

Center for the Study of Traumatic Stress

Strategic Growth

2024 Annual Report

CSTS





CONTENTS

From the Director	1
Our Mission.....	3
What's New in 2024.....	4
Research.....	7
Education and Training	14
Consultations.....	18
Publications	21
Presentations, Interviews and Briefings, Awards and Appointments ..	27
CSTS Personnel.....	36
Partnerships.....	44
Funded Grants.....	48

Throughout 2024, CSTS expanded its scope and its staff (now nearly 100 personnel), launching new initiatives that underscore the Center's commitment to evidence-based approaches and proactive responses to current and emerging needs.

— Dr. Robert J. Ursano

From the Director

Now in its 37th year, the Center for the Study of Traumatic Stress (CSTS) at Uniformed Services University (USU) remains dedicated to its mission of



supporting the Department of Defense (DoD) and the Nation by conducting cutting-edge research and providing education and consultation aimed at mitigating the impact of trauma. CSTS is at the forefront of applying science-based solutions to address the behavioral health

challenges stemming from trauma, disasters, terrorism, community violence and public health threats. The CSTS mission is accomplished through leadership, research, training, education, service, outreach, collaboration, consultation and global health engagement. With its multidisciplinary and collaborative team of scientists, educators, clinicians, consultants, staff and thought leaders, CSTS advances its mission, helps sustain the Nation's readiness and contributes to the global community as an internationally renowned Center in trauma and disaster psychiatry.

Throughout 2024, CSTS expanded its scope and its staff (now nearly 100 personnel), launching new initiatives that underscore the Center's commitment to evidence-based approaches and proactive responses to current and emerging needs. CSTS has grown strategically to support the DoD and the Nation with world-class research, education and training and consultation. Below, I highlight a few notable efforts that occurred in 2024.

CSTS received funding and initiated the Suicide Avoidance Focused Enhanced Group Using Algorithm Risk Detection (SAFEGUARD) initiative.

SAFEGUARD is built from the foundational work conducted in the Army Study to Assess Risk and Resilience in Servicemembers (STARRS) epidemiological studies. Through machine learning and predictive analytics, three targeted timepoints were identified in which service members are at the greatest risk for suicide. SAFEGUARD interventions target: (1) first duty assignment (SAFEGUARD Life Skills); (2) the period following mandatory training (SAFEGUARD Life Force); and (3) the period following psychiatric hospitalization (SAFEGUARD Pathfinding). SAFEGUARD represents a culmination point for the foundational and groundbreaking research conducted in STARRS. Also in 2024, CSTS received funding for a new effort driven by Congressional interest in digital health solutions for substance abuse. CSTS established the Alcohol and Substance Use Prevention and Recovery (ASUPR) program. ASUPR will provide a platform to further evaluate and expand on much needed evidence-based programs for alcohol and substance abuse and recovery in service members. Sixteen programs are being evaluated as part of ASUPR and funding selections will be made early in 2025. CSTS also initiated the Military and Veterans Posttraumatic Stress Disorder (PTSD) Adaptive Platform Clinical Trial (M-PACT) study. M-PACT is a multi-site study across the military health system (MHS) that aims to streamline studies of different drug therapies for PTSD in service members.

CSTS also continued its support of interagency partner needs. For example, this past year the Department of Homeland Security (DHS) funded CSTS for a five-year project aimed at building the resilience of its employees. The Resilience and Stress

CSTS has grown strategically to support the DoD and the Nation with world-class research, education and training and consultation.

From the Director, continued from page 1

in Homeland Security Employees (RSHSE) program will collect data from Homeland Security Investigations (HSI) employees to understand risk and resilience factors in this population. RSHSE aims to provide the impetus for periodic health and resilience assessments that can serve as a basis for establishing evidence-based resilience programs for DHS. Similarly, CSTS has provided critical support to the National Guard Bureau (NGB) and Army National Guard (ARNG) through the establishment and growth of CSTS program areas such as consultation on integrated primary prevention (IPP) approaches and helping to establish a standard behavioral health program system of care across the 54 States and Territories.

As in past years, CSTS continued to be a leader in providing disaster psychiatry support, globally and domestically. For example, CSTS continued its support of Ukraine and Israel, providing consultation and “just-in-time” information products to help our allies and partners. In addition, CSTS and Department of Psychiatry colleagues led military-to-military engagements with our African partners of Senegal and Mozambique. CSTS consultation was also sought to help officials in Brazil deal with catastrophic flooding that occurred during the Spring of 2024. Here at home in the US, CSTS consulted with numerous agencies across the country, such as Kansas City Fire Department officials following the mass shooting at the Super Bowl parade, officials in Southern California who dealt with wildfires, and officials in Madison, Wisconsin supporting the community impacted by the Abundant Life Christian School shootings.

Our annual Amygdala, Stress, & PTSD Conference continued in 2024 with both the large conference in April of 2024 as well as a featured speaker engagement in the fall, with General (Retired) Paul Nakasone, former Director of the National Security Agency (NSA). GEN Nakasone spoke about the criticality of behavioral health and leadership in national security. Moving into 2025, the Amygdala, Stress, & PTSD Conference and our fall Lecture Series were rebranded as the Brain, Behavior, & Mind Spring Conference and Fall Lecture, a change reflecting a broader scope and focus.

In 2024, CSTS Scientists published 69 peer-reviewed manuscripts in leading national and international journals. Moreover, CSTS Scientists were active in professional conferences and meetings, giving over 100 presentations. As with the growth of our staff, capabilities and productivity, CSTS has also added new partners to its research network, ensuring that CSTS continues to deliver evidence-based solutions where and when they are needed.

In this year’s Annual Report, you will find brief summaries of new and ongoing activities. CSTS has indeed grown strategically to meet the present needs of our service members, providers and the public, while remaining vigilant for how we can best support each in the future.

Robert J. Ursano, MD
Professor of Psychiatry and Neuroscience
Department of Psychiatry
Director, Center for the Study of Traumatic Stress
Uniformed Services University

The CSTS mission is accomplished through leadership, research, training, education, service, outreach, collaboration, consultation and global health engagement.

Our Mission

CSTS supports the MHS, USU, and the mission of the DoD. The Center is committed to advancing trauma-informed care and is dedicated to furthering the Nation's understanding of the impact of trauma on individuals, families and communities. As part of our Nation's federal medical school (America's Medical School) at USU, the Center is well-positioned to rapidly respond with DoD mission-relevant activities.

The Center's work spans a broad range of trauma exposures, including combat, terrorism, natural and human-made disasters, public health threats, such as the COVID-19 pandemic, and humanitarian operations. CSTS has been involved in nearly

every major disaster our Nation has faced over the past 37 years. The Center works to ensure that behavioral health is addressed in the face of public health threats, disaster planning and disaster recovery.

Mitigating the effects of disaster and trauma in military and civilian populations builds community and national resilience. The Center informs and educates community, regional, state, national and global stakeholders in government, industry, healthcare, public health and academia. CSTS advances trauma-informed care by providing leadership in research, education, training, consultation, global health and service.



US SERVICE MEMBERS

CSTS is a multidisciplinary and multifaceted research center that possesses the capabilities to study psychiatric and psychological phenomena and their sequelae at the molecular, individual, organization, national and international levels. Our core and focused capabilities illustrate the key ways that CSTS ensures relevant research and consultation for our stakeholders.

CORE CAPABILITIES

- Rapid Response to Psychological Impact of Emerging Threats
- Disaster Psychiatry
- Public Health
- Laboratory Neuroscience
- Translational Science
- Randomized Clinical Trials
- Applied Military Research
- Cutting-Edge Statistics & Methodologies
- Program Development & Evaluation

FOCUSED CAPABILITIES

- Big Data & Machine Learning
- Early Emotional Response to Trauma & Stress
- Event-Related Disorders
- Mental Health Sequelae
- Treatment
- Sleep & Performance (Lab & Field)
- Child & Family
- Genomics

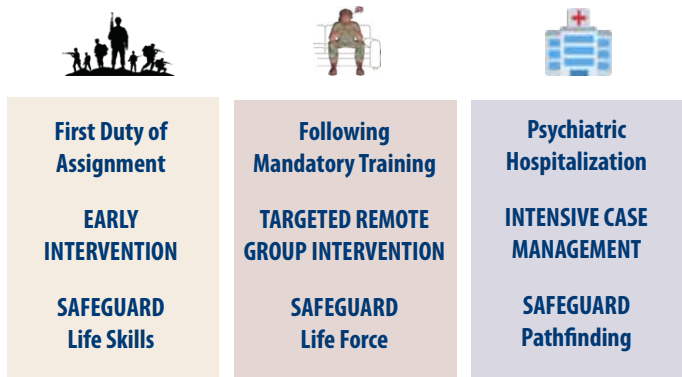
What's New in 2024

Machine Learning & Predictive Analytics Capability

In 2024, CSTS and its partners continued advancing predictive analytics to support service member mental health. Through STARRS and collaborations with USU's Center for Military Precision Health and the National Institute of Mental Health (NIMH) Psychiatric Genomics Consortium (PGC), CSTS has been at the forefront of machine learning and predictive analytics since 2015. The first STARRS publication using machine learning, Kessler et al. (2015), developed a risk model for suicide among Soldiers recently discharged after psychiatric hospitalization. Since then, STARRS Scientists have created more than 20 machine learning models to identify service members at risk of suicide at critical points in their military careers. CSTS has also applied machine learning to genetic data, publishing a study using the NIMH PGC dataset (Dunn et al., 2017). Between 2019 and 2022, STARRS investigators and partners produced six additional genetic studies, culminating in a 2023 publication on whole genome sequencing and suicide attempts among service members (Wilkerson et al., 2024). CSTS's success in identifying who is at risk, as well as when and where risk is highest, has drawn attention from the Office of the Assistant Secretary of Defense for Health Affairs (ASD-HA). In 2024, ASD-HA funded CSTS and its collaborators to apply these models in delivering precision medicine interventions. This initiative, collectively known as **SAFEGUARD** (Suicide Avoidance Focused Enhanced Group Using Algorithm Risk Detection), aims to integrate predictive analytics with scalable interventions at key stages of military service to reduce suicide risk and strengthen mental resilience. SAFEGUARD has already gained significant momentum. The III Armored Corps Commanding General has approved research activities at Fort Cavazos in Texas, intervention content and training manuals have been developed and the team has provided briefings to senior DoD and Army

leadership, including: ASD(HA), III Armored Corps Commanding General, Deputy Assistant Secretary of the Army for Military Personnel and Quality of Life, Deputy Under Secretary of the Army for Personnel and Readiness and Principal Deputy Assistant Secretary of the Army for Manpower and Reserve Affairs. With SAFEGUARD, CSTS continues to lead the way in applying machine learning and predictive analytics to enhance service member mental health and suicide prevention efforts.

SAFEGUARD INTERVENTIONS Critical Touch Points for Intervening



Alcohol and Substance Use Prevention and Recovery (ASUPR) Program

In September 2024, CSTS launched the ASUPR program to expand evidence-based programs and resources for alcohol and substance use prevention and recovery within the MHS. The ASUPR program aims to enhance access to effective support for service members by providing program consultation, evaluation, partner engagement and training resources. To date, the ASUPR program has convened more than 30 experts and stakeholders for strategic planning and program optimization. The program also received 16 project proposals, which have undergone programmatic and peer review. Final selections will be announced in 2025.

Resilience and Stress in Homeland Security Employees (RSHSE)

CSTS has initiated a five-year project, RSHSE, led by Drs. West and A. Walsh, to study resilience among HSI personnel conducting child exploitation investigations. HSI is a global leader in the fight against child exploitation, with hundreds of agents working on these highly challenging cases. CSTS Scientists are conducting interviews with HSI agents and analysts nationwide and reviewing existing research to identify factors that support or hinder resilience in this workforce. The findings will inform the development of periodic health and resilience assessments, ultimately enabling CSTS to provide actionable recommendations to the DHS leadership.

Bereaved Family Self-Care Toolkit

The Bereaved Family Self-Care Toolkit was developed by the CSTS Child & Family Program (CFP) in collaboration with the Tragedy Assistance Program for Survivors (TAPS), to support bereaved families in navigating grief. Designed as a virtual house, the toolkit features eight rooms, each representing a different aspect of grief adaptation. For example, the Living Room focuses on relationships with family, friends and children; the Kitchen focuses on healthy eating and behavior moderation; and the Bedroom focuses on emotions, grief and mental health. Each room provides resources in multiple formats,



including personal video stories from individuals sharing their grief journeys, expert discussions on grief and Prolonged Grief Disorder (PGD) and suicide prevention information. A dedicated resource section offers links to additional support. Explore the toolkit here: <https://www.cstsonline.org/bereaved-family-selfcare-toolkit/welcome>

Military and Veterans PTSD Adaptive Platform Clinical Trial (M-PACT)

M-PACT is a multi-site study designed to explore novel treatment options for PTSD in military and veteran populations. The study currently includes active intervention cohorts for fluoxetine, daridorexant and the newly added SLS-002 (intranasal ketamine). Participants are randomized into multiple cohorts, with a shared control group allowing for comparisons across all interventions. CSTS coordinates three MHS study sites: Walter Reed National Military Medical Center (WRNMMC), Alexander T. Augusta Military Medical Center (ATAMMC) and Wilford Hall Ambulatory Surgical Center (WHASC). All three sites have made significant progress in 2024, with WRNMMC securing site approval and Institutional Review Board (IRB) approval. ATAMMC and WHASC are awaiting local IRB approval and will then proceed with submission to the IRB of record. Site activation is expected in early 2025.



Brain, Behavior, & Mind Conference (Formerly Amgdala, Stress, & PTSD Conference)

Brain, Behavior, & Mind is a global forum series featuring distinguished scientists, clinicians and leaders across neuroscience, psychiatry, psychology and public health. Each event integrates cutting-edge research — from genetics to community health, and from laboratory science to clinical care — to advance

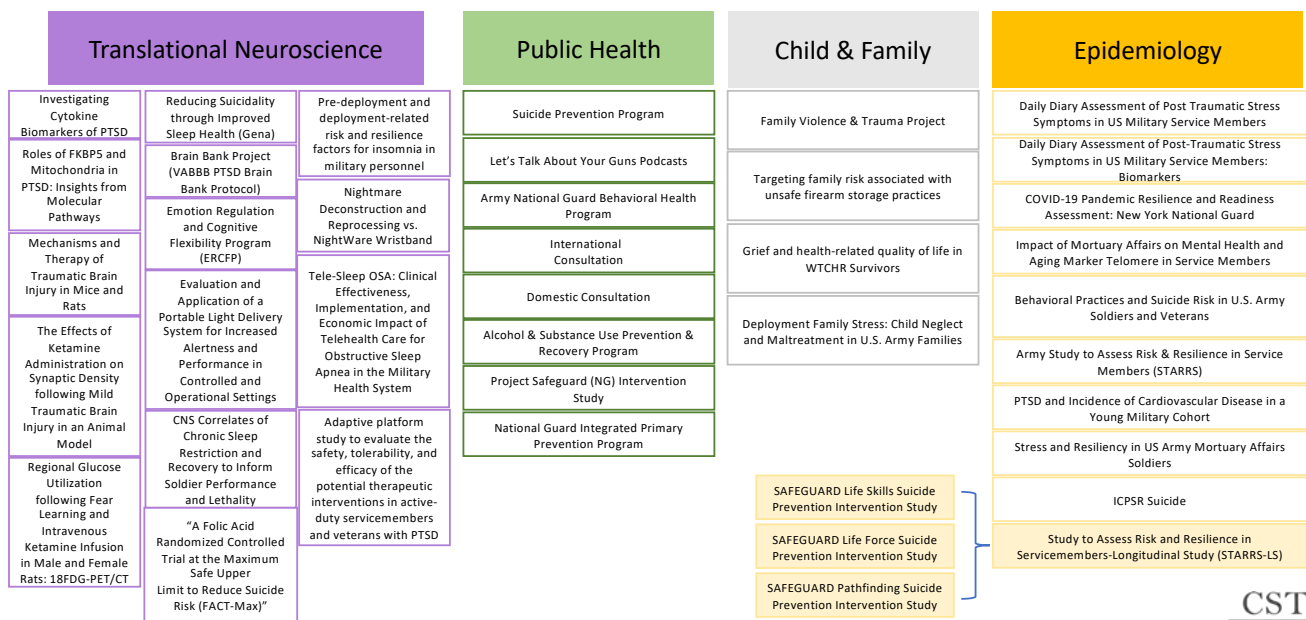
treatment approaches for individuals facing high-stress environments. Sponsored by CSTS in collaboration with USU's Department of Psychiatry, Neuroscience Program, Department of Family Medicine, Center for Deployment Psychology (CDP) and the Brain and Behavior Hub, these forums address critical issues in mental health and resilience. The Spring 2024 Conference (previously the *Amygdala, Stress, & PTSD Conference*) featured renowned speakers, including Drs. Sandro Galea, Joseph LeDoux, Karen Parker, Diego Pizzagalli and Leanne Williams. The Fall 2024 Distinguished Lecture welcomed Retired

General Paul Nakasone, former Director of the NSA and Commander of US Cyber Command.

CSTS Growth

Over the past year, CSTS has expanded significantly, securing new grants and cooperative agreements. The number of projects has grown to 40, spanning four general program areas. To support this expansion, CSTS has increased its team to nearly 100 employees, ensuring continued excellence in research and program implementation.

CSTS PROGRAM AREAS AND PROJECTS



Research

RESEARCH ON US SERVICE MEMBERS

Study to Assess Risk and Resilience in Servicemembers – Longitudinal Study (STARRS-LS)

STARRS-LS

Study to Assess Risk and Resilience in Servicemembers - Longitudinal Study

CSTS continued providing scientific leadership, project management leadership and financial oversight for STARRS-LS, a multidisciplinary, collaborative project of Army Soldiers (including regular, guard and reserve) led by USU, University of California – San Diego, Harvard and University of Michigan. STARRS-LS includes studies that involved surveys collected from representative samples of new Soldiers and the entire Army, as well as studies of suicide deaths, suicide attempts, a pre/post deployment cohort and administrative data for all Soldiers on active duty in 2004 through 2021. The project includes biological samples and a longitudinal follow-up survey component that includes a representative sample of approximately 15,000 participants. In 2024, the research team completed the fourth biannual wave and began the fifth wave of follow-up survey data collection. Public use data are available through the Inter-university Consortium for Political and Social Research (ICPSR) at the University of Michigan. The team published five manuscripts in 2024, bringing the total to 134 since 2012.

Attachment Style and Social Network Impact on Suicide Risk

In 2024, Center Scientists examined the relationship of attachment styles and social network size to lifetime suicidal behaviors among new Soldiers in the US Army. The study identified three attachment styles: preoccupied, fearful and secure. All three, along with social network size, were associated with suicidal ideation and attempt. Notably, the impact of social network size on suicide risk was significantly

influenced by the presence or absence of a preoccupied attachment style. These findings underscore the importance of understanding how attachment styles and social networks contribute to suicidal ideation, suicide attempts and the transition from ideation to action.

Stress and Resilience in US Army Mortuary Affairs (MA) Soldiers

In 2024, active-duty MA Soldiers from the 54th Quartermaster Company (Fort Gregg-Adams, Virginia) participated in this ongoing study by completing 106 deployment-related questionnaires. Overall, more than 4,000 questionnaires have been collected since the study began in 2005. Data analyses in 2024 included: (1) examination of exposure to human remains, combat exposure and prior Middle East deployment as predictors of PTSD and depression; (2) change in rates of probable PTSD and depression over time; and (3) initial emotional responses to exposure to human remains. Manuscripts reporting the study findings are in progress for publication in scientific journals. Two posters describing military deaths and rates of PTSD and depression from 2006 to 2018, and a poster reporting findings on emotional reactivity to MA work, were presented at local and national scientific conferences. Findings from the study inform the education and training of Soldiers and other groups for deployment and work with human remains.

Daily Diary Assessment of Posttraumatic Stress Symptoms in US Military Service Members (Daily Diary Study)

The Daily Diary Study represents the cutting edge in psychological assessment methodology, measures, equipment, technology and research design to better understand posttraumatic stress symptoms and improve the well-being of service members. In 2024, the software application that participants use to complete daily ecological momentary assessments underwent an update. Data analyses included examinations of

daily variation in suicidal ideation and both day-to-day and within-day variation in PTSD symptom clusters (intrusion, avoidance, negative cognitions/mood, hyperarousal). Manuscripts reporting findings on these topics were prepared and submitted for publication in scientific journals. Data analyses also included an examination of the relationship between sleep disturbances (e.g., disturbing dreams and nighttime awakenings) and PTSD symptom clusters. Broad findings from the Daily Diary Study were presented at the USU Brain Health Symposium.

