



**Royal Commission into
Victoria's Mental Health System**



WITNESS STATEMENT OF PROFESSOR ALEXANDER MCFARLANE AO

I, Alexander McFarlane AO, Professor at the University of Adelaide, South Australia, say as follows:

- 1 I make this statement on the basis of my own knowledge, except where otherwise stated. Where I make statements based on information provided by others, I believe that information to be true.
- 2 I am giving evidence to the Royal Commission in my personal capacity and not on behalf of my employers or organisations that I am a member.

Background

- 3 I am a psychiatrist with speciality experience in the areas of traumatic stress and the impact of disasters and post-traumatic stress disorder (**PTSD**). I have a Bachelor of Medicine, Bachelor of Surgery with Honours, a Doctor of Medicine and a Diploma of Psychotherapy from the University of Adelaide. I am a fellow of the Royal Australian and New Zealand College of Psychiatrists.
- 4 I am currently a Professor of Psychiatry in the School of Medicine, at the University of Adelaide, having previously been the Head of the Department of Psychiatry and the Director of the Centre for Traumatic Stress Studies. I am also a senior advisor in psychiatry to the Department of Veteran Affairs and an advisor to the New South Wales and South Australian governments in relation to recovery after the 2019-2020 Australian bushfires.
- 5 I am a former President of both the International Society for Traumatic Stress Studies and the Australasian Society for Traumatic Stress studies.
- 6 I have received several awards in recognition of my contribution to the field of traumatic stress, including:
 - (a) in 2008, the Robert Laufer Award for outstanding scientific achievement in the field of traumatic stress;
 - (b) in 2011, the Officer of the Order of Australia Award in the Australia Day Honours List in recognition of outstanding contributions to medical research in the field of psychiatry, particularly posttraumatic stress disorders, to veterans' mental health management;

Please note that the information presented in this witness statement responds to matters requested by the Royal Commission.

- (c) in 2012, the Lifetime Achievement Award from the International Society of Traumatic Stress Studies, in recognition of years of service and leadership in the field of traumatic stress; and
- (d) in 2016, I was one of the three Australians awarded an Honorary Fellowship of the American College of Psychiatry in recognition of contribution to the field of traumatic stress.

7 Attached to this statement and marked 'AM-1 is a copy of my curriculum vitae.

The nature of trauma and its impacts

Defining trauma

- 8 Trauma is defined by the Diagnostic and Statistical Manual of the American Psychiatric Association as: 'exposure to actual or threatened death, serious injury or sexual violence in one or more of the following ways: (1) witnessing and experiencing traumatic events; (2) witnessing personally the event as it occurs to others; (3) learning of the traumatic event as it occurs in a close family member or close friend; and (4) repeated or extreme exposure to traumatic events, including first responders'.
- 9 Traumatic events of this kind do not include day to day stresses such as divorce or financial difficulties. Traumatic events of the present kind involve experiences such as exposure to death, extreme violence or being a victim of violence or sexual violence.

Impact of single or multiple traumatic experiences

- 10 Historically, the effect of trauma upon serious mental illness has been both overlooked and greatly underestimated.
- 11 In part, this was rooted in an attitude of denial that followed the World Wars and did not change until after the Vietnam War. Many people were very sceptical about the significance of psychological trauma. That attitude was very prevalent then in medical practice and, to my observation, remains quite significant.
- 12 In the last 30 years, however, the prevalence of trauma and its effects have become better understood. There is now a vast body of research concerning PTSD, in particular. Nonetheless, that condition and the effect of trauma generally remains underappreciated and often overlooked in medical practice.
- 13 Notwithstanding the above, the research shows that PTSD can be provoked by a single traumatic event and also by a cumulative burden of trauma exposure. The latter is a very significant risk factor for PTSD. In particular, if you have experienced three traumatic

events you are at a much greater risk of developing PTSD than if you have experienced one such event.

- 14 In addition to the risk of developing PTSD, traumatic events also carry significant risks for a range of other mental health issues including depression, bipolar disorder, anxiety disorders, eating disorders and substance use disorders.¹
- 15 In that regard, a 2006 study of the psychiatric inpatient population at Queen Elizabeth Hospital in Adelaide found that around 40% of patients with schizophrenia or severe affective disorders also had a diagnosis of PTSD.² The study demonstrated that a traumatic event can encourage the onset of mental illness, including psychosis, but may also influence the manifestation of the illness. Equally, many people with severe mental illness such as schizophrenia were the victims of violence and consequently developed PTSD. The study noted that the prevalence of trauma was not systematically examined, recorded or seen as relevant to the patient's condition.³

Trauma and suicide

- 16 Trauma exposure is a significant risk factor for suicide, independent of mental illness.
- 17 I have examined the issue, as have others. The issue has been examined in relation to at least the West Australian Ambulance Service, the Australian Defence Force and the Metropolitan Fire Service.
- 18 In relation to the Metropolitan Fire Service, we found that the rates of suicide ideation were far higher than would have been anticipated when looking only at rates of diagnosed mental illness.
- 19 A key issue is that people who are extensively exposed to death and suffering and other forms of trauma that focus on the disruption to social taboos – including, for example, child abuse and sexual abuse – are significantly more vulnerable to suicide and suicide ideation. In this sense, the nature of the traumatic event to which one is exposed appears to be of significant relevance in assessing any consequential relationship with suicidal ideation.

¹ McFarlane, A and others, 'The Psychiatric Sequelae of Traumatic Injury' (2010) 167 (3) *Am J Psychiatry*.

² McFarlane, A and others, 'Prevalence of victimization, posttraumatic stress disorder and violent behaviour in the seriously mentally ill' (2006) 40 *Australian and New Zealand Journal of Psychiatry*, pp. 1010–1015.

³ McFarlane, A, Schrader, G, Bookless, C and Browne D, 'Prevalence of victimization, posttraumatic stress disorder and violent behaviour in the seriously mentally ill' (2006) 40 *Australian and New Zealand Journal of Psychiatry*, pp. 1014.

