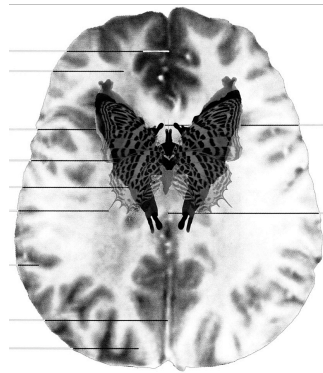


FPR-UCLA Fourth Interdisciplinary Conference

**Cultural and Biological
Contexts of Psychiatric Disorder**

*Implications for
Diagnosis and Treatment*



PROGRAM BOOK

January 22-24, 2010

Neuroscience Research Building Auditorium

635 Charles E. Young Drive South

UCLA



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With special thanks to Catherine Weston!

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January 22, 2010

Dear Colleagues,

As president of The Foundation for Psychocultural Research, I am delighted to welcome you to the 4th FPR-UCLA interdisciplinary conference, *Cultural and Biological Contexts of Psychiatric Disorder: Implications for Diagnosis and Treatment*. The topic of this conference reflects the foundation's commitment to fostering a community of researchers and clinicians interested in connections between biological, cultural, and clinical levels of understanding, knowledge, and practice.

This year's conference promises to be one of our most exciting and rewarding one yet. We are pleased to welcome back UCLA faculty, former FPR postdoctoral fellows, and several presenters from our previous conferences who join a truly outstanding group of speakers and panelists in discussions and presentations on the role of culture and biology in understanding psychiatric disorder.

The conference program encompasses a wide range of perspectives on psychiatric disorder. We open with a session focusing on interdisciplinary foundations, followed by sessions on autism spectrum disorders, bipolar disorder, schizophrenia, and anxiety-related disorders. This year's program also features a keynote roundtable discussion on Friday evening moderated by cultural psychiatrist Laurence Kirmayer with the participation of Bruce Cuthbert, Director of NIMH's Division of Adult Translational Research and Treatment Development, psychological anthropologist Byron Good of Harvard Medical School, and bestselling author and clinician Peter Kramer of Brown University, and a keynote speech on Sunday by Nobel laureate Eric Kandel. We will close with a roundtable discussion on integrating culture and biology into DSM-V.

I would like to thank the Conference Program Committee for their dedication and diligence in selecting an exceptional group of presenters. In organizing this conference, we thought it appropriate to hold the meeting on UCLA's south campus, which is home to the Jane and Terry Semel Institute for Neuroscience and Human Behavior. On behalf of the Conference Organizing Committee, I would like to thank UCLA for making this venue available to us. Finally, I would like to thank Vice Chancellor Claudia Mitchell-Kernan of UCLA's Graduate Division for her longterm and continuous support of our efforts,

Sincerely

Robert Lemelson, PhD
President

Conference Rationale and Scope

Our concept of mental illness in the West is largely shaped by the DSM diagnostic model. The DSM categorization of psychiatric disorders has been useful in driving research, and psychiatric neuroscience has made enormous strides in identifying some of the brain-based factors that contribute to mental disorders such as autism, schizophrenia, and bipolar disorder, as well as suggesting possible drug therapies. However, both neuroscientists and anthropologists have raised questions about the validity and utility of these categories. Neuroscientists are concerned that the categories obfuscate the key brain-behavior linkages underlying pathological processes. Anthropologists on the other hand argue that the categories are largely social constructions and that the current neurobiological zeitgeist minimally attends to social and cultural processes of mental illness. Much still remains unknown, particularly how the social and cultural worlds interact with neurobiological processes to produce mental symptoms that we recognize as depression or psychosis in everyday life and what this interaction implies for diagnosis and treatment.

The aim of this conference is to improve the quality of psychiatric diagnosis and treatment by giving specific attention to biological and cultural contexts and their interactions. Given the abundant criticism directed to both the biological and cultural validity of current DSM diagnostic categories, the focus is particularly important and timely. DSM-V revisions are now underway that attempt to incorporate divergent cross-cultural aspects of mental illness, as well as underlying neurobiological factors common to different disorders. Both areas will be addressed at the conference in presentations and panel discussions.

The conference will be unique in several ways: its interdisciplinary focus; the quality of scholarship by a group of distinguished contributors from neuroscience, anthropology, and psychiatry; and the emphasis on identifying key questions and research opportunities at the intersection of biology and culture. To increase understanding of the experience of living with bipolar disorder or schizophrenia, the program has been designed to move between formal talks, personal stories, and observations from anthropological fieldwork.

The conference is designed to appeal to a wide audience: clinicians, researchers, social workers and therapists, neuroscientists, anthropologists, and others interested in the science, experience, diagnosis, and treatment of mental illness.

Program Summary

Friday, January 22, 2010

- 8:30–8:45 **Opening Remarks**
-
- Robert Lemelson, Claudia Mitchell-Kernan*
- 9:00–12:30 **Session 1. Current Neuroscientific, Clinical, and Cultural Perspectives on Psychiatric Disorder**
-
- Marie-Françoise Chesselet (moderator), Byron J. Good, J. David Kinzie, Tanya M. Luhrmann, Moshe Szyf*
- 1:45–5:00 **Session 2. Cultural and Biological Contexts of Autism**
-
- Carole H. Browner (moderator), Simon Baron-Cohen, Eric Courchesne, Roy Richard Grinker, Emeran A. Mayer, Elinor Ochs, Olga Solomon*
- 7:30–9:00 **Session 3. Friday Evening Keynote Roundtable**
-
- Laurence J. Kirmayer (moderator), Bruce Cuthbert, Byron J. Good, Peter D. Kramer*

Saturday, January 23, 2010

- 8:45–10:45 **Session 4. Cultural and Biological Contexts of Bipolar Disorder**
-
- Douglas Hollan (moderator), Kay Redfield Jamison, Emily Martin, Mary L. Phillips, Anne Becker (panelist), Robert Bilder (panelist)*
- 11:15–3:15 **Session 5. Cultural and Biological Contexts of Schizophrenia**
-
- Steven R. López (moderator), Robert M. Bilder, Tyrone D. Cannon, Mary-Jo DelVecchio Good, Robert Lemelson, Paul Patterson, Elyn R. Saks*
- 3:45–5:45 **Session 6. Cultural and Biological Contexts of Anxiety-Related Conditions**
-
- Emeran A. Mayer (moderator), Anne E. Becker, Devon E. Hinton, Kay Redfield Jamison (panelist), Emily Martin (panelist)*

Sunday, January 24, 2010

- 8:45–10:00 **Session 7. Integrating Biology into DSM-V**
-
- Eric R. Kandel (keynote)*
- 10:30–12:30 **Session 8. Integrating Culture into DSM-V**
-
- James Boehnlein (moderator), J. David Jentsch, Laurence Kirmayer, Roberto Lewis-Fernández, Tanya Luhrmann*



Day 1: Friday, January 22, 2010

7:30–8:30	Breakfast in Lobby / Registration / Distribution of Conference Kit
8:30–8:45	Opening Remarks
8:30–8:45	<i>Claudia Mitchell-Kernan, PhD, Dean, Graduate Division, GSAS, UCLA</i>
8:45–9:00	<i>Robert Lemelson, PhD, President, FPR; Department of Psychiatry and Biobehavioral Sciences, UCLA</i>
9:00–12:30	Session 1. Interdisciplinary Foundations: Current Neuroscientific, Clinical, Cultural, and Historical Perspectives on Psychiatric Disorder
	<i>Session Chair: Marie-Françoise S. Chesselet, MD, PhD, Department of Neurobiology, UCLA; FPR Advisory Board</i>
9:00–9:30	Introduction <i>Marie-Françoise S. Chesselet, MD, PhD</i>
9:30–10:00	Cross-Cultural Research on Mental Illness and Its Treatment: Enduring Challenges, Emerging Questions <i>Byron J. Good, PhD, Department of Social Medicine, Harvard Medical School</i>
10:00–10:30	Epigenomic Mediation of the Impact of Early Life Social Environment on Adult Mental Health <i>Moshe Szyf, PhD, Department of Pharmacology and Therapeutics, McGill University</i>
10:30–11:00	Coffee Break and Poster Preview Without Authors (nos. 1–6)
11:00–11:30	The Clinician’s Point of View: How a Psychiatrist Can Accurately Predict the Future after it Happens <i>J. David Kinzie, MD, Department of Psychiatry, Oregon Health and Science University</i>
11:30–11:45	Commentary <i>Tanya M. Luhrmann, PhD, Department of Anthropology, Stanford University</i>
11:45–12:30	Roundtable Discussion and Q&A <i>Marie-Françoise S. Chesselet, MD, PhD (moderator); Byron Good, J. David Kinzie, Moshe Szyf, Tanya Luhrmann</i>
12:30–1:45	Lunch and Poster Viewing (nos. 1–6)
1:45–5:00	Session 2. Cultural and Biological Contexts of Autism
	<i>Session Chair: Carole H. Browner, PhD, MPH, Semel Institute for Neuroscience and Human Behavior; Departments of Anthropology and Women’s Studies; UCLA; FPR Advisory Board</i>

- 1:45–2:15 **Culture and ASD: The Impact on Prevalence and Recognition**
Roy Richard Grinker, PhD, Department of Anthropology, The George Washington University
- 2:15–2:45 **The Neural Development Defects that Lead to Autism**
Eric Courchesne, PhD, Department of Neurosciences, University of California, San Diego
- 2:45–3:15 **Commentary: Interactional Resonances of Autism**
Elinor Ochs, PhD, Department of Anthropology, UCLA, Olga Solomon, PhD, Division of Occupational Science and Occupational Therapy, University of Southern California
- 3:15–3:45 **Coffee Break and Poster Discussion with Authors (nos. 1–6)**
- 3:45–4:15 **The Fetal Testosterone Theory of Autism**
Simon Baron-Cohen, PhD, MPhil, Autism Research Centre; Departments of Psychiatry and Experimental Psychology, University of Cambridge
- 4:15–4:30 **Commentary: Autism – Any Role for Altered Brain Gut Interactions?**
Emeran A. Mayer, MD, Professor, Departments of Medicine, Physiology, and Psychiatry & Biobehavioral Sciences; Center for Neurobiology of Stress, UCLA
- 4:30–5:00 **Roundtable Discussion and Q&A**
Carole H. Browner, PhD, MPH (moderator); Simon Baron-Cohen, Eric Courchesne, Richard Grinker, Emeran Mayer, Elinor Ochs, Olga Solomon



Friday Evening Keynote Roundtable

7:00–7:30 Coffee and Dessert in NRB Vestibule

7:30–9:00 **Session 3. Beyond Categories: Dimensions, Thresholds, Contexts, and Trajectories in Mental Health and Illness**

Laurence J. Kirmayer, MD, FRCPC, James McGill Professor and Director, Division of Social and Transcultural Psychiatry, Department of Psychiatry, McGill University (Moderator)

Bruce Cuthbert, PhD, Director, Division of Adult Translational Research and Treatment Development, National Institute of Mental Health

Byron J. Good, PhD, Professor of Medical Anthropology, Department of Global Health and Social Medicine, Harvard Medical School

Peter D. Kramer, MD, Clinical Professor, Department of Psychiatry and Human Behavior, Brown University



Day 2: Saturday, January 23, 2010

- 7:30–8:30 **Breakfast**
- 8:30–8:45 **Summary of Day 1**
Douglas Hollan, PhD, Department of Anthropology, UCLA; FPR Board of Directors and Advisory Board
- 8:45–10:45 **Session 4. Cultural and Biological Contexts of Bipolar Disorder**
-
- Session Chair:** *Douglas Hollan, PhD, Department of Anthropology, UCLA; FPR Board of Directors and Advisory Board*
- 8:45–9:15 **Bipolar Illness: Personal and Professional Perspectives**
Kay Redfield Jamison, PhD, Department of Psychiatry, The Johns Hopkins University School of Medicine
- 9:15–9:45 **Understanding How Functional Abnormalities in Brain Circuitry Relate to Mood Dysregulation in Bipolar Disorder**
Mary L. Phillips, MD, Department of Psychiatry, University of Pittsburgh
- 9:45–10:15 **Mania and Depression in American Culture**
Emily Martin, PhD, Department of Anthropology, New York University
- 10:15–10:45 **Roundtable Discussion and Q&A**
Douglas Hollan, PhD (moderator); Anne Becker, Robert Bilder, Kay Redfield Jamison, Emily Martin, Mary Phillips
- 10:45–11:15 **Coffee Break and Poster Preview Without Authors (nos. 7–12)**
- 11:15–3:15 **Session 5. Cultural and Biological Contexts of Schizophrenia**
-
- Session Chair:** *Steven R. López, PhD, Department of Psychology, University of Southern California; FPR Advisory Board*
- 11:15–11:45 **The Continuum of Psychosis: Cultural and Biological Risks and Benefits**
Robert M. Bilder, PhD, ABPP-CN, Division of Medical Psychology-Neuropsychology, Semel Institute for Neuroscience and Human Behavior, UCLA
- 11:45–12:15 **Predictors and Mechanisms of Conversion to Psychosis**
Tyrone D. Cannon, PhD, Departments of Psychology and Psychiatry and Biobehavioral Sciences, UCLA
- 12:15–1:30 **Lunch and Poster Viewing (nos. 7–12)**

- 1:30–2:00 **The Center Cannot Hold: My Journey Through Madness**
*Elyn R. Saks, JD, University of Southern California Gould School of Law;
UCSD School of Medicine*
- 2:00–2:30 **Shadows and Illuminations (film)**
*Robert Lemelson, PhD, President, FPR; Department of Psychiatry and Biobehavioral
Sciences, UCLA*
- 2:30–2:45 **Commentary: Cultural and Biological Perspectives**
*Mary-Jo DelVecchio Good, PhD, Department of Global Health and Social Medicine,
Harvard Medical School*
- Paul H. Patterson, PhD, Division of Biology, California Institute of Technology*
- 2:45–3:15 **Roundtable Discussion and Q&A**
*Steven R. López, PhD (moderator); Robert Bilder, Tyrone Cannon, Mary-Jo DelVecchio
Good, Robert Lemelson, Paul Patterson, Elyn Saks*
- 3:15–3:45 **Coffee Break and Poster Discussion with Authors (nos. 7–12)**
- 3:45–6:00 **Session 6. Cultural and Biological Contexts of Anxiety-Related Conditions**
-
- Session Chair:** *Emeran A. Mayer, MD, Professor, Departments of Medicine,
Physiology, and Psychiatry & Biobehavioral Sciences; Center for Neurobiology of
Stress, UCLA*
- 3:45–4:15 **Interoception in Psychiatric Disorders: When the Brain Misinterprets Signals
from the Body**
Emeran A. Mayer, MD, UCLA
- 4:15–4:45 **Culture and Panic Disorder**
*Devon E. Hinton, MD, PhD, Department of Psychiatry, Massachusetts General
Hospital; Harvard Medical School;*
- 4:45–5:15 **Unfamiliar Presentations of Familiar Symptoms in Ethnic Fijian Adolescent
Girls: Implications for the Cultural Moderation of Eating Pathology**
- Anne E. Becker, MD, PhD, ScM, Department of Global Health and Social
Medicine, Harvard Medical School; Department of Psychiatry, Massachusetts
General Hospital*
- 5:15–5:45 **Roundtable Discussion and Q&A**
*Emeran Mayer, MD (moderator); Anne Becker, Devon Hinton, Emily Martin, Kay
Redfield Jamison*
- 5:45 **Adjourn**



Day 3: Sunday, January 24, 2010

7:30–8:30	Breakfast
8:30–8:45	Summary of Day 2 <i>Carole H. Browner, PhD, MPH, Semel Institute for Neuroscience and Human Behavior; Departments of Anthropology and Women's Studies, UCLA; FPR Advisory Board</i>
8:45–10:00	Session 7. Integrating Biology into DSM-V <hr/>
8:45–9:00	Introduction
9:00–9:50	Closing Keynote: Animal Models of Mental Disorders <i>Eric R. Kandel, MD, University Professor, Fred Kavli Professor and Director of the Kavli Institute for Brain Science, Columbia University College of Physicians and Surgeons; Senior Investigator, Howard Hughes Medical Institute</i>
9:50–10:00	Discussion
10:00–10:30	Coffee Break
10:30–12:30	Session 8. Integrating Culture into DSM-V <hr/>
	Session Chair: <i>James Boehnlein, MD, Department of Psychiatry, Oregon Health and Science University</i>
10:30–11:00	Including Cultural Variation and Cultural Context in DSM-V <i>Roberto Lewis-Fernández, MD, New York State Psychiatric Institute; Columbia University; Member, Anxiety, Obsessive-Compulsive Spectrum, Posttraumatic, and Dissociative Disorders Work Group for DSM-V</i>
11:00–11:30	Ethnographic Case Study <i>Tanya Luhrmann, PhD, Department of Anthropology, Stanford University</i>
11:30–12:30	Roundtable Discussion <i>James Boehnlein, MD (moderator); J. David Jentsch, PhD, Department of Psychology, UCLA; Laurence Kirmayer, Roberto Lewis-Fernández, Tanya Luhrmann</i>
12:30–12:40	Closing Remarks <i>Robert Lemelson, PhD, President, FPR; Department of Psychiatry and Biobehavioral Sciences, UCLA</i>
12:40	Conference Adjourn

Posters 1–6 Discussion with Authors

Friday, Jan. 22, 3:15–3:45pm in NRB Lobby

1. The specter of shame and social threat in PTSD: Toward a novel socio-emotional model for DSM-V

Ashwin Budden, PhD (Candidate) in Anthropology and Cognitive Science, University of California, San Diego

2. Bridging psychiatric and anthropological approaches: Analyzing “nerves” and “depression” among older adults in the United States

Britt Dahlberg, PhD (Candidate), Department of Anthropology; Frances K. Barg, PhD, MEd, Departments of Family Medicine & Community Health and Anthropology; Joseph J. Gallo, MD MPH, Department of Family Medicine and Community Health; Marsha N. Wittink MD MBE, Department of Family Medicine and Community Health, University of Pennsylvania

3. Genes for *what*? Integrating genetics into self-understanding of eating disorder behavior

Michele M. Easter, PhD (Candidate), Department of Sociology, University of North Carolina at Chapel Hill

4. Palestinian perspectives on PTSD and the DSM

Sarah R. Kamens, PhD (Student), Department of Psychology, Fordham University

5. The influence of genes and environment on the differential development of conduct disorder symptomatology among different cultures.

