sur MEDLINE, Embase, PsycINFO et CINAHL. Les études expérimentales/quasi-expérimentales évaluant les difficultés de sommeil chez des minorités furent incluses. Les titres/résumés ($n = 14112$) et textes intégraux ($n = 240$) furent examinés de manière indépendante par deux examinateurs, menant à l'inclusion de 98 articles. Les résultats préliminaires suggèrent un manque de recherche sur les problèmes de sommeil chez les minorités canadiennes, pourtant crucial pour le développement d'interventions visant à améliorer leur sommeil.

Objectifs d'apprentissage :

1. Comprendre les inégalités de santé du sommeil parmi les groupes minoritaires au Canada.
2. Identifier les lacunes dans la recherche concernant les problèmes de sommeil et leur étiologie dans les populations minoritaires.
3. Explorer comment une approche de recherche systématique peut guider les futures interventions pour répondre aux besoins des minorités en matière de sommeil.

#Abstract 5 : Emilie Rudd, Justine Fortin, Roxanne Leblanc et Alain Brunet

Titre : L'expérience masculine face au cancer du sein, une réalité méconnue : Une revue systématique et une méta-synthèse

Le cancer du sein, bien que principalement associé aux femmes, affecte également les hommes, représentant 1% des cas. Cependant, les traitements et les services en oncologie sont basés sur l'expérience féminine puisqu'il n'existe pas de cadre complet pour les hommes. Cette revue systématique et méta-synthèse vise à synthétiser les récits de cancer sur sein chez les hommes pour comparer l'expérience vécue entre les deux sexes. En utilisant la méthodologie PRISMA, six bases de données ont été consultées pour identifier ces récits et ensuite les analyser selon une méthode interprétative. L'échantillon final comprend 38 études et 586 hommes. Les résultats ont mis en évidence 14 thèmes, dont la stigmatisation de vivre avec une "maladie de femme". Ces thèmes ont permis de créer un cadre théorique de la Trajectoire du cancer du sein chez l'homme (TMBC), offrant une base empirique pour les recherches futures et un guide pour les soins en oncologie.

Objectifs d'apprentissage : Mieux comprendre la réalité des hommes vivant avec le cancer du sein afin de réduire la stigmatisation et de développer des traitements plus adaptés à leur réalité.

#Abstract 6 : Suzanne Dupont, Yasmine Benzidane, Daniel Saumier et Alain Brunet

Titre : Conseils-scientifiques concernant les interventions psychothérapeutiques pour les troubles de stress post-traumatique et les troubles d'alcoolisme et de toxicomanie concomitants

Lors du traitement d'un.e client.e présentant à la fois un Trouble de Stress Post-Traumatique (TSPT) et un Trouble Lié à l'Usage d'une Substance (TLUS), le.la thérapeute sera donc confronté.e à la décision de traiter les deux troubles de manière séquentielle ou simultanée. Certain.e.s thérapeutes peuvent estimer que les interventions relatives au TSPT doivent être prioritaires. À l'inverse, d'autres peuvent penser qu'il faut d'abord s'occuper d'un TLUS, si l'on croit que le TLUS nuira à la capacité du client d'assister aux séances de traitement et de s'engager dans le travail thérapeutique. Lors de cette présentation, on s'interrogera sur la gestion de ses troubles lorsqu'ils sont concomitants, avec une considération des évidences empiriques concernant la séquence appropriée de leur traitement.

Objectives d'apprentissage :

1. Mieux comprendre pourquoi les TSPT et les TLUS coexistent.
2. Recevoir un aperçu des thérapies pour les TSPT et les TLUS.
3. Obtenir un aperçu des méthodes de traitement des TSPT/TLUS qui sont centrés ou non-centrées sur le traumatisme.
4. Se familiariser à propos des données probantes concernant les traitements psychothérapeutiques chez les individus souffrant conjointement d'un TSPT et d'un TLUS.