Firearms Behavioral Practices in US Army Soldiers and Veterans

In 2024, CSTS Scientists, University of South Florida and Harvard University collaborators disseminated key research findings at four scientific conferences: the National Research Conference on Firearm Injury Prevention, the American Psychological Association Convention, the Military Health System Research Symposium (MHSRS), and the VA/DoD Suicide Prevention Conference. Recent publications in scientific journals and book chapters focused on firearm suicide risk and prevention in service members. Future research examining motivations for gun ownership for safety/protection, anxiety and unsecure storage practices may help target interventions to prevent suicide death. Findings from this study have significant public health relevance in our understanding of the relationship between firearm storage practices and suicide death, and may inform harm reduction efforts in service members and veterans. Our research findings emphasize the importance of education and training those in “gatekeeper” roles within the military community, and suggest the usefulness of harm reduction and health promotion efforts.

Strengthening Resilient Emotions and Nimble Cognition Through Engineering Neuroplasticity (STRENGTHEN): Targets for Improving Psychological Health and Enhancing Performance

CSTS continued its role as an Independent Verification and Validation (IV&V) partner for the DARPA (Defense Advanced Research Projects Agency)

STRENGTHEN (Strengthening Resilient Emotions and Nimble Cognition Through Engineering Neuroplasticity) program, evaluating its three performer teams as they initiated Phase 1 intervention studies. CSTS reviewed study materials, attended site visits and assessed treatment data, culminating in a comprehensive report with detailed analysis of performer teams’ research strategies, evaluation of progress toward milestones and recommendations for improving intervention transition potential. This report will inform Phase 2 of the STRENGTHEN program.

CSTS hosted a kick-off meeting with their recently established STRENGTHEN science panel. This multidisciplinary group of scientific advisers works with CSTS to facilitate the translation of STRENGTHEN research into practice in both military and civilian contexts. CSTS Scientists also began drafting a manuscript reviewing novel approaches being developed under STRENGTHEN to further broaden the program’s impact. More details can be found at: <https://www.cstsonline.org/research/darpa-strengthen>.

New York National Guard (NYNG) Study: Warfighter Readiness and Resilience Assessment: COVID-19 Activation

The US National Guard (NG) served a critical role in the COVID-19 response. Identifying, monitoring and understanding risk factors associated with mental and behavioral health outcomes in COVID-19-activated NG service members is central to sustaining force readiness and disaster preparedness. In 2020, CSTS collaborated with NYNG to administer a public health surveillance assessment with 4,000 service members. In 2024, CSTS found that work tasks associated with high activation stress included patient transportation and working with the dead and families of COVID-19 patients. High work stress was related to PTSD, anxiety, depression and anger post-activation. Service members with personal COVID-19-related experience (themselves or a family member having COVID-19 or loss of a loved one due to COVID-19) had more posttraumatic stress; those with COVID-19-related loss were almost three times more likely to have PTSD. Study findings inform recommendations for leadership

to promote disaster-related health and readiness among NG personnel. Findings were published in scientific journals and presented at several professional conferences.



RESEARCH ON CHILDREN AND FAMILIES

Bereavement

Bereaved Family Self-Care Toolkit

The Bereaved Family Self-Care Toolkit (noted above) was developed in consultation with TAPS and helps bereaved military family members and others who have experienced the death of a family member. As part of CSTS's Suicide Prevention Program (SPP), the Toolkit provides information, materials and resources on practical and evidence-based self-care tips. Self-care is important for bereaved family members to mitigate stress and lower risk for negative physical and mental health outcomes, such as sleep problems, substance use and suicide.

Finding the Words

When someone at home or work seems to be experiencing serious challenges or distress, it can be difficult to find the right words to have a conversation that could ultimately help the individual and those around them who are impacted. Our "Finding the Words" video series provides specific words to use that will help anyone having difficulty initiating a critical conversation with family and loved ones, peers or someone they lead.

Grief and Health-Related Quality of Life in World Trade Center Survivors

An ongoing CSTS CFP project examines outcomes associated with trauma and bereavement in 9/11 survivors (i.e., individuals who worked or lived at or near the World Trade Center site in New York City on 9/11). Despite 9/11 survivors' high rates of losses on and after 9/11, minimal research has focused on the examination of grief responses and their effects on mental health in this population. Using existing and newly-collected data, the study is examining the complex inter-relationships of bereavement and trauma burden and physical and mental health burden in order to better inform World Trade Center Health Program resources. This project is being conducted in collaboration with colleagues at Columbia University, the World Trade Center Health Registry and Voices Center for Resilience (VOICES). Data collection for this project ended in December 2024 and analyses are underway.



Arlington National Cemetery, Washington, DC.

Stepping Forward in Grief (SFG) Study

A virtual app that addresses grief adaptation could be a helpful resource for bereaved military family members who often live far from available grief support services. CFP formed a partnership with Columbia University's Center for Prolonged Grief to adapt principles from Prolonged Grief Therapy (PGT), found to be helpful in civilian populations, for a digital intervention. This intervention aimed to assist with grief integration, thereby

reducing risk for long-term impairment. The goal of SFG, a randomized controlled trial, is to compare the effectiveness of two virtual apps (GriefSteps [GS] and WellnessSteps) in helping those bereaved by military service-related death. Results indicated that there were small, but statistically significant, improvements in grief and in functional impairment among those in the high grief group using GS. These results indicate that a novel modality, requiring little oversight or cost, can assist bereaved family members. A scientific manuscript describing these findings is in preparation.

Study of Long-Term Outcomes of Terrorism-Related Grief

CFP partnered with VOICES, a nonprofit organization that aids 9/11-affected families, and the Canadian Resource Centre for Victims of Crime, an organization supporting family members who were bereaved by the Air India Flight 182 bombing, to investigate long-term bereavement outcomes in family members following a terrorism-related death. The team published two manuscripts related to these data. A recent analysis of these data examined predictors of co-occurring pain and comorbid psychiatric conditions in family members of 9/11 victims. These findings were presented at the 2024 American Psychiatric Association Annual Meeting in New York, NY.

Bereavement Coping Studies

The goal of these ongoing studies is to determine coping strategies used by military family members following bereavement and to examine associations among risk factors (i.e., hopelessness and reasons for living), specific coping strategies and outcomes (i.e., grief, depression, suicidal ideation). A manuscript that described the associations between these factors and suicidal ideation was recently published. Information from this study was also used to inform the development of an interactive website called BALANCE (Bereavement Adaptation: Learning And Navigating Coping Essentials) that allows users to understand, monitor and adapt the coping strategies that they use to manage their grief. In addition, CFP Scientists conducted a comprehensive literature

review of coping strategies following violent losses. This recently published work examined the types of coping employed and how these strategies relate to bereavement outcomes.

Disenfranchised Grief

CFP collaborated with Sons and Daughters in Touch (SDIT), an organization of children whose fathers died or were missing in action (MIA) in the Vietnam War, and found that this population consistently felt their loss was unacknowledged or rejected. This phenomenon is consistent with disenfranchised grief (DG), which refers to the experiences of bereaved persons whose grief was not or could not be openly acknowledged, publicly mourned or socially supported. In response, CFP developed a measure of DG, created items for this instrument, refined them in response to feedback from SDIT members and CSTS Scientists, and reached out to experts in DG for feedback. The final pool of items will be evaluated in the SDIT population, as well as among individuals who suffered other losses known to be associated with DG, including perinatal death, suicide and homicide, as well as deaths resulting from substance abuse, criminal activity and human immunodeficiency virus (HIV).



Family Violence

Child Maltreatment in US Military Communities and Families

Another focus of the CFP involves the identification of risk factors for child maltreatment in military families, to inform prevention and intervention strategies that promote military family health, well-being and resilience. Our work has focused on child neglect, the most commonly reported type of child maltreatment type in the US and most frequently associated with child fatality. A study examining factors associated with elevated risk of child protective actions, including child victim and parent offender removal from the home, in families of US Army service members with substantiated child neglect incidents was recently published.

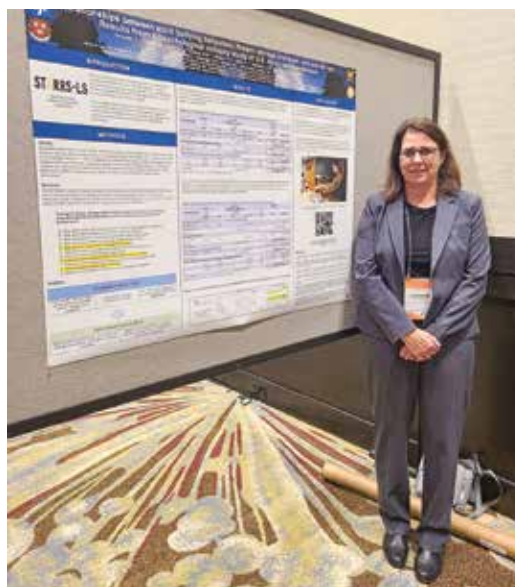
CFP also presented findings from a separate congressionally-mandated study designed to identify risk factors for child maltreatment types (i.e., neglect, physical abuse, sexual abuse, emotional abuse) in active duty families at two research conferences and in a publication describing the study, the first in a series of manuscripts from this dataset.

Safe Is Strong

In 2024, the CFP developed the Safe Is Strong microsite in support of the Center's SPP. The site is designed to educate parents from military-connected families about factors that influence their family safety, and to provide resources that include recommended actions parents can take to strengthen the health and safety of their family. The site is also intended to be a tool for healthcare providers and other professionals who work with military families to help identify families that may benefit from additional resources to reduce suicide risk in parents. Dissemination efforts for Safe Is Strong expanded to include distribution of project postcards to the Pediatric Clinic at Tripler Army Medical Center. The site was also featured at the USU Department of Pediatrics' Annual Military Child Health Research Symposium and in a presentation to behavioral health providers at Cohen Veterans Network in September.

Targeting Family Risk Associated with Unsafe Firearm Storage Practices

Unsafe firearm storage (e.g., maintaining firearms unlocked and loaded) has been associated with suicides, accidents and family violence in both military and civilian families. This Military Operational Medicine Research Program-funded study examines how four potentially modifiable family-level behaviors and attitudes relate to firearm storage practices among military-connected families with children. These factors are: (1) firearm socialization; (2) other household safety practices; (3) adult decision-making dynamics regarding firearm storage; and (4) parental misunderstanding of children's development and motivations. A manuscript describing the contribution of these family-level factors to firearm storage decision-making is being submitted for peer-reviewed publication. Items for a novel measure of parental understanding of child development and motivations were developed and are being evaluated in a general parent population. A bilingual (English and Spanish) survey is under development to assess the association of these factors and firearm storage practices, informed by feedback from focus groups conducted with military-connected family members.



Dr. Catherine Dempsey poster presentation at National Research for the Prevention of Firearm-Related Harms conference.

RESEARCH IN NEUROSCIENCE AND NEUROBIOLOGY

Trauma-Related Disorders Research

Genetics and Biomarkers

In 2024, the CSTS laboratory advanced its efforts to identify biomarkers for PTSD and depression. We reported our study, the Novel Involvement of PTSD-Associated FKBP5 in Protein Networks and Signaling Pathways, at the 2024 Amygdala, Stress, & PTSD Conference, and published our findings on the association of 5-HTTLPR and PTSD in US service members in chronic stress. We also analyzed a large dataset of 155,000 participants from the Prostate, Lung, Colorectal and Ovarian (PLCO) Randomized Screening Trial, which monitored cancer incidence and mortality. Our analysis revealed that prostate cancer (PCa) patients with pre-existing depression had significantly lower 25-year survival rates compared to both PCa patients without depression and healthy controls, emphasizing the long-term impact of depression on PCa outcomes. These findings highlight the critical need for targeted biomarker strategies to mitigate depression's effects on cancer prognosis. We presented these results at the annual USU Research Days.

Exposure and Non-Exposure Treatments for Post-Trauma Nightmares and Insomnia: Nightmare Deconstruction and Reprocessing (NDR) vs. NightWare Wristband

Individuals exposed to trauma often develop persistent nightmares, even in the absence of PTSD, that do not always respond to evidence-based treatments. CSTS is conducting a pilot trial comparing NDR, an exposure-based psychotherapy, to the NightWare prescription digital therapeutic for treatment of trauma-related nightmares and insomnia. Results from a previous CSTS pilot study suggested that NDR may be effective in decreasing the frequency and severity of nightmares and insomnia, with moderate effect sizes, and it was well-tolerated by study participants. The current study will expand on our previous work examining multiple potential

biomarkers of treatment response, including genomic and serum markers at multiple points in treatment. We are also collecting continuous physiologic data over twelve weeks of study intervention using the Empatica EmbracePlus wristband as another potential marker of treatment response. This study will continue enrollment through 2025.

The Veterans Affairs (VA) National PTSD Brain Bank

In 2014, a consortium led by the VA National Center for PTSD and co-founded by CSTS scientists established the VA PTSD Brain Bank — a multi-site human tissue bank that collects tissue donations and medical information for use in neurophysiological research on PTSD. This resource allows investigators nationwide to use the clinical and biological information stored in the bank to generate proposed mechanisms of PTSD, refine diagnostic assessment, improve treatments and ultimately develop preventive strategies for this disorder. Thus far, the Brain Bank has acquired 378 tissue samples, and 284 future donors have enrolled to support the Brain Bank by providing antemortem assessment data and medical records to accompany their future postmortem tissue donations. CSTS Scientists serve on the Tissue Access Committee and Diagnostic Assessment Core, collaborate with investigators on scientific manuscripts, and enroll future donors from the Washington, DC Armed Forces Retirement Home and Brooke Army Medical Center.

Sleep-Related Research

Chronobiology, Light and Sleep Laboratory

Light acutely alerts and phase shifts circadian rhythms with minimal side effects, making it an ideal fatigue countermeasure; however, most lab studies of these responses employ nighttime exposures that are long duration, high intensity and suboptimal for color-rendering. In 2024, we completed a within-subjects laboratory study characterizing physiological responses to light under conditions that are more feasible in practice, elucidating response kinetics and optimal dosing parameters. Relatedly, we conducted

a field study examining the barriers and facilitators to uptake in domestic and workplace settings, to guide further refinements for maximal uptake. We also continued adapting and testing our Circadian, Light and Sleep Skills (CLASS) program in Marines to improve both sleep and mental health (and ultimately, to couple it with other interventions). Finally, the initial results of a randomized clinical trial of melatonin for enhancing response to the influenza vaccine were published, and a second paper is underway.



Toward Personalized Care for Insomnia: Machine Learning Algorithms to Predict Response to Insomnia Therapy

In collaboration with Harvard Medical School, CSTS sought to develop machine learning models to predict response to insomnia medication and, separately, response to cognitive behavioral therapy for insomnia (CBT-I). The team constructed two observational longitudinal datasets using data from STARRS. The first sample comprised 7,000 Army Soldiers diagnosed with insomnia and treated with medication, while the second sample comprised 4,000 Soldiers treated with CBT-I. All Soldiers were assessed before and 6-12 weeks after initiating treatment. In both samples, only a minority of Soldiers responded to treatment, highlighting the need for predictive models. The research also found that severe baseline insomnia and younger age predicted a positive treatment response to medication, while suicidal ideation and severe baseline insomnia predicted a positive treatment response to CBT-I. These results constitute an important step toward personalized treatment planning for Soldiers and civilians with insomnia.

Pre-Deployment and Deployment-Related Risk and Resilience Factors for Insomnia in Military Personnel

CSTS is using data from the Pre/Post Deployment Study (PPDS), a longitudinal component of STARRS, to identify aspects of deployment that affect risk for post-deployment insomnia and

pre-deployment factors that amplify or dampen effects of deployment on insomnia. PPDS included one assessment shortly prior to deployment and three assessments at standard intervals following deployment. Using data from 4,500 Soldiers who completed all four PPDS surveys, we found deployment stress and pre-deployment insomnia are associated with risk for both transient and chronic post-deployment insomnia, and interpersonal stress (both family and unit stress) are stronger predictors than combat-related stressors. Next, we will evaluate effects of other pre-deployment factors (e.g., substance use and mental health) to determine if those moderate effects of deployment stress. Study findings will be transitioned to inform deployment-related policy and clinical practice guidelines for military health providers.

Tele-Sleep Health Project

In the past year, CSTS has made significant strides, including implementing REDCap for various surveys and scripts such as the Alcohol Use Disorders Identification Test (AUDIT) and Pittsburgh Sleep Quality Index (PSQI). We have successfully submitted IRB proposals and expanded the research team by hiring a study coordinator and research assistant. Collaborations with the University of Maryland – Baltimore, the Integrated Referral Management and Appointing Center (IRMAC) and Medbridge have strengthened, facilitating improved study processes. IRMAC will supply lists of patients referred for obstructive sleep apnea (OSA) consultations to aid in recruitment. Participants randomized to receive OSA telehealth care will benefit from remote consultations with sleep specialists and receive Food and Drug Administration-approved diagnostic and treatment equipment, with ongoing support from a sleep navigator. The study will span approximately 90 days post-positive airway pressure treatment initiation. Over four years, about 160 participants from USU and WRNMMC will engage in screenings, evaluations and telehealth consultations, enhancing their understanding of sleep health.

Education and Training

MENTORING PROJECTS AT CSTS

CSTS provides mentorship experiences for USU medical students (including Capstone experiences), National Capital Consortium (NCC) Child and Adolescent Psychiatry fellows, and NCC General Psychiatry residents. Under the guidance of senior researchers, mentees investigate critical issues related to child and family stress and trauma, including bereavement, firearm storage practices and child maltreatment. The work has resulted in presentations at national and international professional conferences and peer-reviewed publications, including an article on predictors of child and parent removal from Army families when child neglect occurred. Mentees have authored or co-authored six conference presentations on topics including the impact of neglect types on child and parental removal from homes within the Army, the association of belief in a “just world” with PGD in 9/11 bereaved parents and strategies for reducing firearm-related injuries through shared decision-making. These experiences enhance mentees’ research skills, broadens their understanding of stress and trauma in both children and adults, and inform their careers in psychiatry.



Dr. Nemcek, Child and Adolescent Psychiatry Fellow, poster presentation, Walter Reed Research and Innovation Month Clinical Award.

DISASTER RESPONSE AND PUBLIC EDUCATION

The Center was sought out for resources to protect mental health of disaster responders, healthcare personnel, children and families and leaders impacted by devastating weather events, such as Hurricane Helene, acts of mass violence, like the shootings at Abundant Life Christian School, and industrial accidents, such as the ship collision that led to collapse of the Francis Scott Key Bridge. Following these events, the Center provided public and disaster mental health educational fact sheets and other resources to responders and other organizations working to protect mental health and foster resilience among impacted communities. Center Scientists also provided education through consultation to help various affected stakeholders address unique and evolving aspects of these and other disasters, including the impact of exposure to human remains, evacuation and displacement, altered feelings of safety and grief and loss.

NEUROSCIENCE MODULE FOR PRE-CLERKSHIP USU MEDICAL STUDENTS

The Neuroscience and Behavior Module is a core eight-week course for first-year medical students at USU. It integrates various disciplines to teach neuroscience principles. Students learn to recognize, diagnose and manage neurological and psychiatric conditions. The module aims to provide a strong foundation in neuroscience for future military medical officers. The key features of the Module in 2024 were:

- **Multidisciplinary approach:** Combines neuroscience with military medicine, medical history and health systems science.
- **Hands-on learning:** Includes simulated patient experiences and practice of neurologic and mental status examinations.
- **Focus on clinical skills:** Emphasizes effective, safe and patient-centered care.

- **Innovative teaching:** Utilizes distance, hybrid and in-person learning methods.
- **High-quality education:** Consistently ranks among the best modules, with 100% student success rates and 100% satisfaction rates.
- **Continuous improvement:** Regularly updates lecture content and utilizes embedded questions for assessment.
- **Rigorous assessment:** Exam questions are carefully designed and aligned with both module and university learning objectives.

EDUCATION AND TRAINING IN SUPPORT OF US AFRICA COMMAND

Dr. Benedek and Col Kumer were invited by the US Embassy in Mozambique and the Mozambique Ministry of Defence to be expert panelists at their Mental Health International Symposium for the Armed Forces. By request, they provided operational behavioral health training in person to the Mozambique Army and also submitted two briefings for the symposium: “Managing the Military Traumatic Stress Response: Guiding Principles for Peers, Leaders and Clinicians” and “Psychological First Aid in the Military Operational Environment: Benefits and Limitations.” Continuing a theme of providing partner nation support in Africa, Col Kumer led



CSTS Team at International Symposium in Senegal.

a Military Operational Behavioral Health Mobile Training Team to Dakar, Senegal, along with CDR La Croix, Dr. Benedek and MAJ Nevers of the Indiana National Guard and CDP, USU. The engagement was sponsored by the US Embassy in Senegal and resulted in the team conducting behavioral health training with 25 military psychiatrists and nurses from the Senegal Defense Forces.

EDUCATION AND TRAINING IN COMBAT AND OPERATIONAL STRESS CONTROL: OPERATION BUSHMASTER

In 2024, CSTS Scientists provided training in Combat and Operational Stress Control as a core component in military medical education. In line with USU’s mission to prepare uniformed health professionals to support the readiness of the US Armed Forces, CSTS Scientists engaged in curriculum preparation, faculty development and direct teaching as part of the annual medical field training exercise called Operation Bushmaster. This undertaking includes preparing senior USU and international students, as well as active-duty residents, to operate in forward medical units in a complex front-line simulation over four days, culminating in a mass casualty event. Students treated a continuous stream of battlefield casualties and non-battle injuries, as well as conducted public health outreach activities while on a simulated combat deployment. Differentiating the assessment, disposition and treatment of psychiatric illnesses were core skills uniquely taught on the field.