Brett Kia-Keating, PhD, Department of Education Gevirtz Graduate School of Education, University of California, Santa Barbara

6. Culture and emotion regulation after trauma

Maryam Kia-Keating, EdM, PhD, Department of Counseling, Clinical, and School Psychology, University of California, Santa Barbara

Posters 7–12 Discussion Authors

Saturday, Jan. 23, 3:15–3:45pm in NRB Lobby

7. Long-term mental health impact of violence in different cultural contexts

Jutta Lindert, PhD, MPH, University of Applied Sciences, Ludwigsburg, Germany

8. Neurocognitive predictors of functional outcome in Chinese first-episode patients with schizophrenia

Nancy H. Liu, MA^{1,2}, Ya Juan Niu, MD², Michael R. Phillips, MD, MPH², William D. Spaulding, PhD¹ ¹University of Nebraska-Lincoln, ²Beijing Hui Long Guan Hospital

9. Explanatory models of depression in motherhood: a study of mothers and health workers in Vietnam

Maria Niemi, PhD (Candidate), Department of Neurobiology, Care Sciences and Society, Karolinska Institutet

Torkel Falkenberg PhD, Ass. Professor, Department of Neurobiology, Care Sciences and Society, Karolinska Institutet

Mai T T T Nguyen PhD (Candidate) Department of Paediatrics, Hanoi Medical University

Minh Nguyen, Health Economics Department, Hanoi Medical University

Vikram Patel PhD, Professor, Epidemiology and Population Health, London School of Hygiene and Tropical Medicine

Elisabeth Faxelid PhD, Ass. Professor, Department of Public Health Sciences, Karolinska Institutet

10. Neuroscientific psychiatric diagnosis

Avi Peled, MD, Bruce and Ruth Rappaport Faculty of Medicine, Technion - Israel Institute of Technology, Haifa, Israel

11. Of biology and culture: How the harmful-dysfunction framework of disorder can help bridge the gap

Vivian Santiago, PhD, MPH, Robert Wood Johnson Foundation Health and Society Scholar, Department of Population Health Sciences, University of Wisconsin-Madison

12. Progression of depressive symptoms and poor physical health in tsunami exposed mothers: A prospective longitudinal investigation

Thulitha Wickrama, PhD, Assistant Professor, Department of Human Development and Family Studies, Auburn University; K. A. S. Wickrama, PhD, Professor, Department of Human Development and Family Studies, Iowa State University

Session 1. Current Neuroscientific, Clinical, Cultural, and Historical Perspectives on Psychiatric Disorder

Epigenomic Mediation of the Impact of Early Life Social Environment on Adult Mental Health

Moshe Szyf, PhD, Department of Pharmacology and Therapeutics, McGill University

The programming of the genome is accomplished by the epigenome. Two elements of epigenomic control are chromatin modification and DNA methylation. Epigenetic patterns are generated during cellular differentiation by a highly programmed and organized process. Nevertheless, they are dynamic and responsive to the environment especially during the critical periods of gestation and early life as well as later in life. This sensitivity of the epigenetic machinery to the environment offers a conduit through which the environment can sculpt the genome and have a long-term impact on behavior. We will discuss three studies from rat, rhesus monkeys, and humans delineating the signature of maternal care and social adversity on the epigenome. We used high-density oligonucleotide microarrays combined with methylated DNA immunoprecipitation to map the response of the “methylome” “acetylome” and “transcriptome” in different brain regions as well as T cells and whole blood in adults exposed to social adversity early in life and controls. Our preliminary results indicate a wide signature of early life maternal care and social positioning on the methylome. Our data also suggest evolutionary conservation of the response and its co-clustering in defined genomic regions.

The Clinician’s Point of View: How a Psychiatrist Can Accurately Predict the Future after it Happens

J. David Kinzie, MD, Oregon Health and Science University

The speaker will present a case study and family from Somalia and discuss it in terms of threshold, context, and trajectory. The presentation will include a brief video of the interview and information about the family.

Session 2. Cultural and Biological Contexts of Autism

The Neural Developmental Defects that Lead to Autism

Eric Courchesne, PhD, Autism Center of Excellence, Department of Neuroscience, University of California San Diego School of Medicine

Although the neurobiology of autism has been studied for more than two decades, the majority of studies have examined brain anatomy 10 or more years after the onset of clinical symptoms. The early neural defects that cause autism remain unknown, but their signature is likely to most evident during the first years of life when clinical symptoms are emerging. This lecture highlights new neurobiological findings during the first years of life and places evidence on older autistic subjects in the light of these discoveries about the early brain growth pathology in autism. Three phases of brain development pathology in autism are theorized: a phase of early brain overgrowth, then

arrest of growth and finally degeneration in some percentage of cases. Early brain overgrowth may be a key to discovering the neural bases for emergence of autistic behavior as well as its genetic and non-genetic causes. We speculate that excess neuron numbers may be one possible cause of early brain overgrowth and produce defects in neural patterning and wiring, with exuberant local and short distance cortical interactions impeding the function of large-scale, long-distance interactions between brain regions. Since large-scale networks underlie socio-emotional and communication functions, such alterations in brain architecture could relate to the early clinical manifestations in autism. As such, autism may additionally provide unique insight into genetic and developmental processes that shape early neural wiring patterns and make possible higher-order social, emotional and communication functions that epitomize humans.

The Fetal Testosterone Theory of Autism

Simon Baron-Cohen, PhD, MPhil, Autism Research Centre, Departments of Psychiatry and Experimental Psychology, University of Cambridge

Autism affects males much more often than females. The explanation for this must either lie in diagnostic practice, hormones, or genetics, or a mix of all three. In this lecture I summarize work from our lab from three lines of investigation: (1) The role of fetal testosterone (FT) in later social and communication development, and in the development of autistic traits. The study uses amniocentesis, the timing of which coincides with the surge in FT production, and is a longitudinal follow-up of typically developing children. (2) The evidence for hormone dysregulation in autism. This includes evidence from the timing of puberty, and the association with testosterone-linked medical conditions in autism. (3) The association between candidate genes that regulate testosterone, and autism. These three lines of research suggest FT is a key factor underlying social development and may play a part in autism. Converging evidence for the link between testosterone and autistic traits comes from rare medical conditions where FT is elevated (such as Congenital Adrenal Hyperplasia). The discussion ties these different lines of evidence together.

Key Books

Baron-Cohen, S. Lutchmaya, S, & Knickmeyer, R, (2005) *Prenatal testosterone in mind: Studies of amniotic fluid*. Cambridge, MA: MIT Press/Bradford Books.

Baron-Cohen, S. (2003) *The essential difference*. New York: Basic Books/Penguin.

Baron-Cohen, S. (2009) *Autism and Asperger Syndrome: The facts*. Oxford, UK: Oxford University Press.

Key Articles

Baron-Cohen, S., Knickmeyer, R., & Belmonte, M. (2005) Sex differences in the brain: Implications for explaining autism. *Science*, 310, 819–823.

Chakrabarti, B., Hill-Cawthorne, G., Dudridge, F., Kent, L., Wheelwright, S., Allison, C., Banerjee-Basu, S., & Baron-Cohen, S. (2009). Genes related to sex-steroids, neural growth and social-emotional behaviour are associated with autistic traits, empathy and Asperger Syndrome. *Autism Research*, 2, 157-177.

Links: <http://www.autismresearchcentre.com>

Culture and ASD: The Impact on Prevalence and Recognition

Roy Richard Grinker, PhD, Department of Anthropology, The George Washington University

The current state of research on autism prevalence and diagnosis is described from a global, cross-cultural perspective. While knowledge about autism is increasing rapidly throughout the world, there are to date few scientific studies of the characteristics, prevalence and phenotypes of autism spectrum disorders outside of North America and Western Europe. Socio-cultural factors in both developed and developing countries influence autism research, especially epidemiology. Other topics to be covered include: the role of culture in developing interventions and services, conceptualizing autism as a disease vs. a disability, the role of language in screening and diagnosis, social stigma, and urban-rural differences in autism awareness. It is argued that understanding autism as a cultural phenomenon, and as a disability, may lead to better prevalence estimates, and better services and community integration of people on the autism spectrum.

Session 4. Cultural and Biological Contexts of Bipolar Disorder

Bipolar Illness: Personal and Professional Perspectives

Kay Redfield Jamison, PhD, Department of Psychiatry, The Johns Hopkins University School of Medicine

The lecture will describe the phenomenology of manic and depressed mood states, with a focus on the addictive qualities of euphoric manic states and the dangers of dysphoric, mixed ones. The complex problem of non-adherence to medications and the high risk of suicide in bipolar illness, as well as the subjective mood states associated with each, will be discussed. The importance of skilled psychotherapy, in addition to psycho-pharmacology, will be emphasized, as well as the ethical and societal implications of treating an illness that is destructive and life-threatening yet also associated in some individuals with creativity and accomplishment.

Understanding How Functional Abnormalities in Brain Circuitry Relate to Mood Dysregulation in Bipolar Disorder

Mary L. Phillips, MD, Department of Psychiatry, University of Pittsburgh

Identifying neural system abnormalities that may represent objective biomarkers of bipolar disorders is a crucially important step toward the long-term goal of improving diagnostic accuracy of these disorders, and informing management in individuals presenting in the early stages of illness. My research has focused first on employing neuroimaging techniques to identify abnormalities in brain circuitry supporting emotion processing and emotion regulation in adult bipolar disorder that may serve as objective biomarkers to help improve early diagnosis of the disorder. My second focus has been examination of the extent to which neuroimaging can help identify emotion regulatory brain circuitry abnormalities in youth at genetic risk of bipolar disorder, to help provide objective markers that may be used to identify those at risk youth who are most likely to subsequently develop the disorder later in development. I will present findings from neuroimaging studies from my group in which we have employed different neuroimaging techniques, including functional Magnetic Resonance Imaging and diffusion tensor imaging, to examine the structural and functional integrity of brain circuitry underlying emotion regulation in healthy, bipolar and unipolar depressed adults. I will present findings from these studies that have abnormalities in this circuitry in people with bipolar disorder that have the potential in the future to be used as objective markers to improve accuracy of diagnosis of the disorder, especially in depressed individuals. I will also present some findings from studies in which we have employed similar neuroimaging techniques and experimental paradigms in youth at genetic risk of bipolar disorder. These findings provide evidence of abnormalities in brain circuitry supporting emotion processing and emotion regulation in offspring of parents with bipolar disorder who range from being healthy and unaffected by psychiatric illness to having diagnosed bipolar disorder. I will discuss the extent to which these brain circuitry abnormalities in at risk youth have the potential to be able to serve as objective markers denoting likely risk of future development of bipolar disorder in these youth through adolescence and adulthood.

Mania and Depression in American Culture

Emily Martin, PhD, Department of Anthropology, New York University

I explore psychiatric categories involving emotion through ethnographic fieldwork in the contemporary US. I ask how these categories are culturally created, measured, and applied in relation to gender and race; then modified, contested, and rejected in contexts such as clinical rounds, patient advocacy support groups, and Internet newsgroups. Some issues raised include: What definitions of rationality do mood disorders entail? What are the implications for the personhood of the patient of treating "irrational" mood disorders with psychotropic drugs intended to "manage" them? What are the stakes of the current broad revaluing of "mania" for larger cultural contexts, such as competitive US corporations, which now place a high value on energized, "manic" states for the sake of the innovation and creativity they are believed to yield?

Session 5. Cultural and Biological Contexts of Schizophrenia

The Continuum of Psychosis: Cultural and Biological Risks and Benefits

Robert M. Bilder, PhD, ABPP-CN, Division of Medical Psychology-Neuropsychology, Semel Institute for Neuroscience and Human Behavior, UCLA

The more we learn about psychiatric syndromes the more we recognize that these do not fall neatly into discrete categories. Dimensional rather than categorical structures have been suggested for many psychiatric syndromes, including the psychotic disorders. Some theories, supported in part by observations of clinical symptoms observed in the context of systemic illnesses, suggest that all psychiatric syndromes may best be explained by a single severity continuum. There is continued debate about whether schizotypy is better explained as a dimensional construct or as a discrete category, particularly in the healthy adult population, and it remains unclear to what extent research, some of which has been conducted on college students, generalizes to the general population. Further questions revolve around the extent to which schizotypal traits are best conceptualized as liability factors for psychopathology, particularly “schizophrenia proneness”, or may index aspects of cognitive function that have adaptive value. We have been examining performance on the Chapman Scales (Perceptual Aberrations, Magical Ideation, Physical Anhedonia, and Social Anhedonia) with respect to temperament/character traits, divergent thinking (Torrance Tests of Creativity), latent inhibition, a wide range of neurocognitive performance indices, and creative achievement. Results from the Tennenbaum Family Center for the Biology of Creativity show positive correlations for positive schizotypal personality traits (perceptual aberration, and magical ideation) with both lifetime creative achievement and divergent thinking tasks. Additional preliminary data from the Consortium for Neuropsychiatric Phenomics, an ongoing genome-wide association study (GWAS) in a demographically similar community sample, and which also include “negative” schizotypy scales (physical and social anhedonia) suggest on the other hand that higher schizotypy is associated with poorer performance on tests of memory and response inhibition. This presentation focuses on interpretations that may help explain this apparent paradox, and on hypotheses that selected aspects of cognitive flexibility may be associated with both increased positive schizotypy and confer an adaptive advantage, perhaps helping to explain the persistence of genes associated with psychosis despite decreased fecundity. (Supported by the Consortium for Neuropsychiatric Phenomics (UL1DE019580, RL1MH083268, RL1MH083269, RL1DA024853, RL1MH083270, RL1LM009833, PL1MH083271) and the Tennenbaum Family Center for the Biology of Creativity).

Predictors and Mechanisms of Conversion to Psychosis

Tyrone D. Cannon, PhD, Departments of Psychology and Psychiatry & Biobehavioral Sciences, University of California, Los Angeles

This talk will address recent progress in the prediction of schizophrenia and related disorders, as well as in the identification of genetic and neural mechanisms associated with their onset. In the context of a multi-site study of 291 prospectively followed

youth at high clinical risk for psychosis, we have observed a cumulative conversion rate of 35% and a decelerating rate of transition during the 2.5-year follow-up period. Five features assessed at baseline contributed uniquely to the prediction of psychosis, and algorithms combining two or three of these variables resulted in dramatic increases in positive predictive power (i.e., to 68-80%) compared with the prodromal criteria alone. These findings indicate that prospective ascertainment of individuals at risk for psychosis is feasible, with a level of predictive accuracy comparable to that in other areas of preventive medicine. The mechanisms underlying the development of psychosis are not known, but maturational and disease-related changes in the structure and functioning of a number of key brain systems known to be disturbed in schizophrenia, including prefrontal and medial temporal lobe regions, figure prominently in most theoretical accounts. Cortical gray matter reduction in schizophrenia does not reflect a loss of cell bodies, but rather, a reduction in dendritic and synaptic elements that support inter-neuronal connectivity. Here I report the first evidence of a steeper rate of gray matter reduction among clinical high-risk individuals who develop psychosis compared with those who do not. We have also shown that gray matter reduction in the prefrontal cortex and hippocampus, as well as disrupted social functioning and working memory, are related to variations in a known susceptibility gene for schizophrenia – DISC1. In a series of animal transgenic studies, we demonstrate that experimentally altered DISC1 function produces neurons that achieve less connectivity with other cells, produce smaller amplitude responses to electrical stimulation, and produce disrupted behavior paralleling that observed in patients with schizophrenia, including reduced social preference and impaired working memory. These series of studies provide the background for an emerging prevention strategy aimed at early identification of individuals at risk and preventive intervention targeting specific molecules affecting neuronal plasticity and connectivity.

The Center Cannot Hold: My Journey Through Madness

Elyn R. Saks, JD, University of Southern California Gould School of Law; UCSD School of Medicine

Elyn Saks will narrate the story of her struggles with schizophrenia, punctuating her narrative with passages from her book, *The Center Cannot Hold: My Journey Through Madness*. Her hope is to give people a window into the mind of someone suffering with psychosis. She will conclude her talk with some of the policy implications of her story, recognizing that she is an "n" of only one.

Shadows and Illuminations

Robert Lemelson, PhD, FPR and UCLA

"Shadows and Illuminations" is an ethnographic film addressing questions regarding how to represent and understand extraordinary experiences that appear to a psychiatric audience as clearly indicative of severe mental illness, yet other, less stigmatizing and more culturally syntonetic, interpretations are possible. The film, shot over the course of 12 years in Bali, Indonesia, follows the life course of an older Balinese man, Pak Kreta, as he narrates and struggles with the continuous intrusion into his

consciousness of what he terms “shadows,” or spirits. The film documents his painful and traumatic personal history of trauma, loss, and exposure to toxins, all of which possibly contribute to his extraordinary experiences. The film also contextualizes Pak Kreta in modern Balinese history and culture, and draws on other family members’ memories and interpretations of how to understand his struggles and distress. Central questions of how to interpret these experiences, and what role a psychiatric diagnosis and the meanings such a label entails, are explored and implicitly problematized throughout the course of the film. The film also explores the role traditional healing in rural Indonesia has as a means of framing and treating such states. The film concludes with a consideration of how Pak Kreta has adapted and adjusted to his spirits, and how he attempts to find a small measure of peace in the later years of his life.

Session 6. Cultural and Biological Contexts of Anxiety-Related Disorders

Interoception in Psychiatric Disorders: When the Brain Misinterprets Signals from the Body

Emeran A. Mayer, MD, Center for Neurobiology of Stress, UCLA

Converging experimental evidence has resulted in the current view that subregions of insular cortex and connected brain regions play an important role not only in the encoding and modulation of interoceptive signals, but also in the conscious awareness of feeling states. Evidence from functional and structural imaging studies has in part confirmed the role of interoceptive information from the body proposed by earlier proponents of peripheral theories of emotion. In addition, it has been suggested that anterior insula may mediate behavioral and physiological effects of risk prediction, computing an interoceptive prediction error, between actual and anticipated bodily arousal and homeostatic state. This prediction error in turn can result in a subjective feeling of anxiety as well as associated abnormal states of bodily arousal. The proposed role of the insula as an interface between the body and the mind provides a neurobiological model to explain the close relationship between abnormal body states and emotions.