- 20 Whilst the present issue has been examined, as I have indicated above, it is a matter that could benefit greatly from more systematic examination in research together with a wider appreciation of the issue throughout the broader research community.

Impact of traumatic experiences over time and 're-traumatisation'

- 21 Traumatic events can overpower a person's capacity to integrate and symbolise experience. It is similar to having different programs open on a computer that overwhelms the RAM with the effect that it cannot function.
- 22 For example, if you have been trapped in a bushfire you may have experienced fear, overwhelming noise, an inability to breathe and extreme heat. The brain may get trapped in these primary senses rather than being able to convert them into symbolic representation in the form of language. When that occurs, the trauma can trigger or exacerbate mental illness, including PTSD.
- 23 Interestingly, after a traumatic event, the risk of developing mental illness including PTSD tends to increase with time.
- 24 This is unlike most other events in life, which tend to have a window of effect of about six months. By contrast, the research shows that traumatic events create a lifelong risk.
- 25 In light of this cumulative risk, a person can be at risk of exacerbation upon the occurrence of another traumatic event or a sequence of traumatic events.
- 26 Sometimes this is referred to in the media as 're-traumatisation', but that concept does not tend to be used in the profession.
- 27 The process tends to be that traumatic events can give rise to traumatic memories. It is the memories that drive the neurobiological dysregulation that seems to be at the heart of PTSD. In this way, the stress reactivity of a person can change or deteriorate with each exposure to a traumatic event.
- 28 With each disruption to the stress system effected by traumatic exposure, the person becomes more vulnerable to mental illness, including PTSD.
- 29 For people living with PTSD, exposure to further traumatic events can significantly worsen the severity of the condition and its prognosis. It can also significantly reduce the prospect of any effective response to treatment.
- 30 The processes that I am referring to are evident in classic cases that I have seen. For example, police members will often tolerate a degree of trauma that would satisfy the diagnosis, but then keep working and become severely disabled because of ongoing exposure.

- 31 Another example is a detective who carries a memory of a particular crime scene. The detective may have that memory triggered by later attendance at a similar scene. The immediate crime scene can trigger a flashback to the previous event. It can result in the detective being unable to focus on the precise nature of the current evidence and properly be able to investigate the new crime. In this way, the previous memories can sit between the detective and the capacity to adjust and respond to present circumstances.
- 32 This said, a minority of people exposed to traumatic events experience or develop mental illness including PTSD. From my work in respect to the bushfires, and longitudinal studies of accident victims and Australian soldiers in Afghanistan, a significant majority of people exposed to trauma do not experience mental illness. Most people manage the acute aftermath of these events. The interesting issue is that symptomatic distress can and often does emerge with the passage of time. Again, however, it is still only in the minority.
- 33 Of those that do have a reaction to a traumatic event, by far the most vulnerable groups are those that have experienced previous trauma or have pre-existing mental illness.

Consequences of trauma from childhood abuse and/or family violence

- 34 I have already mentioned the greater risks presented by trauma that bears upon or breaches social taboos.
- 35 In addition to this, the experience of trauma from childhood abuse or family violence raises further risks. There are developmental periods in terms of brain development, particularly in infancy and in adolescence. The effects of child abuse or family violence upon a developing brain are likely to be more severe.
- 36 Child trauma is of particular importance because exposure to these sorts of events in childhood can disrupt the development of emotional regulation and a capacity for attachment. This can have very long-term consequences, in terms of an ability for emotional regulation and a capacity to form relationships.

Interpersonal violence

- 37 As I have noted, interpersonal violence can be at the heart of a traumatic event that can sponsor the commencement or exacerbation of PTSD symptoms.
- 38 However, the issue is particularly important for the further reason that people who are highly traumatised by violence can often respond to it by becoming increasingly violent themselves. Such people tend to respond to a threat by using excessive violence as a form of protection. The violence is in anticipated response to perceived threat.

Vicarious trauma

- 39 Vicarious traumatisation occurs when a person is not directly exposed to a traumatic event, but, typically, hears the stories of trauma and, progressively, themselves become affected.
- 40 Vicarious trauma can give rise to the full range of PTSD including intrusive images, flashbacks, nightmares, anxiety, depression.
- 41 This risk can present most seriously for police officers who are investigating historical sexual abuse claims; where they are given very graphic examples of the sort of abuse that has occurred.
- 42 Repeated and long-term exposure to these stories and mental images can be extremely disruptive to the mental health of such people. It can significantly impact upon their capacity to have a sexual life.
- 43 This can also occur in the legal profession, including in judges.

Impact of PTSD on physical health

- 44 People with PTSD experience a significant disruption of their inflammatory systems.
- 45 People with PTSD also have a higher susceptibility to severe infection compared with the general population.
- 46 For these reasons, I would expect that a person with PTSD would be at greater risk of death and serious infection as a consequence of COVID-19. The body has an inflammatory response to the virus, particularly in the lungs and kidneys. In people with PTSD, that response is already disrupted.

Treatment of PTSD

- 47 Phoenix Australia, the Centre for Posttraumatic Mental Health, publishes guidelines entitled 'The Australian Guidelines for the Treatment of Acute Stress Disorder and Posttraumatic Stress Disorder'.
- 48 The Guidelines provide information concerning the most effective treatments for PTSD. I understand that the third version of the Guidelines is in the process of being finalised by Phoenix Australia.
- 49 The first type of treatment identified in the Guidelines is psychological therapy, particularly –
 - a) cognitive behaviour therapy;

- b) prolonged exposure; and
- c) eye movement desensitization and reprocessing.