Operation Bushmaster annual medical field training exercise.

DISASTER AND PREVENTIVE PSYCHIATRY COURSE

The Center's international reputation for expertise in military and disaster psychiatry led to a partnership with the American Psychiatric Association to develop the world's first (and only) online interactive training in "Disaster and Preventive Psychiatry: Protecting Health and Fostering Community Resilience." The course is free and offers eight continuing education credits, providing learners with critical information on topics such as the psychological and behavioral impact of different types of disaster, understanding aspects of risk and protection, evidence-based actions for protecting the mental health of disaster responders, using communication and messaging to protect health and leadership behaviors to foster community recovery. This unique course has been widely praised by national and global partners, cited in textbooks and shared broadly throughout the national and global disaster community through Center partnerships with the Administration for Strategic Preparedness and Response, the Substance Abuse and Mental Health Services Administration (SAMHSA), the National Association of State Mental Health Program Directors (NASMHPD), the Five Eyes Mental Health Research and Innovation Collaboration (MHRIC), the North Atlantic Treaty Organization (NATO), and the United Nations (UN).



US DEPARTMENT OF VETERAN AFFAIRS (VA) RESEARCH-IN-RESIDENCE FELLOWSHIPS

The VA/STARRS-LS Researcher-In-Residence Fellowship Program is now in its second year. In 2023, the STARRS-LS research team, in collaboration with our partners at Harvard Medical School,

established a pioneering interagency research fellowship program with the VA. The goal of the program is to partner with early career VA researchers and explore research-based solutions for service members vulnerable to suicide as they transition from active duty to veteran status. In 2024, we welcomed two additional fellows who will collaborate part-time with the STARRS-LS researchers for a two-year term. Dr. Amar Mandavia from VA Boston and Dr. Marcus Wild from the VA's Waco Regional Office were selected for two-year fellowships. For further details, please refer to the VA's Health Services Research and Development website featuring the Researcher-In-Residence Program: <https://www.hsrd.research.va.gov/centers/core/sprint/starrs-ls.cfm>. Moving forward, STARRS-LS researchers hope to work with the DoD to develop a similar fellowship program with DoD research scientists.

TRAINING TO SUPPORT RESEARCH

The Center trains and educates research support staff, such as Research Assistants (RAs). In 2024, a team of nine RAs supported research efforts at CSTS. RAs provide support to scientists and team members on a variety of projects, and learn by working with CSTS scientists, biostatisticians and program managers. The RAs conduct literature reviews, participate in study participant recruitment and data collection, assist in data entry and quality control and develop tables and graphics for study findings. RAs also provide administrative support for meetings, including preparing meeting minutes. While at CSTS, RAs acquire valuable research skills, including developing posters for presentation at professional conferences. RAs are offered professional development opportunities, including attending workshops and assisting with manuscript preparation for publication in peer-reviewed scientific journals. Following their tenure at CSTS, RAs often further their education by pursuing advanced degrees. Former Center RAs have engaged in graduate study at institutions including: Yale University, Notre Dame University, Johns Hopkins University, Duke University, Columbia University, Georgetown University, London

School of Hygiene and Tropical Medicine, University of Maryland, George Washington University, Catholic University, Florida State University, University of Nebraska – Lincoln and USU. Opportunities that RAs have pursued following their experience at CSTS have included:

- PhD programs in psychology and related behavioral science fields
- Medical school
- Physician assistant school
- Law school
- Master's degree programs in psychology, counseling, public health and social work
- Training positions at the National Institutes of Health
- Careers with the Federal Bureau of Investigation

In 2024, CSTS continued its professional development workshops designed to educate and facilitate discussions among the Center staff on topics critical to success. Workshops included discussions on behavioral health careers in the military, managing psychological consequences in disaster populations and workplace etiquette.

DISSEMINATION AND IMPLEMENTATION OF HEALTH AND RESEARCH KNOWLEDGE

Fact Sheets, Infographics and Pocket Cards

Over many years, the center has developed and disseminated brief, just-in-time, action-oriented resources to address public health and disaster mental health issues of concern. The center is well known for its disaster education fact sheets and pocket cards, which explain complex topics in a way that is easy to understand and provide information that is easy to use, particularly during times of heightened stress.

The pocket card “helping others calm an acute stress response” has been widely utilized by responders and community members in a variety of recent and ongoing disaster events, including hurricanes, mass violence, bridge collapse and war. To help address the issue of moral distress and injury that may result from exposure to various extreme events,

the center developed “understanding moral injury.” This fact sheet briefly explains moral injury and its impact, and provides strategies to support individuals experiencing moral injury.

Website

CSTS's website is a primary tool that is used to further the goal of disseminating relevant and timely information to a wide range of stakeholders (www.CSTSONline.org). Materials available on the website include summaries of current research activities, publication citations, newsletters, conference reports and a searchable repository of CSTS disaster mental health education fact sheets. The website includes a “What's New” section that highlights recent disaster education materials, research initiatives, publications, conference summaries and announcements of upcoming events.

In 2024, the website saw 44,528 users from 156 countries around the world. Among these users, 27,292 (61%) were from the US. The largest number of views occurred on Wednesday, February 28th, with 826 users. This past year, the site received 114,639 page views across 739 pages. The CSTS SPP website launched season two of the podcast series, “Let's Talk About Your Guns.” The “Let's Talk About Your Guns” podcast page had 621 views.

Social Media

In 2024, the Center continued to grow its online presence through the use of social media. Social media resources allowed for the timely dissemination of content relevant to CSTS partners and the public. CSTS social media engaged users from ten different countries across the globe on X (formerly known as Twitter), Facebook and LinkedIn. The Center has a social media team that works to develop weekly and monthly public health outreach campaigns and other types of communications materials. Moving forward into 2025, the Center is exploring new ways to increase its social media presence across multiple platforms. CSTS encourages people to visit and follow our postings to stay up to date on new activities, resources and publications. “Like” CSTS on Facebook and follow CSTS on X (@CSTS_USU) and LinkedIn.

Consultations



GLOBAL MENTAL HEALTH

- **Ukraine Mental Health Support.** Weekly consultations continued between CSTS, Walter Reed Army Institute of Research (WRAIR) and Harvard University to support Ukrainian mental health leaders amid ongoing conflict.
- **Israel Defense Forces (IDF) Mental Health Support.** Dr. Biggs provided recommendations on psychological care for IDF military body handlers through Bar-Ilan University.
- **Republic of Fiji Military Forces Mental Health Training.** CSTS partnered with Mr. Klomp (Geneva Office for Human Rights Education, Pacific Area) to provide guidance on mitigating the impact of extended military deployments on soldiers and their families.
- **Brazil Flood Response.** In response to historic floods affecting more than two million people, Dr. Morganstein provided a live-streamed disaster mental health grand rounds to healthcare professionals in Brazil. The session has been viewed nearly 1,000 times and continues to support long-term recovery.
- **National Defense Medical Center, Taiwan, Collaboration.** Dr. West participated in high-level discussions on potential research and training collaborations between CSTS and Taiwan's medical defense leaders.

- **Brain Health Summit in Warsaw, Poland.** Drs. Capaldi and West advised on mental health strategies for warfighters in Ukraine during this international symposium organized by US Army Medical Research and Development Command and Aspen Medical.

NATIONAL MENTAL HEALTH

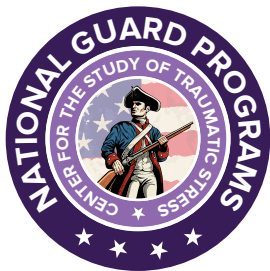
- **Armed Forces Medical Examiner System (AFMES) Collaboration.** CSTS consulted with AFMES leadership to develop a mental health protection system for forensic pathologists and mortuary specialists.
- **Kansas City Mass Shooting Response.** Following the tragic February 14, 2024, mass shooting, CSTS provided behavioral health consultation to local leadership, including Dr. Gist of the Kansas City, MO Fire Department. Continued engagement supports long-term recovery planning.
- **Department of State (DoS) Mental Health Support.** CSTS experts, including Drs. Benedek, Ursano and Morganstein, contributed specialized consultation to enhance mental healthcare systems for 75,000+ globally dispersed DoS personnel.



Drs. Vincent Capaldi and Curt West (middle) in Poland for the Warsaw Brain Health Symposium.

- **Federal Emergency Management Agency (FEMA) Urban Search & Rescue Behavioral Health Initiative.** Dr. Morganstein delivered a presentation on responder well-being and continues discussions to shape FEMA’s behavioral health response plan for disaster rescue teams.
- **Smithsonian Institution Workplace Stress Consultation.** Dr. Ursano engaged with the Smithsonian Institution, providing expertise on handling workplace stress events.
- **Fostering Resilience and Managing Emotions (FRAME) Training at WRAIR.** Dr. Biggs contributed consultation on the FRAME course focused on handling human remains.
- **Defense Support of Civil Authorities (DSCA) Consultation.** Ongoing monthly consultations addressed mortuary affairs and mental health coordination across multiple military and federal agencies. Additionally, CSTS leaders provided support and educational fact sheets for Maryland authorities following the Key Bridge collapse in Baltimore.

NATIONAL GUARD PROGRAMS (NGP)



National Guard Bureau (NGB) Integrated Primary Prevention (IPP)

During its first full year, the IPP team collaborated with the NGB to support national IPP efforts. The team developed a Quality Assurance Check (QAC) process and guide to strengthen individual Comprehensive Integrated Primary Prevention (CIPP) plans. The IPP team reviewed 34 plans and conducted 26 feedback sessions. The team consulted NGB on IPP products, presented at IPP Workforce (IPPW) internal meetings, and attended the IPPW annual symposium. Representatives attended quarterly NGB forums to assist in developing strategic plans for the IPPW. The team presented QAC findings at four national conferences through poster and oral presentations. Looking forward, the IPP team will continue to support the development of the CIPP plan. The team is expanding supportive efforts by

creating additional educational materials and offering additional opportunities for consultation with the team of scientists.

Army National Guard Behavioral Health (ARNG BH) Program

The ARNG BH Program aims to optimize behavioral health readiness among the ARNG, increase access to care and increase quality of care through standardization of evidenced-informed practices, policies and community partnerships. In 2024, the ARNG BH program expanded its efforts under three main areas of focus: Metrics and Data Collection, Standardization and Quality Improvement, and Program Structure and Capacity Enhancement. Key achievements included comprehensive analyses of existing ARNG BH data sources and improvement of Medical Electronic Data (for) Care History And Readiness Tracking (MEDCHART) reporting for better capture of key metrics. In addition, the team supported the creation of the first-ever comprehensive roster of ARNG BH providers, development of a program website and purchased a platform upon which to build a comprehensive training curriculum. The team provided support for planning and execution of the Behavioral Health Training Event (BHTE) for 2024 as well as planning for the 2025 event.

NGP Data & Evaluation

The Data and Evaluation department supports the NGB’s IPP and the ARNG BH Program. Work assisting the IPP in 2024 included analyzing multiple data sources to understand and visualize state-level and NG-wide trends for risk/protective factors and outcomes of interest and providing feedback on the 54 States, Territories + District (S/T/DC) CIPP plans. The team developed a presentation for NGB on the differences between and how to utilize the Pennsylvania State University Clearinghouse for Military Family Readiness and RAND Corporation research database to support implementing evidence-based prevention activities that address harmful behaviors within the NG. The team also presented a talk titled “Data-Driven” to S/T/DC. ARNG BH Program work included developing a survey and interview guide assessing ARNG BH provider and

service member needs. In addition, the team developed a form for behavioral health providers requesting behavioral health consultation and created heat maps of S/T/DC behavioral health provider-to-service member ratios.

NGP Education & Training

The Education and Training team was established in 2024 to provide support to IPP and ARNG BH teams by developing educational products and training curricula, conducting content review and editing and coordinating training events. Key accomplishments included organizing a CSTS site

visit to the National Guard Memorial Museum and presenting the findings at the National Guard Presents meeting. The team provided guidance in the development of the National Guard Handbook and laid the groundwork for the 2025 Forum on Health & National Security. Additionally, the team supported IPP by reviewing QAC guides, helping with the Project Safe Guard Generation III rollout, and expanding the training curriculum. This included assisting the ARNG BH team plan the 2025 BHTE, and collaborating with other NGP teams to initiate the development of a dedicated website and design of a representative image for the program.

Dr. Brian Flynn's Long Service in CSTS Leadership

In August, Dr. Brian Flynn stepped back from his 22 years on the CSTS Leadership Team. Before joining USU/CSTS, he served 31 years in the US Public Health Service (USPHS), retiring at the rank of Rear Admiral/Assistant Surgeon General. During his time at CSTS, Dr. Flynn brought invaluable experience from his senior USPHS management roles, especially in the development, operation and supervision of the federal government's disaster behavioral health program. From his years of consultation, policy development

and program implementation, Dr. Flynn added significantly to the Center's expertise in domestic disaster preparedness, response and recovery. Dr. Flynn's unique background contributed to the Center's research, training, education and consultation portfolio. In addition, he created new partnerships that remain central to the leadership of CSTS. Dr. Flynn continues as an Adjunct Professor and has remained available to contribute his expertise and unique perspective as needed.



Dr. Brian Flynn retires after 22 years at CSTS.



Dr. Robert Ursano honoring Dr. Brian Flynn at his retirement ceremony.

Publications

(Names in bold text are CSTS personnel)

JOURNAL ARTICLES

- Boese, M., **Berman, R. Y.**, Qiu, J., Spencer, H. F., Radford, K. D., & **Choi, K. H.** (2024). Effects of mild closed-head injury and subanesthetic ketamine infusion on microglia, axonal injury, and synaptic density in Sprague-Dawley rats. *International Journal of Molecular Science*, 25(8). <https://doi.org/10.3390/ijms25084287>
- Campbell-Sills, L., **Choi, K. W.**, Strizver, S. D., Kautz, J. D., Papini, S., **Aliaga, P. A.**, Lester, P. B., **Naifeh, J. A.**, Ray, C., Kessler, R. C., **Ursano, R. J.**, Stein, M. B., & Bliese, P. D. (2024). Interactive effects of genetic liability and combat exposure on risk of alcohol use disorder among US service members. *Drug and Alcohol Dependence*, 264, 112459. <https://doi.org/10.1016/j.drugalcdep.2024.112459>
- Cleaves, E. S.** (2024). Supervising individual psychotherapy: The guide to “good enough.” *Psychiatry*, 87(2), 200-202. <https://doi.org/10.1080/00332747.2024.2348422>
- Collier, L., Seah, C., Hicks, E. M., Holtzheimer, P. E., Krystal, J. H., Girgenti, M. J., Huckins, L. M. & Johnston, K. J. A. (**Ursano, R. J.** as a contributor) (2024). The impact of chronic pain on brain gene expression. *medRxiv*. <https://doi.org/10.1101/2024.05.20.24307630>
- Daskalakis, N. P., Iatrou, A., Chatzinakos, C., Jajoo, A., Snijders, C., Wylie, D., DiPietro, C. P., Tsatsani, I., Chen, C. Y., Pernia, C. D., Soliva-Estruch, M., Arasappan, D., Bharadwaj, R. A., Collado-Torres, L., Wuchty, S., Alvarez, V. E., Dammer, E. B., Deep-Soboslay, A., Duong, D. M.,...Ressler, K. J. (**Ursano, R. J.** as contributor) (2024). Systems biology dissection of PTSD and MDD across brain regions, cell types, and blood. *Science*, 384(6698), eadh3707. <https://doi.org/10.1126/science.adh3707>
- Dempsey, C. L.**, **Ao, J.**, **Georg, M. W.**, **Aliaga, P. A.**, Brent, D. A., **Benedek, D. M.**, Zuromski, K. L., Nock, M. K., Heeringa, S. G., Kessler, R. C., Stein, M. B., & **Ursano, R. J.** (2024). Suicide without warning: Results from the Army Study to Assess Risk and Resilience in Servicemembers (STARRS). *Journal of Mood & Anxiety Disorders*, 7. <https://doi.org/10.1016/j.xjmad.2024.100064>
- Dempsey, C. L.**, **Benedek, D. M.**, **Spangler, P. T.**, **West, J. C.**, Bossarte, R. M., Nock, M. K., Zuromski, K. L., **Georg, M. W.**, **Ao, J.**, **Haller, K.**, **Probe, D. M.**, & **Ursano, R. J.** (2024). Gun ownership for safety/protection and unsecured firearm storage practices: Suicide risk and prevention among U.S. Army servicemembers. *American Journal of Preventive Medicine*. <https://doi.org/10.1016/j.amepre.2024.10.011>
- Fisher, J. E.**, **Zhou, J.**, **Blumhorst, A. L.**, **Ogle, C. M.**, **Sumberg, L.**, & **Cozza, S. J.** (2024). Pathways between grief, depression, hopelessness, reasons for living, and suicidal ideation in bereaved individuals. *Journal of Psychiatric Research*, 179, 351-359. <https://doi.org/10.1016/j.jpsychires.2024.08.033>
- Flynn, B. W.** (2024). Finding a place to stand: Developing self-reflective institutions, leaders, and citizens. *Psychiatry*, 87(1), 101-103. <https://doi.org/10.1080/00332747.2024.2308478>
- Gabbay, F. H.**, **Wynn, G. H.**, **Georg, M. W.**, Gildea, S. M., Kennedy, C. J., King, A. J., Sampson, N. A., **Ursano, R. J.**, Stein, M. B., & Wagner, J. R. (2024). Toward personalized care for insomnia in the US Army: A machine learning model to predict response to cognitive behavioral therapy



Mona Al-Bizri, Rehana Naik Olson, Sonia Warrior and Dr. Quinn Biggs meeting with mortuary affairs soldiers at Fort Gregg-Adams, Virginia.



Evan Salerno, Drs. Joscelyn Fisher, Christin Ogle, Stephen Cozza and Alexander Rice representing the CSTS Child and Family Program at the Military Child Education Coalition Global Summit, Washington DC.

for insomnia. *Journal of Clinical Sleep Medicine*, 20(6), 921-931.

He, Q., Wang, W., Xu, D., Xiong, Y., Tao, C., You, C., Ma, L., & Ma, J. (Ursano, R. J. as contributor) (2024). Potential causal association between gut microbiome and posttraumatic stress disorder. *Translational Psychiatry*, 14(1), 67. <https://doi.org/10.1038/s41398-024-02765-7>

Howe, E. G. (2024). Being available to patients. *Capital Psychiatry*, 15-17.

Howe, E. G. (2024). Exceptional critical concerns for patients who are facing aging and death. *Directions in Psychiatry*, 6 Sec. <https://www.hatherleigh.com/courses/directions-in-psychiatry-vol-44>

Howe, E. G. (2024). How should therapists treat patients who are so altruistic they regularly harm themselves for the sake of others? *Innovative Clinical Neuroscience*, 21(4-6), 14-18.

Howe, E. G. (2024). A new psychotherapy that may treat PTSD in one session. *Frontiers in Psychiatry*, 15, 1440113. <https://doi.org/10.3389/fpsy.2024.1440113>

Howe, E. G. (2024). New ways to help patients worst off. *Journal of Clinical Ethics*, 35(1), 1-7. <https://doi.org/10.1086/728098>

Howe, E. G. (2024). Psychotherapeutic approaches: Hopefully, globally effective. *Frontiers in Psychiatry*, 15, 1322184. <https://doi.org/10.3389/fpsy.2024.1322184>

Howe, E. G. (2024). Should providers advocate for their patients? *Journal of Clinical Ethics*, 35(2), 77-84. <https://doi.org/10.1086/729224>

Howe, E. G. (2024). Should providers ask family members what they want when establishing surrogate decision-making? *Journal of Clinical Ethics*, 35(3), 147-154. <https://doi.org/10.1086/730874>

Howe, E. G. (2024). Should providers engage in religious discussions, and if they should, then with whom? *Journal of Clinical Ethics*, 35(4), 217-223. <https://doi.org/10.1086/732143>

Howe, E. G. (2024). Teaching of medical ethics regarding military, genetic, reproductive, and student ethics, and the Holocaust at the Uniformed Services University of the Health Sciences (USUHS) during its first fifty years, Part 1. *Military Medicine*. <https://doi.org/10.1093/milmed/usae546>

Howe, E. G. (2024). Teaching of medical ethics regarding military, genetic, reproductive, and student ethics, and the Holocaust at the Uniformed Services University of the Health Sciences (USUHS) during its first fifty years, Part 2. *Military Medicine*. <https://doi.org/10.1093/milmed/usae546>

Howe, E. G. (2024). Teaching psychiatry when teaching the mental status exam. *Capital Psychiatry*, 68-69.