Culture and Panic Disorder

Devon E. Hinton, MD, PhD, Massachusetts General Hospital, Harvard Medical School

Panic disorder varies enormously across cultures, in respect to what triggers panic episodes, what is feared, what are the prominent symptoms, and what is done to treat the episodes. I will use Cambodian refugee examples to illustrate this cross-cultural variability. To illustrate how this cultural difference occurs, I will present a model, the multiplex model. According to multiplex model, after a somatic sensation is generated in any of multiple ways, which often involve culturally related processes, the somatic sensations activate multiple types of culturally specific meaning networks. I will argue that somatic symptoms are interpreted according to local understanding of the physiology of the body, and that this has profound impact on what symptoms are

feared and the rates and types of panic disorder. I will argue that somatic symptoms have specific metaphoric dimensions, again culturally variable. And I will argue that somatic sensations may activate traumatic memory, which again are culturally variable. These various meanings networks then create feedback loops of fear that may escalate to panic. I will also argue that how persons in different cultures treat panic events varies greatly, and that this is important aspect of the cross-cultural variation of panic disorder. In sum, I will demonstrate that panic attacks are a dimensional construct that can be examined in a sensitive way across cultures. Panic attacks and panic disorder are profoundly patterned by culture: from what somatic symptoms induce panic and how those symptoms are induced, to the meaning and associations to sensations, to what is done to try and gain relief from and treat the panic attack.

Unfamiliar Presentations of Familiar Symptoms in Ethnic Fijian Adolescent Girls: Implications for the Cultural Moderation of Eating Pathology

Anne E. Becker, MD, PhD, ScM. Department of Global Health and Social Medicine, Harvard Medical School; Department of Psychiatry, Massachusetts General Hospital

Eating disorders have recently been identified as a priority area for adolescent mental health care by the World Health Organization. They have global distribution and are increasingly likely to contribute to the burden of illness in populations undergoing migration, urbanization, or rapid economic development. Despite numerous studies documenting how the etiology and phenomenology of body image and eating disturbances are embedded in their local social context, comparatively few studies address the clinical utility of diagnostic criteria for eating disorders when implemented in populations outside of the high-income countries in which they were developed. Ethnographic, clinical narrative, and epidemiologic data from a study of the impact of social transition on eating pathology in Fiji will anchor a discussion and critique of the application of universalizing diagnostic and therapeutic paradigms for eating disorders across culturally diverse populations.

Session 7. Integrating Biology into DSM-V

Animal Models of Psychiatric Disorder

Eric R. Kandel, MD, University Professor, Fred Kavli Professor and Director of the Kavli Institute for Brain Science, Columbia University College of Physicians and Surgeons; Senior Investigator, Howard Hughes Medical Institute

In the last two decades molecular genetics has transformed neurology. Diagnoses of neurological disorders are no longer based only on signs and symptoms, but also on tests for the dysfunction of specific genes, proteins, and nerve cell components as well as brain scans for disturbances of neural systems. Molecular genetics also has led to the discovery of 1) several newly defined molecular diseases caused by mutations in specific genes, such as the channelopathies and 2) new mechanisms of pathogenesis such as the trinucleotide-repeat and the prion disorders. To date, however, molecular biology has had only a modest impact on psychiatry. I propose to address this issue by

illustrating that whereas neurology has long been based on the location of disease in the brain, there is not a comparable strong neuropathology of mental illness. In addition, tracing the genetic causes of mental illness is a much more difficult task than finding the gene for Huntington's disease. There is no single gene for schizophrenia, or most other mental illnesses. Most psychiatric disorders have a combined multigenic and environmental basis. As a result of these limitations, psychiatry has not been able to benefit from animal models of mental illness. I will suggest that during the next few years things may change. We also are beginning to know something about the neural circuits affected by these diseases. As a result, we can now develop satisfactory animal models of components of these disorders. I will devote most of the lecture to describe attempts to develop mouse models of memory deficits present in two major mental disorders: 1) anxiety disorders that have a component of learned fear and 2) schizophrenia, focusing on the cognitive symptoms reflected in working memory deficit.

Session 8. Integrating Culture into DSM-V

Including Cultural Variation and Cultural Context in DSM-V

Roberto Lewis-Fernández, MD, New York State Psychiatric Institute; Columbia University

The phenomenology of psychiatric disorders shows both commonalities and differences across cultures. Cultural groups, for example, may describe psychopathology in more psychological or more somatic terms, or cluster syndromes in alternate ways, connecting symptoms together that other cultures do not acknowledge as related. This diversity can result in syndromes that are distinct from current psychiatric nosology, also known as "cultural syndromes." Their existence raises several questions: How can this level of cultural variation be included in a universalistic nosology, as represented by DSM-V? What can research on culturally diverse symptom presentations contribute to elucidating the core phenomenological elements of each disorder as well as the socio-biological roots of mental illness? What kind of contextual information can help clarify the relationship between related but diverse presentations of psychopathology? This talk will illustrate an approach for incorporating cultural variation and cultural context in DSM-V by focusing on two cultural syndromes that are related to dissociative symptoms and disorders: *ataque de nervios* (attack of nerves) and pathological possession. This approach includes the use of cultural information in defining disorder criteria and textual description for DSM-V. It also involves attending to the socio-cultural context of illness expression via a revised Cultural Formulation that can help guide clinical assessment and treatment planning.

Ethnographic Case Study

Tanya Luhrmann, PhD, Stanford University

The talk focuses on the challenge of interpreting hallucinations within the current DSM framework. I begin by discussing apparently non-pathological hallucinations, which are

far more common than many imagine; those who experience them could not be diagnosed with psychosis, but the awkwardness they present to the diagnostic nosology is that it is not possible to rule out psychosis when a hallucination is present. Within the system, hallucinations are presumed psychotic. I then move on to discuss the possibility that the way in which hallucinations are understood psychiatrically may affect the way in which individuals experience pathological hallucinations. My case study concerns a young man who meets criteria for schizophrenia, and who hears frequent distressing voices. His voices seem to disappear when they are treated as being meaningful. The case supports the emerging argument that distressing hallucinations may have different pathways from other symptoms of psychosis. It suggests powerfully that the biomedical interpretation of distressing voices may be costly to those who struggle with them.

P1**The specter of shame and social threat in PTSD: Toward a novel socio-emotional model for DSM-V**

Ashwin Budden, PhD (Candidate) in Anthropology and Cognitive Science, University of California, San Diego

My poster outlines a theoretical framework for re-examining the emotional foundations of trauma and posttraumatic stress disorder (PTSD) and their elaboration in social and cultural contexts. Prevailing diagnostic and neurobehavioral models implicate *fear*, associated with threats of physical injury and death, as the key assembly of peri-traumatic stress response and PTSD pathogenesis. However, clinical and epidemiological studies indicate that the disorder emerges and stabilizes over time in socially threatening environments and that shame is central to the etiology and progression of PTSD. In light of this evidence, I propose a model that accounts for social threats in traumatic experience and that implicates acute shame as the key affective driver of traumatic stress and PTSD.

This model builds on research in clinical psychology and psychological anthropology that describes shame as the principal defensive emotion underlying culturally patterned perceptions of status inferiority and social norm violation. I show that these psychosocial experiences are greatly magnified in peri-traumatic events and overwhelm the social self and how posttraumatic shame is associated with PTSD symptoms.

Considering the conspicuous relationship of social experience to PTSD morbidity, I propose four domains that influence shame's elaboration in sociocultural contexts and highlight the consequences for identification and clinical management of PTSD. These include culturally patterned emotion discourses, ethnopsychology, changing status and social norms, and stigmatization.

Finally, I make recommendations for revisions to the diagnostic category 'PTSD' in the forthcoming publication of *DSM-V*. New diagnostic criteria must account for how traumatization occurs through acute injuries to the social self, rooted in extreme subjugation, humiliation, and helplessness, as well as in acute erasures of identity and normative expectations about the world. Beyond the current diagnostic focus on physical threats, an emphasis on shame and social threat also implicates the broader interpersonal, institutional, and political relations that perpetuate the conditions for traumatization. Additionally, by widening analytical lenses beyond individual symptom profiles, clinicians and researchers can also gain a better picture of the integral social and cultural factors that pattern shame emotionality and temporal course of coping.

P2**Bridging psychiatric and anthropological approaches: Analyzing "nerves" and "depression" among older adults in the United States**

Britt Dahlberg, PhD (Candidate), Department of Anthropology; Research Coordinator, Department of Family Medicine and Community Health, University of Pennsylvania

Frances K. Barg, PhD, MEd, Assistant Professor, Departments of Family Medicine & Community Health and Anthropology, University of Pennsylvania

Joseph J. Gallo, MD, MPH, Professor, Department of Family Medicine and Community Health, University of Pennsylvania

Marsha N. Wittink, MD, MBE, Assistant Professor, Department of Family Medicine and Community Health, University of Pennsylvania

Introduction: Psychiatrists and anthropologists have taken distinct analytic approaches when confronted with differences between emic and etic models for distress: whereas psychiatrists have worked to translate lay models into diagnostic categories, anthropologists have emphasized the culture-specific meanings of illness conveyed through local categories. The rift between psychiatric and anthropological research keeps “individual disease” and “culture” disconnected and thus hinders the study of interrelationships between mental health and culture. In this poster we demonstrate an approach for bridging psychiatric and anthropological approaches by applying insights from research and theory on cultural models, embodiment, critical medical anthropology, and social epidemiology, to our analysis of data from a mixed methods study about depression in older adults.

Methods: We conducted semi-structured and survey interviews with 102 adults ages 65 years and older sampled from primary care practices in Baltimore, MD. “Nerves” was mentioned spontaneously by over one fourth of participants during semi-structured interviews, as a way of describing distress related to but distinct from depression. To understand the phenomenon of nerves we (1) analyzed how participants described nerves during semi-structured interviews through close reading within and across cases, and through linguistic analysis of core metaphors and other features; and (2) compared the personal characteristics of people who mentioned nerves with those who did not to hypothesize about the social distribution of the cultural model for nerves.

Results: Older adults said that conflict, money problems, and accumulated life difficulties weakened nerves. Participants emphasized that while “depression” is a clinical disorder, “nerves” is a normal response to difficulties common in their communities. Participants used nerves to express the impact social and economic hardships have on individual physical and emotional health by being embodied through the nerves. In contrast, participants felt that “depression” did not capture the relationship between individual health and community context. People who mentioned “nerves” were statistically significantly more likely to be women, African-American, depressed, and have less than high school education than those who did not. Physicians rated participants who mentioned nerves as more likely to somatize.

Conclusions and implications: The cultural model suggested by participants and the distribution and use of the term *nerves* imply that there may be economic and social conditions experienced differently by segments of the population that contribute to the weakening of nerves. We suggest that cultural models such as that for “nerves” arise in response to personal experiences, and in turn, shape those experiences. Bridging

psychiatric and anthropological approaches advances culture theory by suggesting ways to explore relationships between circulating cultural models and personal experiences of distress, as well as between social distribution of cultural models and sociopolitical structure. The proposed approach offers a preliminary framework incorporating cultural meaning and social context into psychiatric explanatory models. Shifting research from a focus on comparing content of emic and etic concepts, to examining how these social realities and concepts are co-constructed, may resolve epistemological and ontological debates surrounding differences between emic and etic concepts, and improve understanding of the interrelationships between culture and health.

P3

Genes for *what*? Integrating genetics into self-understanding of eating disorder behavior

Michele M. Easter, PhD (Candidate), Department of Sociology, University of North Carolina at Chapel Hill

The DSM classifications for psychiatric illnesses have been unsatisfying to some scientists as a basis for investigating genetic influence upon mental disorder. On the one hand, there is concern that the classifications may be heterogeneous, combining multiple distinguishable phenotypes, each of which might have a different genetically influenced pathway. A diagnostic category might need to be divided into narrower subphenotypes in order to detect a genetic influence. On the other hand, DSM diagnoses might be usefully lumped together, as diagnostic distinctions may obscure common genetic origins. This genetic lumping and splitting across diagnostic categories may affect the self-understandings of people with a psychiatric diagnosis, depending on what kind of genetic contribution seems plausible to them and what its implications are. This paper examines how people diagnosed with an eating disorder imagine genetic causality to work, namely what the genes are “for”, as well as the role of non-genetic factors, and implications for these. Women with anorexia or bulimia nervosa found plausible genes “for” a wide range of phenotypes. They differed along several axes: the extent to which eating behavior was included in the gene (e.g., genes for anorexia vs. genes for general psychopathology), whether the gene was for a medicalized category or not (e.g., genes for a DSM diagnosis vs. genes for perfectionist personality), and whether the gene was for a psychiatric or physical phenotype (e.g., genes for depression vs. overweight). Even when theorizing a gene “for” anorexia or bulimia, most thought environmental and personal characteristics were needed to turn a predisposition into a disorder. Lumping and splitting diagnoses along genetic lines had implications for perception of eating disorders, stigma, treatment, and recovery.

P4

Palestinian perspectives on PTSD and the DSM

Sarah R. Kamens, PhD (Student), Department of Psychology, Fordham University

Though the DSM-IV is nearly ubiquitous in mental health institutions throughout the West Bank, there is little research on its utility for the Palestinian population. As in

other conflict zones, the research literature on West-Bank and Gazan populations has increasingly spotlighted Posttraumatic Stress Disorder (PTSD) (e.g., Baker & Shalhoub-Kevorkian, 1999; Elbedour, Onwuegbuzie, Ghannam, Whitcome, & Hein, 2007; Thabet, Ibraheem, Shivram, Winter, & Vostanis, 2009). Researchers have estimated that as many as 87% of children living in Gaza and 34% of children living in the West Bank and Jerusalem suffer from PTSD (Khamis, 2005; Qouta, Punamaki, & Sarraj, 2003). Because of the chronic nature of the conflict, some suggest that the standardized diagnostic definitions of trauma may not apply (Devi, 2005).

As part of a qualitative interview study investigating the experiences of psychosocial workers in the West Bank, six Palestinian mental health workers were interviewed about their theoretical and practical approaches to diagnosis. Specifically, participants were asked to describe their diagnostic procedures, their thoughts on the utility of the DSM for local populations, and the applicability of the PTSD category in their clinical work.

Results suggested that the DSM is widely used and accepted, though the category PTSD is a controversial topic among Palestinians. Most participants saw great need for reevaluation of PTSD as applied to the West Bank and Gaza. Specifically, five of the six interviewees were skeptical of research literature reporting high local rates of PTSD. Their narratives suggested that the DSM-IV criteria paint an incomplete clinical picture of Palestinians' reactions to violence. These interviewees described insufficiencies in the PTSD criteria, noted other common symptom patterns (e.g., depression, psychosomatic clusters) that emerge after political violence, and proposed that forms of resiliency be considered simultaneously with trauma symptoms. One participant suggested that sociopolitical concerns, such as research opportunities, were a driving factor in the PTSD literature in the region.

Of primary concern to participants were the implications of diagnosing a "post"traumatic syndrome in ongoing traumatic circumstances. Even those participants who reported high local rates of PTSD questioned the clinical and statistical utility of the diagnosis in such a context. One participant explained, "we cannot say that 80% of the Palestinians are not [functioning] [...] it means we are not a nation anymore, we are [...] a mental health hospital. I don't believe in that, and I don't agree."

Through easily presentable diagrams, text, and tables, this poster will display these and other concerns that interviewees raised about PTSD and the DSM-IV as applied to West Bank and Gazan populations. The perceived utility of PTSD in the context of continuous conflict will be a focal point. Participants' suggestions for future research on Palestinians will be presented and evaluated as part of a call for larger, quantitative studies that would allow for increased cross-cultural accuracy in diagnostic practice.

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P5

The influence of genes and environment on the differential development of conduct disorder symptomatology among different cultures.

Brett Kia-Keating, PhD, Department of Education Gevirtz Graduate School of Education, University of California, Santa Barbara

The American Psychiatric Association defines Conduct Disorder (CD) as a repetitive and persistent pattern of behavior in which the basic rights of others or major age-appropriate societal norms or rules are violated (American Psychiatric Association, 2000). This disorder causes tremendous financial and personal cost to society, and in order to prevent or intervene within the development of CD, the developmental trajectory needs to be better understood. There is concern, however, that this diagnostic classification is not valid across cultures. Thus, the cluster of symptoms that represent the diagnostic classification of CD may have a different developmental trajectory for individuals of different races/ethnicities.

This disorder has been found to be at least partially determined by genetic influences (Lyons, 1996; Cadoret, Cain, & Crowe, 1983; Eley, Lichtenstein, & Moffitt, 2003). However, unlike disorders such as Huntington's disease, which are caused by mutations in a single gene, CD is presumed to have a multifactorial polygenic etiology in which numerous genes and environmental factors make small contributions to the overall risk for the illness (Gelhorn et al., 2005; Dick et al., 2005; Eaves et al., 1997; Goldstein, Prescott, & Kendler, 2001; Jaffee et al., 2005). In addition, recent research examining the interaction between genetic and environmental factors on CD has demonstrated that environmental risks can affect people more strongly than previously appreciated within genetically vulnerable populations, and conversely, the effects of genes can be larger when individuals are exposed to environmental risk (Moffitt, 2005).

This study examines different interactions between genetic and environmental influences within the developmental trajectories of CD for culturally diverse adolescents. Factor analysis was utilized to cluster CD symptoms into a factor scale score for a nationally representative sample of 20,725 adolescents in grades 7 through 12 from the National Longitudinal Study of Adolescent Health. Change in this factor scale score across three waves of data collection was then predicted for a different racial/ethnic groups within a subsample of twins, siblings, half-siblings, and unrelated adolescents living in the same household (n= 6,906). This analysis was conducted utilizing hierarchical growth modeling, in which the heritable and environmental

influence, and their interactions, were then used to explain the growth trajectory of the CD symptom factor scale scores for each racial/ethnic group over time.

For this subsample, saliva was gathered at wave 3 so that genotype scores could be created for specific genes that have been found to be important in the literature, including DAT1 (dopamine transporter), DRD4 (dopamine receptor), SLC6A4 (serotonin transporter), MAOA-u (monoamine oxidase A-uVNTR), DRD2 (dopamine D2 receptor), and CYP2A6 (cytochromeP450 2A6). Utilizing this genotype information, in the next step of the analysis, each of the specific genotype scores were introduced into the model to evaluate their mediating and moderating effect on the relationship between heredity and CD symptoms.