- 50 These treatments seek to get people to focus on the traumatic memory, including the emotional affect associated with it, and convert it into a narrative that allows them to distance themselves from the traumatic affect. It is a process of going over the experience repeatedly in order that it can be processed.
- 51 The evidence base for these treatments is good, and they can be effective, although not in about 33% of cases and other people do not wish to engage in exposure based therapies.
- 52 In my view, there can be a tendency to overstate the benefits of these treatments. We know, particularly amongst veterans, that while there are often improvements with these treatments, many people are left with the diagnosis.
- 53 The second type of treatment is medication. The 2007 National Mental Health and Wellbeing Survey found that PTSD is the most common disorder in the Australian civilian population.⁴ However, no drug company has developed a drug that specifically addresses the condition. Medication is often prescribed to deal with accompanying symptoms of depression and anxiety, although, as I have noted, there is no medication specifically to address the symptoms of PTSD.

Nature and impact of trauma following emergencies and disasters

The 'collective' trauma experienced by disaster-impacted communities

- 54 There are solitary traumas that are similar to collective traumas. For example, people can lose their home in a solitary house fire, but also in a collective disaster such as a bushfire. Traumatic experiences of both kinds can give rise to, or exacerbate mental illness, including PTSD.
- 55 In one way, however, collective disasters can be less problematic for the exposed individuals because there is often a much greater community focus upon the needs created by the disaster. Governments are also much more proactive in giving assistance.
- 56 In this sense, there can be a degree of protection that comes with being involved in a collective disaster because the horrific nature of the event and its effects are more widely understood and often better managed.

⁴ Slade J, Teesson W and Burgess P. The mental health of Australians 2: report on the 2007 National Survey of Mental Health and Wellbeing. Department of Health and Aging, Canberra, 2009.

- 57 For example, there are attempts at the moment to improve the health services and to identify who is at risk in regions that have recently been affected by bushfire. However, the same general support and community outreach would probably not be occurring around a person that had lost their home in a solitary house fire.
- 58 On the other hand, one of the adverse challenges that can be created by a collective disaster is that the community can become stuck in an identity affected by the disaster. Over time, empathy in the broader community can dissipate and the affected community can almost become trapped in a victim identity and find it difficult to move into a more adaptive stage of reconstruction and getting on with life.
- 59 That is always one of the real challenges in providing support to communities after disaster – it can be important not to over-interpret the consequences of a disaster and to underplay the other difficulties within that community. If you blame everything on the disaster you can sometimes miss some other very substantial issues.
- 60 For example, I have recently completed writing a report concerning the 2017 Grenfell Tower disaster in London. Some of the affected families were refugees or from war-torn countries and were also affected by significant social disadvantage. One of the real challenges is that if you ascribe all of the difficulties to the fire, you actually do not provide a helpful narrative, because part of the issue is that these people have come to England seeking a sense of safety and it is that safety which they have lost because of the fire. The impact of the disaster is that it keeps alive many of the issues that the victims were escaping from.

Impacts of emergencies and disasters in the immediate, medium-term and long-term

- 61 Support in a community in the immediate aftermath of an emergency or disaster is important, but support in the medium term and long term is crucial.
- 62 Evidence from follow up of disaster affected communities show that often rates of disorder increase with time at the very point when services are being withdrawn. The critical issue is to plan a system that sustains and improves the mental health services provided within those communities over the longer term.
- 63 One of the real aims for a post-disaster service should be to create more effective and skilled mental health services that can deal generally with the affected communities into the future.

Factors that increase and reduce the likelihood that people will experience mental illness following a disaster

- 64 I have already discussed the factors that can increase the likelihood that people will experience mental illness following a disaster, including the extent to which the person has already experienced trauma.
- 65 I have also referred to the fact that collective disasters can have a protective function that can reduce the likelihood that people will experience mental illness following a disaster.
- 66 In my view, one of the most important things after a disaster is for effective programs to be put in place to support and rebuild the affected communities. The evidence is that if you stay within a disaster affected community your mental health in the longer term is more affected by the stresses and the strains in the post-disaster period, than it is by your exposure to the event.
- 67 In this regard, the complexity of providing supports to people after a disaster is often underestimated. For example, if there have been 900 homes burned in a community, how do you rebuild those homes quickly? How do you distribute donations among the communities? There are many complexities that arise, but their successful management and the administration of the overall response to the disaster is crucial if the risk to the mental health of the affected community is to be reduced. Anything that can be done to expedite reconstruction, minimise conflict within the community about the distribution of resources and to minimise complaints about, for example, insurance responses, is of significant importance and potential beneficial effect.
- 68 Further, the availability of effective healthcare is critical, as health infrastructure is quite often impacted by a disaster. In addition, the local general practitioner or nurse or social workers themselves may have been victims. One of the central issues is about how you supplement, sustain and support the local health system.
- 69 One of the difficulties that we have in Australia is that the Federal Government essentially funds private practices and the State Governments provides much of the mental health system, workers' compensation system, emergency services and the private hospital system. The interfaces between those services really need to be managed, particularly following a disaster. Although there is often a general desire to have effective interventions, these interfaces can be very difficult to manage, although their effective management can make a very significant difference in reducing the long term effects of trauma on affected communities.

Supporting recovery from trauma

- 70 Identification and diagnosis are the core issues in respect of supporting recovery from trauma.
- 71 We know that people with PTSD are frequently not diagnosed. Follow up research of the accident populations in Victoria, South Australia, Queensland and New South Wales identified that a significant number of those people were not identified as suffering the consequential effects of trauma. These populations were being treated in our best public hospitals and followed up through the general practices. They were also being screened with structured diagnostic interviews. But the effects of trauma were still not necessarily being identified and in many cases those effects were undetected.
- 72 One way to overcome this may be that when anybody comes to any trauma service with physical injuries, they should be properly screened for the psychological effects of trauma, not just for acute physical effects.
- 73 As I have also mentioned, as many people have a late onset of symptoms, there really should be ongoing support and follow up, again using appropriately structured tools.
- 74 In mental health services generally, there is a lack of training that focuses upon psychological trauma. In my view, the training that most psychologists and psychiatric residents receive in this field is inadequate. The development of a properly trained mental health workforce to deliver trauma-informed care is a critical priority but requires oversight and funding. Much more research is available in the field and a detailed understanding of the effects of trauma is of great clinical importance.
- 75 I think that the position has actually got worse, particularly since the closure of the Repatriation Hospitals. The Repatriation Hospitals used to be the one focus in the health system that really provided some opportunities for the training of registrars and clinical psychologists in this area, but they have now been lost.
- 76 Further, those who manage services often completely underestimate the need to create training opportunities and expertise in this domain.
- 77 In my view, part of the reason for this, is the abiding scepticism about the effects of psychological trauma. Another part of this scepticism is that the delivery of mental health services is often based on or directed by acuity. It will be people who are the most behaviourally disturbed that are the ones who are dealt with in the emergency departments and inpatient units, and we completely ignore a whole population of people who probably would never be admitted to inpatient services. That is shown in the lack of outpatient care or outreach services directed to those affected by trauma.