Hu, X. Z., Ursano, R. J., Benedek, D. M., Li, X., & Zhang, L. (2024). Association of 5-HTTLPR with post-traumatic stress disorder in US service members. *Chronic Stress*, 8. <https://doi.org/10.1177/24705470241245497>

Hukovskyy, O., West, J. C., Morganstein, J. C., Augusterfer, E. F., Benedek, D. M., Boyko, O., Ursano, R. J., & Adler, A. B. (2024). The combat path: Sustaining mental readiness in Ukrainian soldiers. *Parameters*, 54(2).

Katrinli, S., Wani, A. H., Maihofer, A. X., Ratanatharathorn, A., Daskalakis, N. P., Montalvo-Ortiz, J., Núñez-Ríos, D. L., Zannas, A. S., Zhao, X., Aiello, A. E., Ashley-Koch, A. E., Avetyan, D., Baker, D. G., Beckham, J. C., Boks, M. P., Brick, L. A., Bromet, E., Champagne, F. A., Chen,

- C. Y.,...**Ursano, R. J.**,... Logue, M. W. (2024). Epigenome-wide association studies identify novel DNA methylation sites associated with PTSD: A meta-analysis of 23 military and civilian cohorts. *Genome Medicine*, 16(1), 147. <https://doi.org/10.1186/s13073-024-01417-1>
- Kennedy, C. J., Kearns, J. C., Geraci, J. C., Gildea, S. M., Hwang, I. H., King, A. J., Liu, H., Luedtke, A., Marx, B. P., Papini, S., Petukhova, M. V., Sampson, N. A., Smoller, J. W., Wolock, C. J., Zainal, N. H., Stein, M. B., **Ursano, R. J.**, Wagner, J. R., & Kessler, R. C. (2024). Predicting suicides among US Army soldiers after leaving active service. *JAMA Psychiatry*, 81(12), 1215-1224. <https://doi.org/10.1001/jamapsychiatry.2024.2744>
- Kessler, R. C., Bossarte, R. M., Hwang, I., Luedtke, A., **Naifeh, J. A.**, Nock, M. K., Petukhova, M., Sadikova, E., Sampson, N. A., Sverdrup, E., Zubizarreta, J. R., Wager, S., Wagner, J., Stein, M. B., & **Ursano, R. J.** (2024). A prediction model for differential resilience to the effects of combat-related stressors in US army soldiers. *International Journal of Methods in Psychiatric Research*, 33(4), e70006. <https://doi.org/10.1002/mpr.70006>
- Krantz, D. S., **Gabbay, F. H.**, Belleau, E. A., **Aliaga, P. A.**, Wynn, G. H., Stein, M. B., **Ursano, R. J.**, & **Naifeh, J. A.** (2024). PTSD, comorbidities, gender, and increased risk of cardiovascular disease in a large military cohort. *medRxiv*. <https://doi.org/10.1101/2024.04.13.24305769>
- Landvater, J., Kim, S., Caswell, K., Kwon, C., Odafe, E., Roe, G., Tripathi, A., Vukovics, C., Wang, J., Ryan, K., Cocozza, V., Brock, M., Tchopov, Z., Tonkin, B., **Capaldi, V.**, Collen, J., Creamer, J., Irfan, M., Wickwire, E. M.,...Hinds, S. R. (2024). Traumatic brain injury and sleep in military and veteran populations: A literature review. *NeuroRehabilitation*, 55(3), 245-270. <https://doi.org/10.3233/nre-230380>
- Lee, R. U., Watson, N. L., **Glickman, G. L.**, White, L., Isidean, S. D., Porter, C. K., Hollis-Perry, M., Walther, S. R., Maiolatesi, S., Sedegah, M., Ganeshan, H., Huang, J., Boulifard, D. A., Ewing, D., Sundaram, A. K., Harrison, E. M., DeTizio, K., Belmonte, M., Belmonte, A.,...Danko, J. (2024). A randomized clinical trial of the impact of melatonin on influenza vaccine: Outcomes from the melatonin and vaccine response immunity and chronobiology study (MAVRICS). *Human Vaccines and Immunotherapies*, 20(1), 2419742. <https://doi.org/10.1080/21645515.2024.2419742>
- Mairson, T. M., & **Howe, E.** (2024). Addressing structural audism in medicine: How those who are Deaf and hard of hearing are marginalized in healthcare. *Psychiatry*, 87(1), 2-6. <https://doi.org/10.1080/00332747.2023.2286844>
- Mash, H. B. H.**, **Fullerton, C. S.**, Adler, A. B., **Morganstein, J. C.**, **Blumhorst, A.**, **La Croix, C. L.**, **Biggs, Q. M.**, & **Ursano, R. J.** (2024). COVID-19 personal experiences and posttraumatic stress in National Guard service members. *Military Medicine*, usae478. <https://doi.org/10.1093/milmed/usae478>
- Mash, H. B. H.**, **Fullerton, C. S.**, Adler, A. B., **Morganstein, J. C.**, **Reissman, D. B.**, **Biggs, Q. M.**, **La Croix, C. L.**, **Blumhorst, A.**, & **Ursano, R. J.** (2024). Types of COVID-19 disaster work and psychological responses in National Guard service members. *Military Medicine*, 189(11-12), e2692-e2699. <https://doi.org/10.1093/milmed/usae228>
- Matta, S. E., **La Croix, C.**, Tanev, K., & Stern, T. A. (2024). Pharmacologic management of the sequelae of traumatic brain injuries. *The Primary Care Companion for CNS Disorders*, 26(4), 56086.
- Matta, S. E., **La Croix, C.**, Walterfang, M., Tanev, K. S., & Stern, T. A. (2024). Traumatic brain injuries: Manifestations, evaluation, management, and outcomes. *Primary Care Companion on CNS Disorders*, 26(3). <https://doi.org/10.4088/PCC.23f03667>
- McCarroll, J. E.**, **Fisher, J. E.**, **Cozza, S. J.**, **Mash, H. H.**, **Biggs, Q. M.**, **Flynn, B. W.**, & **Walsh, T.** (2024). Notification, viewing the body, and social and cultural considerations after traumatic death: A systematic literature review. *Disaster Medicine and Public Health Preparedness*, 18, e256. <https://doi.org/10.1017/dmp.2024.125>
- Meng, X., Navoly, G., Giannakopoulou, O., Levey, D. F., Koller, D., Pathak, G. A., Koen, N., Lin, K., Adams, M. J., Rentería, M. E., Feng, Y., Gaziano, J. M., Stein, D. J., Zar, H. J., Campbell, M. L., van Heel, D. A., Trivedi, B., Finer, S., McQuillin, A.,...**Ursano, R. J.**,...Kuchenbaecker, K. (2024). Multi-ancestry genome-wide association study of major depression aids locus discovery, fine mapping, gene prioritization and causal inference. *Nature*

- Genetics*, 56(2), 222-233. <https://doi.org/10.1038/s41588-023-01596-4>
- Naifeh, J. A., Ursano, R. J., Shor, R., Mash, H. B. H., Aliaga, P. A., Fullerton, C. S.,** Nock, M. K., Kao, T. C., Sampson, N. A., Kessler, R. C., & Stein, M. B. (2024). Undetected suicide attempts among U.S. soldiers: Results from the Army Study to Assess Risk and Resilience in Servicemembers (Army STARRS). *Psychological Medicine*, 1-9. <https://doi.org/10.1017/s0033291724001028>
- Naifeh, J. A., Ursano, R. J., Stein, M. B., Mash, H. B. H., Aliaga, P. A., Fullerton, C. S., Shor, R.,** Kao, T. C., Sampson, N. A., & Kessler, R. C. (2024). Optimism, sociability, and the risk of future suicide attempt among US Army soldiers. *Military Medicine*, 189(7-8), e1642-e1652. <https://doi.org/10.1093/milmed/usad457>
- Naifeh, J. A., Ursano, R. J., Stein, M. B., Wang, J., Mash, H. B. H., Aliaga, P. A., Fullerton, C. S.,** Dinh, H. M., Kao, T. C., Sampson, N. A., & Kessler, R. C. (2024). Prospective association of attachment style with suicide attempts among US Army soldiers. *Psychological Medicine*, 54(4), 785-793. <https://doi.org/10.1017/s0033291723002489>
- Nievergelt, C. M., Maihofer, A. X., Atkinson, E. G., Chen, C. Y., **Choi, K. W.,** Coleman, J. R. I., Daskalakis, N. P., Duncan, L. E., Polimanti, R., Aaronson, C., Amstadter, A. B., Andersen, S. B., Andreassen, O. A., Arbisi, P. A., Ashley-Koch, A. E., Austin, S. B., Avdibegović, E., Babić, D., Bacanu, S. A.,...Koenen, K. C. (2024). Genome-wide association analyses identify 95 risk loci and provide insights into the neurobiology of post-traumatic stress disorder. *Nature Genetics*, 56(5), 792-808. <https://doi.org/10.1038/s41588-024-01707-9>
- Nock, M. K., Jaroszewski, A. C., Deming, C. A., Glenn, C. R., Millner, A. J., Knepley, M., **Naifeh, J. A.,** Stein, M. B., Kessler, R. C., & **Ursano, R. J.** (2024). Antecedents, reasons for, and consequences of suicide attempts: Results from a qualitative study of 89 suicide attempts among Army soldiers. *Journal of Psychopathology and Clinical Science*, 134(1), 6-17. <https://doi.org/10.1037/abn0000935>
- Ogle, C. M.,** Harmon-Darrow, C., Fedina, L., Nichols, D., Mulford, C. F., & Backes, B. L. (2024). Operational definitions of poly-victimization: A scoping review. *Trauma, Violence, & Abuse*, 25(4), 3360-3376. <https://doi.org/10.1177/15248380241246522>
- Ogle, C. M., Zhou, J., Fisher, J. E., Aliaga, P. A.,** Rose, V. C., Huleatt, W. J., Chiarantona, K. H., **Naifeh, J. A., Mash, H. B. H., Fullerton, C. S., Ursano, R. J., & Cozza, S. J.** (2024). Overview and design of the Child Maltreatment in Military Families Life Course Study. *Psychiatry*, 87(2), 149-160. <https://doi.org/10.1080/00332747.2023.2258750>
- Pineles, S. L., Ni, P., Pandey, S., Japuntich, S. J., Cesare, N., **Shor, R.,** Carpenter, J. K., Gregor, K., Joos, C. M., Blumenthal, T. D., & Rasmusson, A. M. (2024). Tobacco withdrawal-induced changes in sensorimotor filtering as a predictor of smoking lapse in trauma-exposed individuals. *Addictive Behaviors*, 148, 107868. <https://doi.org/https://doi.org/10.1016/j.addbeh.2023.107868>
- Quartana, P. Q., Beymer, M. R., Gomez, S. A. Q., Adler, A. B., Jackson Santo, T., **Thomas, J. L.** & Millikan Bell, A. (2024). *Military Medicine*, 189(3-4), 3878-3887. <https://doi.org/10.1093/milmed/usad350>
- Raut, S. B., Joly, F., Haass, N. K., Eri, R., Canales, J. J., **Benedek, D. M., Ursano, R. J.,** & Johnson, L. R. (2024). The clinically relevant MEK inhibitor mirdametininib combined with D-cycloserine and prediction error disrupts fear memory in PTSD models. *Translational Psychiatry*, 14(1), 492. <https://doi.org/10.1038/s41398-024-03190-6>
- Regier, D. A.** (2024). Fifty years of psychiatric classification and epidemiology interactions: What is a mental disorder? *Psychiatry*, 87(4), 279-297. <https://doi.org/10.1080/00332747.2024.2395755>
- Rice, A. J., Fisher, J. E., & Cozza, S. J.** (2024). Coping after violent loss: A systematic literature review and organizing model. *Journal of Loss and Trauma*, 1-61. <https://doi.org/10.1080/15325024.2024.2415706>
- Rønning, L., Anyan, F., Hjemdal, O., Bøe, H. J., Espetvedt Nordstrand, A., **Mash, H. B. H., & Naifeh, J. A.** (2024). Exploring heterogeneity in PTSD symptoms and associated predictors and outcomes in Afghanistan veterans: A latent profile analysis. *Military Psychology*, 1-12. <https://doi.org/10.1080/08995605.2024.2345580>
- Rønning, L., **Shor, R.,** Anyan, F., Hjemdal, O., Jakob Bøe, H., **Dempsey, C. L.,** & Espetvedt Nordstrand, A. (2024). The prevalence of sexual

- harassment and bullying among Norwegian Afghanistan veterans: Does workplace harassment disproportionately impact the mental health and life satisfaction of female soldiers? *Journal of Interpersonal Violence*, 40(1-2), 465-488. <https://doi.org/10.1177/08862605241248432>
- Sadler, N., Pedlar, D., & Ursano, R. (2024). Suicide in military and veteran populations: A view across the Five Eyes nations. *Psychiatry*, 87(2), 161-164. <https://doi.org/10.1080/00332747.2024.2306794>
- Sheth, N. K., Wilson, A. B., West, J. C., Schilling, D. C., Rhee, S. H., & Napier, T. C. (2024). Effects of stigmatizing language on trainees' clinical decision-making in substance use disorders: A randomized controlled trial. *Academic Psychiatry*. <https://doi.org/10.1007/s40596-024-02103-5>
- Stein, M. B., Jain, S., Papini, S., Campbell-Sills, L., Choi, K. W., Martis, B., Sun, X., He, F., Ware, E. B., Naifeh, J. A., Aliaga, P. A., Ge, T., Smoller, J. W., Gelernter, J., Kessler, R. C., & Ursano, R. J. (2024). Polygenic risk for suicide attempt is associated with lifetime suicide attempt in US soldiers independent of parental risk. *Journal of Affective Disorders*, 351, 671-682. <https://doi.org/10.1016/j.jad.2024.01.254>
- Thomas, C., Collen, J., Capaldi, V., Zhao, Z., Williams, S., Assefa, S., Chen, S., Albrecht, J., & Wickwire, E. (2024). 0491 Exploring COMISA, sleep-related symptoms, and healthcare utilization in military personnel. *Sleep*, 47(Supplement_1), A211-A211. <https://doi.org/10.1093/sleep/zsae067.0491>
- Thomas, C. L., Capaldi, V. F., & Collen, J. F. (2024). Breathing new life into PTSD-related sleep disorders! *Journal of Clinical Sleep Medicine*, 20(3), 335-336. <https://doi.org/10.5664/jcsm.11008>
- Tsai, J., Szymkowiak, D., Hooshyar, D., Gildea, S. M., Hwang, I., Kennedy, C. J., King, A. J., Koh, K. A., Luedtke, A., Marx, B. P., Montgomery, A. E., O'Brien, R. W., Petukhova, M. V., Sampson, N. A., Stein, M. B., Ursano, R. J., & Kessler, R. C. (2024). Predicting homelessness among transitioning US Army soldiers. *American Journal of Preventive Medicine*, 66(6), 999-1007. <https://doi.org/10.1016/j.amepre.2024.01.018>
- Walsh, A., Friedman, K., Morrissey, B. H., Godin, S., Morganstein, J., Bryan, C. J., Anestis, M. D., Foley, S. K., Johnson, R. L., Baker, J. C., Bryan, A., Betz, M. E., & Wright-Kelly, E. (2024). Project Safe Guard: Evaluating a lethal means safety intervention to reduce firearm suicide in the National Guard. *Military Medicine*, 189, 510-516. <https://doi.org/10.1093/milmed/usae172>
- Walsh, A., Ghahramanlou-Holloway, M., Stanley, I. H., Betz, M. E., Heintz Morrissey, B., Godin, S., Morganstein, J. C., LaCroix, J., Cobb, E., Grammer, J., & Button, C. J. (2024). Firearm leadership: Development, analysis, and application of a novel concept to message secure storage of firearms in the military. *Military Psychology*, 1-7. <https://doi.org/10.1080/08995605.2024.2336641>
- Wang, J. (2024). The age of prediction: Algorithms, AI, and the shifting shadows of risk. *Psychiatry*, 87(4), 377-380. <https://doi.org/10.1080/00332747.2024.2422273>
- Wang, J., Naifeh, J. A., Mash, H. B. H., Thomas, J. L., Hooke, J., Morganstein, J. C., Fullerton, C. S., Cozza, S. J., Stein, M. B., & Ursano, R. J. (2024). Attachment style, social support network, and lifetime suicide ideation and suicide attempts among new soldiers in the US Army. *Psychiatry*, 87(3), 251-263. <https://doi.org/10.1080/00332747.2024.2364525>
- Wani, A. H., Katrinli, S., Zhao, X., Daskalakis, N. P., Zannas, A. S., Aiello, A. E., Baker, D. G., Boks, M. P., Brick, L. A., Chen, C. Y., Dalvie, S., Fortier, C., Geuze, E., Hayes, J. P., Kessler, R. C., King, A. P., Koen, N., Liberzon, I., Lori, A.,... Ursano, R. J.,... & Uddin, M. (2024). Blood-based DNA methylation and exposure risk scores predict PTSD with high accuracy in military and civilian cohorts. *BMC Medical Genomics*, 17(1), 235. <https://doi.org/10.1186/s12920-024-02002-6>
- Werner, J. K., Albrecht, J., Capaldi, V. F., Jain, S., Sun, X., Mukherjee, P., Williams, S. G., Collen, J., Diaz-Arrastia, R., Manley, G. T., Krystal, A. D., & Wickwire, E. (2024). Association of biomarkers of neuronal injury and inflammation with insomnia trajectories after traumatic brain injury: A TRACK-TBI study. *Neurology*, 102(8), e209269. <https://doi.org/10.1212/wnl.0000000000209269>
- Wickwire, E. M., Collen, J., Capaldi, V. F., Assefa, S. Z., Jones, R., Williams, S. G., Thomas, C. L., Williams, D. C., & Albrecht, J. S. (2024). Virtual first: Implementation of a novel sleep telehealth platform in the United States military. *Frontiers in Sleep*, 3, 1304743.
- Wickwire, E. M., Collen, J., Capaldi, V. F., Zhao,

Z., Williams, S. G., Thomas, C. L., Assefa, S. Z., Albrecht, J. S., & Chen, S. (2024). Prior-night sleep predicts next-day symptoms over ten days among military personnel with sleep problems. *NPJ Biological Timing and Sleep*, 1(1), 10. <https://doi.org/10.1038/s44323-024-00008-y>

Wilkerson, M. D., Hupaló, D., Gray, J. C., Zhang, X., Wang, J., Girgenti, M. J., Alba, C., Sukumar, G., Lott, N. M., Naifeh, J. A., Aliaga, P., Kessler, R. C., Turner, C., Pollard, H. B., Dalgard, C. L., Ursano, R. J., & Stein, M. B. (2024). Uncommon protein-coding variants associated with suicide attempt in a diverse sample of US Army soldiers. *Biological Psychiatry*, 96(1), 15-25. <https://doi.org/10.1016/j.biopsych.2023.12.008>

Zuromski, K. L., Wilks, C. R., Al-Suwaidi, M., Wittler, E., Scherban, L., Hite, B., Raymond, L., Dempsey, C. L., Stein, M. B., Ursano, R. J., Benedek, D., & Nock, M. K. (2024). Perspectives of suicide loss survivors: Qualitative analysis of data from a psychological autopsy study of U.S. Army soldiers. *Suicide and Life-Threatening Behavior*, 54(3), 437-449. <https://doi.org/10.1111/sltb.13052>

BOOKS

Reynolds, C. F. III, Cozza, S. J., Maciejewski, P. K., Prigerson, H. G., Shear, M. K., Simon, N., & Zisook, S. (Eds.). (2024). *Grief and Prolonged Grief Disorder*. American Psychiatric Association Publishing.

BOOK CHAPTERS

Benedek, D. M., Morganstein, J. C., West, J. C., & Ursano, R. J. (2024). Disaster psychiatry: Disasters, terrorism, and war. In R. Boland, M. L. Verduin, & P. Ruiz (Eds.). *Kaplan & Sadock's Comprehensive Textbook of Psychiatry*, 12th Ed. Lippincott Williams & Wilkins.

Cozza, S. J. & Fisher, J. E. (2024). Bereavement. In C. F. Reynolds III, S. J. Cozza, P. K. Maciejewski, H. G. Prigerson, M. K. Shear, N. Simon, & S. Zisook (Eds.), *Grief and Prolonged Grief Disorder*. American Psychiatric Association Publishing.

Cozza, S. J. & Ogle, C. M. (2024). Bereavement, grief, and prolonged grief disorder in children and adolescents. In C. F. Reynolds III, S. J. Cozza, P. K. Maciejewski, H. G. Prigerson, M. K. Shear, N. Simon, & S. Zisook (Eds.), *Grief and Prolonged Grief Disorder*. American Psychiatric Association Publishing.