Results will be discussed in terms of the relationship between genetic and environmental characteristics in the developmental trajectories of CD symptoms for adolescents of different cultures.

P6

Culture and emotion regulation after trauma

Maryam Kia-Keating, EdM, PhD, Department of Counseling, Clinical, and School Psychology, University of California, Santa Barbara

Developmental Trauma Disorder (DTD) is being developed by a National Child Traumatic Stress Network taskforce as a new diagnosis that might better capture the complexity and developmentally-specific symptom picture associated with childhood traumatic stress. Specific features of DTD will include an emphasis on identifying a triggered pattern of repeated dysregulation in response to trauma cues. Given this emphasis, understanding the ways in which traumatized youth manage or regulate their emotions has critical implications for informing the DTD diagnosis and treatment. Moreover, it is important to examine these processes among diverse youth who may rely on culturally specific ways of regulating their affect. Young refugees are an important sample to draw from because they are often exposed to extreme and multiple adverse and traumatic life events, including exposure to armed conflict (Lustig, Kia-Keating et al., 2004). Moreover, much of the literature on young refugees has focused on PTSD as a diagnosis and there is some research to suggest that PTSD rates are high and can persist over time (Kinzie et al., 1999). The current study examines trauma exposure, emotion regulation, and trauma symptoms in a sample of 102 Somali adolescent refugees, ages 12-19, resettled in the United States. Adolescents completed the War Trauma Screening Scale (WTSS; Layne et al., 1999), the Responses to Stress Questionnaire (RSQ; Connor-Smith et al., 2000), and the UCLA PTSD Index for DSM-IV (PTSD-I; Rodriguez et al., 1999). Emotion regulation can be identified in terms of two aspects: reappraisal and suppression (Gross & John, 2003). Suppression is the inhibition of emotional expressive behavior and, in the context of this study, was measured by the disengagement subscale of the RSQ.

Exposure to trauma significantly predicted 20.7% of the variance in PTSD symptoms ($F(1,101)=26.03, p<.001$). Hierarchical regression analyses demonstrated that when added to the trauma model in Step 2, disengagement was not significant. The interaction between trauma exposure and disengagement, added to the model in step 3, was significant, uniquely accounting for 5.2% of the variance in PTSD symptom

severity. To facilitate the interpretation of this finding, the interaction was plotted (see Figure 1; Aiken & West, 1991). The interaction indicated that the relationship between trauma exposure and PTSD symptom severity was stronger for adolescents who reported higher use of disengagement than those who reported lower use of disengagement.

The detrimental role of disengagement at high levels of trauma suggests that disengagement may be particularly maladaptive for youth contending with high levels of trauma and adversity, or that highly symptomatic, highly traumatized youth may be more likely to employ disengagement strategies. It is possible that disengagement is reflective of the adolescents' trauma reaction and symptom picture rather than of a purposeful attempt at emotion regulation. Implications for the DTD diagnosis and treatment in the context of development, culture, and neurobiology will be examined.

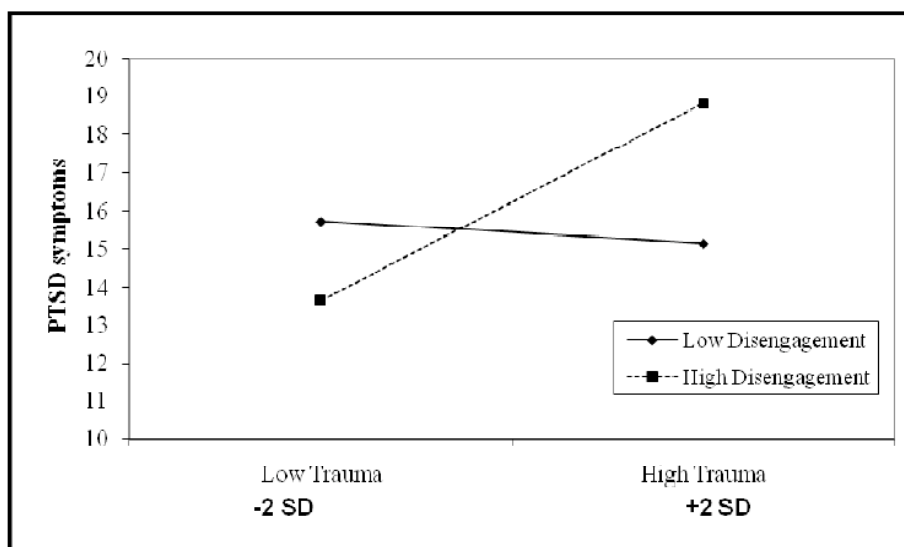


Figure 1. Interaction between Exposure to Trauma and Disengagement in Predicting Post-Traumatic Stress Symptom Severity (n=102)

P7

Long-term mental health impact of violence in different cultural contexts

Jutta Lindert, PhD, MPH, University of Applied Sciences, Ludwigsburg, Germany

Background: Mass violence is one of the primary causes of mortality and morbidity worldwide. Violence can have short-term impact and long term impact on mental health of affected populations. We aimed to systematically investigate symptoms of mental ill health in the population of the countries affected by mass violence.

Methods: We searched, and systematically reviewed published papers located by keywords *genocide, *disaster, *mass violence, * violence, *depression, *anxiety and "posttraumatic stress and *distress published 1945-2009 in Pubmed. Additionally

articles were handsearched in English and German journals. Case reports and studies with less than 30 people were excluded from the review, remaining 167 studies to be analysed.

Results: The systematic review of published studies on the long-term health impact of mass violence suggests that exposure to mass violence has an impact on scope and extent of mental disorders across all cultures. Level of symptoms and symptoms of mental disorders varied with prevalence rates between 3% and 80% in relation to the country where the mass violence occurred, to the age of affected populations and to the measurement methods of the study. Idioms of distress varied between affected populations (e.g. prevalence of somatic symptoms, prevalence of specific symptoms of posttraumatic stress disorder like arousal or intrusion).

Conclusions: Despite the limitations existing studies suggest that mass violence has long lasting mental ill-health effects across cultures. Mental ill health symptoms can be differentiated into *core symptoms* which are shown across the cultural contexts and into *cultural idioms of symptoms*.

P8

Neurocognitive predictors of functional outcome in Chinese first-episode patients with schizophrenia

Nancy H. Liu, MA^{1,2}, Ya Juan Niu, MD², Michael R. Phillips, MD, MPH², William D. Spaulding, PhD¹

¹University of Nebraska-Lincoln, ²Beijing Hui Long Guan Hospital

Background. Cognitive dysfunction is a hallmark symptom of schizophrenia. Evident at first-episode, deficits are pronounced in executive function, working memory and attention. Cognitive deficits contribute to functional impairment, such as in work. Recent research has highlighted the need for cross-cultural research in schizophrenia, especially related to social functioning and real-world outcomes. Until now, no studies from China have examined the relationship between neurocognitive and functional outcomes in first-episode schizophrenia. Due to the lack of research in this area and known heterogeneity of this population, we utilized an exploratory approach to determine the predictive value of several neurocognitive, social cognitive, and symptom indicators on social functioning.

Methods. Data were collected from approximately 163 Chinese patients with first episode schizophrenia from the Beijing Hui Long Guan Hospital. Neurocognitive functioning was measured using the Wechsler Memory Scale, subtests of the WAIS-III-R, Trails A and B and the Wisconsin Card Sort Task (WCST). The Brief Psychiatric Rating Scale (BPRS) assessed symptomatology. Social functioning measures were assessed multiple time points and included the Nurse's Observational Scale for Inpatient Evaluation-30 (NOSIE-30), Social Dysfunction Scale, Social Dysfunction Scale and work functioning. R was used for all analyses.

Results. Preliminary results revealed the predictive ability of neurocognitive status on later social functioning.

Discussion. Neurocognitive functioning is an important target of functioning among individuals with severe mental illness in China.

P9

Explanatory models of depression in motherhood: A study of mothers and health workers in Vietnam

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Vikram Patel PhD, Professor, Epidemiology and Population Health, London School of Hygiene and Tropical Medicine

Elisabeth Faxelid PhD, Ass. Professor, Department of Public Health Sciences, Karolinska Institutet

Background: Major depression is the third leading cause of the global disease burden, and its prevalence is increasing worldwide. In Vietnam, primary care physicians rarely diagnose depression, and those afflicted seek professional care only in very severe cases. Depressive disorders affecting mothers are associated with low birth-weight, childhood stunting, under nutrition and adverse mental development, and a study in Ho Chi Minh City, Vietnam found a 33 percent prevalence of postnatal depression.

The symptomatic presentation of depression varies from culture to culture. In Vietnam, the influence of Confucianism, Buddhism, and Taoism has created a holistic thinking where clear distinctions between physical and psychological symptoms are not made. The Cartesian mind/body dualistic fashion of thinking that underlies Western psychiatric nosology does not necessarily coincide with this holistic view.

Methods: The aim of this study was to elicit Illness Explanatory Models (EMs) of depression and postnatal depression. The study was conducted in a semi-rural area in Vietnam, and we used semi-structured interviews with a case vignette of depression to elicit EMs from nine mothers and nine health workers. The interviews were analyzed through qualitative content analysis.

Results: The EMs were found to be predominantly somatosocial, and mothers assigned a strong personal responsibility for care. Also, preference for a male infant and other social factors were described as important causes for depression or postnatal depression. Psychiatric health care was seldom recommended by the participants, and

when biomedical treatment was recommended, it was mainly in order to treat a physical illness which was thought to be the cause of the depression.

Conclusion: Our findings highlight the importance of diagnosis and treatment at the level of primary care for depression and postnatal depression, where a lack of knowledge currently impedes diagnosis. Additionally, a cross-sectoral approach for depression prevention in Vietnam seems necessary, where its social causation in women is taken into account.

P10

Neuroscientific psychiatric diagnosis

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In the recent years we see substantial advancement in the development of complex systems sciences such as graph-theory, non-linear dynamics, and others. Their contribution to neurosciences is considerable resulting in concepts such as "Small-world networks," "neural and matching complexity," "Dynamic core," "Bayesian brain" and "free energy," these concepts relate to how the brain organizes to achieve optimal cognitions and emotions, and thus of primary interest for psychiatry. The applications of complex systems theories to the understanding of mental disorders are just beginning to penetrate psychiatric literature. They have the potential to revolutionize our field especially in the transition from a descriptive DSM-like conceptualization of mental disorders toward an etiopathic brain-related neuroscientific psychiatric diagnosis. Mental disorders can be reconceptualized as disturbances to the optimal brain organization; they can be divided to disturbances to 1) internal representations 2) optimization dynamics and 3) neural complexity. Personality disorders being related to internal configurations developed over years of experience-dependent-plasticity can be reconceptualized as disorders of neural networks of internal representations. Affective and anxiety disorders being related to plasticity synaptic-neural genesis can be reconceptualized as disorders of optimization dynamics. Psychosis and schizophrenia related to fragmentation of neural network connectivity can be reconceptualized as disorders of neural complexity. This model explains the social-cultural, environmental and developmental influences in mental disorder via the ideas of experience-dependent-plasticity and optimization dynamics of internal representations, it is also neuroscientific being related to the complex neural network dynamics involved in these influences. The formulations of these complex dynamics with the aide of complex-systems science are very promising for neuroscientific psychiatry. The transition from a descriptive to neuroscientific psychiatry can be gradual first mediated by a translation metrics converging sets of clinical signs and symptom to their underlying proposed neural network disturbances thus offering sets of testable predictions to validate with brain imaging research.

P11

Of Biology and culture: How the harmful-dysfunction framework of disorder can help bridge the gap

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The core of diagnostic and construct validity questions in mental health lie at the intersection of biology and culture.¹ How we negotiate our understanding of the function and limits of biology and the influence and salience of environment and culture has implications for diagnosis and treatment. Although much work attempts to engage both of the ends of this biology-culture spectrum in etiologic research, less work within psychiatry grapples with how both intersect in defining disease.

Many concepts of health and illness are used in mental health research across disciplines. The most prominent among them is the much utilized, yet elusive, DSM construct of “disorder.” DSM defines disorder as “a clinically significant behavioral or psychological syndrome or pattern that occurs in an individual and that is associated with present distress... or disability...or with a significantly increased risk of suffering death, pain, disability, or an important loss of freedom... Whatever its original cause, it must currently be considered a manifestation of a behavioral, psychological, or biological dysfunction in the individual.”² This construct guides DSM IV categorization, diagnostic practice and much research. Despite its ubiquity, this construct may not fit varying goals across disciplines and its application rests on how we define what is normal. From a cultural perspective, cultural expectations dominate in defining what is normal. However, the DSM further outlines that deviant behavior not associated with dysfunction in the individual cannot be considered a disorder. Biological perspectives focus on biological definitions of normality which may fail to fully appreciate the role of environment in understanding biology. How do we reconcile the two to advance understanding of mental disorders?

We propose that the harmful-dysfunction framework of disorder^{1,3} can help clarify the intended construct of disorder and thereby facilitate communication about the diverse concepts of interest in mental health. Harmful-dysfunction posits that a condition is a disorder only if it *both* causes some degree of *harm* to the individual; AND is presumed to be a result of some *internal-dysfunction*. Disorders are therefore defined in the intersection of biology and culture. Harmful-dysfunction, particularly in its internal-dysfunction component, challenges us to think about what we define as pathology. When little is understood about what may be normal function in the mental mechanisms of interest, a greater knowledge base on how environmental stimuli, culture and social interactions influence behavior is required to determine what is potentially normal versus indicative of underlying pathology.^{4,5} Moreover, the harm component of harmful-dysfunction explicitly grounds the definition of disorder in the sociocultural meaning of the consequences of the internal-dysfunction.

As mental disorders gain attention on the public health agenda domestically⁶ and internationally⁷ diagnostic validity questions loom large. Often missing in the relevant discourse is a guiding framework that integrates biology and sociocultural norms. We propose that the harmful-dysfunction framework of disorder may provide such a framework and discuss how it can better integrate the biological and socio-cultural research on mental illness to bring about useful diagnostic categories, etiologic discoveries and greater understanding of how culture influences disorder and its construction.

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P12**Progression of depressive symptoms and poor physical health in Tsunami exposed mothers: A prospective longitudinal investigation**

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K. A. S. Wickrama, PhD, Professor, Department of Human Development and Family Studies, Iowa State University

Using data from 160 Tsunami-affected mothers living in a village in southern Sri Lanka, the current study investigates the progression of post-Tsunami depressive symptoms and poor physical health from 2005 to 2008. Tsunami exposure contributed to depressive symptoms among mothers independently of pre-Tsunami family adversities. Depressive symptoms showed an average decline whereas poor physical health showed an average increase over this period. However, post-Tsunami poor physical health and depressive symptoms continued over the study period. The results also revealed an inter-related health process between depression and physical health over time. Some of the associations between early health problems and later health problems were mediated by post-Tsunami family stressful events. The average number of post-Tsunami family negative life events was significantly higher than that of pre-Tsunami family negative life events. The identification of mechanisms involving the progression of post-disaster health problems can be useful for post-disaster interventions and recovery programs.

Cross-lagged influences showed that early reported depression contributed to poor physical health later, and early poor physical health contributed to later depressive symptoms. These reciprocal influences create post-disaster inter-related health processes over time. It seems that although disaster-exposure does not directly influence later physical health or depression, it initiates an inter-related health process by making initial health problems. Only a prospective longitudinal study, such as the present study, provides an appropriate opportunity to understand changes in health problems and inter-related processes over time (McNally et al., 2003). Thus, the present study fills an important gap in disaster research.

The results showed that continuity of health problems are mediated by secondary stressors such as family negative life events. These secondary stressors were influenced not only by initial poor physical health and depression, but also by Tsunami exposure directly. Secondary stressors were responsible for more than half of the explained variance of poor physical health and depressive symptoms three years after the Tsunami. The results suggest that secondary stressors exert not only a mediating effect but also additive effect on later health problems. The present prospective longitudinal study provided an appropriate opportunity to understand associations of changes in health problems with secondary risk factors (McNally et al., 2003).

Findings from this study suggest a number of important practical implications for offering support to Tsunami-exposed communities. First, Tsunami-exposed mothers showed higher prevalence in depression three and half months after the Tsunami. This has been attributed not only to Tsunami exposure, but also to family adversity. In addition, secondary family negative life events contribute to the continuity of their health problems. Thus, health recovery programs should focus not only on mothers' exposure to disaster, but also their pre-disaster and post-disaster adversities. Second, disaster recovery programs should reach disaster-exposed mothers directly, therefore, more effectively eliminating potential gender bias or discrimination of existing delivery systems. Third, physical and mental health problems continue as an inter-related process. Thus, disaster health recovery programs should have an integrated health intervention approach to disrupt continuities of health problems.

Suzanne Anker, MFA*Cover Artist**School of Visual Arts*

Suzanne Anker, Chair of the Fine Arts Department at the School of Visual Arts in NYC, is an artist, theorist and co-author (with the late Dorothy Nelkin) of *The Molecular Gaze: Art in the Genetic Age* (Cold Spring Harbor Laboratory Press, 2004). Her Internet radio program, "The Bio-Blurb" show, is hosted by P.S.1 and the Museum of Modern Art (www.ps1.org). Her most recent project was an on-line symposium, Visual Culture and Bioscience, sponsored by the National Academy of Sciences and the University of Maryland, Baltimore. Her recent publications include "Neuroculture," in *Nature Reviews Neuroscience* 10 (2009): 815-821 (with Giovanni Frazzetto).

Simon Baron-Cohen, PhD, MPhil*Session 2 Speaker**University of Cambridge*

Simon Baron-Cohen is Professor of Developmental Psychopathology at the University of Cambridge and Fellow at Trinity College, Cambridge. He is Director of the Autism Research Centre (ARC) in Cambridge (www.autismresearchcentre.com). He holds degrees in Human Sciences from New College, Oxford, a PhD in Psychology from UCL, and an MPhil in Clinical Psychology at the Institute of Psychiatry. He held lectureships in both of these departments in London before moving to Cambridge in 1994.