- 78 Another issue about trauma is that the effect of it is actually distributed widely across the entire system: general practice, private practice, hospitals, emergency services, worker's compensation, veterans, criminal justice, Department of Community Services, Department of Education, insurers and more. All of them have exposure to people affected by trauma, but there is no centralised or co-ordinated understanding of the problem or response to it. All of these institutions spend money on the problem – often indirectly – but that money is not co-ordinated and therefore often spent ineffectively because there is no centralised expertise or development of co-ordinated quality care.
- 79 By contrast, in the area of cardiology the cardiologists and academic cardiologists all work together in the main teaching hospitals. This is where registrars are taught a high quality of care and it is where the research occurs. However, for PTSD there is a very limited primary research focus in hospitals or any properly funded clinical services. Generally speaking, there are no co-ordinated services that really think about how you bring professional knowledge into establishing and ensuring quality standards of care.

Interventions for preventing and minimising the impact of trauma and mental illness

- 80 There is no evidence to support that preventive interventions such as debriefing are effective in minimising the impact of trauma.
- 81 In my view, the critical issue is screening and early intervention for those with significant symptoms. Early intervention is critical to preventing chronicity and decreasing responsiveness to treatment as the duration of illness increases. It also lessens the secondary comorbidities such as substance abuse and relationship breakdown.
- 82 There are more similarities than differences in the care provided to support the recovery of victims of different types of trauma. What is important is that the cultural issues are addressed such as for emergency service personnel and veterans. Evidence supports that the same forms of psychotherapy are effective in treating trauma independent of the type of event that led to the disorder.

Adopting a 'trauma-informed' approach to mental health

- 83 A trauma informed approach is training people to recognise, understand and be sympathetic to the effects of trauma and therefore be able to tease them out with the patients and treat them accordingly.
- 84 From my experience as a clinical director of an Adelaide health service, I think that the quality of the histories taken from patients in acute psychiatric units are less sophisticated and sensitive to trauma than they should be. I have already dealt with the lack of sufficient training in respect to the field of trauma and its effects. If the experience of trauma and

effects was better understood, mental illness would be better understood, managed and treated. That would be trauma informed care.

- 85 I was involved in providing advice to the Japanese Government after the earthquake in Kobe. One of the other psychiatrists involved was a Director of Mental Health in San Francisco. It was realised that if they ever had a huge earthquake in California, they would never have enough properly trained mental health professionals to put in place. What they did was to get all of their mental health professionals working in the public system in order to spend one day working with a trauma population. The quality of their care more generally then improved dramatically – because these people brought their understanding of trauma informed care into the breadth of their clinical work. The introduction of trauma informed care had a transformative impact on the operation of that mental health service.

Implementing effective system wide trauma informed and recovery-oriented approaches

- 86 People affected by trauma have contact with many different clinical services, for example orthopaedics units, emergency departments, burns services, sexual assault services and cardiology units. Accordingly, there is a need in many clinical settings for trauma informed care, support and treatment.
- 87 In my view, centres of excellence for mental health and trauma should be established on a nationwide level to act as advisors and knowledge translators.
- 88 Very often, both mental health and trauma are not viewed or approached broadly and with an understanding of their role in many and varied presentations and diseases. Research indicates that there is a broad range of risk factors, genetic and biological, for psychiatric disorders, and there are many shared mechanisms that go across the spectrum of disorders. It follows that centralised and co-ordinated research and assembly of learning and knowledge is vital in order that sophisticated understanding can be assembled and imparted.
- 89 Peak bodies of this kind can be a resource for the entire system as a central repository for knowledge, learning and research. In this way, knowledge acquired in response to disasters would not so readily be lost. That is a significant problem at present because there is no such central body and the lessons learned in past disasters tends to be lost over time.
- 90 The provision of trauma informed care goes beyond mental health services. If you work on a burns unit, if you are working in an orthopaedic surgery unit or if you are a cardiologist, you need to know about trauma. People who have had chemotherapy for cancer can develop PTSD as a consequence of some of the treatments they receive. There is a great deal to be gained across the entire health service from the establishment

of peak bodies across the nation that facilitate knowledge accumulation, research and sharing.

- 91 General practitioners are the people who should have the best training and access to knowledge in this domain because they will commonly be the practitioners who will treat the victim of family violence who is not severe enough to have gone to an emergency department. With access to knowledge of this kind, the general practitioner will be able to understand the circumstances and the consequences of trauma and institute appropriate treatment.
- 92 As I have indicated, there is evidence that PTSD is a systemic illness; that it can increase the rates of cancer, autoimmune disease and cardiovascular disease. These illnesses have considerable consequences for peoples' health and the system generally. At the present time, that body of evidence has little to no impact on the way that such patients get managed. There is no one within the system who is really making the case for these issues.
- 93 That would be the role for the peak bodies that I have referred to. With a central network of peak bodies, excellence would be given a focus and there would also be a focus for funding that, as I have indicated, is presently fragmented and spread across a range of institutions in seeking to meet a problem that is presently very largely unmet.