#Abstract 7 : Alexandra Aliferis, Chloe Muller et Alain Brunet

Title : Use of Reconsolidation Therapy to treat posttraumatic stress disorder caused by anaesthesia awareness with recall

This case study describes the success of Reconsolidation Therapy (RT) to treat PTSD caused by anesthesia awareness with recall (AAWR) during a session of electroconvulsive therapy (ECT) for the management of treatment-resistant bipolar disorder in a 46-year-old white outpatient woman. AAWR is a rare complication where a patient under general anesthesia perceives and recalls sensory experiences during the medical procedure. AAWR can cause psychological trauma and possibly lead to PTSD, which can make a patient refuse or withdraw from care. In this case study, the patient described was too traumatized to continue her ECT therapy after experiencing AAWR twice during ECT sessions. RT, using the beta-blocker propranolol, has been shown to be 80% effective for the treatment of PTSD by blocking emotional memory reconsolidation of a traumatic event. After undergoing RT, composed of 6 weekly 25-min treatment sessions, the patient reported a 70% reduction of PTSD symptoms, assessed with the PCL-5. This case study suggests that RT can be highly effective in the treatment of PTSD induced by AARW.

Learning objectives:

1. RT is 80% effective for acute (≥ 1 month) and chronic (> 6 months) PTSD from single major psychological trauma. In this case it was also effective for a trauma experienced more than once.
2. Audience members will learn the basic procedure of RT (i.e. six 25-min treatment sessions, trauma narrative)
3. Audience will learn about concepts of memory consolidation and blocking emotional memory reconsolidation with beta blockers.

#Abstract 8: Houdaifa Maria et Fellah Niamat

Title: Psychological barriers to recovery in generational trauma in addiction

Our research offers an exploration of the intricate challenges faced by individuals seeking recovery from families marked by generational trauma and addiction. The research aims to illuminate the complexities at play and highlight the key psychological barriers, and their relation to generational trauma that hinders an addict's journey toward healing and sobriety. We aim to uncover various maladaptive coping mechanisms developed within these family systems, such as enablement. Furthermore, we aim to uncover the stigmatized sentiments surrounding addiction and recovery.

This will be achieved through secondary research analysis. Additionally, the research delves into the effects of societal stigmatization and shame. By emphasizing stories of resilience and healing, the project seeks to inspire hope even in the face of generational trauma and addiction and carve a path toward destigmatization. Ultimately, the audience will gain a deeper appreciation of the psychological nuances involved, equipping them with insights to offer more compassionate and effective support to those on the path to recovery.

Learning objectives:

- Audience will gain insight into the multifaceted nature of generational trauma and addiction and how they intersect to create complex psychological barriers.
- Learn about the historical and familial factors that contribute to the development of these barriers, enhancing comprehension of their deep-seated nature.
- Explore and recognize specific psychological barriers that individuals from families with a history of generational trauma and addiction commonly encounter when seeking recovery.
- Gain a nuanced understanding of the emotional, cognitive, and behavioral obstacles that can impede the recovery process.
- Discover strategies and insights for fostering a more compassionate and understanding approach to addiction treatment and recovery support for individuals with generational trauma.
- Learn about the importance of culturally sensitive and trauma-informed care, as well as the role of resilience and healing in the recovery journey.

#Abstract 9 : Samah Ellithi, Chloe Muller, Daniel Saumier et Alain Brunet

Title: Investigating the Effects of Pre-Reactivation Propranolol Therapy on Quality of Sleep and Nightmares: a Randomized Controlled Trial

Sleep disturbances were once considered secondary symptoms of PTSD but their persistence post-treatment point to their crucial role as contributors and maintaining factors of the condition. Furthermore, the adverse physical and psychological impacts associated with sleep disturbances call for the development of sleep-focused interventions for PTSD patients. This study extends prior work on propranolol treatment for PTSD and explores reconsolidation therapy's effects on sleep quality and nightmares in 60 long-standing PTSD patients in a 6-week, double-blind, placebo-controlled trial. Administering either a placebo or propranolol 90 minutes before weekly memory reactivation sessions, the results revealed that reconsolidation therapy offers a promising approach to address sleep-related issues in PTSD. Indeed, while the placebo group regressed to baseline scores at T26, the propranolol group were still doing better than at baseline. In conclusion, this study underscores the potential of reconsolidation therapy in managing sleep disturbances in PTSD, especially nightmares, emphasizing the need to integrate sleep-focused interventions into PTSD treatment strategies due to their central role in the disorder.