He is author of *Mindblindness* (MIT Press, 1995), *The Essential Difference* (Penguin UK/Basic Books, 2003), and *Prenatal Testosterone in Mind* (MIT Press, 2005). He has edited a number of scholarly anthologies, including *Understanding Other Minds* (Oxford University Press, 1993, 2001), *The Maladapted Mind* (Erlbaum, 1997) and *Synaesthesia* (Blackwells, 1997). He has also written books for parents and teachers such as *Autism and Asperger Syndrome: The Facts* (OUP, 2008), and *Teaching children with autism to mind read* (Wiley, 1998). He is author of the DVD-ROM *Mind Reading: an interactive guide to emotions* (Jessica Kingsley Ltd, 2003) and *The Transporters* (<http://www.thetransporters.com/>, 2007), an animation for preschool children with autism to help them learn emotion recognition. Both of these were nominated for BAFTA awards.

He has been awarded prizes from the American Psychological Association, the British Association for the Advancement of Science (BA), and the British Psychological Society (BPS) for his research into autism. For 2007 he was President of the Psychology Section of the BA, Vice President of the National Autistic Society, and received the 2006 Presidents' Award for Distinguished Contributions to Psychological Knowledge from the BPS. He is a Fellow of the BPS and co-editor in chief of the new journal *Molecular Autism*. His current research is testing the 'extreme male brain' theory of autism at the neural, endocrine, and genetic levels.

Anne E. Becker, MD, PhD, ScM*Session 4 Roundtable Panelist; Session 6 Speaker**Harvard Medical School; Massachusetts General Hospital*

Anne Becker is Vice Chair of the Department of Global Health and Social Medicine, Harvard Medical School, and Director of the MGH Eating Disorders Clinical and Research Program. She

received her medical training at Harvard Medical School and completed her psychiatric residency at the Massachusetts General Hospital in 1994. She also received a doctoral degree in anthropology from the Harvard Graduate School of Arts & Sciences and a master's degree in epidemiology from the Harvard School of Public Health.

Dr. Becker has a clinical interest in bulimia nervosa, binge eating disorder, as well as in how ethnic and cultural issues impact on eating disorders. Her research interests focus on the impact of social and cultural context on eating disorders. Dr. Becker is the recipient of an NIMH grant to study the impact of social transition on disordered eating and body image in young women. She is also the lead investigator of research on the impact of television on the body image of teenage girls in Fiji. Dr. Becker is the author of *Body, Self, and Society: The View from Fiji*. She continues to investigate the impact of modernization on body image and eating disorders in the South Pacific.

Dr. Becker is a member of the Board of Directors for the Academy for Eating Disorders (AED) and was co-chair of the Scientific Program Committee for the 2007 International Conference on Eating Disorders. She also serves on the Teaching Day Committee for the AED. She has published numerous original scientific papers and reviews on eating disorders and is on the editorial board of the *International Journal of Eating Disorders*.

Dr. Becker has been co-editor in chief of the journal, *Culture, Medicine and Psychiatry* until 2007. In addition, she serves on the editorial boards of the *Harvard Review of Psychiatry*, and *Anthropology & Medicine*. Dr. Becker is a member of the Group for the Advancement of Psychiatry (GAP) committee on cultural psychiatry and is active in training psychiatry residents in delivering culturally sensitive, informed, and competent care.

Robert M. Bilder, PhD, ABPP-CN

Session 4 Roundtable Panelist; Session 5 Speaker
University of California, Los Angeles

Dr. Bilder is currently Chief of Medical Psychology – Neuropsychology at the Jane & Terry Semel Institute for Neuroscience and Human Behavior and Michael E. Tennenbaum Family Professor of Psychiatry & Biobehavioral Sciences and Psychology at UCLA. Dr. Bilder received a BA from Columbia College of Columbia University in Biology and Psychology (1978), and a PhD in Psychology from City College, City University of New York, where he specialized in human neuropsychology (1984). He did his Internship in the Division of Neuropsychology, New York State Neuro-logical Institute, Columbia-Presbyterian Medical Center (1982). Before joining UCLA in 2002, Dr. Bilder held faculty appointments at Columbia University College of Physicians & Surgeons and the Albert Einstein College of Medicine. He served as Chief of Neuropsychology at Zucker Hillside Hospital of North Shore – Long Island Jewish Medical Center from 1988 to 2002, and was Associate Director for Human Research at the Center for Advanced Brain Imaging at the Nathan Kline Institute for Psychiatric Research from 1996 to 2002. Dr. Bilder is a member of the Board of Directors of the American Board of Clinical Neuropsychology, and directs the UCLA Postdoctoral Fellowship Program in Neuropsychology.

Dr. Bilder is has been engaged for over 25 years in research on the neuroanatomic and neuropsychological bases of major mental illnesses. His work has been presented in more than 100 peer-reviewed publications and 300 scientific presentations. Dr. Bilder's research focuses on interdisciplinary and translational research, and particularly on developing the new discipline of "phenomics" to enable the systematic study of neural system phenotypes on a genome-wide scale (see www.phenomics.ucla.edu). He directs the Consortium for Neuropsychiatric Phenomics under the aegis of the NIH Roadmap Initiative to identify and study the neural system phenotypes that offer the most promising targets for gene and drug discovery. He also is Co-PI

of an NIMH-sponsored Center for Intervention Development and Applied Research (CIDAR) at UCLA, focusing on Translational Research to Enhance Cognitive Control particularly in children and adolescents.

James Boehnlein, MD

Session 8 Chair/Moderator

Oregon Health and Science University; Department of Veterans Affairs Northwest Network Mental Illness Research, Education, and Clinical Center (MIRECC)

Dr. Boehnlein received his psychiatry training at the Oregon Health and Science University (OHSU) and was a Robert Wood Johnson Scholar at the University of Pennsylvania before he took his current faculty position at OHSU, where he is now Professor of Psychiatry. During the past 22 years he has been a staff psychiatrist in OHSU's Intercultural Psychiatric Program, where he has treated Cambodian, Vietnamese, and Central American refugees, and has worked with colleagues in clinical research that has studied long-term adjustment of traumatized refugees from a biopsychosocial perspective. Over the same period he has also been a clinician in the mental health clinic of the Portland VA Medical Center, treating veterans with PTSD and chronic psychosis. He is board certified in both general and forensic psychiatry. Dr. Boehnlein also has been extensively involved in various areas of medical education and curriculum reform and is currently Director of Medical Student Education in OHSU's Department of Psychiatry and was the medical school's Assistant Dean for Curriculum and curriculum committee chair from 1997-2005. He has responsibility for ongoing continuing education for the VA's multidisciplinary mental health professionals in Oregon, Washington, Idaho and Alaska as Director of Education for the VA's Northwest region Mental Illness Research, Education and Clinical Center (MIRECC), and is Director of the MIRECC psychiatry research fellowship. He is President of the Society for the Study of Psychiatry and Culture, an international association of psychiatric and social science researchers and educators that has as its mission the enhancement of research, education, and culturally competent clinical care in cross-cultural psychiatry.

Carole H. Browner, PhD, MPH

Session 2 Chair/Moderator

UCLA; FPR; Conference Program Committee

Carole H. Browner is a Professor at the UCLA Center for Culture and Health in the David Geffen School of Medicine's NPI-Semel Institute for Neuroscience and Human Behavior. She also holds appointments in the Departments of Anthropology and Women's Studies. Her training as a medical anthropologist combines a doctorate in socio-cultural anthropology and a master's in public health (both from UC-Berkeley), and years of field research in urban Colombia, rural Mexico, and with diverse ethnic groups in the U.S. She has also held faculty positions at Wayne State University, the University of Barcelona, and Columbia University.

Since 1989, her work has focused principally on issues surrounding the medicalization of pregnancy and prenatal care; particularly ways in which prenatal genetic information may alter reproductive experience. She is co-editor of the forthcoming *Globalization, Reproduction, and the State: New Theoretical and Ethnographic Perspectives* (Duke University Press, 2010).

Amid increasingly sharp debate over the consequences of decoding the human genome, Dr. Browner's most current work examines the growing role of genetic testing in the field of neurology. Her new monograph, *Neurogenetic Diagnoses: the Power of Hope and the Limits of Today's Medicine* (Routledge, 2010; co-authored with Mabel Preloran), explores the diverse meanings and impacts of genetic diagnoses for patients enduring incurable, ultimately fatal neurodegenerative diseases -- and for their family caregivers and clinicians.

Professor Browner's research has been funded by the National Science Foundation, the National Institutes of Health, the Agency for Health Care Policy Research, the Centers for Disease Control and Prevention, private donors and foundations.

She has served on the Scientific Advisory Committee for California's Birth Defects Monitoring Program and on the Executive and Advisory Boards of several University of California institutes including UC-MEXUS, the Institute for American Cultures, the Institute for Development Studies, the International Institute, the Latin American Center, and the Center for the Study of Women. Nationally, she has been a member of the Executive Boards of the American Anthropological Association, the Society for Applied Anthropology, the Society for Latin American Anthropology, and the Society for Medical Anthropology, of which she was President from 1995-97. Dr. Browner was a founding member of and serves on the board of directors of the Foundation for Psychocultural Research.

Ashwin Budden, PhD (Candidate)

Poster Presenter

University of California, San Diego

Ashwin is a doctoral student in medical anthropology and cognitive science at the University of California San Diego (Interdisciplinary Ph.D. program). His research and training activities focus on the interplay of culture and social cognition in acute and chronic stress, psychopathology, and treatment seeking in contexts of medical pluralism. He has conducted long-term ethnographic fieldwork in the Brazilian Amazon on popular religion and cultural psychiatry and has been involved in other research projects on mental health services delivery in California and ethnomedicine in Italy. Ashwin is working to integrate anthropological perspectives into social neuroscience, behavioral medicine, and global mental health initiatives.

Tyrone D. Cannon, PhD

Session 5 Speaker

UCLA

Tyrone D. Cannon is the Staglin Family Professor of Psychology, Psychiatry & Biobehavioral Sciences, and the Carol Moss Spivak Scholar in Neuroscience at UCLA. He also serves as Director of the Staglin Music Festival Center for Cognitive Neuroscience and Associate Director of the Semel Institute for Neuroscience and Human Behavior. Dr. Cannon earned his bachelor's degree at Dartmouth College (1985) and his doctoral degree at the University of Southern California (1990). He spent a year in clinical training at the UCLA Neuropsychiatric Institute (1990-1991), before taking his first academic appointment in the Department of Psychology at the University of Pennsylvania, where he was promoted to associate professor with tenure in 1997. He joined the faculty at UCLA in 1999. Dr. Cannon's research aims to discover the causes of schizophrenia and bipolar disorder and to develop effective treatment and prevention strategies based on an understanding of the genetic and neural mechanisms that give rise to these disorders. His studies have focused on elucidating the genetic and non-genetic factors that influence susceptibility to schizophrenia and bipolar disorder and delineating their effects on brain structure and functioning across development, with a particular emphasis on gestational (pre- and perinatal) and adolescent periods of brain development. A hallmark of his work is the integration of molecular biological and neuroimaging approaches in unique populations such as twins discordant for schizophrenia and bipolar disorder and selected members of large prospectively evaluated birth cohorts who have developed one of these conditions in adulthood. Recent work has incorporated transgenic animal models and has extended this translational human-animal genetics and neuroscience strategy to Neurofibromatosis 1, an inherited condition affecting brain structure and function. With support from the Music Festival for Mental

Health and the National Institute of Mental Health, Dr. Cannon has established a clinical research center for early detection and prevention of major mental illness in at risk youth based in the UCLA Neuropsychiatric Institute. In that project he and his colleagues are ascertaining individuals who are at risk for imminent onset of psychosis and following them in longitudinal neuroimaging studies aimed at identifying the neural changes that occur proximally to onset of psychosis.

Marie-Françoise Chesselet, MD, PhD

Session 1 Chair/Moderator/Speaker

UCLA; FPR; Conference Program Committee

Marie-Françoise Chesselet is the Charles H. Markham Professor of Neurology and the Chair of the Department of Neurobiology in the David Geffen School of Medicine at UCLA. She received her MD and PhD degrees from the University of Paris VI, France, where she completed her PhD thesis in the laboratory of Jacques Glowinski and became a Charge de Recherches at the CNRS, the National French Research Agency. She was a Visiting Scientist in the laboratories of Ann Graybiel at the MIT and of Michael Bronstein at the NIH before joining the Faculty of the Medical College of Pennsylvania and then the University of Pennsylvania. In 1996, she moved to UCLA where she directs the APDA Advanced Center for Parkinson's Disease Research, the NINDS-funded UCLA Morris K. Udall, Center of Excellence for Parkinson's Disease Research and the NIEHS-funded Center for Gene Environment in Parkinson's Disease. Her laboratory conducts research on the molecular mechanisms of disorders of the basal ganglia and new treatments for Parkinson's disease and Huntington's disease.

Eric Courchesne, PhD

Session 2 Speaker

University of California, San Diego

Eric Courchesne is Director of the NIH-UCSD Autism Center of Excellence. His Center is dedicated to uncovering the brain bases and genetic causes of autism. Current MRI studies of autism aim to patterns of abnormal brain growth and function in the first years of life in autism. Current functional brain imaging techniques ("fMRI") are used to establish links between autistic symptoms and the brain sites responsible for them. His studies of frontal cortex microstructure seeks to identify abnormal developmental changes in gene expression and cellular organization from early childhood to adulthood in autism. Recognized through publications in such journals as *Science*, the *Proceedings of the National Academy of Sciences*, *The New England Journal of Medicine*, *Lancet*, and the *Journal of the American Medical Association (JAMA)*, his work has significantly contributed to scientists' understanding of the biological bases of autism, and has been the source of new insights on the functional role of the frontal lobes and cerebellum. He is frequently invited to lecture at major national and international conferences, and he has also made numerous media appearances, including as a featured guest on U.S., Canadian, Japanese, French, and British public television science programs. His discoveries have also been featured in numerous newspapers and magazines around the world, including *Time*, *Newsweek*, *The Wall Street Journal*, and the *New York Times*. Dr. Courchesne's studies have resulted in over 180 publications. His research is supported through grants from the National Institute of Mental Health, the National Institute of Child Health and Human Development, the National Institute of Neurological Disorders and Stroke, the Simons Foundation, Autism Speaks, Cure Autism Now, the Peter Emch Family Foundation, and The Thursday Club Juniors.

Constance A. Cummings, PhD

FPR; Conference Program Committee

Constance Cummings is Project Director of the non-profit Foundation for Psychocultural Research, which supports and advances interdisciplinary research and scholarship at the intersection of biology, neuroscience, psychology, psychiatry, anthropology, and related fields, with an emphasis on psychocultural factors. She is co-editor (with Carol Worthman, Paul Plotsky, and Dan Schechter) of *Formative Experiences: The Interaction of Caregiving, Culture, and Developmental Psychobiology* (New York: Cambridge University Press, 2010). She received her doctorate in theoretical linguistics from New York University.

Bruce Cuthbert, PhD

Session 3 Keynote Roundtable Panelist

NIMH

Bruce Cuthbert was named Director of the Division of Adult Translational Research and Treatment Development (DATR) at the National Institute of Mental Health (NIMH) in January, 2010. A major component of this position involves coordinating the new Research Domain Criteria project to develop neuroscience-based criteria for studying mental disorders. Dr. Cuthbert returned to NIMH following four years as a professor of clinical science at the University of Minnesota. He first came to NIMH in 1998, and was from 1999 to 2005 chief of the Adult Psychopathology and Prevention Research Branch. Dr. Cuthbert earned a Ph.D. in clinical psychology and psychophysiology from the University of Wisconsin at Madison. He served in the U.S. Army Medical Service Corps and was on the faculty for seventeen years at the University of Florida. He was elected president of the Society for Psychophysiological Research in 2004 and is a fellow of the Association for Psychological Science. Dr. Cuthbert's research interests focus on the translation of new psychophysiological models and measures of emotion to mood and anxiety disorders (and their co-morbidity). At Florida he was a senior member of Peter Lang's research group, conducting basic studies to develop paradigms and measures for studying emotions such as the International Affective Picture System (IAPS, a standardized emotional stimulus set) and the use of the startle probe and event-related potentials as indices of emotional response; and translating the results of this work to clinical studies designed to explicate similarities and differences in psychopathology among different types of anxiety disorders.

Britt Dahlberg, PhD (Candidate)

Poster Presenter

University of Pennsylvania

Britt Dahlberg is a doctoral student in Medical Anthropology at the University of Pennsylvania where she also works as a Research Coordinator on interdisciplinary studies about depression and aging in the Department of Family Medicine and Community Health. She is interested in exploring connections between culture and mental health, and in developing the theoretical and methodological tools needed to explore these complex relationships. Her work to date has focused on how older adults conceptualize and experience depression and depression diagnosis, older adults' strategies for treating depression, and how cultural models about distress arise in response to and shape personal experience.

Michele M. Easter, PhD (Candidate)

Poster Presenter

University of North Carolina, Chapel Hill

Michele M. Easter, MA, is a doctoral candidate in the Department of Sociology at University of North Carolina at Chapel Hill. For her dissertation, currently entitled "Eating Disorders as 'Genetic': Meanings and Implications for Women with Eating Disorders," she interviewed 50

women in treatment or recovered from anorexia or bulimia nervosa. She is also a trainee at the Center for Genomics and Society at UNC-Chapel Hill.

Byron J. Good, PhD

*Session 1 Speaker; Session 3 Keynote Roundtable Panelist
Harvard Medical School*

Byron J. Good is Professor of Medical Anthropology in the Department of Social Medicine, Harvard Medical School, and Professor in the Department of Anthropology, Harvard University Faculty of Arts and Sciences. Dr. Good's book, *Medicine, Rationality and Experience: An Anthropological Perspective* was published by Cambridge University Press in 1994. He was a co-editor of *World Mental Health: Problems, Priorities and Responses*, published by Oxford University Press in 1995, and of *Culture and Depression: Studies in the Anthropology and Cross-Cultural Psychiatry of Affect and Disorder*, published in 1985 by the University of California Press. He has been Co-Editor-in-Chief of *Culture, Medicine and Psychiatry: An international journal of comparative cross-cultural research*, since 1987.