Dempsey, C. L. Spangler, P. T., West, J. C., & Benedek, D. M. (2024). Firearm suicide risk and prevention among servicemembers. In Thomson, N., *Handbook of Gun Violence*. Academic Press. <https://doi.org/10.1016/C2021-0-02581-5>

Howe, E. G. (2024) Perspective chapter: Presuppositions psychiatrists must make to do most effective psychotherapy. In F. Durbano, F. Irtelli, B. Marchesi (Eds.), *Psychotherapy – New Trends and Developments*. IntechOpen. <https://www.intechopen.com/online-first/1201651>

Morganstein, J. C. (2024). Climate-related disasters: Impact, risk, and interventions. In R. Moore (Ed.), *Climate Change and Mental Health Equity*. Springer.

BLOG POSTS AND NEWSLETTERS

- Dr. Dempsey authored a blog post for the Anxiety & Depression Association of America: Firearm suicide risk in service members and veterans.
- Dr. West co-authored an op-ed for the American Psychiatric Association Committee on the Psychiatric Dimensions of Disaster published in *DC Journal*: There is help for people enduring distress.
- The following article by Dr. Dempsey, et al., published in the *Journal of Mood and Anxiety Disorders*, was showcased in a Military REACH newsletter: Suicide without warning: Results from the Army Study to assess Risk and Resilience in Servicemembers.

Presentations, Interviews and Briefings, Awards and Appointments

PRESENTATIONS

(Names in bold text are CSTS personnel)

Andersen, C., **Rice, A., Fisher, J. E., Zhou, J., Ogle, C. M., & Cozza, S. J.** (2024, September). *The association of belief in a just world and prolonged grief disorder in 9/11 bereaved parents* [Poster presentation]. International Society for Traumatic Stress Studies 40th Annual Meeting, Boston, MA, United States.

Benedek, D. M. (2024, January). *Interviewing survivors of — or witnesses to — torture and trauma: Considerations for military service members* [Virtual presentation and panel discussion]. Reparative Justice II: Challenges of Listening When Interviewing Traumatized Witnesses.

Benedek, D. M. (2024, February). *CSTS and CDP overview and research questions* [Invited presentation]. US Medical Research and Development Command Ukraine Research Needs and Capabilities Symposium, Warsaw, Poland.

Benedek, D. M. (2024, May). *Using Army administrative data to identify US soldiers at risk of perpetrating violence* [Virtual presentation]. Leiden Trauma Talks, Leiden University Medical Center, Leiden, Netherlands.

Benedek, D. M. (2024, September). *Managing the military traumatic stress response: Guiding principles for peers, leaders, and clinicians*. Mental Health International Symposium for the Armed Forces, Mozambique.

Benedek, D. M. (2024, October). *The Army STARRS SHOS-B psychological autopsy study: Key findings and the way ahead* [Grand Rounds presentation]. Walter Reed National Military Medical Center Department of Psychiatry Grand Rounds, Bethesda, MD, United States.

Benedek, D. M., & Dempsey, C. L. (2024, May). *Relationships between adult bullying behaviors and suicide risk: Results from a psychological autopsy study of U.S. Army servicemembers*. Defense Suicide Prevention

Office All-Hands Meeting, Bethesda, MD, United States.

Bessman, S., Harrison, E., Easterling, A., Preilipper, S., & **Glickman, G.** (2024, June). *Shining light on photic measurement for sleep and circadian field studies*. 38th Annual Meeting of the Associated Professional Sleep Societies, Houston, TX, United States.

Bessman, S., Harrison, E., Easterling, A., Preilipper, S., Snider, M., & **Glickman, G.** (2024, June). *Hybrid effectiveness-implementation study of two novel spectrally-engineered lighting countermeasures for shiftworkers*. 8th Annual Johns Hopkins Sleep & Circadian Research Day, Baltimore, MD, United States.

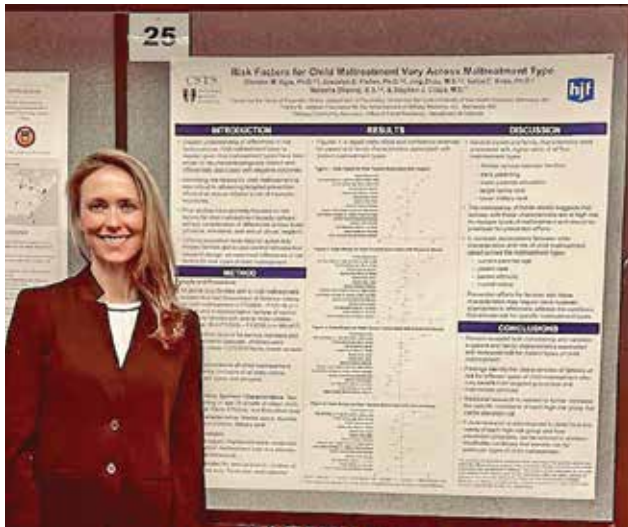
Boese, M., **Berman, R.,** Rujan, O., Spencer, H., Metz, E., Radford, K., & **Choi, K. H.** (2024, August). *Role of subanesthetic intravenous ketamine infusion on stress hormones and synaptic plasticity in a rodent model of closed head injury* [Poster presentation]. Military Health System Research Symposium, Kissimmee, FL, United States.

Bookwala, N. M., Warrior, S., Biggs, Q. M., Moore, J., Fullerton, C. S., Wang, L., & Ursano, R. J. (2024, April). *Posttraumatic stress disorder in Mortuary Affairs soldiers, 2006-2018* [Poster presentation]. 17th Annual Amygdala, Stress, & PTSD Conference, Bethesda, MD, United States.

Chen, C. J., Geraci, J. C., Eastman, M. R., Paine, C. M., **Naifeh, J. A.,** & Eickhoff, C. J. (2024, July). *Leveraging multi-sector collaboration and technology for military and veteran suicide prevention* [Panel discussion]. 2024 VA/DoD Suicide Prevention Conference, Portland, OR, United States.

Childs, E. M. & Collette, C. (2024, September). *The comprehensive integrated primary prevention (CIPP) plan quality assurance check (QAC): MAR24 and JUL24 submission cycles* [PowerPoint presentation]. National Guard Integrated Primary Prevention Quarterly Strategic Forum, Arlington, VA, United States.

Chokroverty, L., **Cozza, S. J.,** Berkowitz, S. J.,



Dr. Christin Ogle poster presentation at the ISTSS conference.

- Hilliard, H. M., Garrett, S. T., Sobowale, K. & McGee, M. E. (2024, October). *Taking the reins before the rains: Preparing child and adolescent psychiatrists (CAPs) before the next disaster* [Poster presentation]. American Academy of Child & Adolescent Psychiatry 71st Annual Meeting, Seattle, WA, United States.
- Cleaves, E. S.** (2024, May). *How to work smarter (not harder) using generative AI* [Round table discussion]. Society of Uniformed Services Psychiatrists Annual Meeting, Bethesda, MD, United States.
- Cleaves, E. S.,** Kotlyar, B., Ping Tsao, C., Russo, R., Gluzman, E., **West, J.,** Schilling, D., Schatte, D., & Song, X. A. (2024, June). *Scoping review of assessments in medical education: Implications for medical schools and residency programs* [Poster presentation]. Association of Directors of Medical Student Education in Psychiatry Annual Meeting, Pittsburgh, PA, United States.
- Cleaves, E. S., Teisberg, M.,** Moorhead, B., **West, J. C., Cozza, K. L., & Hamaoka, D.** (2024, September). *Posttraumatic stress disorder: Self-Paced Learning Module*. Association of Directors of Medical Student Education in Psychiatry Annual Meeting, Pittsburgh, PA, United States.
- Collette, C.** (2024, November). *The comprehensive integrated primary prevention (CIPP) plan quality assurance check (QAC)* [PowerPoint presentation]. National Guard Integrated Primary Prevention Quarterly Strategic Forum, Arlington, VA, United States.
- Cozza, S. J.** (2024, May). *Children and war: Exposures and outcomes* [PowerPoint presentation]. National Child Traumatic Stress Network 2024 All-Network Conference, Bethesda, MD, United States.
- Cozza, S. J.** (2024, May). *Children and firearms: Understanding risk and promoting safety* [PowerPoint presentation]. Duke University Department of Psychiatry & Behavioral Sciences Grand Rounds, Durham, NC, United States.
- Cozza, S. J.** (2024, May). *Children and firearms: Understanding risk and promoting safety* [PowerPoint presentation]. Child & Adolescent Psychiatry Society of Greater Washington, Washington, DC, United States.
- Cozza, S. J.** (2024, June). *Grief and substance use-related deaths* [Virtual presentation]. National Capital Region Pain Initiative Addiction Webinar, Washington, DC, United States.
- Cozza, S. J.** (2024, September). *Grief and substance use-related deaths* [Virtual presentation]. National Capital Region Pain Initiative Annual Substance Use Disorder Symposium. Washington, DC, United States.
- Cozza, S. J.** (2024, September). *Targeting family risk associated with unsafe storage practices*. Firearm Suicide Prevention in the US Military 3rd Annual Summit, Aurora, CO, United States.
- Cozza, S. J.** (2024, October). *Targeting family risk associated with unsecured firearm storage* [Virtual presentation]. Office of Military Community and Family Policy Brief.
- Cozza, S. J.** (2024, December). *Military children and families: Strengths and challenges* [Grand Rounds presentation]. Georgetown University Child & Adolescent Psychiatry Program Grand Rounds, Washington, DC, United States.
- Cozza, S. J.,** Trotter, J., Berkowitz, S. J., Feder, J. D., & Song, S. J. (2024, October). *Children and war: Exposures, outcomes, and interventions* [Clinical perspectives workshop]. American Academy of Child & Adolescent Psychiatry 2024 Annual Meeting, Seattle, WA, United States.
- Cozza, S. J., Ogle, C. M., Fisher, J. E., Zhou, J., Walsh, T. R., Zuleta, R. F., Dempsey, C. L., West, J. C., Fullerton, C. S. & Ursano, R. J.**

(2024, April). *The associations of posttraumatic stress disorder and family composition with firearm ownership and unsafe firearm storage practices among military and veteran servicemembers* [Poster presentation]. 17th Annual Amygdala, Stress, & PTSD Conference, Bethesda, MD, United States.

Cross, A. B., Fisher, J. E., Ogle, C. M., Zhou, J., & Cozza, S. J. (2024, May). *Predictors of pain and co-morbid psychiatric conditions in family members of 9/11 victims*. American Psychiatric Association Annual Meeting, New York, NY, United States.

Dempsey, C. L., Benedek, D. M., Ao, J., Georg, M. W., Aliaga, P. A., Haller, K., Elmahdy, S. W., Sumberg, L. L., Zuromski, K. L., Nock, M. K., Heeringa, S. G., Kessler, R. C., Stein, M. B., & Ursano, R. J. (2024, December). *Relationships between adult bullying behaviors, firearm storage practices, and suicide risk: Results from a psychological autopsy study of U.S. Army Servicemembers* [Poster presentation]. 2024 National Research Conference for the Prevention of Firearm-Related Harms, Seattle, WA, United States.

Dempsey C. L., Benedek, D. M., Brent, D. A., & Ursano, R. J. (2024, July). *Suicide without warning: Results from the Army Study to Assess Risk and Resilience in Servicemembers* [Poster presentation]. 2024 VA/DOD Suicide Prevention Conference, Portland, OR, United States.

Dempsey, C. L., Bossarte, R. M., Benedek, D.

M, Spangler, P. S., West, J. C., Nock, M. K., Zuromski, K., Georg, M. W., Ao, J. & Ursano, R. J. (2024, August). *Reasons for gun ownership, firearm storage practices and suicide risk in servicemembers: A target for intervention* [Poster presentation]. Military Health System Research Symposium, Kissimmee, FL, United States.

Dempsey, C. L., Bossarte, R. M., Walsh, A. K., Mattson S. A., & West, J. C. (2024, August). *Firearm suicide risk and prevention in servicemembers: Opportunities for science to make an impact* [Symposium]. American Psychological Association Annual Convention, Seattle, WA, United States.

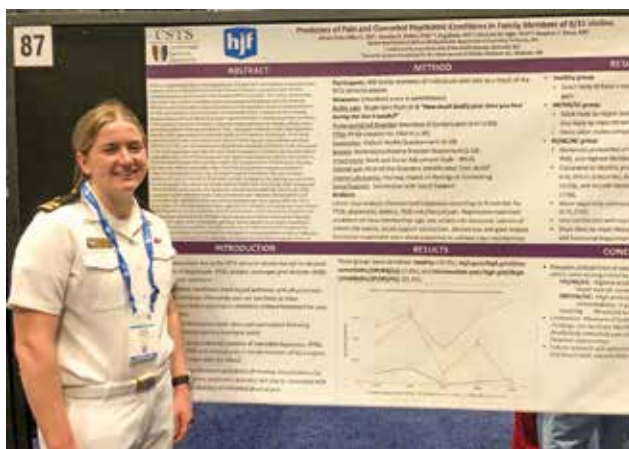
Elmahdy, S. W., Sumberg, L. L., Haller, K., Dempsey, C. L., Benedek, D. M., Ao, J., Georg, M. W., Aliaga, P. A., Zuromski, K. L., Nock, M. K., Heeringa, S. G., Kessler, R. C., Stein, M. B., & Ursano, R. J. (2024, April). *Relationships between adult bullying behaviors and suicide risk: Results from a psychological autopsy study of U.S. Army Servicemembers* [Poster presentation]. 17th Annual Amygdala, Stress, & PTSD Conference, Bethesda, MD, United States.

Elmahdy, S. W., Sumberg, L. L., Haller, K., Dempsey, C. L., Benedek, D. M., Ao, J., Georg, M. W., Aliaga, P. A., Zuromski, K. L., Nock, M. K., Heeringa, S. G., Kessler, R. C., Stein, M. B., & Ursano, R. J. (2024, May). *Relationships between adult bullying behaviors and suicide risk: Results from a psychological autopsy study of U.S. Army Servicemembers* [Poster presentation]. Uniformed Services University Research Days, Bethesda, MD, United States

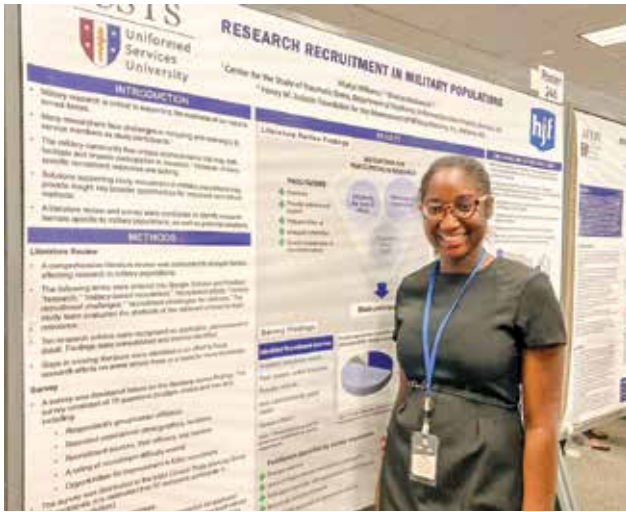
Fisher, J. E., Ogle, C. M., Zhou, J., Walsh, T. R., Fetchet, M., Zuleta, R. F., Fullerton, C. S., Ursano, R. J. & Cozza, S. J. (2024, April). *Avoidant coping and supportive coping differentiate patterns of comorbidity in groups in 9/11-bereaved fifteen years after 9/11* [Poster presentation]. 17th Annual Amygdala, Stress, & PTSD Conference, Bethesda, MD, United States.

Fisher, J. E., Zhou, J., Rice, A., Ogle, C. M., & Cozza, S. J. (2024, September). *Coping following bereavement predicts longitudinal changes in mental health outcomes* [Poster presentation]. International Society for Traumatic Stress Studies 40th Annual Meeting, Boston, MA, United States.

Flynn, B., & Bornemann, J. (2024, May). *Behavioral health in disaster response* [Webinar presentation].



Dr. Lexi Cross poster presentation at the American Psychiatric Association conference.



Miahje Williams poster presentation at USU Research Days

Region I Disaster Health Response System and the Region I Emerging Special Pathogens Treatment Center.

- Gabbay, F. H., Naifeh, J. A., Pabst, A. E., Collen, J. F., Killgore, W.D., Werner, J. K., Jr., Williams, S. G., & Capaldi V. F., II.** (2024, March). *Risk and resilience for deployment-related insomnia: using existing military data to address knowledge gaps.* In J. K. Werner, Jr., & C. Good, (Co-chairs), Sleep disorders in military service members and veterans [Paper presentation]. Society for Brain Mapping and Therapeutics 21st Annual World Congress, Los Angeles, CA, United States.
- Glickman, G.** (2024, July). *Interventions for optimizing circadian health: From development to implementation* [Invited virtual presentation]. Translational Sensory & Circadian Neuroscience Unit Current Topics in Sleep & Circadian Health. https://youtu.be/YfQLb3bRFSI?si=O_yKgXsnXs3LpcBp
- Glickman, G.** (2024, September). *Using light to reduce fatigue and optimize performance in operational environments* [Invited virtual presentation]. Inter-agency Federal Fatigue Management and Research Work Group Meeting.
- Godin, S., Rice, A., McCarroll, J., Walsh, T., & Cozza, S. J.** (2024, April). *Food insecurity in the U.S.: Implications for military families.* [Poster presentation]. 17th Annual Amygdala, Stress, & PTSD Conference, Bethesda, MD, United States.
- Greene, E. A., Cleaves, E. S., Gentry, M. & Villanueva, R.** (2024, June). *Be a bias buster!* [Workshop presentation]. Association of Directors of Medical Student Education in Psychiatry Annual Meeting, Pittsburgh, PA, United States.
- Hamaoka, D., Cleaves, E., Kels, L. & Steinmann, M.** (2024, June). *Free (or nearly free) tools for your courses you should know and use.* Association of Directors of Medical Student Education in Psychiatry Annual Meeting, Pittsburgh, PA, United States.
- Howe, E. G.** (2024, February). *Military medical ethics* [Virtual presentation]. Columbia University Graduate Ethics Course, New York, NY, United States.
- Howe, E. G.** (2024, March). *Research ethics.* Uniformed Services University School of Medicine Open House, Bethesda, MD, United States.
- Howe, E. G.** (2024, November). *Boundaries or bonding?* University of Chicago The MacLean Center for Clinical Medical Ethics, Chicago, IL, United States.
- Hu, X. Z., Zhang, L., Li, X., Benedek, D. M., & Ursano R. J.** (2024). *The novel involvement of PTSD-associated FKBP5 in protein networks and signaling pathways* [Poster presentation]. 17th Annual Amygdala, Stress, & PTSD Conference, Bethesda, MD, United States.
- Hu, X. Z., Zhang, L., Li, X., Petrovics, G., Ahmed, A. E., Benedek, D. M., & Ursano R. J.** (2024, December). *Association between pre-existing depression and prostate cancer survival: Findings from a prospective study in the PLCO cancer screening trial* [Poster presentation]. Uniformed Services University Neuroscience 2024 Annual Winter Symposium, Bethesda, MD, United States.
- Kumer, K.** (2024, September). *Psych First Aid in the military operational environment: Benefits and limitations.* Mental Health International Symposium for the Armed Forces, Mozambique.
- La Croix, C.** (2024, May). *Post-Covid psychiatric conditions.* Braceland Psychiatric Meeting, US Navy.
- La Croix, C.** (2024, August). *Postvention is prevention.* Star Behavioral Health Providers Event, Washington, DC, United States.
- La Croix, C.** (2024, September). *The cost of caring:*