#Abstract 10: Maryam Ratemi, Susana Y. Wang Fu et Matthew P. H. Gardner

Title: Expressing Generalized Learning: The Road to Exploring Overgeneralization in Mental Disorders

Efficient information processing relies on generalized knowledge. However, disruptions in the ability to appropriately generalize information, particularly in the form of overgeneralization, have been implicated in a variety of mental health conditions (e.g., depression, anxiety disorders, and PTSD). To explore overgeneralization, a basic measure of generalization is essential. As such, we assessed generalized learning in 48 rats (24 males, 24 females) via a novel acquired equivalence task. In this task, two sets of auditory cues were paired with a different visual stimulus, with shared associations expected to facilitate reward outcome generalization. Subjects indeed exhibited reward generalization, showing increased responses to cues sharing reinforced associations compared to nonreinforced ones. Notably, females demonstrated generalized learning, while males did not. Prospectively, we plan to use this task to investigate the orbitofrontal cortex's role in learned generalization by employing causal inactivation methods (e.g., DREADDs), to provide insights into the neurobiology of overgeneralization in mental disorders.

Learning objectives:

- Explain the advantages of generalization and the implications of its disruptions (overgeneralization) for mental health conditions.
- Define overgeneralization in the context of mental health, with a focus on conditions like PTSD. - Highlight the role of overgeneralization in exacerbating psychiatric comorbidities.
- Describe a novel acquired equivalence paradigm and its validation for measuring generalization, and prospectively, overgeneralization.
- Highlight the importance of understanding these processes in the context of real-world traumatic experiences.
- Discuss potential clinical implications of the research findings, including how they might inform therapeutic approaches for individuals with mental health conditions that involve overgeneralization symptoms.
- Describe the use of causal inactivation methods like DREADDs to investigate the neurobiological underpinnings of overgeneralization in mental disorders
- Encourage the exploration of future research avenues that can build upon this study's findings and expand our understanding of the relationship between generalized learning and mental health.
- Consider the broader context of war, exile, and psychological trauma and how the concepts of generalized learning and overgeneralization may be relevant.
- Provide the opportunity to engage in a discussion related to the presented research and its implications for the fields of psychology, neuroscience, and mental health.

#Abstract 11 : Marjolaine Rivest-Beauregard, Manuela Ferrari et Alain Brunet

Title: Trajectoires de symptômes liés au stress et au trauma pendant la pandémie de la COVID-19 : Une étude internationale.

Selon Bonnano, après avoir été exposé à un événement potentiellement traumatisant, ou stressant, un individu peut présenter des symptômes liés au stress et trauma dans l'une des quatre trajectoires suivantes : chronique, aiguë, différée et résiliente. Pour mieux comprendre les réactions psychologiques à la pandémie, nous avons fait des analyses de classes latentes confirmatoires afin de valider le modèle de Bonnano auprès de 758 adultes suivis pendant 8 mois. Nos résultats suggèrent que le modèle à 4 facteurs ne capture pas nos données de manière optimale. Plusieurs facteurs peuvent expliquer cette divergence. Étant donné l'hétérogénéité des événements causés par la pandémie, et sa nature cyclique, il est possible que plus de 4 trajectoires soient nécessaires afin de bien représenter l'évolution des symptômes liés au stress et au trauma. De plus, les études de trajectoires existantes sont d'ampleur nationale. Différentes trajectoires pourraient donc être retrouvées d'un pays à l'autre.

Learning objectives :

1. Comprendre le modèle de trajectoires de Bonnano (modèle CARD) et son application à la suite d'événements potentiellement traumatisants;
2. Identifier différentes variables pouvant expliquer la différence entre les modèles de classes latentes et le nombre de trajectoires obtenues d'un échantillon à un autre.