Professor Good's recent publications include "Culture and DSM-IV: Diagnosis, Knowledge and Power," in *Culture, Medicine and Psychiatry* 1996; "Studying Mental Illness in Context: Local, Global, or Universal?" in *Ethos* 1997; "Culture and Psychotherapy: Clinical Issues in Cross-Cultural Settings," in *Culture and Psyche: Japanese Journal of Transcultural Psychiatry* 1998; (with Mary-Jo DelVecchio Good) "Clinical Narratives and the Study of Contemporary Doctor-Patient Relationships," in Gary L. Albrecht, Ray Fitzpatrick and Susan C. Scrimshaw, eds., *The Handbook of Social Studies in Health and Medicine* (Sage Publications Ltd., 2000); (with Mary-Jo DelVecchio Good) "'Fiction' and 'Historicity' in Doctors' Stories: Social and Narrative Dimensions of Learning Medicine," in Cheryl Mattingly and Linda Garro, eds., *Narrative and the Cultural Construction of Illness and Healing* (University of California Press, 2000).

Dr. Good's current work focuses on major mental illness and its treatment in Central Java in Indonesia. He is also carrying out research on the effects of managed mental and behavioral health services on the morale of psychiatrists and psychotherapists, as well as on the care provided for persons being treated for substance abuse or mental illness. He has developed a program of research and writing focused on social, cultural, and ethical issues associated with new biotechnologies. He continues to explore the place of culture theory in medical anthropology, with a special focus on the use of narrative techniques for studies of the cultural shaping of mental illness and client-practitioner relationships.

Mary-Jo DelVecchio Good, PhD

*Session 5 Commentator/Roundtable Panelist
Harvard Medical School*

Mary-Jo DelVecchio Good, a comparative sociologist and medical anthropologist, is Professor of Social Medicine in Harvard Medical School's Department of Social Medicine. She also teaches in the Department of Sociology at Harvard University. Professor Good is a faculty affiliate of the Asia Center, the Center for Middle Eastern Studies, and the Weatherhead Center for International Affairs. Professor Good is a member of the steering committee for the Harvard Initiative on Global Health, and is additionally a member of University standing committees for Middle Eastern Studies, Global Health, Islamic Studies, and Special Concentrations. At HMS, she is Co-Director of the NIMH Training Program in Culture and Mental Health services, which has brought post-doctoral and pre-doctoral trainees in medical and psychiatric anthropology to Harvard for over 24 years. She is a core faculty member of the International Mental Health Training Program, funded by the Fogarty International Center, which trains psychiatrists from China in mental health services research. Professor Good teaches and advises Harvard medical

students as well as graduate and undergraduate students in the Harvard Faculty of Arts and Sciences. She chairs the University Milton Fund Committee, serves on the HMS IRB, and is a member of the HMS Joint Committee on the Status of Women.

Professor Good's research broadly focuses on the culture and political economy of biomedicine, biotechnology and bioethics, including clinical realities and moral dilemmas encountered by physicians in the United States and globally (Indonesia, East Africa). She has published extensively on clinical narratives, particularly in oncology and medicine, as well as on the meaning of professional competence and medical errors in medical training and practice. Her current research in the United States, funded by the Russell Sage Foundation, asks whether culture counts in mental health services and medical care, and examines both the professional and clinical cultures of psychiatry and medicine as they shape institutional as well as individual clinicians' responses to the cultural and socioeconomic diversity of patient populations. Professor Good was a visiting scholar at the Russell Sage Foundation in 2002-2003.

Professor Good has been a Visiting Professor in the Faculty of Medicine at the University of Gadjah Mada in Indonesia where she was also a Fulbright Senior Scholar in 1996-1997. Since that time, she has collaborated with colleagues at UGM to establish a Center for Bioethics, Humanities and Social Medicine. Current collaborative projects include a comparative study of the impact of patient death on physicians and implications for quality of care at the end of life in the United States and in Indonesia, funded by grants from the Cummings Foundation and the American-Indonesian Educational Foundation. Additionally, she collaborates on studies of doctoring in crisis by examining physicians and psychiatrists' responses to disasters such as the Tsunami in Aceh and the earthquake in Yogyakarta.

In addition to her research on biomedicine, Professor Good has been collaborating with Professor Byron Good and the International Organization for Migration (IOM) to develop mental health services in post-tsunami and post-conflict Aceh (Indonesia). They have conducted evaluations of levels of military violence and trauma suffered by civilian communities in rural Aceh, and are currently collaborating with IOM to provide outreach mental health care to 75 high-conflict affected villages.

In addition, Professor Good studies political subjectivity of contemporary Indonesians, including artists and physicians and has written together with her husband on the meanings of "amok" in recent Indonesian politics and daily life. Professor Good was a Peace Corp Volunteer in Turkey and subsequently carried out research on religion and politics; she also studies social change, women's health, and population and health policies in Iran. She was a scientific advisor for HIID on studies of ORT and child survival in Indonesia and Pakistan, and has had a long interest in women's mental and physical health. She has written in collaboration with former students and East African fellows on studies of the impact of HIV/AIDS on physician resilience and burnout in Kenya and Tanzania, as well as on comparative projects studying the ethics of medical disclosure in Japan and Thailand.

Professor Good's comparative interests have long focused on the relationship between individuals and the state and most recently on states in crisis and political subjectivity. She is editor of a new volume, *Postcolonial Disorders*, (with Sandra T. Hyde, Sarah Pinto, and Byron J. Good), published in 2008 by University of California Press, and a contributor to *Subjectivity: Ethnographic Investigations*, edited by João Biehl, Byron J. Good, and Arthur Kleinman (University of California Press, 2007).

Professor Good is a former Co-Editor-in-Chief of *Culture, Medicine and Psychiatry: An International Journal of Comparative Cross-Cultural Research* (1992-2004), serving previously as Associate Editor since 1986. She is on the editorial board of the *Journal of Health and Social Behavior, Social Science and Medicine*, and *Ethos*, among others, including the Cambridge/Rutgers series in Medical

Anthropology (Cambridge University Press, 1994–2004; Rutgers University Press, 2005), and the Bergham series in anthropology (Oxford University Press). Professor Good was a member of the founding steering committee of the International Forum for Social Science in Health (1992–1996).

R. Richard Grinker, PhD

Session 2 Speaker

The George Washington University

Roy Richard Grinker is Professor of Anthropology, Human Sciences and International Affairs and Director of the Institute for Ethnographic Research at the George Washington University. He is editor-in-chief of *Anthropological Quarterly*.

Dr. Grinker was born and raised in Chicago. He graduated from Grinnell College in 1983 and received his Ph.D. in Social Anthropology at Harvard University in 1989. He has published books and articles on topics such as the ethnic conflict in central Africa, the intellectual history of African Studies, north-south Korean relations, and most recently autism. He has conducted research in the Democratic Republic of Congo, South Korea, Swaziland, South Africa, India, and the U.S.

Grinker is the author of *Houses in the Rainforest* (University of California, 1994), *Korea and its Futures* (St. Martin's, 1998), *Perspectives on Africa* (Wiley-Blackwell, 1997 and 2010), *In the Arms of Africa: The Life of Colin M. Turnbull* (University of Chicago, 2001), and most recently, *Unstrange Minds: Remapping the World of Autism* (Basic Books, 2007). *Unstrange Minds* is an account of both the cultural factors underlying changes in autism prevalence, and his own experiences raising a daughter with autism. *Unstrange Minds* is published in the U.S., the United Kingdom, and in translation in Korea, the Netherlands, Brazil, and Japan. *Unstrange Minds* was a finalist for the American Anthropological Association's Victor Turner Prize for Ethnographic Writing, was selected by Library Journal as one of the "30 Best Books of 2007," and received the 2008 KEN Award from the National Alliance on Mental Illness for "outstanding contribution to a better understanding of mental illness."

His current research projects, funded by Autism Speaks, the National Institute of Mental Health, and the Children's Brain Research Foundation, are focused on the cross-cultural study of autism. Grinker, Young-Shin Kim, M.D., Ph.D. (Yale) and Eric Fombonne, M.D. (McGill) are currently completing the first ever prevalence study of ASD in South Korea, a total population study of approximately 30,000 children (ages 6-12). Grinker and Amy Wetherby, Ph.D. (Florida State) are just beginning a 2 year study of early social characteristics of ASD in two populations, an immigrant Latino community in Tallahassee, Fl., the other a Zulu community near Pietermaritzburg, South Africa.

Devon E. Hinton, MD, PhD

Session 6 Speaker

Massachusetts General Hospital, Harvard Medical School; Southeast Asian Clinic, Arbour Counseling Center, Lowell, Massachusetts

Devon E. Hinton is an anthropologist and psychiatrist, and an Associate Professor at Massachusetts General Hospital, Harvard Medical School. He has written extensively on the culturally specific presentations of panic attacks, panic disorder, and PTSD among Southeast Asian populations, particularly Cambodian and Vietnamese refugees. He and his team have developed a manualized treatment that can be culturally adapted for the treatment of traumatized refugees, a treatment that has been shown (in controlled trials) to be effective for Cambodian and Vietnamese refugees, and for Spanish-speaking populations. His research is currently supported by an R01 from the NIMH. He is the co-editor, with Byron Good, of the volume *Culture and Panic Disorder* (Stanford University Press, 2009). He is an advisor (on

cultural issues) to the Anxiety, OC, Posttraumatic, and Dissociative Disorders Work Group of DSM-V (American Psychiatric Association).

Douglas Hollan, PhD

Session 4 Chair/Moderator

UCLA; FPR; Conference Program Committee

Douglas Hollan is Professor in the Department of Anthropology at University of California, Los Angeles; Instructor at the Southern California Psychoanalytic Institute; and President of the Society for Psychological Anthropology. His research interests include psychological anthropology; cross-cultural psychiatry; person-centered ethnography; and the cross-cultural study of mind, consciousness, and mental disorder. He is the co-author of *Contentment and Suffering: Culture and Experience in Toraja* (1994) and *The Thread of Life: Toraja Reflections on the Life Cycle*. Dr. Hollan is currently conducting cross-cultural studies of dreams, consciousness, and cultural idioms of distress. He is a member of the FPR Board, and holds a Ph.D. in Anthropology and in Psychoanalysis.

Kay Redfield Jamison, PhD

Session 4 Speaker; Session 5 Roundtable Panelist

The Johns Hopkins University School of Medicine

Kay Redfield Jamison is Professor of Psychiatry at the Johns Hopkins University School of Medicine and co-director of the Johns Hopkins Mood Disorders Center. She is also Honorary Professor of English at the University of St. Andrews in Scotland. She is the coauthor of the standard medical text on manic-depressive illness, which was chosen in 1990 as the Most Outstanding Book in Biomedical Sciences by the American Association of Publishers, and author of *Touched with Fire, An Unquiet Mind, Night Falls Fast, and Exuberance*. Her memoir about her experiences with manic-depressive illness, *An Unquiet Mind*, was cited by several major publications as one of the best books of 1995. *An Unquiet Mind* was on *The New York Times* Bestseller List for more than five months and translated into twenty-five languages. *Night Falls Fast: Understanding Suicide* was a national bestseller, translated into fifteen languages, and selected by *The New York Times* as a Notable Book of 1999. Her book *Exuberance: The Passion for Life*, was selected by *The Washington Post, The Seattle Times, and The San Francisco Chronicle* as one of the best books of 2004 and by *Discover* magazine as one of the best science books of the year. Her most recent book is *Nothing Was the Same: A Memoir*.

Dr. Jamison did her undergraduate and doctoral studies at the University of California, Los Angeles where she was a National Science Foundation Research Fellow, University of California Cook Scholar, John F. Kennedy Scholar, United States Public Health Service Pre-doctoral Research Fellow, and UCLA Graduate Woman of the Year. She also studied zoology and neurophysiology at the University of St. Andrews in Scotland.

Dr. Jamison, formerly the director of the UCLA Affective Disorders Clinic, was selected as UCLA Woman of Science and has been cited as one of the "Best Doctors in the United States." She is recipient of the American Suicide Foundation Research Award, the UCLA Distinguished Alumnus Award, the UCLA Award for Creative Excellence, the Siena Medal, the Endowment Award from the Massachusetts General Hospital/Harvard Medical School, the Fawcett Humanitarian Award from the National Depressive and Manic-Depressive Association, the Steven V. Logan Award for Research into Brain Disorders from the National Alliance for the Mentally Ill, the William Styron Award from the National Mental Health Association, the Falcone Prize for Research in Affective Illness from the National Alliance for Research on Schizophrenia and Depression, and the Yale University McGovern Award for excellence in medical communication. She has been awarded numerous honorary degrees, selected as one of

five individuals for the public television series "Great Minds of Medicine," and chosen by *Time* magazine as a "Hero of Medicine." She was Distinguished Lecturer at Harvard University in 2002 and the Litchfield Lecturer at the University of Oxford in 2003. She is the recipient of a MacArthur Award.

Dr. Jamison was a member of the first National Advisory Council for Human Genome Research. She is Senior Scientific Consultant to the Dana Foundation and was Chair of the Genome Action Coalition, an alliance of more than 140 patient groups, pharmaceutical corporations, and biotechnology companies. She also served on the National Committee for Basic Sciences at UCLA and was the executive producer and writer for a series of award-winning public television specials about manic-depressive illness and the arts.

J. David Jentsch, PhD

Session 8 Commentator/Roundtable Panelist
UCLA

Dr. Jentsch is a Professor in the Department of Psychology and the Brain Research Institute at UCLA. He earned his Ph.D. in Neurobiology from the Yale University School of Medicine in 1999. He has published more than 50 papers and chapters describing his basic neuroscience research on the neural basis of memory, attention and decision making, with a special emphasis on the genetic and neurochemical mechanisms that underlie poor cognition in mental disorders.

The goal of his research is to understand the physiological mechanisms that underlie the naturally-occurring variation in complex behavior and cognition (attention, memory, etc.). From genius to dementia, there is enormous variation in these traits across human and animal populations, and this variation is explained by genetic and environmental factors, as well as by their interplay. Using neurochemical, genetic and behavioral techniques, we are working to uncover how basic neural mechanisms control complex cognition and how genetic and environmental factors sculpt those mechanisms.

Sarah Kamens, PhD (Student)

Poster Presenter
Fordham University

Sarah R. Kamens, M.A., is a doctoral student in Clinical Psychology at Fordham University. Her current research focuses on qualitative approaches to trauma and controversial issues in psychiatric diagnosis.

From 2006 to 2009, Sarah lived in the West Bank and Israel, where she conducted research in psychology and worked in film. Her past research projects include a study of violent content in the artwork of Palestinian children and an evaluation of psychosocial interventions for Palestinian parents. She was the associate producer of a fiction film about an Israeli mental institution near Jerusalem, and she produced a documentary film about the Jammu-Kashmir Liberation Front, a nonviolent movement for peace between Kashmir, India, and Pakistan.

Sarah conducted psycholinguistics research at New York University, where she received her Bachelor's degree. She has a Master's degree in Media and Communications from the European Graduate School, an interdisciplinary program in Switzerland where she studied with preeminent philosophers and artists. Her master's thesis evaluated theories of trauma in the context of the linguistic turn in philosophy.

Eric R. Kandel, MD*Session 7 Keynote Speaker**Columbia University; Howard Hughes Medical Institute*

By probing the synaptic connections between nerve cells in the humble sea slug, Eric Kandel has uncovered some of the basic molecular mechanisms underlying learning and memory in animals ranging from snails to flies to mice and even in humans. His groundbreaking studies have demonstrated the fundamental ways that nerve cells alter their response to chemical signals to produce coordinated changes in behavior. This work is central to understanding not only normal memory but also dementia and other mental illnesses that affect memory.

Dr. Kandel's research has shown that learning produces changes in behavior by modifying the strength of connections between nerve cells, rather than by altering the brain's basic circuitry. He went on to determine the biochemical changes that accompany memory formation, showing that short-term memory involves a functional modulation of the synapses while long-term memory requires the activation of genes and the synthesis of proteins to grow new synaptic connections. For this work, the Austrian-born Kandel was awarded the 2000 Nobel Prize in Physiology or Medicine.

The traumatic events of Kandel's childhood likely influenced his later interest in the biological mechanisms of memory. He was only eight when, in 1938, Nazi Germany annexed his homeland, but the humiliation and discrimination that Kandel, his family, and other Jews suffered under this oppressive regime were forever seared into his memory. In 1939, on the eve of World War II, his family fled Austria for the United States.

As a college student at Harvard, Kandel majored in history and literature, but he was drawn to psychoanalysis after befriending a native Austrian student whose parents were prominent psychoanalysts in Sigmund Freud's circle. Kandel went to medical school at New York University with the goal of studying psychiatry and becoming a psychoanalyst himself. But thinking that he should know more about how the brain works, he took a neurophysiology course that shifted his interest toward research into the biology of memory. "The cell and molecular mechanisms of learning and memory struck me as a wonderful problem to study.... It was clear to me even then that learning and memory were central to behavior, and thus to psychopathology and to psychotherapy," Kandel recalled.

Initially, he focused on recording the activity of nerve cells in the hippocampus, a region of the brain vital to memory formation. The mammalian hippocampus, however, with its seemingly infinite number of neurons and synaptic connections, made it difficult to study learning and memory at the cellular level. Kandel soon realized he needed a simpler system and chose the invertebrate sea slug *Aplysia*, much to the dismay of his colleagues who thought that no self-respecting neurophysiologist would abandon the study of learning in mammals to work on an invertebrate.

This bold decision paid off, though, and Kandel now works to instill in his students a sense that risk-taking is important to good science. "I try to convey to students my love of science and my conviction that exploring the biology of the brain is an unmatched scientific adventure," he explained. "I also encourage them to think boldly and to work carefully; to take gambles on their ideas and to try new approaches. I also tell them never to be embarrassed in exposing their ignorance.... We are all here to learn, and the learning never ends."

More recently, Kandel has expanded his studies of simple learning and memory in *Aplysia* to include more complex forms of memory storage in genetically modified mice. These studies have focused on explicit memory (the conscious recall of information about places and objects),

revealing the importance of a balance of activation and inhibition in memory storage so that animals as well as humans do not store information in their memories that is not important to recall.