- Vicarious trauma and resilience.* William S. Fulton, Jr., Appellate Military Judges Conference. Washington, DC, United States.
- La Croix, C.** (2024, October). *Psychiatrically treating the war wounded.* Ukraine Rehabilitation Seminar: Rehabilitation Insights: Translating Success and Addressing the Unique Challenges in the Ukrainian Health System, Warsaw, Poland.
- Lee, R., Watson, N., Danko, J., Hollisperry, M., Porter, C., Isidean, S., Walther, S., Park, K., Cooper, E., & **Glickman, G.** (2024, February). *Melatonin and vaccine response immunity and chronobiology study (MAVRICS): The impact of melatonin and sleep on influenza vaccine immunogenicity.* American Academy of Allergy, Asthma & Immunology Annual Meeting, Washington, DC, United States.
- Medvescek, K., West, J. C., Dalgard, C., Dempsey, C. L., Glickman, G., Zhang, L., & Spangler, P. T.** (2024, August). *Follow-up randomized pilot trial investigating two novel treatments for trauma-related nightmares* [Poster presentation]. American Psychological Association Annual Convention, Seattle, WA, United States.
- Medvescek, K. West, J.C., Dalgard, C., Dempsey, C. Glickman, G., Zhang, L., & Spangler, P.T.** (2024, September). *Quantifying exposure: Novel methods to investigate exposure treatments for trauma-related nightmares* [Poster presentation]. International Society for CNS Clinical Trials and Methodology 2024 Autumn Conference, San Diego, CA, United States.
- Medvescek, K., West, J., & Spangler, P.** (2024, December). *Potential for psychometric assessment of obstructive sleep apnea risk in clinical research screening.* Uniformed Services University Neuroscience 2024 Annual Winter Symposium, Bethesda, MD, United States.
- Morganstein, J. C.** (2024, July). *Disasters and mental health: Principles and practices to foster resilience and sustainment for responders and community members* [Virtual presentation]. Behavioral Health Ad Hoc Working Group, National Urban Search & Rescue System, Federal Emergency Management Agency.
- Morganstein, J. C.** (2024, July). *Disasters & behavioral health: Evidence-based and action-oriented resources to protect communities* [Virtual presentation]. Disaster Behavioral Health Quarterly Partner Meeting, Administration for Strategic Preparedness and Response.
- Morganstein, J. C.** (2024, September). *Disaster & preventive psychiatry: Fostering resilience & sustainment for community members & responders* [Virtual presentation]. The Global Conference: Connections and Disconnections: From Everyday Life to Disasters, sponsored by Centro de Estudos Luis Guedes, Brazil.
- Morganstein, J. C.** (2024, September). *Mental health in war & other disasters: The critical role of leaders in protecting military and civilian communities* [Virtual presentation]. The Advance Research Workgroup, North Atlantic Treaty Organization.
- Morganstein, J. C.** (2024, October). *Disasters and mental health: Principles and practices to foster resilience and sustainment* [Virtual Grand Rounds presentation]. University of Colorado School of Medicine Department of Psychiatry Grand Rounds.
- Morganstein, J. C., West, J. C., Gise, L., Ng, A., & Rorbaugh R.** (2024, May). *Disasters and mental health: Building your skills to care for patients through wildfires, chemical spills, pandemics, climate change, and beyond* [Course presentation]. American Psychiatric Association Annual Meeting, New York, NY, United States.
- Mullinax, M., **Greene, E., Ogle, C. M., Fisher, J. E., & Cozza, S. J.** (2024, May). *Barriers to mental healthcare for military physicians in training: Challenges associated with shared identities* [Poster presentation]. Uniformed Services University Research Days, Bethesda, MD, United States.
- Naifeh, J. A.** (2024, August). *An overview of Army STARRS and STARRS-LS.* Presentation to leadership of the Defense Suicide Prevention Office. Arlington, VA, United States.
- Naik Olson, R., Godin, S., Walsh, T. R., Walsh, A. K., Heintz Morrissey, B. A., & Morganstein, J. C.** (2024). *A quality assurance process model of the comprehensive integrated primary prevention plan to reduce harmful behaviors in the US National Guard.* [Poster presentation]. Uniformed Services University Research Days, Bethesda, MD, United States.
- Nemcek, S. P., **Ogle, C. M., & Cozza, S. J.** (2024, March). *Child maltreatment: How neglect types*

- and other covariates predict removal actions in the US Army. 40th Annual Midwest American Academy of Psychiatry and the Law Annual Conference, Milwaukee, WI, United States.
- Nemcek, S., **Ogle, C. M., Zhou, J., & Cozza, S. J.** (2024, May). *The association of failure to provide physical needs with child removal in U.S. Army families with substantiated incidents of child neglect*. Walter Reed National Military Medical Center 2024 Research & Innovation Month Research Symposium, Bethesda, MD, United States.
- Nemcek, S., **Ogle, C. M., Zhou, J., & Cozza, S. J.** (2024, May). *The association of failure to provide physical needs with child removal in U.S. Army families with substantiated incidents of child neglect* [PowerPoint presentation]. Walter Reed National Military Medical Center Research & Innovation Month Clinical Award Competition.
- Odeh, A., Blumhorst, A., Searfass, D., Weingrad A. B., Mash, H. B. H., Fullerton, C. S., Morganstein, J. C., & Ursano, R. J.** (2024, May). *COVID-19-related life changes and mental health outcomes in National Guard service members* [Poster presentation]. Uniformed Services University Research Days, Bethesda, MD, United States.
- Ogembo, M., **Hamaoka, D., Cleaves, E. S., Meyer, E. G., Pham, A., & Cozza, K. L.** (2024). *Personality disorder: Self-paced learning module*. [Learning module]. Association of Directors of Medical Student Education in Psychiatry Annual Meeting, Pittsburgh, PA, United States. <https://www.admsep.org/subpages/csi/modules/personalitydo2024/index.html#/>
- Ogle, C. M.** (2024, September). *Safe Is Strong: Enhancing safety in young military families* [Invited, virtual presentation]. Cohen Veterans Network, Stamford, CT, United States.
- Ogle, C. M., Cozza, S. J., Ellis, H., Gewirtz, A., & Lieberman, A.** (2024, May). *Navigating child trauma and traumatic grief through cultural lenses in war-affected regions* [Workshop presentation]. National Child Traumatic Stress Network 2024 All-Network Conference, Bethesda, MD, United States.
- Ogle, C. M., Fisher, J. E., Zhou, J., Rose, V. C., Dhanraj, N., & Cozza, S. J.** (2024, September). *Risk factors for child maltreatment vary across maltreatment type* [Poster presentation]. International Society for Traumatic Stress Studies 40th Annual Meeting, Boston, MA, United States.
- Ogle, C. M., Fisher, J. E., Zhou, J., Walsh, T., Nemcek, S., Zuleta, R. F., Fullerton, C. S., Ursano, R. J., & Cozza, S. J.** (2024, April). *Child protective actions in response to specific types of child neglect* [Poster presentation]. 17th Annual Amygdala, Stress, & PTSD Conference, Bethesda, MD, United States.
- Ogle, C. M., Nemcek, S. P., Hisle-Gorman, E., Best, S. M., & Cozza, S. J.** (2024, February). *Child maltreatment in military families: Risk factors and prevention efforts* [Multiple-paper presentation]. 39th Annual San Diego International Conference on Child and Family Maltreatment, San Diego, CA, United States.
- O’Keefe, C. L., Scott, A. A., **Cozza, K. L., Cleaves, E. S., & Hamaoka, D. A.** (2024, June). *What do medical students think about faculty surveys?* [Poster presentation]. Association of Directors of Medical Student Education in Psychiatry Annual Meeting, Pittsburgh, PA, United States.
- Pabst, A.** (2024, November). *Navigating career paths in neuroscience: Transitioning from undergraduate studies to industry & academic research* [Invited presentation]. Augustana University, Sioux Falls, SD, United States.
- Preilipper, S., **Bessman, S.,** Easterling, A., Harrison, E., & **Glickman, G.** (2024, April). *Lighting and mental health: Insights from recent sleep and circadian studies*. 17th Annual Amygdala, Stress, & PTSD Conference, Bethesda, MD, United States
- Preilipper, S., Harrison, E., **Bessman, S.,** Easterling, A., & **Glickman, G.** (2024, May). *Mental health and its relationship with sleep, chronotype, and light in US service members*. Uniformed Services University Research Days, Bethesda, MD, United States.
- Preilipper, S., **Bessman, S.,** Easterling, A., Harrison, E., & **Glickman, G.** (2024, June). *Mental health, sleep, chronotype and light: Exploring these relationships in recent studies of circadian health*. 8th Annual Johns Hopkins Sleep & Circadian Research Day, Baltimore, MD, United States.
- Rakofsky, J. & **West, J. C.** (2024, June). *Educational research: Statistics simplified* [Workshop

- presentation]. Association of Directors of Medical Student Education in Psychiatry Annual Meeting, Pittsburgh, PA, United States.
- Searfass, D., Weingrad, A. B., Blumhorst, A., Odeh, A., Mash, H. B. H., Fullerton, C. S., Morganstein, J. C., & Ursano, R. J.** (2024, May). *Recovery time: Effects of COVID-19-related life changes in activated National Guard service members* [Poster presentation]. Uniformed Services University Research Days, Bethesda, MD, United States.
- Santiago, A., Harrison, E., Easterling, A., **Bessman, S.**, Preilipper, S., & **Glickman, G.** (2024). *Auditory and visual psychomotor vigilance tasks are not interchangeable: Investigating the gold standard for the objective assessment of alertness*. Oak Ridge Institute for Science & Education Summer Student Symposium, Bethesda, MD, United States.
- Scott, A., **Hamaoka, D., Cleaves, E.**, Hawks, M., O'Keefe, C., & **Cozza, K. L.** (2024, June). *Faculty performance evaluations: Three years of lessons learned*. [Poster presentation]. Association of Directors of Medical Student Education in Psychiatry Annual Meeting, Pittsburgh, PA, United States.
- Shor, R.** (2024, May). *Trauma and stress-related reactions: Coping strategies following a traumatic event* [Invited presentation]. Hadassah Wrestling with PTSD: How Healthcare Providers Can Help Win the Battle.
- Spangler, P. T., Dalgard, C., Dempsey, C. L., Glickman, G., Medvescek, K., West, J. C., & Zhang, L.** (2024, August). *Randomized pilot trial of emerging exposure and non-exposure treatments for trauma-related nightmares* [Poster presentation]. Military Health System Research Symposium, Kissimmee, FL, United States.
- Sumberg, L., Berman, R., Qiu, J., Greene, S., Tran, B., Torres, J., Boese, M., & Choi, K.** (2024, December). *Effects of mild closed head injury on microglia morphology in the cerebral cortex of rats* [Poster presentation]. Uniformed Services University Neuroscience 2024 Annual Winter Symposium, Bethesda, MD, United States.
- Tyagi, R., **Cozza, K. L., Mullinex, P., Greene, E. A., Hamaoka, D. A., Cleaves, E., West, J. C., Kumer, K., Serpico, E., Morganstein, J. M., Lachman, L., & Ottolini, M.** (2024, June). *Obtaining and documenting informed consent: An advanced UME cross-specialty, role-playing skill builder* [Poster presentation]. Association of Directors of Medical Student Education in Psychiatry Annual Meeting, Pittsburgh, PA, United States.
- Ursano, R. J.** (2024, January). *Perspectives on prevention and behavioral health across the life cycle: Challenges and opportunities* [Oral presentation]. National Academy of Sciences: Committee on a Blueprint for a National Prevention Infrastructure for Behavioral Health Disorders, Washington DC, United States
- Ursano, R. J.** (2024, June). *Overview of the Center for the Study of Traumatic Stress, Uniformed Services of the Health Sciences, and Department of Defense* [Invited virtual presentation and panel discussion]. All-Ukrainian Scientific and Practical Conference with International Participation: Restoring the Mental Health of Military Personnel, Lviv, Ukraine.
- Ursano, R. J.** (2024, June). *Overview of the Center for the Study of Traumatic Stress, Uniformed Services of the Health Sciences, and Department of Defense* [Invited virtual presentation]. All-Ukrainian Scientific and Practical Conference with International Participation: Restoring the Mental Health of Military Personnel, Lviv, Ukraine.
- Ursano, R. J.** (2024, September). *Personalized preventive medicine for mental health: Protecting the brain combat space* [Virtual presentation]. North Atlantic Treaty Organization Advanced Research Workshop: Digital Tools for Prevention, Mitigation, and Treatment of Traumatic Stress Responses in Terror and War, Tbilisi, Georgia.
- Vigilar, M. V., **Ogle, C. M., Rose, V. C., Zhou, J., Fisher, J. E., & Cozza, S. J.** (2024, October). *Heightened risk of child maltreatment in female active duty service member families* [Poster presentation]. American Academy of Child & Adolescent Psychiatry 2024 Annual Meeting, Seattle, WA, United States.
- Walsh, A. K.** (2024, August). *Project Safe Guard: Evaluating a lethal means safety intervention to reduce firearm suicide in the National Guard* [PowerPoint Presentation]. American Psychological Association Annual Convention, Seattle, WA, United States.
- Walsh, A. K., Bryan, C. J., Anestis, M. D., Betz, M. E., Morganstein, J. C., Heintz Morrissey, B. A.,**

- Godin, S. J.,** & Vernon, E. (2024, August). *The evolution of Project Safe Guard in the National Guard: Towards an integrated sustained approach to firearm injury prevention* [Poster presentation]. Military Health System Research Symposium, Kissimmee, FL, United States.
- Walsh, A. K., Heintz Morrissey, B. A., Collette, C.,** & Ayers, D. (2024, August). *Introduction to Project Safe Guard: Generational expansion* [PowerPoint presentation] National Guard Bureau Resilience, Risk Reduction, & Suicide Prevention 2024 Symposium, Baton Rouge, LA, United States.
- Walsh, T. R., Walsh, A. K., Heintz Morrissey, B. A., Naik Olson, R. K., & Morganstein, J. C.** (2024, August). *A quality assurance process model of the comprehensive integrated primary prevention plan to reduce harmful behaviors in the US National Guard* [Poster presentation]. Military Health System Research Symposium, Kissimmee, FL, United States.
- Wang, J., Biggs, Q. M., Naifeh, J. A., Mash, H. B. H., Thomas, J., Fullerton, C. S., & Ursano, R. J.** (2024, August). *Reactivity to Mortuary Affairs work: A latent class analysis* [Poster presentation]. Military Health System Research Symposium, Kissimmee, FL, United States.
- Wang, J., Naifeh, J. A., Mash, H. B. H., Thomas, J., Morganstein, J. C., Fullerton, C. S., Cozza, S. J., Stein, M. B., & Ursano, R. J.** (2024, April). *Joint influence of attachment styles and social support network on lifetime suicidal behaviors* [Poster presentation]. 17th Annual Amygdala, Stress, & PTSD Conference, Bethesda, MD, United States.
- Warrior, S., Bookwala, N. M., Biggs, Q. M., Moore, J., Fullerton, C. S., Wang, L., & Ursano, R. J.** (2024, May). *Rates of depression in US Army Mortuary Affairs soldiers, 2006 to 2018* [Poster presentation] Uniformed Services University Research Days, Bethesda, MD, United States.
- West, J. C.** (2024, January) *Sustaining the disaster workforce during conflict: What can we learn from combat and operational stress control?* [Virtual presentation]. European College of Neuropsychopharmacology Traumatic Stress Network Hot Topic Virtual Meeting.
- West, J. C.** (2024, March). *Frontline support: The value of embedded mental health programs in the military.* Brain Health Summit, Warsaw, Poland.
- West, J. C.** (2024, July). *Let's Talk About Your Guns: Preventing suicide through personal firearm safety* [Presentation]. US Coast Guard Wellness Wednesday, Bethesda, MD, United States.
- West, J. C.** (2024, August). *Let's Talk About Your Guns: Public health messaging about firearm safety* [Presentation]. American Psychological Association Annual Convention, Seattle, WA, United States.
- West, J. C.,** Gentry, M. T., Villanueva, R., Cotton, N. K., & **Greene, E. A.** (2024, June). *Shaping a caring and inclusive learning environment: Inspiring discussion and thought on addressing microaggressions and student mistreatment* [Workshop presentation]. Association of Directors of Medical Student Education in Psychiatry Annual Meeting, Pittsburgh, PA, United States.
- Younghans, C., Ogle, C. M., Fisher, J. E., & Cozza, S. J. (2024, September). *Reducing injuries and death by promoting shared decision-making about firearm storage practices* [Poster presentation]. International Society for Traumatic Stress Studies 40th Annual Meeting, Boston, MA, United States.

INTERVIEWS AND BRIEFINGS

- Therapeutic Arts Festival** (January 23-25, 2024). Col Kumer served as a panel expert on *Building Health, Wellness, and Community Together* at the British Embassy in Washington, DC.
- Annual Brain Mapping Day at the US Congress** (June 5, 2024). Dr. West participated in this event promoting new diagnostic and therapeutic methods for brain function restoration.
- Pentagon Briefing on STARRS Research (July 15, 2024).** Dr. Ursano, COL Capaldi, Dr. Thomas and Mr. Hurwitz provided updates to DoD and VA senior leaders on STARRS research developments.
- Disaster Behavioral Health Quarterly Partner Meeting (July 30, 2024).** Dr. Morganstein was the inaugural speaker for this US Department of Health and Human Services-led federal behavioral health response meeting, presenting CSTS resources.
- The State of Military Kids and Families in 2024 Convening Event** (Aug 27-29, 2024). Dr. Ogle participated in discussions on behavioral health innovations for military families.

Army National Guard Behavioral Health Briefing (Nov 5, 2024). The CSTS team briefed leadership at the NGB on behavioral health program collaborations.

HSI Meeting (Nov 20, 2024). Drs. A. Walsh and West met with HSI agents and analysts regarding building resilience in child exploitation investigation teams.

AWARDS AND APPOINTMENTS

National Medical Board Service: Col. Kumer served on the National Board of Medical Examiners (NBME) US Medical Licensing Examination Step 2 Clinical Knowledge (CK) standard-setting panel at NBME Headquarters in Philadelphia, PA on April 10-11, 2025. This panel plays a crucial role in evaluating the Step 2 CK pass/fail standard.

Book of the Month: *A Psychiatrist's Guide to Advocacy*, edited by Dr. Vance et al., was selected as *Psychiatry Online's* Book of the Month for October, 2024.

Award for Design Excellence: The Bereaved Family Self-Care Toolkit (SPP) received an American Graphic Design Award for 2024.

Highly Cited Research: "Association of emotion reactivity and distress intolerance with suicide attempts in U.S. Army soldiers" by Dr. Naifeh et al. was among the most-cited papers in *Suicide and Life-Threatening Behavior*.



Dr. Curt West presenting at the American Psychiatric Association conference.

Research Engagement: With 429 new reads, Dr. Regier's research was the second-most-read among USU researchers on ResearchGate for the week of May 5, 2024. Dr. Ursano's publications were the second-most-read from USU on ResearchGate during the weeks of November 4, 2024 (462 new reads) and December 16, 2024 (307 new reads).

Research Recognition: Dr. Steven Nemcek, Child & Adolescent Psychiatry Fellow with the CSTS CFP, won second place at the 16th Annual National Capital Region Research and Inquiry Competition for his project on child neglect and Army family dynamics.

Scholarly Publication Award: The 2024 Association of Directors of Medical Student Education in Psychiatry Scholarly Publication Award was given to USU authors Drs. Meyer, K. Cozza, West and Hamaoka for their article, "The effectiveness of online experiential learning in a psychiatry clerkship," published in *Academic Psychiatry*.

International Recognition: The UN Division of Healthcare Management and Occupational Safety and Health received permission to translate CSTS-published factsheets and resources into 15 UN languages.

VA Research Review Panel: Dr. Dempsey served as a reviewer on the VA Office of Research and Development's Mental and Behavioral Health review panel, covering studies on Veteran mental health, substance use and suicide prevention.