#Abstract 12: Margaux Bouillard, Nomi Rubin, Chloe Muller, Anouchka Debionne, Polina Iourtchenko, Daniel Saumier et Alain Brunet

Title: Treating Post-Traumatic Stress Disorder: International Guidelines

This poster outlines eleven key international guidelines for the treatment of PTSD, focusing on psychological treatments endorsed by renowned organizations, including the American Psychiatric Association, World Health Organization and others. These guidelines were selected as they are the most widely recognized international guidelines on PTSD paving the way for improved treatment options beyond medications. An electronic database search was conducted to retrieve the most current information on treatments for PTSD. The aim is to potentially reduce the time clinicians allocate to less effective or less robust treatments, advancing the quality-of-care PTSD patients receive. The hope is for the audience to develop a greater understanding of the diagnosis of PTSD, and any comorbid disorders or symptoms such as stress and anxiety, considering its global impact, and recognize that guidelines can vary between countries due to differences in research, healthcare systems and resources.

Learning objectives:

1. Increasing awareness of commonly used PTSD treatments to empower patients and doctors to make informed decisions for effective relief.
2. Differentiating between available PTSD treatments and understanding their suitability based on individualized diagnoses.
3. Offering valuable insights to guide future research and clinical practices in the field.
4. Emphasizing the importance of stress reduction in managing PTSD and comorbid disorders

#Abstract 13: Yang Lin, Saumier, Michelle Lonergan, Chloe Muller, Suzanne Dupont et Alain Brunet

Title: L'efficacité du blocage de la reconsolidation mnésique sous propranolol: Une analyse de la dose-réponse.

La thérapie de la reconsolidation est un traitement prometteur pour les troubles liés au stress et au trauma qui aurait pour effet de compenser les limites des traitements actuels de première ligne. Toutefois, ce traitement en cours de développement n'a peut-être pas atteint son efficacité optimale. L'étude présentée a examiné l'impact du dosage de propranolol sur l'efficacité du traitement. Les données des quatre essais précédents employant le protocole du blocage de la reconsolidation sous propranolol en six séances étaient incluses dans la présente étude. Les participants étaient regroupés en deux groupes en fonction du dosage. L'analyse principale était le modèle mixte (Dose; 1.67mg/kg vs 1mg/kg et Temps; 7 séances) sur les scores moyens des deux échelles *PTSD checklist* et *Impact of Event Scale*. Les résultats ont indiqué que le groupe ayant reçu une moins grande dose présentait une plus grande amélioration de symptômes au cours des séances de traitement. L'analyse de corrélation entre le niveau de dose de propranolol (40 mg, 50 mg, 60 mg, 70 mg etc.) et le changement dans les symptômes a confirmé les résultats de première analyse. En présence de certains facteurs confondants dans le présent échantillon (p. ex. ethnicité, etc.), de futures études axées sur la dose sont nécessaires pour clarifier la relation dose-effet dans le cadre de la thérapie de reconsolidation.

#Abstract 14: Sarra Rashid, Michelle Lonergan, Jean-François Bureau, Audrey Brassard, Natacha Godbout, Katherine Péloquin & Marie-France Lafontaine

Title: The Severity of Stress Symptoms Related to an Attachment Injury in Injured Adults: The Role of Physical and Psychological Abuse in Childhood

The experience of an attachment injury in a couple relationship has been linked with injury-related stress symptoms (e.g., preoccupation, failure to adapt) for some, but not all, injured individuals. One factor that may be linked with this variability is physical and psychological abuse in childhood. In this cross-sectional study, we examined two types of childhood trauma (parental physical/psychological abuse prior to the age of 18) and the severity of injury-related stress in a sample of 529 adults who experienced an attachment injury in their current romantic relationship using independent sample t-tests. In total, 31% of participants reported physical abuse, whereas 54% reported psychological abuse by a parental figure. Although participants reported moderate to severe injury-related stress symptoms, there were no statistically significant differences between those who reported physical/psychological abuse and those who did not, suggesting that other facets of childhood maltreatment (e.g., neglect, sexual abuse) should be explored. Theoretical implications and future directions are discussed.

Learning objectives:

- To enlighten to construct of an attachment injury in couple relationships from an interpersonal trauma lens.
- To understand the theoretical links between childhood maltreatment and adjustment to an attachment injury in adult romantic relationships.
- To identify avenues for future research aimed at better understanding these links.

#Abstract 15: Yilmaz, Ece; Lonergan, Michelle; Bisson, Camille; Lafontaine, Marie-France

Title: The resolution and non-resolution of an attachment injury by a romantic partner in women from the community: Differences on sociodemographic, clinical, and linguistic dimensions.