Brett Kia-Keating, PhD

Poster Presenter

University of California, Santa Barbara

Dr. Kia-Keating received his Bachelor's Degree in Psychology from Hope College and his Master's Degree in Counseling Psychology from Northwestern University. After working in the field as a therapist with incarcerated violent juvenile offenders, he attended Harvard University where he completed both a Master's Degree in Methodology in Developmental Research, and a Doctoral Degree in Human Development and Psychology, with a focus on Risk and Prevention for School Aged Children and Adolescents. He then completed postdoctoral training in psychiatric genetic epidemiology and behavioral genetics at the Center for Behavioral Genomics at the University of California, San Diego.

His interest is in translational research of the genetic and environmental contributors to developmental psychopathology and problem behaviors. In particular, his research is focused on elucidating the course of both healthy and maladaptive development through longitudinal research designs which identify risk and protective factors, mediators and moderators, and gene-by-environment interactions at different ecological levels. He is interested in how various factors within the individual, the family, the peer group, the school, and the community interact to put children at greater or lesser risk of unhealthy psychosocial development. His findings are intended to inform treatment and prevention efforts in school, community, and clinical settings, with his primary interest being the understanding and prevention of violent behavior and aggression.

Maryam Kia-Keating, EdM, PhD

Poster Presenter

University of California, Santa Barbara

Maryam Kia-Keating is an Assistant Professor in the UCSB Department of Counseling, Clinical, and School Psychology. Dr. Kia-Keating's research focuses on the impact of stressful events and adversity on developmental trajectories, among a variety of diverse populations and contexts, including refugees and immigrants who have been exposed to war violence and other adversities. Her research aims to better identify the factors and processes that explain both risk and resilience in the face of these high-risk environments, in order to inform clinical interventions. She has a particular interest in examining the role of social and cultural processes on emotion regulation in the context of high levels of trauma, and the impact of mental health and psychosocial functioning throughout development. She is currently serving on the APA Task Force on the Psychosocial Effects of War on Children and Families Who are Refugees from Armed Conflict Residing in the United States.

J. David Kinzie, MD

Session 1 Speaker

Oregon Health and Science University

J. David Kinzie is Professor of Psychiatry at Oregon Health & Science University and originated the Intercultural Psychiatric Program in 1977. He is still active and his caseload includes Cambodian, Somali, Ethiopian, and Bosnian patients. He was a general physician in Vietnam and Malaysia, and after residency taught psychiatry at the University of Malaya School of Medicine. He has directed the Torture Treatment Center of Oregon and has published over 115

articles and book chapters in the fields of Transcultural Psychiatry, refugee mental health, and posttraumatic stress disorder. He is a Distinguished Life Fellow of the American Psychiatric Association and Fellow of the American College of Psychiatrists. Dr. Kinzie was the 2007 recipient of the Kun-Po Soo Award. This award was established to recognize significant contributions toward understanding the impact and import of Asian cultural heritage in areas relevant to psychiatry.

Laurence J. Kirmayer, MD, FRCPC

Session 3 Moderator/Keynote Roundtable Discussion

McGill University; Jewish General Hospital (Montréal); Conference Program Committee

Laurence J. Kirmayer is James McGill Professor and Director, Division of Social and Transcultural Psychiatry, Department of Psychiatry, McGill University. He is Editor-in-Chief of *Transcultural Psychiatry*, a quarterly scientific journal published by Sage (UK) and directs the Culture & Mental Health Research Unit at the Department of Psychiatry, Jewish General Hospital in Montréal where he conducts research on mental health services for immigrants and refugees, psychiatry in primary care, the mental health of indigenous peoples, and the anthropology of psychiatry. He founded and directs the annual Summer Program and Advanced Study Institute in Social and Cultural Psychiatry at McGill. He also directs a CIHR-funded strategic training program in Culture and Mental Health Services Research and co-directs the National Network for Aboriginal Mental Health Research.

His past research includes funded studies on the development and evaluation of a cultural consultation service in mental health, pathways and barriers to mental health care for immigrants, somatization in primary care, cultural concepts of mental health and illness in Inuit communities, risk and protective factors for suicide among Inuit youth in Nunavik (Northern Québec), and resilience among Indigenous peoples. He co-edited the volumes, *Current Concepts of Somatization* (American Psychiatric Press), *Understanding Trauma: Integrating Biological, Clinical, and Cultural Perspectives* (Cambridge University Press), *Healing Traditions: The Mental Health of Canadian Aboriginal Peoples in Canada* (University of British Columbia Press), and *Encountering the Other: The Practice of Cultural Consultation* (Springer SBM).

Peter D. Kramer, MD

Session 3 Keynote Roundtable Panelist

Brown University

Peter D. Kramer is Clinical Professor in the Department of Psychiatry and Human Behavior at Brown University in Providence, RI, where he is also in private practice. He is the author of *Moments of Engagement* (1989); *Listening to Prozac* (1993); *Should You Leave* (1997); *Spectacular Happiness* (2001); *Against Depression* (2005); and *Freud: Inventor of the Modern Mind* (2006). His writings have appeared in the *New York Times*, the *Washington Post*, *The Wall Street Journal*, and other national publications. He is currently writing a book on psychiatric diagnosis. More information can be found on his weblog at: (<http://peterdkramer.blogspot.com/>)

Robert Lemelson, PhD

Session 5 Presenter

UCLA; FPR; Conference Program Committee

An anthropologist who received his master's degree from the University of Chicago and his doctoral degree from the University of California-Los Angeles, Dr. Robert Lemelson is currently a research anthropologist in Center for Culture and Health, Department of Psychiatry and

Biobehavioral Sciences at the UCLA Semel Institute, and Lecturer in the Departments of Anthropology and Psychology at UCLA. He was a Fulbright scholar in Indonesia in 1996-97. He has worked for the World Health Organization and is additionally trained as a clinical psychologist. His areas of specialty are Southeast-Asian studies, psychological anthropology, and transcultural psychiatry.

Dr. Lemelson has recently published in the journals *Culture, Medicine and Psychiatry*, *Medical Anthropology Quarterly*, and *Transcultural Psychiatry*, among others. His co-edited volume, *Understanding Trauma: Integrating Biological, Clinical, and Cultural Perspectives*, was published in early 2007 by Cambridge University Press.

As a documentary filmmaker and psychological anthropologist, Dr. Lemelson's work focuses on personal experience, culture, and mental illness in Indonesia and the United States. He has been conducting anthropological research in Indonesia since 1993. Dr. Lemelson has just completed his most recent film entitled *40 Years of Silence: an Indonesian Tragedy*, a feature length documentary about the traumatic long-term effects of Indonesia's 1965 mass killings on four families. He is currently re-editing *Movements and Madness: Gusti Ayu*, a documentary on a young Balinese woman's struggle with Tourette's syndrome. He is also the CEO and founder of Elemental Productions.

Dr. Lemelson is the founder and the president of the Foundation for Psychocultural Research (The FPR), whose mission is to advance and support interdisciplinary research and training in neuroscience, psychiatry, and anthropology. Dr. Lemelson also serves as a director, co-Vice President and Secretary of The Lemelson Foundation, a family foundation whose mission is to promote innovation and invention in American society and the developing world. Dr. Lemelson also supports the UCLA Indonesian Studies Program, which was created in 2008. It is part of UCLA's Center for Southeast Asian Studies, which is housed at the UCLA International Institute.

Roberto Lewis-Fernández, MD

Session 8 Speaker

New York State Psychiatric Institute; Columbia University

Dr. Roberto Lewis-Fernández is Director of the NYS Center of Excellence for Cultural Competence and the Hispanic Treatment Program at New York State Psychiatric Institute, Associate Professor of Clinical Psychiatry at Columbia University, and Lecturer on Social Medicine at Harvard University. He received his B.A. from Harvard College in 1979, a Master's Degree in comparative religion from Harvard Divinity School in 1982, and his M.D. from Yale Medical School in 1986. He obtained his psychiatric training at The Cambridge Hospital (1986-90) and completed a Dupont-Warren psychiatric research fellowship (1990-91) and an NIMH-sponsored fellowship in clinically applied medical anthropology (1991-93) at Harvard Medical School. From 1993 to 1995, Dr. Lewis-Fernández worked for the Puerto Rico Health Department implementing an innovative mental health consultation-liaison program for rural primary care clinics.

His research focuses on the socio-cultural determinants of illness experience, symptomatology, help-seeking behavior, and treatment outcome among U.S. Latinos and African Americans diagnosed with anxiety, depressive, and dissociative disorders. Specific interests include the relationship between psychiatric diagnoses and popular syndromes; socio-cultural factors associated with treatment dropout; misdiagnosis of psychosis; symptom presentations of trauma-related disorders; and collaboration models between mental health and primary care medicine to increase access to culturally competent care for consumers with psychiatric disorders.

Dr. Lewis-Fernández is a member of the National Advisory Mental Health Council of the

NIMH, the chair of the Cultural Psychiatry Committee of the Group for the Advancement of Psychiatry, a member of the Anxiety Disorders Work Group and the Culture and Gender Study Group of the DSM-V, and a member of the Community Services Board of the NYC Department of Health and Mental Hygiene. From 1996 to 2007, he also served as Editor of the Cases Section of *Culture, Medicine and Psychiatry*, which publishes clinical cases illustrating the impact of culture on the symptoms, course, and outcome of psychiatric disorders and patients' help-seeking choices.

Jutta Lindert, PhD, MPH

Poster Presenter

University of Applied Sciences, Ludwigsburg

Jutta Lindert is Professor of Public Health at the University of Applied Sciences in Ludwigsburg, Ludwigsburg, Germany. She is president of the Public Mental Health Section of the European Public Health Association (EUPHA). Additionally, she is member of the International Association of Genocide Scholars (IAGS) and lecturer at the "Auschwitz Institute for Peace and Reconciliation" (AIPR). Her research focuses on mental health in relation to life-events (e.g. migration, violence). In violence research she investigates the long-term impact of violence, abuse and neglect on mental health. Currently, she is involved in several projects investigating scope and extent of violence against people above 60 in Europe (ABUEL) and scope and extent of intimate partner violence in Europe. Before being appointed as Professor of Public Health she worked at different universities in the United Kingdom (at Queen Mary's & The Barts in London) and in Germany (e.g. at the University of Bielefeld and at the university of Mainz). She is author of several books on Mental Health and author of around 30 scientific papers.

Nancy Liu, PhD (Candidate)

Poster Presenter

University of Nebraska-Lincoln

Nancy Liu is a graduate student in clinical psychology and quantitative methods at the University of Nebraska-Lincoln. She focuses her research on the recovery of functioning in persons with severe mental illness, with a particular interest in neurocognition. Under the auspices of the Fulbright Program, Nancy examined the predictive ability of cognitive factors in work functioning in persons with SMI in Beijing, China. She was subsequently awarded a fellowship by the NIH/Fogarty International Center to examine health policy and the implementation of evidence-based interventions in low- and middle-income countries. Nancy is originally from Texas and received her undergraduate degree from Trinity University, where she majored in psychology and minored in philosophy, sociology, and religion.

Steven R. López, PhD

Session 5 Chair/Moderator

University of Southern California; FPR; Conference Program Committee

Steven R. López is a Professor in the Department of Psychology at the University of Southern California. His main area of research addresses how sociocultural factors relate to the psychopathology, assessment, and intervention of Latinos and other ethnic minority groups. He began with the study of culture and assessment and has extended that work to culture and intervention. Based on this work, he and his colleagues have developed a heuristic model of cultural competence for clinical practice, which, with support from the National Institute of Mental Health, they are currently evaluating. Professor López has also been studying the relationship of family factors and the course of schizophrenia, particularly among Mexican American families. He is particularly interested in identifying what families do to prevent relapse. In addition, Dr. Lopez and his colleagues have developed and evaluated a public

education message to increase mental health literacy and reduce latency to treatment among Spanish-speaking adults with psychotic illnesses. He is directing a 5-year NIH-sponsored summer research training program for U.S. minority students with a focus on serious mental illness in Puebla, Mexico in collaboration Carmen Lara at the Benemerita Universidad Autonoma de Puebla. He was one of the five science editors for the Surgeon General's *Report on Mental Health: Culture, Race and Ethnicity*. He recently contributed a chapter (with Peter J. Guarnaccia) on culture and mental illness to *Psychopathology: Foundations for a contemporary understanding* (2008, 2nd ed., James E. Maddux and Barbara A. Winstead, editors).

Tanya M. Luhrmann, PhD

Session 1 Commentator/Roundtable Panelist; Session 8 Speaker
Stanford University

Tanya joined Stanford's department of Anthropology in Spring of 2007. Her interests include the social construction of psychological experience, and the way that social practice may affect even the most concrete ways in which people experience their world, particularly in the domain of what some would call the "irrational". Her current work looks at the way American evangelicals learn to experience God and at psychosis in psychiatric clients. These are very different projects, but they share an interest in the way subjective experience is interpreted and the way that socio-cultural expectations can override ordinary sensory processing. Tanya trained at the University of Cambridge (PhD, 1986), and taught for many years at the University of California San Diego. Prior to coming to Stanford she was Max Palevsky Professor and a director of the Clinical Ethnography project in the Department of Comparative Human Development at the University of Chicago. Her first project was a detailed study of the way apparently reasonable people come to believe apparently unreasonable beliefs (*Persuasions of the Witch's Craft*, Harvard, 1989). Her second project explored the apparently irrational self-criticism of a postcolonial India elite, the result of colonial identification with the colonizers (*The Good Parsi*, Harvard 1996). Her third book identified two cultures with the American profession of psychiatry and examined the way these different cultures encouraged two different forms of empathy and two different understandings of mental illness (*Of Two Minds*, Knopf, 2000).

Emily Martin, PhD

Session 4 Speaker; Session 6 Roundtable Panelist
New York University

Emily Martin has taught anthropology at the University of California, Irvine, Yale University, Johns Hopkins University, Princeton University and (currently) at New York University. She has served on the Board of Directors of the Social Science Research Council and as president of the American Ethnological Society. Her research has been supported by Fulbright awards, a Guggenheim fellowship, and grants from the National Science Foundation, the Social Science Research Council, and the Spencer Foundation. She has done research on Chinese culture and society, which she published in *The Cult of the Dead in a Chinese Village* (Stanford University Press), *Chinese Ritual and Politics* (Cambridge University Press) and *The Anthropology of Taiwanese Society*, coedited with Hill Gates, (Stanford University Press). Based on her research in conceptions and practices of the body, the mind, work, health and personhood in American culture, she published *The Woman in the Body: A Cultural Analysis of Reproduction, Flexible Bodies; Tracking Immunity in America from the Days of Polio to the Age of AIDS* (Beacon Press); and *Bipolar Expeditions: Mania and Depression in American Culture* (Princeton University Press). *Bipolar Expeditions* is affiliated with a website intended to provoke readers' engagement and participation: www.livecrazy.org.

She is the founding editor of the public interest magazine *Anthropology Now* (<http://anthronow.com>) sponsored by the American Ethnological Association, funded in part by

the Wenner-Gren Foundation, and published by Paradigm Publishers. With Louis Sass and Elizabeth Lunbeck, Martin co-organizes the regional seminar, The Psyences Project. The Psyences Project brings clinicians into dialogue with academics around common interests in mind and brain as understood by disciplines such as psychology, psychiatry, and psychopharmacology in cultural and historical context (<http://www.nyu.edu/fas/ihpk/Psyences/PsyencesSP2006.htm>). She is Research Director (with Elizabeth Lunbeck) of a 2009 Dissertation Proposal Development Fellowship program funded by the Social Science Research Council, on "Cultures and Histories of the Human Sciences."

Emeran A. Mayer, MD

Session 6 Chair/Moderator/Speaker

UCLA; Conference Program Committee

Emeran Mayer is a Professor in the Departments of Medicine, Physiology and Psychiatry & Biobehavioral Sciences at UCLA, and has more than 20 years of experience in the study of clinical and neurobiological aspects of brain gut interactions in health and chronic gastrointestinal diseases. He has published more than 160 original peer reviewed articles, 80 chapters and reviews, co-edited two books, and organized several interdisciplinary symposia in the area of visceral pain and mind body interactions. He has made seminal contributions to the field of functional pain disorders, particularly in the area of studying the interaction of stress, pain and emotions both in animal models and in humans. Specifically, his research efforts have included the study of cellular and molecular mechanisms of chemo- and mechanotransduction of primary afferent nerves; animal studies on stress modulation of visceral pain and associated autonomic responses; and human physiology studies on cerebral, autonomic, neuroendocrine, and perceptual responses to visceral stimuli. During the past 5 years, his interests have broadened to the role of interoception and brain gut interactions in a variety of disorders, including anxiety, eating disorders, obesity and autism.

Dr. Mayer is Executive Director of the NIH-funded Center for the Neurobiology of Stress and Co-Director of the CURE Digestive Diseases Research Center. He is currently Associate Editor of Gastro-enterology, and has served on the editorial boards of the leading journals in digestive diseases, including *Gut*, *Digestion*, and the *American Journal of Physiology*, and has served as reviewer for a wide range of medical and neuroscience journals, as an ad hoc reviewer for national and international funding agencies, and on ad hoc NIH study sections.

Claudia Mitchell-Kernan, PhD

Opening Remarks; UCLA

Claudia Mitchell-Kernan is an anthropologist currently serving as Vice Chancellor for Graduate Studies and Dean of the Graduate Division. As *Vice-Chancellor and Dean*, she serves as the campus wide advocate for the advancement of graduate education and works to insure that standards of excellence, fairness, and equity are maintained across all graduate programs. Her responsibilities combine academic administration and leadership; strategic planning and budgetary authority, program planning and review; and external relations. She is a Professor in the Departments of Anthropology and Psychiatry and Biobehavioral Sciences. She received her Ph.D. from the University of California, Berkeley and her B.A. and M.A. from Indiana University and was a member of the Harvard University faculty before coming to UCLA in 1973. She is widely known for her early work in linguistic anthropology and her classic sociolinguistic studies of African Americans continue to be widely cited. Her most recent book, *The Decline in Marriage Among African Americans*, co-edited with M. Belinda Tucker, was published in 1995 by Russell Sage. Throughout her career, she has maintained an active record

of service nationally to federal agencies that sponsor research. President Clinton appointed her to the six-year term on the National Science Board (1994-2000), which provides advice to the President and Congress on issues affecting science and technology and governs the National Science Foundation. At the national level, she is currently on the Board of Higher Education and Workforce of the National Research Council; the Board of Director's of the Consortium of Social Science Associations; and the Government Relations Advisory Committee of the Council of Graduate Schools. Recent service includes: the Board of Directors of the Council of Graduate Schools; Chair of the CGS Advisory Committee on Minorities in Graduate Education; Chair of the Board of Directors of the Graduate Record Examination, and the Advisory Board of the National Security Education Program.