The following person was appointed as Professor:

- Derrick Hamaoka, MD

The following person was appointed as Associate Professor:

- Justin Curley, COL, MC, USA

The following personnel were appointed as Research Assistant Professors:

- Pablo Aliaga, MS
- Sarah Maggio, PhD
- Alexandra Pabst, PhD
- Alexander Rice-Solo, PhD
- Adam Walsh, PhD

CSTS Personnel

DIRECTORS

Robert J. Ursano, MD
Col, MC, FS, USAF (Ret.)
Professor of Psychiatry and
Neuroscience
Department of Psychiatry
Director
CSTS, USU

David M. Benedek, MD
COL, MC, USA (Ret.)
Professor
Department of Psychiatry
Associate Director, Consultation
and Education
CSTS, USU

Stephen J. Cozza, MD
COL, USA (Ret.)
Professor of Psychiatry and
Pediatrics
Department of Psychiatry
Associate Director, CFP
CSTS, USU

Brian W. Flynn, EdD
RADM, USPHS (Ret.)
Adjunct Professor
Department of Psychiatry
Special Advisor to the Director
CSTS, USU

Carol S. Fullerton, PhD
Research Professor
Department of Psychiatry
Scientific Director
CSTS, USU

Paul E. Hurwitz, MPH
Instructor
Department of Psychiatry
Director, Program Operations
(STARRS)
CSTS, USU

Holly H. Mash, PhD
Research Associate Professor
Department of Psychiatry
Assistant Scientific Director
CSTS, USU

Joshua C. Morganstein, MD
CAPT, USPHS (Ret.)
Professor/Assistant Chair
Department of Psychiatry
Deputy Director
CSTS, USU

James A. Naifeh, PhD
Research Associate Professor
Department of Psychiatry
Assistant Scientific Director
CSTS, USU

Jeffrey L. Thomas, PhD
COL, USA (Ret.)
Research Professor
Department of Psychiatry
Executive Director, Center/
Program Operations
CSTS, USU

SCIENTISTS

Pablo A. Aliaga, MS
Research Assistant Professor
Department of Psychiatry
Biostatistician
CSTS, USU

Eric Allely, MD
COL, USA (Ret.)
Senior Researcher, Health Systems
Management
Department of Psychiatry
CSTS, USU

David M. Benedek, MD
COL, MC, USA (Ret.)
Professor
Department of Psychiatry

Associate Director, Consultation
and Education
CSTS, USU

Quinn M. Biggs, PhD, MPH
Research Assistant Professor
Department of Psychiatry
Research Psychologist
CSTS, USU

Robert M. Bossarte, PhD
Professor
Department of Psychiatry and
Behavioral Neurosciences
University of South Florida
Adjunct Professor
Department of Psychiatry
CSTS, USU

Maria Braga, DDS, PhD
Professor
Department of Anatomy,
Physiology and Genetics
CSTS, USU

Allen R. Braun, MD
Senior Scientist
Department of Psychiatry
CSTS, USU

Oscar A. Cabrera, PhD
LTC, MS, USA
Department of Psychiatry
CSTS, USU

Vincent F. Capaldi, II, ScM, MD,
DFAPA, FACP, FAASM
COL, MC, USA
Chair, Department of Psychiatry
Professor of Psychiatry, Medicine
and Neuroscience
Senior Scientist, CSTS
Program Director, Combined
Internal Medicine/Psychiatry
Residency, USU

Kwang Choi, PhD
Associate Professor
Department of Psychiatry
CSTS, USU

Elle S. Cleaves, MD
Lt Col, USAF, MC, FS
Assistant Professor
Director, Psychiatry Clerkship
Department of Psychiatry
CSTS, USU

**Kelly L. Cozza, MD, DLFAPA,
FACLP**
Professor and Vice Chair
(Education)
Director, Departmental Faculty
Appointments, Promotions
and Development
Department of Psychiatry
CSTS, USU

Stephen J. Cozza, MD
COL, USA (Ret.)
Professor of Psychiatry and
Pediatrics
Department of Psychiatry
Associate Director, CFP
CSTS, USU

Justin M. Curley, MD
COL, MC, USA
Deputy Chair
Associate Professor
Department of Psychiatry
CSTS, USU

**Catherine L. Dempsey, PhD,
MPH**
Research Associate Professor
Department of Psychiatry
Research Psychologist
CSTS, USU

Joscelyn E. Fisher, PhD
Research Associate Professor
Department of Psychiatry
Research Psychologist
CSTS, USU

Brian W. Flynn, EdD
RADM, USPHS (Ret.)
Adjunct Professor
Department of Psychiatry
Special Advisor to the Director
CSTS, USU

Michael C. Freed, PhD
Chief, Services Research and
Clinical Epidemiology Branch
National Institute of Mental Health
Department of Psychiatry
CSTS, USU

Carol S. Fullerton, PhD
Research Professor
Department of Psychiatry
Scientific Director
CSTS, USU

Francie H. Gabbay, PhD
Research Associate Professor
Department of Psychiatry
CSTS, USU

James Giordano, PhD
Adjunct Professor
Department of Psychiatry
CSTS, USU

Gena L. Glickman, PhD
Associate Professor
Director, Chronobiology, Light and
Sleep Lab
Department of Psychiatry and
Neuroscience
CSTS, USU

Oscar I. Gonzalez, PhD
MAJ, MC, USA
Research Psychologist
Army Resilience Directorate
Headquarters, US Department of
the Army, DCS, G-1
Department of Psychiatry
CSTS, USU

Elizabeth A. Greene, MD, FAPA
Assistant Professor
Director, Tele/Digital Education
Department of Psychiatry
CSTS, USU

Derrick A. Hamaoka, MD
Col, USAF, MC, FS (Ret.)
Professor
Department of Psychiatry
CSTS, USU

Erin L. Maresh, PhD
Research Psychologist
Department of Psychiatry
CSTS, USU

**Brooke A. Heintz Morrissey,
PhD, LCSW**
LTC, ARNG
Operations Director, SPP & NGP
Department of Psychiatry
CSTS, USU

Harry C. Holloway, MD
COL, MC, USA (Ret.)
Professor Emeritus
Department of Psychiatry
CSTS, USU

Marjan G. Holloway, PhD
Professor
Departments of Medical &
Clinical Psychology and
Psychiatry
CSTS, USU

Edmund G. Howe III, MD, JD
Professor
Department of Psychiatry
CSTS, USU

Xianzhang Hu, MD, PhD
Department of Psychiatry
CSTS, USU

Luke R. Johnson, PhD

Associate Professor
of Psychology
University of Tasmania
Adjunct Assistant Professor
Department of Psychiatry
CSTS, USU

Tzu Cheg Kao, PhD

Professor
Departments of Preventive
Medicine & Biometrics and
Psychiatry
CSTS, USU

Elie Karam, MD

Professor and Chairman
Department of Psychiatry
American University, Beirut
CSTS, USU

David S. Krantz, PhD

Emeritus Professor
Departments of Medical & Clinical
Psychology and Psychiatry
CSTS, USU

Kimberly D. Kumer, MD

Col, USAF, MC
Assistant Professor
Director of Operational
Curriculum
Department of Psychiatry
CSTS, USU

Christina La Croix, DO

CDR, USN
Assistant Professor
Departments of Physical Medicine
& Rehabilitation and Psychiatry
CSTS, USU

He Li, MD, PhD

Associate Professor
Department of Psychiatry
CSTS, USU

Xian Liu, PhD

Research Professor
Deployment Health Clinical
Center
WRNMMC
Senior Scientist
CSTS, USU

Sarah Maggio, PhD

Research Assistant Professor
Department of Psychiatry
Senior Portfolio Manager
CSTS, USU

Erin L. Maresh, PhD

Research Psychologist
Department of Psychology
CSTS, USU

Holly H. Mash, PhD

Research Associate Professor
Department of Psychiatry
Assistant Scientific Director
CSTS, USU

James E. McCarroll, PhD, MPH

COL, USA (Ret.)
Research Professor
Department of Psychiatry
CSTS, USU

Eric G. Meyer II, MD

Lt Col, USAF, MC, FS
Professor
Department of Psychiatry
CSTS, USU

Joshua C. Morganstein, MD

CAPT, USPHS (Ret.)
Professor/Assistant Chair
Department of Psychiatry
Deputy Director
CSTS, USU

James A. Naifeh, PhD

Research Associate Professor
Department of Psychiatry
Assistant Scientific Director
CSTS, USU

Thomas H. Nassif, PhD

MAJ, MS, USA
Assistant Professor and Deputy
Vice Chair for Research
Department of Psychiatry
CSTS, USU

Christin M. Ogle, PhD

Research Assistant Professor
Department of Psychiatry
Child Research Psychologist
CSTS, USU

Alexandria Pabst, PhD

Research Assistant Professor
Department of Psychiatry
Research Psychologist
CSTS, USU

Darrel A. Regier, MD, MPH

RADM, USPHS (Ret.)
Adjunct Professor
Department of Psychiatry
Senior Scientist
CSTS, USU

Dori B. Reissman, MD, MPH

RDML, USPHS (Ret.)
Adjunct Professor
Department of Psychiatry
CSTS, USU

Alexander J. Rice, PhD

Research Assistant Professor
Department of Psychiatry
CSTS, USU

Dale Russell, PhD

Director of Research/Senior
Research Psychologist
Commander, Naval Surface Forces
Behavioral Science Researcher
Department of Psychiatry
CSTS, USU

Patcho N. Santiago, MD, MPH
CAPT, MC, USN (Ret.)
Associate Dean for Diversity &
Inclusion
School of Medicine
Associate Professor
Department of Psychiatry
CSTS, USU

Eric Serpico, DO
CDR, MC, USN
Assistant Professor
Department of Psychiatry
CSTS, USU

Rachel Shor, PhD
Research Assistant Professor
Department of Psychiatry
Research Psychologist
CSTS, USU

Patricia T. Spangler, PhD
Research Assistant Professor
Department of Psychiatry
Clinical Research Psychologist
CSTS, USU

Madeline Teisberg, DO
LCDR, MC, USN
Assistant Professor
Department of Psychiatry
CSTS, USU
Faculty, National Capital
Consortium Psychiatry
Residency
WRNMMC
CSTS, USU

Jeffrey L. Thomas, PhD
COL, USA (Ret.)
Research Professor
Department of Psychiatry
Executive Director, Center/
Program Operations
CSTS, USU

E. Fuller Torrey, MD
Executive Director
Stanley Medical Research Institute
CSTS, USU

Robert J. Ursano, MD
Col, MC, FS, USAF (Ret.)
Professor of Psychiatry and
Neuroscience
Department of Psychiatry
Director
CSTS, USU

Mary C. Vance, MD, MSc
LCDR, USPHS
Director, Behavioral Health, Pacific
Area, USCG
Assistant Professor
Department of Psychiatry
CSTS, USU

Adam Walsh, PhD, LCSW
Research Assistant Professor
Department of Psychiatry
Senior Scientist
CSTS, USU

**Tasaneé Walsh, PhD, MPH,
MSW**
Research Assistant Professor
Department of Psychiatry
Senior Scientist
CSTS, USU

Jing Wang, PhD
Research Associate Professor
Departments of Psychiatry and
Medical & Clinical Psychology
Quantitative Psychologist
CSTS, USU

Leming Wang, MS
Instructor
Department of Psychiatry
Biostatistician
CSTS, USU

Maree J. Webster, PhD
Research Assistant Professor
Department of Psychiatry
CSTS, USU
Director
Laboratory of Brain Research
Stanley Medical Research Institute
CSTS, USU

Lars Weisaeth, MD
Professor
Division of Disaster Psychiatry
University of Oslo
CSTS, USU

James C. West, MD
CAPT, MC, USN (Ret.)
Associate Professor and Vice
Chair for Research
Department of Psychiatry
CSTS, USU

Ronald Whalen, PhD, LMSW
Senior Research Social Worker
Department of Psychiatry
CSTS, USU

Kathleen Wright, PhD
Former Director (Ret.)
Force Health Protection Program
USAMRU-E
WRAIR
CSTS, USU

Gary H. Wynn, MD
COL, MC, USA (Ret.)
Professor
Department of Psychiatry
Senior Scientist
CSTS, USU

Lei Zhang, MD
Associate Professor
Department of Psychiatry
Senior Scientist
CSTS, USU

PROGRAM MANAGEMENT

Rachel Audant, MA
Program Manager
Department of Psychiatry
CSTS, USU

Wafa Azgugu, MS
Clinical Coordinator II
Department of Psychiatry
CSTS, USU

Kristin Baker, MSW, LCSW
Behavioral Health Consultant
Department of Psychiatry
CSTS, USU

Sara Bessman, MS
Program Manager
Department of Psychiatry
CSTS, USU

Alexandra Blumhorst, BS
Study Coordinator II
Department of Psychiatry
CSTS, USU

Elisa Childs, PhD, MSW, LCSW
Program Manager/Evaluator
Department of Psychiatry
CSTS, USU

Christy Collette, MA
Senior Operations Manager, NGP
Department of Psychiatry
CSTS, USU

Natasha Dhanraj, BS
Study Coordinator
Department of Psychiatry
CSTS, USU

**Jacqueline Dotson, MSW, LCSW,
BCD**
Behavioral Health Consultant
Department of Psychiatry
CSTS, USU

**Katie Duffy, LCSW, LCAC,
MAC, BCD**
Behavioral Health Consultant
Department of Psychiatry
CSTS, USU

**Leah McGowan Fletcher, MSW,
LCSW, BCD**
LTC, MS, ARNG
Senior Operations Manager,
Army Behavioral Health and
National Guard Programs
Department of Psychiatry
CSTS, USU

Shira Godin, BS
Study Coordinator
Department of Psychiatry
CSTS, USU

Amber Hampton, MSN, RN
Clinical Coordinator II
Department of Psychiatry
CSTS, USU

**Brooke A. Heintz Morrissey,
PhD, LCSW**
LTC, ARNG
Operations Director
Suicide Prevention Program, &
Army Behavioral Health and
National Guard Programs
Department of Psychiatry
CSTS, USU

Joseph Hooke, BS
Study Coordinator
Department of Psychiatry
CSTS, USU

Pewu Lavela, BS
Study Coordinator
Department of Psychiatry
CSTS, USU

Laura Liu, BS, RN
Clinical Coordinator II
Department of Psychiatry
CSTS, USU

**Elizabeth Lute, MBA HM,
BSN, RN**
Clinical Coordinator II
Department of Psychiatry
CSTS, USU

John Lyons, MSc
Study Coordinator
Department of Psychiatry
CSTS, USU

Sarah Maggio, PhD
Research Assistant Professor
Department of Psychiatry
Senior Portfolio Manager
CSTS, USU

Andrew (Scott) McRae, MSW
Program Manager III
Department of Psychiatry
CSTS, USU

Kristina Medvescek, MPH
Study Coordinator
Department of Psychiatry
CSTS, USU

Miranda Meyer, MPA
Program Manager
Department of Psychiatry
CSTS, USU

Yumina Myers, MEd
Senior Operations Manager
Department of Psychiatry
CSTS, USU

Amila Odeh, BS
Study Coordinator
Department of Psychiatry
CSTS, USU

Joseph Piemontese, BS
Information Technology Specialist
Department of Psychiatry
CSTS, USU

Deborah M. Probe, MA
Project Coordinator
Department of Psychiatry
CSTS, USU

Amiris Roberson, MPH, CHES
Senior Program Coordinator
Department of Psychiatry
CSTS, USU

Evan Salerno, MA
Study Coordinator
Department of Psychiatry
CSTS, USU

Devinn Searfass, MA
Study Coordinator
Department of Psychiatry
CSTS, USU

**Robin Sontheimer, MSW,
LCSW-C**
Behavioral Health Consultant
Department of Psychiatry
CSTS, USU

Jeremiah Trapp, MSW, LCSW
Behavioral Health Consultant
Department of Psychiatry
CSTS, USU

Aaron Weingrad, BS
Assistant to the Director
Scientific Program Coordinator II
Department of Psychiatry
CSTS, USU

BIostatisticians

Pablo A. Aliaga, MS
Research Assistant Professor
Department of Psychiatry
CSTS, USU

Leming Wang, MS
Instructor
Department of Psychiatry
CSTS, USU

Jingning Ao, MPH
Biostatistician
Department of Psychiatry
CSTS, USU

Matthew Georg, MPH
Data Analyst
Department of Psychiatry
CSTS, USU

Katy Haller, MSPH
Biostatistician
Department of Psychiatry
CSTS, USU

Jing Zhou, MS
Biostatistician
Department of Psychiatry
CSTS, USU

FINANCIAL MANAGEMENT

Diana Monday
Administrative Assistant II &
Presentations Coordinator
Department of Psychiatry
CSTS, USU

Joshua Ruff, BA
Senior Manager, Finance
Operations
Department of Psychiatry
CSTS, USU

CSTS FELLOWSHIP AWARD RECIPIENTS

Mydirah Littlepage-Saunders

MILITARY SUPPORT OPERATIONS

MSgt Jessica Moore

STAFF

Myshak Abdi
Mona Al-Bizri
Kirstin Battles
Rina Berman
Ashley Bernard
Jennifer Bivin
Nur Bookwala
Alison Clark
Sama Elmahdy
Aamina Khattak
Benjamin Kruger
Xiaoxia Li
Carina Martin
Sierra Martin
Sabreen Mohammed
Hanna Nettles
Rony Ngamliya-Ndam

Rehana Naik Olson
Samuel Nunn
Nicole Schlegel
Jessica Simanjuntak
Luke Sumberg
Sonia Warrior
Miahjé Williams
Qing-Feng Yang

STRATEGIC BOARD MEMBERS

Terry M. Rauch, PhD (Chair)
Director, Medical Research and
Development
Health Readiness Policy and
Oversight, Health Affairs
DoD

Amy B. Adler, PhD
Senior Scientist, Center for
Military Psychiatry and
Neuroscience
WRAIR

**Matthew E. Kleiman, MSW
RADM, USPHS**
Assistant Surgeon General
USPHS

Harvey B. Pollard, MD, PhD
Department of Anatomy,
Physiology & Genetics
USU

David Riggs, PhD
Professor, Director for the Center
for Deployment Psychology
USU

Rudy P. Rull, PhD, MPH
Principal Investigator, Millennium
Cohort Study
Department Head, Deployment
Health Research
Naval Health Research Center

Paula P. Schnurr, PhD
Executive Director, National
Center for Posttraumatic Stress
Disorder
VA

**Delores Johnson Davis, MA,
MSW**
Federal Executive (Retired)

Dori B. Reissman, MD, MPH
RADM, USPHS (Retired)

Eric B. Schoomaker, MD, PhD
LTG, USA (Retired)
Department of Military and
Emergency Medicine
USU
Former US Army Surgeon General
and
Commanding General of the US
Army Medical Command

SCIENCE COLLABORATIVE MEMBERS

James E. Barrett, PhD
Emeritus Professor and Former
Chairman
Departments of Pharmacology
and Physiology
Drexel University
College of Medicine

Paul D. Bliese, PhD
Professor
Department of Management
University of South Carolina
Darla Moore School of Business

Robert Bossarte, PhD
Professor
Departments of Psychiatry and
Behavioral Neurosciences
University of South Florida
Adjunct Professor
Department of Psychiatry
CSTS, USU

David Brody, MD, PhD
Professor
Department of Neurology Director
Center for Neuroscience and
Regenerative Medicine
USU

M. Richard Fragala, MD
COL, USAF, MC, FS (Ret.)
Professor
Department of Psychiatry
USU

Matthew J. Friedman, MD, PhD
Professor
Department of Psychiatry
Professor
Department of Pharmacology &
Toxicology
Dartmouth University
Geisel School of Medicine
Director Emeritus
Leahy-Friedman National
PTSD Brain Bank
Senior Advisor
National Center for PTSD
VA

Harry C. Holloway, MD
COL, MC, USA (Ret.)
Professor Emeritus
Department of Psychiatry
USU

Ronald C. Kessler, PhD
McNeil Family Professor
Department of Health Care Policy
Harvard Medical School

Craig H. Llewellyn, MD
Professor
Department of Military &
Emergency Medicine
USU

Irwin Lucki, PhD
Professor and Chair
Department of Pharmacology &
Molecular Therapeutics
USU

Matthew K. Nock, PhD
Edgar Pierce Professor and Chair
Department of Psychology
Harvard University

Francis O'Conner, MD, MPH
COL, MC, USA
Professor
Department of Military &
Emergency Medicine
USU

Harvey B. Pollard, MD, PhD
Professor
Department of Anatomy,
Physiology & Genetics
USU

Robert M. Post, MD
Head
Bipolar Collaborative Network
Former Chief
Biological Psychiatry Branch
NIMH

David Riggs, PhD
Professor and Chair
Department of Medical & Clinical
Psychology
Executive Director
Center for Deployment
Psychology
USU

Arieh Y. Shalev, MD
Professor
Department of Psychiatry
New York University Professor
Department of Psychiatry
Hadassah University School of
Medicine

M. Katherine Shear, MD
Professor
Department of Psychiatry in Social
Work
Columbia University School of
Social Work
Columbia University College of
Physicians and Surgeons
Director, Center for Complicated
Grief
Columbia University

Murray B. Stein, MD, MPH
VA San Diego Healthcare System
Distinguished Professor
Departments of Psychiatry and
Family Medicine & Public
Health
University of California, San Diego

Lars Weisaeth, MD
Professor
Division of Disaster Psychiatry
University of Oslo

DISTINGUISHED FORMER SCIENCE COLLABORATIVE MEMBERS & EMERITUS FRIENDS OF CSTS

Herbert A. Hauptman, PhD
(1917-2011)
1985 Nobel Laureate,
Chemistry
President
Hauptman-Woodward
Medical Research Institute
Research Professor
Department of Biophysical
Sciences
Adjunct Professor
Department of Computer
Science
University of Buffalo

Joshua Lederberg, PhD,
ForMenRS
(1925-2008)
1958 Nobel Laureate, Physiology
or Medicine
Professor Emeritus
Department of Molecular
Genetics and Informatics
Rockefeller University
Founder, Department of Medical
Genetics
University of Wisconsin –
Madison

David H. Marlowe, PhD
(1931-2014)
Senior Lecturer
Department of Psychiatry
USU
Former Chief
Department of Military
Psychiatry
WRAIR Fellow
American Anthropological
Association



The second season of the Let's Talk About Your Guns podcast was produced in 2024 and is available @ <https://www.cstsonline.org/suicide-prevention-program/podcasts/lets-talk-about-your-guns>

Partnerships

The Center has worked with organizations in the public and private sectors through research partnerships, project collaborations, consultations and trainings. CSTS would like to acknowledge and thank our partners and collaborators listed below:

Administration for Strategic Preparedness and Response (ASPR)
Alfred P. Sloan Foundation
American Academy of Child and Adolescent Psychiatry (AACAP)
American Association for the Advancement of Science (AAAS)
American Gold Star Mothers, Inc.
American Psychiatric Association (APA)
American Psychological Association (APA)
Architect of the Capitol
Armed Forces Retirement Home
Army National Guard (ARNG)
Broad Institute
The Carter Center
Catholic University of America (CUA)
Center for Health Care Research Medical University of South Carolina (MUSC)
Centers for Disease Control and Prevention (CDC)
Columbia University
Columbia University Mailman School of Public Health
Cornell University
Dartmouth University
Defense Advanced Research Projects Agency (DARPA)

