

Sunday 16 June 2019

Day #3

Parallel session #7 – Flashtalk session F7

10:00–11:15

**F7.1****Risk factors for the development of post-traumatic medical stress following paediatric hospitalization for surgery**Amichai Ben Ari<sup>a,b</sup> and Daniella Margalit<sup>b</sup><sup>a</sup>Hadassah Medical Center, Israel; <sup>b</sup>Ariel University, Israel

Track: Child Trauma

*Background:* Hospitalization for surgery is a source of traumatic stress and can lead to long-term symptoms, affecting the child's functioning and physical recovery. Published data in this field is scarce. *Objective:* The aim of this study was to discover the risk factors for the development of medical posttraumatic stress in children aged 1–12 after hospitalization for surgery. *Method:* The study included 230 children, aged 1–12, who were hospitalized in the Pediatric Surgery Department. Due to the young age of the children, the study was based on parents' reports. The study included a baseline assessment at the time of the hospitalization and an outcome evaluation at 3–5 months after discharge. The study used the CBCL, PAT and TESI-PR questionnaires to assess the risk factors and the UCLA-PTSD and PTSDSSI questionnaires to assess the level of child distress. Pearson tests and hierarchical regression were used to identify the risk factors for PMTS among children. *Results:* Hierarchical regression indicates that among the risk factors for post-traumatic stress among children after surgery are various characteristics of the surgical hospitalization and treatment, the extent of the parent's distress and his/her tendency to hide from the child medical information about his medical condition. *Conclusions:* We will discuss the implications of these results on the prevention or the early detection of posttraumatic medical stress following hospitalization in paediatric surgery.

**F7.2****Mothers' emotions after paediatric burn injury: longitudinal associations with posttraumatic stress- and depressive symptoms**Marthe R. Egberts<sup>a,b</sup>, Iris Engelhard<sup>b</sup>, Rens van de Schoot<sup>b</sup>, Anne Bakker<sup>c</sup>, Rinie Geenen<sup>b</sup>, Peter van der Heijden<sup>b</sup>, and Nancy van Loey<sup>a</sup><sup>a</sup>Association of Dutch Burn Centers, the Netherlands; <sup>b</sup>Utrecht University, the Netherlands; <sup>c</sup>Amsterdam UMC, University of Amsterdam, the Netherlands

Track: Child Trauma

*Background:* A child's burn injury is an emotional experience that places parents at risk of developing posttraumatic stress disorder (PTSD) symptoms. Although the wide range of emotions implicated in PTSD is acknowledged, longitudinal research examining changes in emotions and PTSD over time is scarce (McLean & Foa, 2017). *Objective:* To examine the longitudinal relationships of mothers' trauma-related emotions with symptoms of posttraumatic stress and depression 18 months after their child's burn injury. *Method:* Mothers ( $n = 296$ ) reported intensity of burn-related emotions within the first month (T1) and at 12 months postburn (T2). The Impact of Event Scale (IES) and the depression subscale of the Hospital and Anxiety Depression Scale (HADS-D) were administered at T1 and 18 months postburn (T3). *Results:* Based on two Exploratory Factor Analyses (EFA), emotion variables were merged into two factors: basic emotions (fear, sadness, horror and anger) and self-conscious emotions (guilt and shame). Path analyses indicated that persistence of basic emotions (from T1 to T2) was related to persistence of posttraumatic stress- and depressive symptoms. Self-conscious emotions showed concurrent associations with posttraumatic stress- and depressive symptoms at T1 and were longitudinally related to depressive, but not posttraumatic stress, symptoms. *Conclusions:* Initial high levels of basic emotions that persist appear to increase the risk of chronic posttraumatic stress and of co-occurring depressive symptoms. Over and above these relationships, self-conscious emotions are indicated to contribute to long-term depressive symptoms.

**F7.3****Profiles of positive adaptation: resilience in children and adolescents in foster care**

Katharina Sölva

University of Vienna, Austria

Track: Child Trauma

*Background:* In 2017, 8306 children and adolescents were accommodated in foster care facilities in