An attachment injury can occur in couples when one partner betrays and/or abandons the other during a critical moment of need; they have been linked to relational traumas and resolution is necessary to restore well-being. No research has examined the resolution of an attachment injury in women beyond treatment-seeking couples. Moreover, the linguistic content of written accounts of attachment injuries has yet to be investigated. This study aims to address these gaps. Participants provided a written narrative of an attachment injury experienced in their current romantic relationship and completed self-report questionnaires. Compared to the group with resolved attachment injuries ($n = 47$), the group with unresolved attachment injuries ($n = 53$) was older, more likely to be married; reported infidelity, longer relationship duration, longer injury onset, higher injury-related stress, lower relationship satisfaction; used significantly fewer positive emotion words, and greater anger words in their narratives. Findings are discussed considering the implications of understanding attachment injury resolution.

Learning objectives: The present study extends current knowledge of the resolution of romantic attachment injuries to a non-treatment-seeking sample of injured partners and provides insight into the recovery process outside of therapy. Findings indicate that any individual can report various types of attachment injuries in their romantic relationship. Thus, it is important to educate and help couples resolve an injury, either through preventative measures, self-help methods, or via couple therapy, so as to minimize the impact that attachment injuries can have on emotional well-being and relationship functioning. In sum, findings from this research can inform theory and clinical practice on assessment and intervention strategies.

#Abstract 16: Josiane Laliberté, Marie-France Lafontaine, Michelle Lonergan, Camille Bisson, Audrey Brassard, Natacha Godbout, Katherine Péloquin et Jean-François Bureau

Title: The Victimization and Perpetration of Intimate Partner Physical Violence in Young Adults who Experienced an Attachment Injury in Their Romantic Relationship.

In couples, an attachment injury can occur when one partner feels abandoned/betrayed by the other at a critical time of need for support. This relational trauma may initiate a negative interaction cycle that includes victimization and perpetration of physical intimate partner violence (IPV). This study examines the prevalence of physical IPV (victimization/perpetration) in the past 3 months among young adults (18-30 years old) injured by an attachment injury more than 3 months ago. Among the 347 participants who completed self-report questionnaires online, 23.5% reported physical IPV perpetration, 20.4% reported victimization, and 15.7% reported bidirectional physical IPV (both victimization/perpetration). The average and most prevalent acts of physical IPV in this sample will be presented in light of prior research, and theoretical implications will be discussed. In conclusion, an attachment injury represents a betrayal and a breach of trust in romantic relationships and can negatively impact both partners and the relationship itself.

Learning objectives:

- To understand the theoretical overlap between the concepts of an attachment injury and IPV.
- To contextualize the rates of physical IPV among young adults who have experienced an attachment injury in light of prior research on prevalence of physical IPV among those who have not.
- To identify avenues for future research and theory aimed at better understanding the links between attachment injury and physical IPV, which can inform prevention and intervention strategies.

#Abstract 17: Élyse Gauthier, Marjolaine Rivest-Beauregard, Manuela Ferrari, Alain Brunet

Titre: Les différences entre pays et la croissance postraumatiqe en temps de pandémie de la COVID-19

Lorsque confronté à des événements potentiellement traumatisques, la réponse normative est celle de l'adaptation, puis, pour certains, il est possible d'en ressortir grandi. Ce phénomène est connu sous le nom de croissance post-traumatique (CPT). La pandémie de la COVID-19 a engendré des expériences potentiellement traumatisques. Afin d'évaluer notre capacité d'adaptation à cet événement mondial, la CPT est un élément important à explorer. Puisque la chronologie des évènements, les mesures sanitaires et les conséquences de la pandémie ont variés d'un pays à l'autre, il est alors possible que le CPT varie aussi. Un échantillon de 313 participants international (Canada, États-Unis, France et Italie) a répondu à un questionnaire en ligne ainsi qu'à une version courte du « Posttraumatic Growth Inventory ». Un ANOVA comparant la CPT par pays de résidence a été généré et suggère qu'il n'y a pas de différence statistiquement significative. Cela propose que le pays de résidence n'est pas un élément ayant eu une forte incidence sur la CPT de notre échantillon. Des éléments individuels et expérientiels, devraient être pris en compte lors de futures recherches.

