S2.1

Prevalence Matters: The Influence of Socio-Demographic and Loss-Related Variables on the **Development of Prolonged Grief Disorder**

Manik Djelantik^{a,b}, Birgit Wagner^c, Suzan Soydas^{a,b}, and Clare Killikelly^d

^aUtrecht University, the Netherlands; ^bArq Psychotrauma Expert Group/Foundation '45, the Netherlands; 'Medical School Berlin, Germany; ^dUniversity of Zurich, Switzerland

Track: Assessment & Diagnosis

A meta-analysis is currently being conducted on prolonged grief disorder (PGD) following unnatural losses. Preliminary results indicate a much higher prevalence than the prevalence of PGD following natural losses. In addition, other loss-related variables may be associated with PGD prevalence. This symposium aims to illustrate the clinical implications of these 'prevalence matters' by presenting two studies of large help-seeking samples of bereaved individuals. The first study is based on data from 942 Western homicidally bereaved individuals. The second study examined data from 2404 Arabic speaking bereaved individuals. The third study introduces a culturally-sensitive online assessment measure of PGD for Swiss, Japanese and Chinese bereaved individuals.

Prolonged Grief Disorder in Bereaved Individuals Following Unnatural Losses: Preliminary Findings

Manik Djelantik^{a,b}, Geert Smid^b, Anna Mroz^a, Rolf Kleber^a, and Paul Boelen^a

^aUtrecht University, the Netherlands; ^bArq Psychotrauma Expert Group/Foundation '45, the Netherlands

Background: Previous research has indicated that 10% of naturally bereaved individuals develops prolonged grief disorder (PGD). Less is known about the prevalence of PGD following unnatural deaths, such as accidents, disasters, suicides or homicides. Objective: The aim of the current study is to compute the prevalence of PGD and to determine possible predictors. Method: A literature search and a meta-analysis are currently being performed to calculate the pooled prevalence rate of PGD. Multivariate meta-regression is used to explore heterogeneity among the studies. Results: Preliminary findings suggest that the prevalence of PGD following unnatural losses is much higher than PGD following natural losses. Loss-related variables

be associated with the prevalence rate. Conclusions: This study could provide valuable information which may help to identify PGD and underscores the importance of addressing PGD in individuals affected by loss and trauma.

Prevalence of Prolonged Grief Disorder in **Arabic-Speaking Help-Seeking Populations**

Birgit Wagner^a, Maria Böttche^b, and Christine Knaevelsrud^a

^aDepartment of Clinical Psychology, Medical School Berlin, Germany; ^bFree University Berlin, Germany

Background: In the past 30 years, war and conflicts have led to high rates of losses among people in the Middle East. However, few studies to date have measured prolonged grief disorder in this population. Method: Prevalence of prolonged grief disorder, sociodemographic characteristics, PTBS and Depression were examined in a help-seeking sample (N = 2404) of an Internet-based intervention for PTBS. Grief-related symptoms were assessed with the Inventory of Complicated Grief, depression with the Hopkins Symptom Checklist and disorder posttraumatic stress with the Posttraumatic Diagnostic Scale at pre-treatment. Results: The results reveal a prevalence rate of 7.4% for prolonged grief disorder: 23% of the participants experienced the killing of a family member and 93% lost a significant person under other traumatic circumstances. Conclusions: This study provides evidence that the prevalence of prolonged grief disorder in Arabic-speaking countries is comparable to Western samples and have substantial mental health implications for those suffering of a pathological grieving process.

Prevalence and Predictors of Psychiatric Disorders in a Large Help-Seeking Sample of **Homicidally Bereaved Persons**

Suzan Soydas^{a,b}, Geert Smid^a, Barbara Goodfellow^c, Rachel Wilson^c, and Paul Boelen^b

^aArq Psychotrauma Expert Group/Foundation Netherlands; bUtrecht University, the Netherlands; cASSIST Trauma Care, UK

Background: Literature on grief reactions in the aftermath of a homicide is scarce and inconclusive, often describing small and heterogenous (sub)samples, yielding varying results. Method: Data of 942 individuals who are bereaved due to homicide were analysed. Data were obtained from ASSIST Trauma Care UK, a specialist Third Sector (Not-for-Profit) Organization providing specialist therapeutic intervention to homicide survivors. Measures included questionnaires assessing symptoms of PTSD, PGD, anxiety and depression, as well as socio-demographic and homicide related characteristics. *Results*: Prevalence rates of PTSD, PGD and clinically relevant anxiety and depression were generally quite high. Status of the judicial process was one of the variables rendering people prone to elevated distress. *Conclusions*: This study provides insight into the prevalence and correlates of grief-related disorders following bereavement through homicide. Information obtained can inform the improvement of treatment options.