Supporting recovery from trauma following emergencies and disasters

- 94 As I described above, at the heart of supporting recovery from trauma would be the establishment of nationwide centres for excellence. This would also assist with response and recovery to emergencies and disasters.
- 95 As I have indicated, in my view one of the great tragedies is that people quickly lose knowledge about how to manage these tragic events. Once you have a peak body that can speak with authority and retain knowledge over time, it can be a trusted source when times of disaster emerge. This helps the community both to look to that body for information, and with community resilience because there is a trusted body that can be looked to. Without a peak body of this kind, all of that knowledge is dissipated through the system and at risk of being lost.
- 96 The way to help individuals is to have a system that maintains knowledge within it in an organised way, which should then be imparted to clinicians and other health workers. This would ensure those that are treating people have appropriate information based in peak research. In this way, health workers at all levels in the system would be equipped to get the best results.

- 97 In the trauma field, we also need to develop treatments for the people who are treatment resistant or relapsing. At present, we do not have a stepped system of care – the people who don't do well in treatment have nowhere to go.

Treatment and care needs of individuals in the justice and forensic system

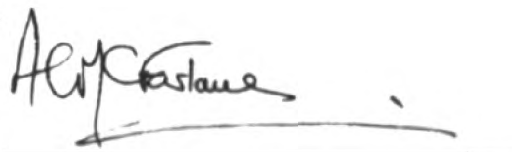
- 98 Prison can be a distressing environment, particularly for female prisoners who have experienced a history of abuse through substance abuse or interpersonal violence. Without overgeneralising, prisoners tend to have a rate of significant mental health difficulties that have arisen because of their traumatisation. There are real opportunities to try and turn prisons into systems of reform by bringing this this body of trauma informed knowledge into those environments.
- 99 The threat of being in prison presents significant difficulties to implementing a trauma informed approach. Part of what needs to be done is to give people the skill sets to survive in prison so that they are not further traumatised in that environment.

Strengthening the mental health workforce and the need for a whole of government approach

- 100 A whole of government response to trauma would improve the ability of the mental health workforce to deliver trauma informed care. As discussed above, there should be a network of peak bodies with the ability to coordinate the response to trauma across the community. This would result in greater identification and diagnosis, particularly as there would be a coordinated approach to research and training.
- 101 In the field of cardiology, there have been very significant improvements in treatment, particularly as the broad body of scientific research has impacted and informed clinical practice. However, in the field of PTSD there has been a vast body of neuroscientific research, but this has little or no impact upon clinical practice. A real challenge for the peak bodies would be to translate more sophisticated modern neuroscientific learnings into advances in clinical practice.
- 102 In my view, we are lacking a whole of government understanding of the need to create a skilled workforce with an understanding of the effects of trauma. There should be consultation with universities, particularly with the psychologists, as to what particular programs will ensure adequate quality of training.
- 103 As discussed above, one of the other challenges within the current system is the fragmentation of spending across different organisations involved in responding to community mental illness affected by trauma. For example, the fire, ambulance and police all have different systems of care for their emergency services workers because they all have different budgets and different ministers.

- 104 There has been a recognition of these issues in Canada, where the Federal Parliament has recently passed a Post-Traumatic Stress Disorder Bill. This initiative is one that governments in Australia should consider at a Commonwealth and State level.
- 105 The 2019 report released by the Productivity Commission Inquiry on the Compensation and Rehabilitation of Veterans found that the Department of Veteran Affairs has lost its epidemiologists and clinicians, who were previously an important culture carrier. This has been a particular and significant loss. It is important that the system have centres of knowledge, learning and excellence. This tends to lead to a more sophisticated understanding of the issues and, in turn, better outcomes. The independent review of Departments is important to highlight the deficiencies that administrations seldom address without external review.
- 106 In my view, in order to produce a more humane system the workforce should be assisted to understand what trauma does to people and how they can be treated in order to mitigate these dreadful experiences both for the individuals involved but also for their family and, often, many others that they come into contact with. It is important to protect the next generation from the consequences of their parents' traumatic experiences, as trauma impacts parenting.
- 107 This again highlights the need to address trauma at a whole of government level. To address or limit something that can have multi-generational effect, there needs to be a system that actually treats people in a coordinated way guided from the top by excellent co-ordination of knowledge and research rather than the presently fragmented system.

sign here ►



print name Prof Alexander C McFarlane AO

date 14 May 2020



**Royal Commission into
Victoria's Mental Health System**



ATTACHMENT AM-1

This is the attachment marked 'AM-1' referred to in the witness statement of Alexander McFarlane dated 14 May 2020.

PROFESSIONAL BIOGRAPHY SUMMARY

Professor McFarlane has had an outstanding and internationally recognised career as a researcher, clinician and advocate in the field of traumatic stress. He has made major contributions to multiple dimensions of this field since commencing his career in this area in 1983 and is one of the most cited and influential researchers in the field of traumatic stress. He has been a tenured Professor of Psychiatry at The University of Adelaide since 1990 and holds the position of Director at the Centre for Traumatic Stress Studies.

Clinical and Health Care Practice and Policy

National Roles

1. The Defence Force and the Department of Veterans Affairs

Professor McFarlane has contributed to multiple forums that have involved the translation of his research findings into policy and health service delivery systems. In recent years he has been a senior advisor to both the Australian Defence Force and the Department of Veterans Affairs in Australia. Given the public profile of the impact of the recent wars in Iraq and Afghanistan, his expertise derived from his research and clinical knowledge has played a pivotal role in both the occurrences of numerous inquiries and the development of policy and issues. He has also contributed to the Specialist Medical Research Council of the Repatriation Medical Authority, examining the issue of the nature of trauma exposure that leads to PTSD as a determinant of pension entitlements for veterans.

In these roles he has been an enduring advocate for the improvement of services for military personnel and veterans. He has actively requested to contribute to various Parliamentary inquiries by the Joint Standing Committees of the House of Representatives and Senate on Defence, Foreign Affairs and Trade. He has also advised veterans' organisations in the area of addressing the needs of their members. This is an ongoing body of work and a domain that presents an unusual opportunity to demonstrate where high-quality research can directly impact on policy, clinical health delivery and public debate.