Learning objectives :

1. Appronfondir les connaissances et la compréhension du phénomène de la croissance posttraumatique
2. Cibler les enjeux ayant un effet sur cette dernière

#Abstract 18: Inès Ait Abdelmalek et Robert-Paul Juster

Title: Resilience and PTSD Symptoms Among Sexual and Gender Minorities During the COVID-19 Crisis: A Cross-Sectional Study

The global mental health crisis brought about by the COVID-19 pandemic has placed sexual and gender minorities (SGM) at a potentially higher risk of experiencing posttraumatic stress disorder (PTSD) due to stigmatization and heightened stressors. This study explored the relationship between resilience and PTSD symptoms among SGM and cisgender-heterosexual individuals during the COVID-19 pandemic. In this cross-sectional study, 6,446 participants took part, including 1,771 SGMs and 4,614 cisgender-heterosexuals. Using the *Multidimensional Sex/Gender Measure* (MSGM), *Kinsey Scale*, *Adult Resilience Measure-Revised* (ARM-R), and *PTSD Checklist for DSM-5* (PCL-5), the research examined the inverse relationship between resilience and the severity of PTSD symptoms. It further assessed the impact of SGM status on PTSD symptoms, and its moderating effect in the resilience-PTSD relationship. Results revealed a significant inverse relationship between resilience and COVID-19 PTSD symptom severity, with higher resilience correlating with fewer symptoms. SGM status significantly predicted PTSD severity, with sexual and gender minorities experiencing heightened symptoms compared to cisgender and heterosexual counterparts. However, no significant moderating effect of sexual orientation or gender identity on the resilience-PTSD relationship was found, pointing to other influencing sociodemographic and psychosocial factors. This study reveals resilience as integral to reducing PTSD symptoms during the pandemic, consistent across all sexual and gender identities. It stresses the need for mental health strategies that recognize the specific adversities of diverse individuals, thereby enriching our understanding of mental health resilience amidst global crises.

Learning objectives: This study aims to emphasize the pandemic's impact on the mental health of sexual and gender minorities, particularly regarding PTSD symptoms. It underscores the pivotal role of resilience in reducing PTSD symptom severity, irrespective of sexual orientation or gender identity. Furthermore, it highlights the importance of tailoring mental health interventions to address the unique challenges faced by this diverse group during the crisis.

#Abstract 19: Hadia Mustansir

Title: Exploring the neurophysiology of regular THC usage with stress induced by ADHD on the Endocannabinoid System (eCS): Literature Review Paper

THC is a psychoactive component of the plant cannabis and is used in various ways. Previous studies have shown a relationship between PTSD and ADHD disorders being the leading cause of stress and ultimately using THC as a coping mechanism. However, detailed research is yet required on the effects of regular cannabis use to cope with stress caused by ADHD on the Endocannabinoid System (eCS), which is one of the main pathways to regulate homeostasis through functional connectivity in various brain regions to cope with stress and threatening events (Gunduz-Cinar, 2021). This review paper, yet to be published, has explored 20+ research papers, from 1985-2023 and will 1) highlight the neurochemical pathway of eCS and its reaction to regular cannabis use, 2) the effects of ADHD on the eCS, 3) and, explore the eCS as a therapeutic mechanism in aiding with neuropsychiatric disorders, while considering regular cannabis use. It has been found that regular cannabis use dysregulates the eCS, specifically the endocannabinoid receptors, which have similar effects from stress caused by neurodevelopmental disorders. Although THC could help with reducing stress, there is still a neurobiological component in the eCS that could in fact be dysregulated and induce similar stress to one caused by ADHD. Clinicians and other researchers can benefit from this paper to implement potential psychotherapies and pharmacological interventions to aid individuals who undergo a disorder like ADHD, or PTSD with using regular cannabis. However, more studies need to be conducted on excessive THC usage, and see if there are any permanent effects on the eCS.

Learning objectives: The focus of this paper is on understanding the impact stress from ADHD, and PTSD have on the eCS, along with how a coping mechanism, like THC can also dysregulate the system. Clinicians and other researchers can benefit from this paper to implement potential psychotherapies and pharmacological interventions to aid individuals who undergo a disorder like ADHD, or PTSD with using regular cannabis.