MAPAsia Measurement and Assessment of Prolonged Grief Disorder in Swiss, Japanese and Chinese Bereaved Adults: Preliminary Findings

Clare Killikelly^a, Eva Stelzer^b, Ningning Zhou^c, and Andreas Maercker^a

^aUniversity of Zurich, Switzerland; ^bUniversity of Arizona, USA; ^cBeijing Normal University, China

Background: The definition of prolonged grief disorder (PGD) for the ICD-11 is based on symptoms found in Western society and guidelines for diagnosis have been preliminarily validated in this context. The validity and acceptability of these diagnostic guidelines in Japan and China is currently unknown. The present project explores similarities and contrasts in purported symptoms associated with grief (including somatization and the identification of cultural idioms of grief distress) in detail in Chinese, Japan and Swiss bereaved individuals. Objective: The overall aim of the study is to develop a culturally-sensitive online assessment measure of PGD for Swiss, Japanese and Chinese bereaved. Method: The study consists of two sub-studies: semi-structured interviews (Sub-study I) explored key informants understanding of grief (N = 20). The International Prolonged Grief Disorder Scale (IPGDS) was adapted accordingly. Focus groups with bereaved participants adapted the IPGDS to an online (mobile or web-based) format. The acceptability and feasibility of the online IPGDS along with preliminary psychometric validation will be examined with battery of questionnaires (N = 200 participants in each culture) (Sub-study 2). Results: Sub-study 1: culturally sensitive versions of the IPGDS have been developed from qualitative interviews with Swiss, Japanese and Chinese health care workers. The beta draft of an online version of the IPGDS is currently piloted for feasibility, acceptability and preliminary psychometric properties. Conclusion: This is the first study to explore grief crossculturally in Japan, China and Switzerland and to develop a culturally sensitive measure of grief based on the new ICD-11 criteria.

S2.2

Posttraumatic Stress Disorder due to Early Childhood Trauma: Research on Innovative Trauma-Focused Treatments

Maartje Schoorl^a, Danielle A. C. Oprel^{a,b}, Sandra Raabe^c, and Simone Menninga^d

^aLeiden University, the Netherlands; ^bPsyQ psychotrauma, the Netherlands; ^cUniversity of Amsterdam, the Netherlands; ^dPsyQ Beverwijk, the Netherlands

Track: Child Trauma

Both national and international, a debate is on-going regarding the best treatment for patients with PTSD related to childhood abuse (CA-PTSD). As a result, practitioners may feel helpless: Which treatment is best for my complex patient, and which approach fits when? This symposium contributes an answer to the first question. We present research, in different stages, on innovative applications of existing treatments for patients with CA-PTSD. More specifically, we focus on working alliances in innovative forms of trauma-focused treatment, on working elements of trauma-focused treatment from a patient perspective and on the effect of additional skills training on Imagery rescripting. Our goal is to give practitioners better tools and to improve treatment outcome for this vulnerable patient group.

Working Alliance in Trauma-Focused Treatment for Patients with Childhood Abuse-Related PTSD

Danielle Oprel^{a,b}, C. M. Hoeboer^a, M. Schoorl^b, R. A. De Kleine^b, A. Van Minnen^c, and W. van der Does^b

^aPsyQ Psychotrauma, the Netherlands; ^bLeiden University, the Netherlands; ^cPSYTREC, the Netherlands

Background: Interpersonal distrust, problems in affect regulation and a negative self-concept are common in patients with childhood abuse-related posttraumatic stress disorder (CA-PTSD) (Cloitre et al., 2002). The lack of affect regulation skills may compromise the formation of an effective working alliance (WA) (Cloitre et al., 2004). In the context of a clinical trial, we compared WA during exposure treatment with two variants of exposure treatment in 150 patients. One variant involves skills training (which may facilitate WA); the other is intensive treatment involving two rotating therapists (which may compromise WA). Objective: To compare working alliance during three variants of prolonged exposure. Method: Working alliance was measured with the Working Alliance Inventory (WAI) (Horvarth & Greenberg, 1989). Assessments were made after four sessions. Results: Analyses are