Maria Niemi, MSc, PhD (Candidate)

Poster Presenter; Karolinska Institutet

Maria is a doctoral student with a research project in cultural psychiatry and global mental health, at the Department of Neurobiology, Care Sciences and Society at Karolinska Institutet. Her previous education includes a BSc in neuroscience and an MSc in culture and mental health, both at University College London. Her current research focuses on the development of culturally and contextually appropriate methods for early detection and treatment of perinatal depression in a semi-rural area in Vietnam. Additionally, Maria is interested in the use and development of mindfulness meditation based approaches in psychiatry, particularly for depression prevention in resource scarce settings.

Elinor Ochs, PhD

Session 2 Commentator; Roundtable Panelist

UCLA

Elinor Ochs is Distinguished Professor of Anthropology and Applied Linguistics and Director of the UCLA Sloan Center on Everyday Lives of Families. Her research focuses on the role of language and culture in organizing life span human development across communities. Ochs helped to establish the field of language socialization, which analyzes how novices are apprenticed through language practices into sociocultural competence. She has examined how, when, and why adults simplify their communication with children cross-culturally. Ochs also collaborated with Lisa Capps to discern how parents with panic disorder may socialize their children into heightened anxieties through their discursive practices. She co-directed with Capps an ethnographic study of how children with autism spectrum disorders navigate everyday communicative encounters with family members, peers, and teachers. Honors include: MacArthur Fellow (1998-2003), Fellow of the American Academy of Arts and Sciences (1998-), Guggenheim Fellow (1984), Honorary Doctorate Linköping University (2000), Helsinki University Rector's Medal of Distinctive Scholarship (1996), President of Society for Linguistic Anthropology (2001-2003), and President of American Association for Applied Linguistics (1996). Selected relevant publications include Capps, L., & Ochs, E. (1995) *Constructing Panic*; Ochs, E., & Capps, L. (2001) *Living Narrative*; Ochs, E., Solomon, O., & Sterponi, L. (2005) "Limitations and Transformations of Habitus in Child-Directed Communication," *Discourse Studies* 7(4-5); Ochs, E., & Izquierdo, C. (2009) "Responsibility in Childhood: Three Developmental Trajectories," *Ethos* 37(4); and Ochs, E., & Solomon, O. (in press) "Autistic Sociality," *Ethos*.

Paul H. Patterson, PhD

Session 5 Commentator/Roundtable Panelist

California Institute of Technology

Paul Patterson is Anne P. and Benjamin F. Biaggini Professor of Biological Sciences at the California Institute of Technology and Research Professor of Neurological Surgery at Keck School

of Medicine, University of Southern California. He received a doctoral degree in biochemistry from Johns Hopkins University and a Helen Hay Whitney postdoctoral fellowship in neurobiology at Harvard Medical School. Prior to joining the Caltech faculty in 1983, he was Associate Professor of Neurobiology at Harvard.

Dr. Patterson's research focuses on interactions between the nervous and immune systems. Currently, his laboratory is investigating a mouse model of mental illness based on the known risk factor of maternal influenza infection. They are also testing potential therapies for Huntington's disease, using intracellular expression of antibodies, and manipulating NFkB activity. An additional project involves the mobilization of endogenous neural stem cells in the adult brain to remyelinate in a mouse model of multiple sclerosis.

Dr. Patterson has served as Executive Officer for Neurobiology and Vice Chair of the Faculty at Caltech. He also serves on the scientific advisory boards of the John Douglas French Alzheimer's Foundation, the Autism Speaks Foundation, and the Hereditary Disease Foundation. He is a member of the External Advisory Board of UCLA's UDALL Center for Excellence in Parkinson's Disease Research and the Medical and Scientific Advisory Council of the Alzheimer's Association. Dr. Patterson is the recipient of numerous awards, including the Distinguished Investigator Award from NARSAD, the McKnight Foundation Neuroscience of Brain Disorders Award, and the Javits Neuroscience Investigator Award from the National Institutes of Health. He has also been a recipient of the Biology Undergrad Student Advisory Committee Excellence in Teaching Award and the 11th Annual Award for Excellence in Teaching from the Associated Students of Caltech.

Avi Peled, MD

Poster Presenter

Technion – Israel Institute of Technology

Avi Peled is Chair of the adult psychiatric department at the Shaar-Menashe mental health center and a lecturer at the Bruce and Ruth Rappaport Faculty of Medicine, Technion - Israel Institute of Technology

He received his medical degree from the University of Rome ('La Sapienza'). Residency at the Rambam Medical Center affiliated with the Technion - Israel Institute of Technology. Post doctorate at the psychiatric department of UCDMC (University of California Davis Medical Center).

His research interests include applications of systems theories e.g., computational neuroscience and nonlinear dynamics, to the reformulation of mental disorders as disturbances to the dynamic optimal brain organization.

Mary L. Phillips, MD

Session 4 Speaker

Department of Psychiatry, University of Pittsburgh

Dr. Mary Phillips trained in Medicine at the University of Cambridge, UK and in Psychiatry at the Maudsley Hospital, London and Institute of Psychiatry, UK. She received a research training fellowship from the Medical Research Council (UK) to examine visual scan paths in schizophrenia. She subsequently developed a research interest in the application of functional neuroimaging techniques to the examination of the neural basis of emotion processing in healthy and psychiatric populations. She has, in particular, focused on the identification of neural correlates that underlie the symptoms of specific abnormalities in emotion processing in individuals with mood disorders. She became Professor of Neuroscience and Emotion and Head

of Section of Neuroscience and Emotion within the Department of Psychiatry, Division of Psychological Medicine, Institute of Psychiatry, King's College, London, UK in 2003. In October, 2004, she joined the Department of Psychiatry at the University of Pittsburgh as part-time Visiting Professor and Director of the Functional Neuroimaging Program, moving to become a Professor of Psychiatry in April, 2006. In 2005, Dr. Phillips became a member of The American College of Neuropsychopharmacology, and in 2006, was awarded the Nellie Blumenthal Investigator by the National Alliance for Research in Schizophrenia and Depression. Since 2006, Dr. Phillips has been Co-Director of the Brain Imaging Research Center within Carnegie Mellon University and the University of Pittsburgh. In January, 2008, Dr. Phillips took up a consulting adjunct position of Professor in Clinical Affective Neuroscience in the Department of Psychological Medicine, Cardiff University, UK. In 2009, Dr. Phillips became Professor in Clinical and Translational Science in the University of Pittsburgh, and now heads the Clinical and Translational Affective Neuroscience Program in the Department of Psychiatry, University of Pittsburgh. Dr. Phillips has received research funding awards from the Medical Research Council (UK) and the Wellcome Trust in the UK, and, from NIMH and NARSAD in the US. Dr. Phillips is mentor to over 20 junior investigators, and has authored or co-authored over 150 publications.

Robert S. Pynoos, MD, MPH

Program Committee Member

The National Center for Child Traumatic Stress; UCLA; Conference Program Committee

Dr. Pynoos is Professor of Psychiatry and Executive Director of the Trauma Psychiatry Program at the UCLA School of Medicine. He is Co-Director of the UCLA/Duke University National Center for Child Traumatic Stress. He is a nationally and internationally renowned expert on children, families, and disasters. He has written seminal papers on public mental health approaches to disaster preparedness, planning, and recovery, and has contributed to numerous national and international disaster recovery programs. He has extensive experience in post-disaster mental health responses to hurricanes, earthquakes, wildfires, tsunamis, typhoons, as well as responses after war, terrorism, and catastrophic violence at schools. He served as an on-site consultant to the U.S. Department of Education after the Oklahoma City bombing, to the Springfield Oregon Public School District after the Thurston High School shooting, to Jefferson County Mental Health after the Columbine High School tragedy, and to the US Public Health Service response to the Red Lake, Minnesota, school shooting. Following hurricanes Katrina and Rita in 2005, he was invited by the US Department of Education and the Department of Health and Human Services to join Secretary Margaret Spellings and SAMHSA administrator, Director Charles Currie, to provide on-site consultation in the hurricane affected states. He is the author/co-author of numerous disaster screening, triage, and surveillance instruments which have been integrated within major CMHS-supported programs in New York, Florida, Louisiana, and California. He has overseen the development of an adolescent trauma and substance abuse curriculum for county mental health providers, and has led initiatives to modernize mental health training platforms, develop internet knowledge banks and learning centers, and promote collaborative networking. He has proven skills in managing a system of extensive expert consultation and mentoring. He has been a leader in disaster research, including studies of neurobiological alterations, longitudinal co-morbidity, algorithms of care, and treatment outcome. He was a pioneer in the development of psychological first aid, and both intermediate and long-term post-disaster interventions, including strategies to address trauma and loss reminders, post-disaster adversities, and traumatic grief. Dr. Pynoos has received the American Psychiatric Association Bruno Lima Award for excellence in disaster psychiatry, the Ann C. Rosensfield Recognition Award from the UCLA Center for Community Partnerships for outstanding contributions to tsunami relief, and the Lifetime Achievement Award from the International Society for Traumatic Stress Studies.

Elyn R. Saks, JD*Session 5 Speaker**University of Southern California Gould School of Law; University of California, San Diego School of Medicine*

Elyn R. Saks, training to be a research psychoanalyst, specializes in mental health law, criminal law, and children and the law. Her recent research focused on ethical dimensions of psychiatric research and forced treatment of people with mental illness. She teaches Mental Health Law, Mental Health Law and the Criminal Justice System, and Advanced Family Law: The Rights and Interests of Children. She also teaches at the Institute of Psychiatry and the Law at the Keck School of Medicine at USC and is an adjunct professor of psychiatry at the University of California, San Diego. In her capacity as associate dean, Professor Saks oversees research and grants at USC Law.

Professor Saks recently published *The Center Cannot Hold: My Journey Through Madness* (Hyperion, 2007), a memoir about her struggles and successes with schizophrenia and acute psychosis. Other publications include *Refusing Care: Forced Treatment and the Rights of the Mentally Ill* (University of Chicago Press, 2002), *Interpreting Interpretation: The Limits of Hermeneutic Psychoanalysis* (Yale University Press, 1999), and *Jekyll on Trial: Multiple Personality Disorder and Criminal Law* (with Stephen H. Behnke, New York University Press, 1997).

Before joining the USC Law faculty in 1989 Professor Saks was an attorney in Connecticut and instructor at the University of Bridgeport School of Law. She graduated summa cum laude from Vanderbilt University before earning her master of letters from Oxford University as a Marshall scholar and her J.D. from Yale Law School, where she also edited the Yale Law Journal. She is a member of Phi Beta Kappa; an affiliate member of the American Psychoanalytic Association; a board member of the Bazelon Center for Mental Health Law; Mental Health Advocacy Services; the Los Angeles Psychoanalytic Foundation, and the Robert J. Stoller Foundation. Professor Saks is also an elected member of the American Law Institute. Professor Saks won both the Associate's Award for Creativity in Research and Scholarship and the Phi Kappa Phi Faculty Recognition Award in 2004. Her memoir has garnered many honors, including *Time* magazine top ten nonfiction book of the year and "books for a better life" inspirational memoir of the year. Professor Saks has also been awarded a 2009 MacArthur fellowship.

Vivian Santiago, PhD*Poster Presenter**University of Wisconsin-Madison*

Vivian Santiago is a Robert Wood Johnson Foundation Health and Society Health Scholar at the University of Wisconsin-Madison. She received a doctoral degree in Epidemiology from the Mailman School of Public Health, Columbia University in 2009, where she trained as a Psychiatric Epidemiology Predoctoral Fellow. Her primary research interests are in the conceptualization of health in population health research. Specifically, she focuses on two broad research areas: understanding how to operationalize the construct of disorder in mental health; and the conceptualization and measurement of pain. Her objective in this work is to identify ways to improve upon the outcomes studied in population health research to maximize efforts at improving health and wellbeing.

Olga Solomon, PhD*Session 2 Commentator/Roundtable Panelist**University of Southern California*

Olga Solomon is Research Assistant Professor in the Division of Occupational Science and Occupational Therapy at the University of Southern California. An applied linguist with a background in clinical psychology and linguistic anthropology, in her research she focuses on how meaning is communicated and shared across difference, whether due to neurological conditions such as autism, socio-cultural or socio-economic factors and even across species such as in human-animal social interaction. Her work examines the socio-cultural, psycho-social and structural phenomena that supports everyday engagement and participation with an eye for mediating potential of social practices, innovations and technologies.

Dr. Solomon is Principal Investigator on an NIH-funded study "Autism in Urban Context: Linking Heterogeneity with Health and Service Disparities" that examines trajectories to an ASD diagnosis of a cohort of African American children living in Los Angeles. Since coming to USC in 2005, Dr. Solomon has been part of an interdisciplinary research team on an NIH-funded longitudinal ethnographic project "Boundary Crossing: Re-Situating Cultural Competence" that involves African American children with special health care needs, their families and the practitioners who serve them. Dr. Solomon is a recipient of the Zumberge Individual Faculty Research and Innovation Award for her project "Animal Assisted Therapy as Socially Assistive Technology: Implications for Autism." She held National Academy of Education Post-Doctoral Fellowship for a study of communicative practices of children with severe autism and was Director of the Ethnography of Autism Project at the University of California, Los Angeles. She served as co-editor with Elinor Ochs of a Special Issue on autism of the journal *Discourse Studies* (2004) and with Nancy Bagatell of a Special Issue on autism of the journal *Ethos* (2010) titled "Autism: Rethinking the Possibilities." Dr. Solomon's selected publications include:

Solomon, O. (2004). Narrative introductions: Discourse competence of children with Autistic Spectrum Disorders. *Discourse Studies* 6(2), 253–276.

Solomon, O. (2008). Language, autism, and childhood: An ethnographic perspective. Language and the Brain [Special issue]. *Annual Review of Applied Linguistics*, 28, 1–20.

Solomon, O. (2009). Giftedness and creativity in autism. In B. A. Kerr (Ed.) *Encyclopedia of giftedness, creativity, and talent* (pp. 82–83). Thousand Oaks: Sage.

Solomon, O. (in press). What a dog can do: Children with autism and therapy dogs in social interaction. *Ethos*, 38(1).

Ochs, E., & Solomon, O. (2005) Practical logic and autism. In R. Edgerton & C. Casey (Eds.), *A companion to psychological anthropology: Modernity and Psychocultural change* (pp. 140–167). Malden, MA: Blackwell.

Ochs, E., Solomon, O., & Sterponi, L. (2005). Limitations and transformations of habitus in child-directed communication. *Discourse Studies* 7(4–5), 547–583.

Ochs, E., & Solomon, O. (in press). An anthropological approach to autistic sociality. *Ethos*, 38(1).

Dr. Solomon's research continues to be dedicated to micro-video analysis of social interaction to understand how children with autism engage in meaningful activities with their family members, therapists, teachers, and peers in daily life.

Moshe Szyf, PhD

Session 1 Speaker
McGill University

Moshe Szyf studied Jewish Philosophy and Political Sciences at Bar Ilan University and obtained his Ph. D. in Biochemistry from the Hebrew University in Jerusalem in 1985. Following postdoctoral training in the Department of Genetics at Harvard Medical School in Boston from 1985-1989 he was appointed as an assistant professor of pharmacology at McGill University in Montreal in 1989. Dr Szyf is a full professor of pharmacology at McGill Medical School since 2000 and was awarded a James McGill professorship in 2003. Szyf's research is focused on understanding the basic principles of the DNA methylation machinery and its involvement in cancer as well as applying this research towards identifying novel anticancer targets. Methyl groups are chemical marks on DNA that mark the state of activity of genes. In 1994 following a decade of studies of the DNA methyltransferase gene and its regulation Szyf has proposed that DNA methyltransferase is a prime anticancer target (*Trends Pharmacol. Sci.* 15, 233 (1994) and has filed a number of broad patents based on these ideas. The laboratory of Szyf developed antisense and direct inhibitors of DNA methyltransferase in collaboration with Hybridon Inc. in Worcester, MA, and has demonstrated their efficacy as anticancer agents in preclinical models (*Proc. Natl. Acad. Sci. USA* 94, 684-689 (1997). His patents and inhibitors of DNA methyltransferase led to the foundation of MethylGene Inc. in Montreal, which is currently testing the antisense inhibitors of DNA methyltransferase in clinical trials (currently at phase II). The laboratory of Szyf has discovered a new and unexpected enzyme and a potential new anticancer target, the demethylase, thus demonstrating that surprisingly DNA methylation is a reversible biological signal (*Nature* 397, 579-583 (1999; *Proc. Natl. Acad. Sci. USA* 96, 6107-6112 (1999). His lab developed novel inhibitors of this protein that show excellent anticancer and antimetastatic activity in animal models. Recently in collaboration with Dr. Michael Meaney, Szyf's lab discovered an epigenetic mechanism by which maternal behavior results in a stable alteration of the glucocorticoid receptor gene by DNA methylation in the hippocampus of the offspring (Weaver et al. *Nature Neuroscience* 7, 847 2004). This data provides a paradigm on how "nurture" alters "nature." Szyf chairs the pharmacology grants committee of the National Cancer Institute of Canada and has served in the Canadian Institutes of Health Research (CIHR) and National Institute of Health USA (NIH) and ICRF grant review committees with specific focus on novel anticancer drugs and targets. He is the founding editor-in-chief of *Epigenetics*, the first journal in the emerging field of epigenetics.

Thulitha Wickrama, PhD

Poster Presenter

Auburn University

Thulitha Wickrama is an Assistant Professor in the Department of Human Development and Family Studies at Auburn University. Dr. Wickrama's research focuses on processes through which community, family, work, and race/ethnicity influence mental and physical health. His work has disentangled mechanisms that link distal social factors such as community, family adversities and race/ethnicity to adolescent depressive symptoms and obesity. Using a dyadic perspective, he has examined how social experiences including racial discrimination influence marital interactions and depressive symptoms of African American couples. Dr. Wickrama has taken a keen interest in studying how experiences with natural disasters such as hurricane Katrina and the 2004 Tsunami influence PTSD and depressive symptoms of adolescents and their mothers.

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