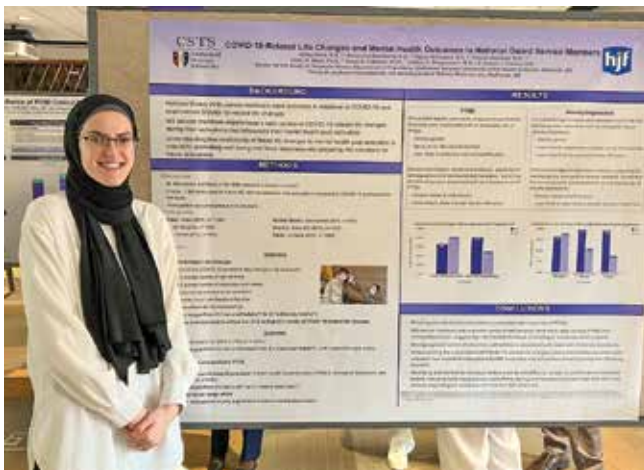
Defense Centers of Excellence for Psychological Health and Traumatic Brain Injury (DCOE TBI)
Defense Health Agency (DHA)
Defense Institute for Medical Operations (DIMO), Mexico
Department of Behavioral Health (DBH), The District of Columbia
Department of Homeland Security (DHS)
Deployment Health Clinical Center
Disaster Psychiatry Canada
Dover Air Force Base
Drexel University
European College of Neuropsychopharmacology (ECNP)
Federal Bureau of Investigation (FBI)
Federal Emergency Management Agency (FEMA)
Florida Department of Health
Fort Bragg, NC (renamed Fort Liberty)
Fort Hood, TX (renamed Fort Cavazos)
Fort Lee, VA (renamed Fort Gregg Adams)
Fort Stewart, GA
George C. Marshall Center for European Security
Gold Star Wives of America, Inc.
Harvard Medical School
Harvard T.H. Chan School of Public Health
Henry M. Jackson Foundation for the Advancement of Military Medicine, Inc. (HJM)
Human Performance Resources by CHAMP (HPRC)

Immigration and Customs Enforcement (ICE)
International Initiative on Mental Health Leadership (IIMHL)
International Ministerial Five Eyes Alliance
International Society for Traumatic Stress Studies (ISTSS)
Israel Defense Forces (IDF)
Embassy of Italy, Washington, DC
Joint Base Lewis-McChord
Joint Mortuary Affairs Center (JMAC) and School, Fort Lee (renamed Fort Gregg-Adams)
Las Vegas Psychiatric Association
Mass General Brigham
Military Child Education Coalition (MCEC)
Military Mortuary Affairs (MA)
University of Miami Miller School of Medicine
Mozambique Defence Armed Forces
National Association for PTSD
National Association of State Mental Health Program Directors (NASMHPD)
National Center for Post-Traumatic Stress Disorder of the VA (NCPTSD)
National Child Traumatic Stress Network (NCTSN)
National Committee for Employer Support of the Guard and Reserve (ESGR)
National Defense Medical Center, Taiwan
National Fallen Firefighters Foundation
National Guard Bureau (NGB)
National Institute for Occupational Safety and Health (NIOSH)

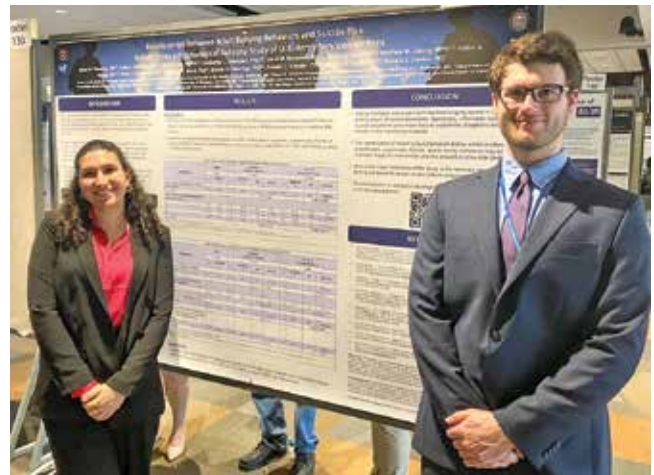
National Institute of Mental Health (NIMH)
 National Institutes of Health (NIH)
 National Military Family Association (NMFA)
 National Intrepid Center of Excellence (NICoE)
 North Atlantic Treaty Organization (NATO)
 Norwegian Armed Forces
 Rockefeller University
 Rutgers University Cell & DNA Repository (RUCDR)
 Rutgers School of Social Work
 Armed Forces of Senegal
 Sesame Workshop
 Stanford University
 State of California
 State of Colorado
 State of Texas
 State of Maryland
 Substance Abuse and Mental Health Services Administration (SAMHSA)
 Syracuse University
 Syracuse VA Medical Center
 Tragedy Assistance Program for Survivors (TAPS)

Tulane School of Social Work
 Ukraine
 Uniformed Services University (USU)
 Union Pacific Railroad
 US Agency for International Development (USAID)
 US Air Force (USAF)
 US Army (USA)
 US Army Family Advocacy Program (FAP)
 US Army Family Programs
 US Army Installation Management Command (IMCOM)
 US Army Medical Research & Development Command (MRDC)
 US Coast Guard (USCG)
 US Department of Defense (DoD)
 US Department of Energy (DoE)
 US Department of Health and Human Services (DHHS)
 US Department of Homeland Security (DHS)
 US Department of Justice (DOJ)
 US Department of State (DoS)
 US Department of Veterans Affairs (VA)
 US National Guard (NG)

US Postal Service (USPS)
 University of California – Los Angeles (UCLA)
 University of California – San Diego (UCSD)
 University of Michigan
 University of Pennsylvania
 University of Pittsburgh
 University of Virginia (UVA)
 University of Virginia’s Critical Incident Analysis Group (CIAG)
 University of Washington
 Washington VA Medical Center
 Vibrant Emotional Health
 Walter Reed Army Institute of Research (WRAIR)
 Walter Reed National Military Medical Center (WRNMMC)
 World Psychiatric Association (WPA)
 Wright State University
 Yale University
 Yale School of Medicine and VA Connecticut Healthcare System (VACHS)
 Yellow Ribbon Reintegration Program (YRRP)
 Zero to Three



Amila Odeh poster presentation at USU Research Days.



Sama Elmahdy and Luke Sumberg poster presentation at USU Research Days.

CSTS
Uniformed Services University
Center for the Study of Traumatic Stress

CSTS | Department of Psychiatry | Uniformed Services University | 4301 Jones Bridge Road, Bethesda, MD 20814-4799 | www.CSTSONline.org

UNDERSTANDING MORAL INJURY

What is Moral Injury (MI)?

- MI is characterized by intense and persistent negative thoughts and feelings, such as guilt, shame, and remorse about behaviors that are in violation of what one believes to be just, honorable, or decent.
- MI can result from self-perceived failures to live up to one's own moral expectations, or witnessing perceived moral violations or failures of one's leadership, organization, or community to prevent harm.
- Although MI can result from non-threatening situations, it often occurs when sudden actions are required during dire or life-threatening situations.
- MI is a topic of increasing interest as its definition is further clarified.

Who is at risk for MI?

- Military service members, first responders, law enforcement, health care providers, and child protective service professionals are among professional groups more likely to face situations that lead to MI.
- Examples of situations that can lead to MI include:
 - A military service member kills a noncombatant in response to a sense of danger to self or others, but later learns that the person was unarmed.
 - A health care provider needs to make triage decisions after a major disaster regarding who receives care, resulting in the death of those that can't be quickly treated.
 - Firefighters are unable to rapidly extinguish a fire in a neighborhood, resulting in prevented fire to prevent severe injuries and deaths.
 - A police officer observes a superior falsely incriminating an innocent defendant.

MI can result in a range of behaviors that can negatively affect functioning including: Withdrawal from social situations and loneliness; difficulties completing daily activities (i.e., self care, eating); occupational burnout; substance misuse; sleep disturbance; poor job satisfaction; suicidal ideation; irritability toward others; interpersonal conflict; and development of mental disorders (e.g., depression, anxiety).

MI often co-occurs with posttraumatic stress disorder (PTSD), but is distinct

- Although both MI and PTSD can result from high stress situations and traumatic experiences, they are different.
 - PTSD involves intrusive and distressing symptoms resulting from a life-threatening event.
 - MI involves guilt, shame, or betrayal from the perceived violation of one's deeply held beliefs.
- MI can arise in the absence of post-traumatic symptoms.
- Individuals with PTSD can also experience MI if the traumatic experience involved perceived moral violations.
- The treatment of PTSD symptoms and MI are different.

What can help a person struggling with MI?

- Early intervention after experiencing a potentially morally violating event can be beneficial.
- Possible actions for relieving MI include:
 - Holding open and non-defensive discussions about the perceived morally injurious event
 - Reminding people that sometimes things don't turn out well and it's not their fault
 - Huddling after stressful events and allowing leaders to address issues of self-blame and misperceptions
 - Leadership being accountable for wrongful actions
 - Recognizing those involved in problematic events may fear consequences for their actions.
 - Accepting responsibility for one's actions while maintaining a fair and balanced perspective of events
 - Appreciating challenges to making decisions and acting in high-stakes circumstances
 - Recognizing limitations of personal agency (i.e., little time to think before acting, lack of adequate knowledge, limited visibility)
 - Forgiving oneself or others for actions outside of one's control
 - Seeking help from friends, colleagues, and family
 - Seeking professional help (e.g., behavioral health, spiritual guidance)
- Some treatments (i.e., cognitive behavioral therapy, acceptance and commitment therapy, cognitive processing therapy) have shown to be helpful.

Continued

CSTS
Uniformed Services University
Center for the Study of Traumatic Stress

CSTS | Department of Psychiatry | Uniformed Services University | 4301 Jones Bridge Road, Bethesda, MD 20814-4799 | www.CSTSONline.org

COPING WITH STRESS FOLLOWING A MASS SHOOTING

Mass shootings and other disaster events can be extremely stressful. Mobile devices and the internet provide instant access to the details of these events, but can also overwhelm us. Graphic images and videos, often seen in real time, can be very distressing. The seemingly random nature of these events as well as the 24/7/365 access to information about disasters around the world can leave us feeling unsafe and in persistent danger after a mass shooting occurs. Constantly feeling unsafe can lead to a variety of behaviors such as trouble sleeping, irritability, difficulty concentrating, increased use of alcohol and tobacco, social isolation, and fear of those around us. In addition to the imagery, news commentary and political rhetoric that surround these events can enhance distress as well as mistrust, and further community divisions.

It is important to manage our response to mass shootings so we are able to care for ourselves, our families, and our communities. Below are steps to help people cope more effectively with stress after a mass shooting.

- Difficulty with sleep, irritability, and trouble concentrating are normal responses following a mass shooting; talk with your Primary Care Provider if these persist or cause problems with relationships or performance at home or work.
- Stay connected with other people, such as friends, family, and neighbors, that provide positive and helpful support; social support helps people recover from stressful situations.
- If going to public places or traveling causes distress, go with other people or in groups until distress reduces.
- Check in with other people that were affected; reaching out to connect with others can be helpful to both of you.
- Avoid increasing alcohol and tobacco to cope with stress; use behavioral techniques to relax (such as breathing, imagery, and muscle relaxation) that do not have negative health effects.

It is important to manage our response to mass shootings so we are able to care for ourselves, our families, and our communities.

- Be cautious of news or other commentary that scapegoats large groups of people for the actions of a single individual; these perspectives often damage community connections and may increase the likelihood of future violence.
- Limit exposure to graphic images and videos on the news and social media, especially for children.
- It is important to talk with children and ask questions to learn their understanding of a mass shooting event. Consider the following when talking with children:
 - Use age-appropriate language, ask questions about what they may have seen or heard and listen to their concerns; respond in a non-judgmental and empathic way.
 - Pre-school and early school aged children often wonder if they have caused a bad thing to happen; if they have become aware of a mass shooting, they should be told directly it is not their fault.
 - Remind children and adolescents that even though some people hurt other people, there are many people working to keep them safe such as police, fire and rescue, and healthcare providers.

Additional Resources

- National Child Traumatic Stress Network – Catastrophic Violence Recovery
<https://www.nctsn.org/what-is-child-trauma/trauma-types/terrorism-and-violence>
- Center for the Study of Traumatic Stress
<http://www.cstsonline.org>

CSTS
Uniformed Services University
Center for the Study of Traumatic Stress

CSTS | Department of Psychiatry | Uniformed Services University | 4301 Jones Bridge Road, Bethesda, MD 20814-4799 | www.CSTSONline.org

SAFETY, RECOVERY AND HOPE AFTER DISASTER

HELPING COMMUNITIES AND FAMILIES RECOVER

Disasters can present a cascade of impacts to those affected—individuals, families and communities. These disasters often promote feelings of fear, confusion, grief, helplessness, anxiety, anger, guilt and even diminished confidence in self or others. A variety of helpful interventions can assist individuals and communities to recover.

Following a disaster, governments and relief organizations play an important role in reducing distress for both victims and the broader society.

- Continue to provide accurate information about the disaster or trauma and the relief efforts. This will help people understand the situation (calming). Help people contact friends or loved ones (connectedness).
- Keep families together; keep children with parents or other close relatives whenever possible (connectedness).
- Give practical suggestions that encourage people towards helping themselves and meeting their own needs (self-efficacy).
- Direct people to locations of available government and non-government services (hopefulness).
- If you know that more help and services are on the way, remind people of this when they express fear or worry (hopefulness).

DO NOT:

- Force people to share their stories with you, especially very personal details (may decrease calming).
- Give simple reassurances like "everything will be ok" or "at least you survived" (often diminishes calmness).
- Tell people what you think they should be feeling, thinking or doing now or how they should have acted earlier (decreases self-efficacy).
- Tell people why you think they have suffered by giving reasons about their personal behaviors or beliefs (also decreases self-efficacy).
- Make promises that may not be kept (decreases hope).
- Criticize existing services or relief activities in front of people in need of these services (diminishes hope and calming).

Continued

Disasters can present a cascade of impacts to those affected—individuals, families and communities. These disasters often promote feelings of fear, confusion, grief, helplessness, anxiety, anger, guilt and even diminished confidence in self or others. A variety of helpful interventions can assist individuals and communities to recover.

Following a disaster, governments and relief organizations play an important role in reducing distress for both victims and the broader society.

When interacting with individuals affected by a disaster event, there is consensus among international disaster experts and researchers that Psychological First Aid (PFA) can help alleviate painful emotions and reduce further harm from initial reactions to disasters. Your actions and interactions with others can help provide PFA to people in distress, by creating and sustaining an environment of (1) safety, (2) calmness, (3) connectedness to others, (4) self-efficacy—or empowerment, and (5) hopefulness. Consider the following suggestions:

DO:

- Help people meet basic needs for food and shelter, and emergency medical attention. Provide, simple and accurate information on how to obtain these (safety).
- Listen to people who wish to share their stories and emotions; remember there is no wrong or right way to feel (calming).
- Be friendly and compassionate even if people are being difficult (calming).

CSTS
Uniformed Services University
Center for the Study of Traumatic Stress

CSTS | Department of Psychiatry | Uniformed Services University | 4301 Jones Bridge Road, Bethesda, MD 20814-4799 | www.CSTSONline.org

MANAGING STRESS DURING ORGANIZATIONAL CHANGE

Changes in the workplace such as restructuring, downsizing, or shifts in organizational priorities can create uncertainty and stress, often making it difficult for individuals to effectively manage daily responsibilities. Questions about possible loss of employment can understandably bring additional stress and anxiety. Recognizing normal stress responses and adopting strategies for both the workplace and home can help maintain our ability to function while managing with challenging times.

Changes in the workplace such as restructuring, downsizing, or shifts in organizational priorities can create uncertainty and stress, often making it difficult for individuals to effectively manage daily responsibilities.

1. At Work

- Practice self-care at work:** Take short breaks, step outside, and engage in breathing exercises to stay grounded. Ensure that you are eating enough and drinking enough water throughout the day. Limit consumption of caffeine, which can increase stress.
- Maintain routine and structure:** Consistency provides a sense of control in uncertain times.
- Focus on task management:** Break down work into manageable steps to prevent feeling overwhelmed.
- Seek and share support:** Being connected to others can be helpful. Share concerns with trusted colleagues and supervisors. Recognize that your colleagues may be experiencing stress differently. Show patience, offer encouragement, and support one another during periods of change and uncertainty to build shared resilience.
- Limit exposure to workplace negativity:** Avoid speculation that fuels anxiety. If workplace news is causing distress, consider taking breaks from it, and balance difficult conversations with constructive or uplifting activities.
- Stay informed from reputable sources:** During uncertain times rumors can abound. Ensure information is valid and up-to-date before acting upon it. Official workplace communications should be trusted and prioritized.
- Seek professional help:** If you are struggling with the level of distress you are experiencing, contact someone who can provide professional assistance (e.g., primary care provider, mental health clinician, spiritual advisor).

Common Reactions to Stress

During times of change, it is common to experience a range of emotional and physical stress responses, including:

- Sleep disruptions:** Trouble falling asleep, staying asleep, or experiencing restless nights may occur.
- Emotional responses:** Feelings of helplessness, frustration, or fear of the unknown, may be challenging to manage. These feelings may lead to increased irritability or problematic anger, that cause us to act in ways that are hurtful to ourselves or those around us.
- Distressed thinking:** Increased uncertainty can lead to overthinking, rumination, and a heightened sense of threat.
- Panic:** Less commonly, physical symptoms, such as shortness of breath, racing heart, dizziness, and difficulty concentrating may arise.

Practical Actions to Manage Stress

During times of uncertainty, taking proactive steps can help manage stress and improve overall well-being. Below are practical strategies for both the workplace and home to maintain balance and resilience with the goals of *staying calm, focusing on the things you can control, staying connected with others, and maintaining hope in the face of uncertainty.*

Examples of knowledge dissemination via CSTS fact sheets.



Winning team at Department of Psychiatry off-site meeting (sitting L to R: Drs. Fullerton and Mash, standing: Eliza Narvaez, Evan Salerno, Drs. Thomas Nassif and Stephen Cozza).



CSTS field trip to the National Guard Memorial Museum, Washington DC.

FUNDED GRANTS

EXTERNALLY FUNDED AWARDS (Jan-Dec 2024)	FUNDING INSTITUTION
Pilot Trial Comparing Exposure and Non-Exposure Treatments for Post-trauma Nightmares and Insomnia: Nightmare Deconstruction and Reprocessing vs. NightWare Wristband (NDR)	Defense Health Program (DHP)
Brain Bank Project: Consortium for the Translational Neuroscience and Treatment of Stress and PTSD (VA Biorepository Brain Bank: PTSD Brain Bank Protocol)	Department of Veterans Affairs (VA)
Study to Assess Risk and Resilience in Servicemembers – Longitudinal Study (STARRS-LS)	Defense Health Program (DHP)
Central Nervous System (CNS) Correlates Study	Military Operational Medicine Research Program (MOMRP)
Army National Guard Behavioral Health Project (ARNG BH)	Army National Guard (ARNG)
National Guard Bureau (NGB) Joint Staff Prevention Workforce Project	National Guard Bureau (NGB)
Center for the Study of Traumatic Stress (CSTS) Program	Defense Health Program (DHP)
Grief and Health-Related Quality of Life in World Trade Center (WTC) Survivors: Associations with Bereavement, Trauma Exposures, and Mental and Physical Health Conditions	Centers for Disease Control and Prevention (CDC)
Targeting Family Risk Associated with Unsafe Firearm Storage Practices	Military Operational Medicine Research Program (MOMRP)
A Phase 2, Multi-center, Multi-Arm, Randomized, Placebo-Controlled, Double-Blind, Adaptive Platform Trial to Evaluate the Safety, Tolerability and Efficacy of Potential Therapeutic Interventions in Active-Duty Service Members and Veterans with PTSD (M-PACT)	US Army Medical Research and Development Command (MRDC)
Emotion Regulation and Cognitive Flexibility Program (ERCFP): Targets for Improving Psychological Health and Enhancing Performance (STRENGTHEN)	Defense Advanced Research Projects Agency (DARPA)
Pre-Deployment and Deployment-Related Risk and Resilience Factors for Insomnia in Military Personnel	Military Operational Medicine Research Program (MOMRP)
Resilience and Stress in Homeland Security Employees (RSHSE)	Department of Homeland Security (DHS)
Alcohol & Substance Use Prevention and Recovery Program (ASUPR)	Defense Health Program (DHP)
Tele-Sleep OSA: Clinical Effectiveness, Implementation, and Economic of Telehealth Care for Obstructive Sleep Apnea in the Military Health System	University of Maryland – Baltimore (UMB)
Suicide Avoidance Focused Enhanced Group Using Algorithm Risk Detection (SAFEGUARD)	Defense Health Program (DHP)

Faces of CSTS



Dr. Dori Reissman and Carol Fullerton enjoying Dr. Brian Flynn's retirement ceremony.



CSTS Research Assistants.




CSTS Research Assistants.



Natasha Dhanraj's Navy induction ceremony presided over by Dr. Stephen Cozza.



Dr. Brian Flynn welcoming Drs. Jeffrey Thomas and Elle Cleaves to his retirement ceremony.



Center for the Study of Traumatic Stress
Department of Psychiatry
Uniformed Services University
4301 Jones Bridge Road, Bethesda, MD 20814-4799
www.CSTSONline.org