In the last decade and a half, Professor McFarlane has been a key leader in the development of an improved knowledge base that has driven clinical and service delivery developments in the field of military and veterans' mental health. He has instigated and driven some of the largest projects ever conducted in military environments internationally over the past 10 years. These include an interview based mental health study of the entire Australian Defence Force, a study of all troops deployed to the Middle East from 2010 to 2012 and a study of all veterans of the Middle East Area of Operations. This body of research then led to the recently completed Transition and Wellbeing Research Programme that has tracked the mental and physical health of this cohort and how they have adjusted when transitioning from military service. This body of research, in which he has played a pivotal role, has become a key driver for improved models of prevention, screening and targeting of service delivery in both the Australian Defence Force setting and also the veterans'

community. He has done this through his role as an independent academic as well as the senior ranked psychiatrist (Group Captain RAAF SR) in the Australian Defence Force, a role in which he advised Joint Health Command. His involvement in this domain since 1992 means that he has been a key culture carrier and advocate for change in the context of the emerging knowledge on military and veterans' health.

The 2010 ADF Mental Health Prevalence and Wellbeing Study was described in a joint press release from the Prime Minister, Minister for Defence and Minister for Veterans' Affairs as being *"the first comprehensive assessment of the overall mental health of serving personnel and was a world first for this type of study in a defence population"*. This report reflects the importance of Professor McFarlane's research leadership to organisations that are committed to developing a knowledge-base to drive service needs. This report in particular, led to the development of the ADF Mental Health and Wellbeing strategy referred to by the Prime Minister at the time of the release of that report.

2. Expert Witness

Professor McFarlane's impact on policy and practice extends into other domains. He has been involved in a range of litigation, both in Australia and in the United Kingdom, that has been seminal to case law. This litigation involved the active scrutiny of large bodies of research and their relevance to public policy through questions of negligence and liability, particularly for the emergency services and for the military. The outcomes of this litigation, in turn, has directed changes and translation into practice because it defined the standards of expected care on the basis of current knowledge.

The NSW Police Force is the third largest police force in the world and a substantial body of litigation has occurred about their failure of duty of care to serving officers. As a consequence of Professor McFarlane's roles as an expert witness, substantial improvements have occurred to decrease the risk of adverse health outcomes to officers. These judgements have translated into other emergency service organisations. The importance of the emergency services being informed by current knowledge is reflected in the establishment of specific academic programs in New South Wales to conduct research in this area.

He has similarly been involved in litigation about the sexual abuse of minors by the clergy, which has been important to bringing these issues to public awareness, as reflected in the recently established Royal Commission into child sexual abuse. He was also a key witness in the first successful claimant of the stolen generation litigation. Also, his research following the Ash Wednesday Bushfires led to a substantial body of litigation that allowed the victims to recoup damages from the electricity authority that had caused a number of the bushfires. He also played a key role in the test case after the Black Saturday Bushfires and was asked to provide a substantial report for the Royal Commission investigating these fires. His engagement in these domains has played an essential role in translating academic knowledge into public policy through the independent supervisory role of the legal system. In summary, his role as an expert witness has been seminal in a number of major litigation cases that have served as precedents for future health policy.

3. Emergency Services

In the occupational health domain, he actively engages with the emergency services across Australia providing advice about the issues of assessment, prevention and early treatment. This has involved the translation of his experience in military populations and in the broader civilian community, in particular the police, ambulance and fire services. This work began in the aftermath of the Ash Wednesday Bushfires in 1983. He was a member of an expert panel that examined a series of suicides in the St Johns' Ambulance service in Western Australia, which made extensive recommendations for improved mental health care. He has been a member of the Medical Board for the South Australian Fire Service and a consultant to the South Australian Police Service, demonstrating a willingness to engage not only at a national level but also at a local level in terms of policy and practice development.

He was the senior investigator of the first study to be conducted of an emergency service using a comparable methodology to national studies of mental health, in the South Australian Metropolitan Fire Service. The results of this study led to major improvements in prevention and care for the mental health of the MFS firefighters. These changes were recognised by a recent national award to that service.

4. Treatment Guidelines

In the more general domain Professor McFarlane has also contributed with other members of the program grant application to the NH&MRC Treatment Guidelines for PTSD. These were first promulgated in 2000 and revised and updated in 2013. The detail of the analysis of the evidence and the program for dissemination has meant that these guidelines have been influential beyond Australia. On a national basis, they have had a critical role in directing policy in government departments and private sector organisations. Professor McFarlane also assisted as a member of the committee that developed treatment guidelines for emergency service workers that was co-ordinated by The University of NSW.

These guidelines follow the first guidelines that were developed by the International Society for Traumatic Stress Studies, which he oversaw in his role as President.

5. Media Involvement

He has been a regular media commentator on topics relating to the impact of disasters and other traumatic events, such as terrorist attacks and war. He also actively engages with the media to advocate for better care for emergency service personnel, including playing a central role in the ABC Four Corners program "Insult to Injury". He has appeared on Late Line, the 730 Report, Insight, and AM and PM of ABC Radio National.

Having worked in the broader health systems, he has been able to play a major role in highlighting the relevance of the field of traumatic stress above and beyond the confines of the narrow populations that are often seen as being the primary focus of the application of this knowledge and information.

He has also appeared and assisted in the scripting of an educational video “Into the Light”, that was judged third place overall in the Medical /Health Category at the 35th US International Film and Video Festival in Los Angeles. The video was awarded a certificate for creative excellence.

State-based Activities

At a state level, Professor McFarlane has also been the mental health representative on the Veterans Health Advisory Counsel and has chaired the Mental Health Sub-Committee. Importantly, this group has worked on the barriers and difficulties identified when implementing federally devised health policy at a state-based level. This has had an important role in devising systems of care that focus on the most vulnerable group of veterans. Importantly, Professor McFarlane has been able to feed this information back through the key roles that he has in Defence, such as sitting on the ADF Mental Health Advisory Group.

As the foundation chair of the board of STARRS, Professor McFarlane has played an active role in setting up a service to provide treatment for the victims of torture and trauma in South Australia. This service addresses the unmet needs of the refugee population in South Australia.

Following the Ash Wednesday Bushfires, Professor McFarlane chaired a Department of Health committee to review the provision of health care following disasters, and as well assisted in writing a report for the Minister of Health into the impact of that disaster. The recommendations were, in part, based on the research program that he had undertaken.

He has also advocated for the South Australian Mental Health Services to take more account in their role by way of their presentation and management, as to how violence and abuse is experienced by individuals with psychotic disorders. This approach included highlighting the traumatic impact of psychosis and the distress this causes the sufferers. He oversaw two research projects looking into the prevalence of trauma in female prisoners and those imprisoned but found not guilty on grounds of insanity. The findings highlighted the importance of a humane understanding of those in incarceration. He has identified the role of traumatic stress as a predictor of suicidal thinking and behaviour in these populations and the need for trauma to be addressed in clinical care. He was committed to this activity whilst being Head of the Academic Department of Psychiatry at The Adelaide University and the Clinical Director of the North Western Adelaide Mental Health Service, providing care for a population of half a million people, prior to taking up his current position.

International Policy and Roles

In the course of his career Professor McFarlane has had multiple roles in international settings in both the disaster and military domains. He represented the Australian Defence Force as a Group Captain (Specialists Reserves) on the NATO Panel for

post-deployment syndromes. In December 2012 he advised a combined ministerial meeting of Defence Ministers, from the USA Canada, Australia and New Zealand, on the issue of mild traumatic brain injury. He also represented Australia's Department of Veterans' Affairs at a Senior International Forum between these four allies. In these roles his research expertise and clinical knowledge has been highly influential in directing both clinical policy and future research agenda. He was also engaged as a leading expert witness in a major litigation in New Zealand, Britain and Northern Ireland, which related to the care of veterans and police in the Royal Ulster Constabulary during the IRA troubles.

In the area of disasters, he has played a role as a consultant for major disasters in Italy and Japan and following the tsunami in 2004 in Asia. He has also played an ongoing advisory role in relation to bushfires and cyclone disasters that have occurred in recent Australian history. He has been an advisor to the Kuwait Government and the WHO on the impact of the 1990 Iraqi occupation of Kuwait. He wrote a report for the United Nations Compensation Commission about the impact of the Iraqi occupation on the Kuwaiti population and he chaired an advisory board that assisted in developing mental health services to address the mental health consequences of that war.

He has supervised a PhD program examining the impact of this war on Kuwaiti military personnel. He has also supported programs and the development of interest in the PTSD field in China, through the work of a PhD student. After the Kobe earthquake, he had an ongoing relationship with the clinicians who dealt with the impact of that disaster. Their work led to the establishment of the Hyogo Institute for traumatic stress, which was a culture carrier for knowledge about PTSD that has led to a major change in Japanese psychiatry. His engagement with the networks for mental health professionals in South East Asia was highlighted when he was invited in 2006 to be the first speaker to run a two-day workshop for the Asian Society for Traumatic Stress Studies, a group representative of academics from the region who had an interest in the field of trauma. This invitation reflected the regard in which his research and leadership was held at that time.

An example of his continued contribution to the field of disaster management was again highlighted by an invitation to Modena in Italy in 2012 to assist in the development of a psychosocial rehabilitation intervention plan and research agenda following the recent earthquake at the time in Northern Italy that left some 250,000 people homeless. In the setting of his attendance, a major regional conference was created where he was the major discussant, bringing together a variety of sectors involved in disaster relief as well as health service providers and academics. This involved active engagement with the national disaster relief organisations in Italy as well as regionally based interventions. He has recently been asked to advice on the community recovery program after the Grenfell Tower disaster in London.

His role as a translator of research and clinical developments in the field of traumatic stress was also recognised by invitations in 2009 and 2011 to provide plenary and keynotes presentations in the field of traumatic stress at the World Psychiatric meeting, a meeting where the main focus was general psychiatry. This reflected his ability to synthesize and translate the relevance of this field to the broader domains of

mental health.

Memberships/Boards/Organised Meetings

Apart from a broad range of interest in his research career, Professor McFarlane has also played a central role in the development of both professional societies and victim organisations. This has occurred through his direct activism, publications, lectures and contributions to professional organisations. He has also been one of the people who have contributed to the development of an international network of knowledge and professional groups in the trauma field. He has done this through his involvement and prolonged membership on the Executive of the International Society for Traumatic Stress Studies. He was the first elected non-US President of the International Society of Traumatic Stress Studies as well as serving in the roles of Secretary and Treasurer.

He chaired the Ministerial Scientific Advisory Committee in 2005, which was about the feasibility of studying the health of the children of Vietnam veterans. He was on the Board of Research for the RANZCP from 1994 to 2007. He was a member of the Scientific Advisory Committee that oversaw the DVA funded study of the impact of the First Gulf War on ADF personnel.

He has held a range of advisory roles with Phoenix Australia and is on the ANZAC Centenary Institute, expert advisory council.

He was on the board of the Centre for Military and Veterans Health and played an instrumental role in winning the Federal Government tender for this Centre. He was one of the founding members of the Australasian Society for Traumatic Stress Studies and served on the Executive until 2001, including holding the position of President. During this period, the world conference of the ISTSS was organised in Melbourne and have over 1,000 attendants.

Research

Following the Ash Wednesday Bushfires, Professor McFarlane pioneered longitudinal studies of traumatised populations, including emergency service workers, disaster victims, and children. This research explored a variety of contributing factors to the emergence and maintenance of posttraumatic symptomatology. These children have now been followed up some 22 and 35 years later. This body of work has led to a long-standing interest into modelling the aetiology of posttraumatic syndromes and their longitudinal course and demonstrates the cumulative impact of multiple trauma exposures in the Australian community. A similar study has been conducted of a population who were assessed five times from the ages of 0 to 13 in the lead exposed community of Port Pirie. Through Professor McFarlane's involvement in epidemiological research, he has been part of group that has continued to model the impact of trauma at a population level. He was involved in contributing to the design of the first National Mental Health and Wellbeing Survey in Australia and the analysis of the data from both studies.

The epidemiological research of veterans has also been a domain where Professor

McFarlane has played a central role. Firstly, he was the psychiatric member of the Scientific Advisory Committee and was involved in the design of the study of Australia's First Gulf War veterans, a study conducted by the Monash group headed by Professor Sims. He has been an investigator with in a second follow-up of this population and the Near North Deployment Health Surveillance studies conducted by the Centre of Military and Veterans Health. These data have had important ramifications for a better understanding of the cause and morbidity arising out of modern deployments. The methodology formed the basis for the 2010 ADF Mental Health Prevalence and Wellbeing Study and the MEAO studies where Professor McFarlane was the initiating principal investigator. This program then led to the currently being completed Transition and Wellbeing Research Programme that is contributing to significant service development to improve the care of veterans.

As part of an NH&MRC program grant funded group, he was also involved in a study of 1,000 injury survivors admitted to hospital who have now been followed for a period of 6 years. This has identified the prolonged impact of these events and the role of pain and the compensation process in their long-term outcomes. This study has also highlighted that delayed onset PTSD is far more prevalent than was previously anticipated.

Professor McFarlane's interest in the biology of posttraumatic stress disorder has also focused on employing the temporal dynamics of cognition using event related potentials. Along with his collaborators, he has led the exploration of this domain in background information processing in PTSD using multimodal imaging, characterising the significant abnormalities in working memory in PTSD. He collaborated as an investigator, focusing on the information processing component of the Harvard Twin Study that has explored the biological correlates of PTSD in monozygotic twin pairs discordant for exposure. This work has highlighted the role of the abnormalities of working memory to current environmental stimuli in posttraumatic stress disorder. These abnormalities are important determinants of disability in PTSD. Most recently he has been the senior investigator studying the neurobiological changes observed before and after deployment in 800 ADF personnel, including neurocognitive change and inflammatory mediators. This study has highlighted the importance of subsyndromal disorder and its biological underpinnings as a predictor of later morbidity. This body of work has made an important contribution to the theoretical underpinnings of the role of memory in posttraumatic stress disorder.

Through his involvement in dealing with the chronically mentally ill, he has been interested in the application of the findings in the more general field of trauma to psychiatric patient populations. In a series of ongoing investigations with his collaborators, he has investigated posttraumatic reactions as a consequence of psychotic disorder as well as the contribution of traumatic stresses to the onset of psychotic illness. This research provides the opportunity to challenge some of the more prejudiced views of the mentally ill, which are derived from an excessive focus on genetic risk factors.

He also has a broader research interest in the representations of trauma in the literature and the historical development of the ideas that have framed the intellectual and social

understanding of the effect of traumatic stress. In the broader domain of research, he played a role as a member of the Board of Research of The Royal Australian & New Zealand College of Psychiatrists until early 2007.

Citations and Publications

Professor McFarlane has one of the most enduring and recognised track records internationally in the field of traumatic stress. The citations of his longitudinal studies emphasises the impact that his work has had on modelling the longitudinal course of PTSD in adults, children, military, and emergency service personnel. He has contributed to the knowledge base in the domains of epidemiology, neurobiology and treatment and is regularly asked to contribute opinion pieces to journals. The impact of his work however, has gone significantly beyond this field.

Apart from his over 330 publications in refereed journals he has also edited three books. Professor McFarlane played the initiating role in developing the book Traumatic Stress edited with Van der Kolk and Weisaeth, which was an attempt to summarise the critical areas of knowledge in the trauma field one and a half decades after the emergence of the field. This has been the most purchased edited academic text in the field of traumatic stress and has been translated into Russian, Chinese, German and Japanese. This text has been quoted some 3,474 times according to Google Scholar and has sold over 65,000 copies. This represents the major contribution that Professor McFarlane has played in the synthesis of the clinical, historical, neurobiological and therapeutic issues in the field of traumatic stress.

He edited the proceedings of a meeting organised with Dr Rachel Yehuda for the New York Academy of Science on the Neurobiology of PTSD and was also involved in editing the International Handbook of Human Response to Trauma published by Kluwer Academic/Plenum Press in 2000.

Awards

Professor McFarlane has received the following awards, reflecting his contribution to the field:

- 1986 Organon Junior Research Award: Awarded by R.A.N.Z.C.P. to a Fellow under the age of 35 who has published the most significant research work.
- 1999 Meritorious Service Award – the International Society for Traumatic Stress Studies;
- 2003 Robert S. Laufer, PhD, Memorial Award for Outstanding Scientific Achievement in the field of posttraumatic stress disorder;
- 2005 Victorian Public Health Research Excellence Awards for the Australian Gulf War Veterans' Health Study;
- 2008 RANZCP's Organon Senior Research Award for the outstanding contribution to psychiatric research in Australia in the previous 5 years;
- 2008 Australasian Society for Psychiatric Research – Founders Medal for outstanding contributions to psychiatric research in Australia;
- 2009 Lifetime Membership Award for notorious service – Australasian Society for Traumatic Stress Studies;

- 2011 Officer of the Order of Australia – Australia Day Honors List recognising “*outstanding contribution to medical research in the field of psychiatry, particularly posttraumatic stress disorders, to veterans’ mental health management, and as an author*”
- 2012 The Lifetime Achievement Award – International Society of Traumatic Stress Studies recognising an outstanding and fundamental contribution to the field of traumatic stress;
- 2016 One of only three Australians to be awarded an *Honorary Fellowship* of the *American Psychiatric Association* in recognition of his contributions to the field of traumatic stress in psychiatry.

CURRICULUM VITAE

PROFESSOR ALEXANDER COWELL MCFARLANE AO

PERSONAL DETAILS

Name: Professor Alexander Cowell McFarlane AO

Postal Address: Centre for Traumatic Stress Studies
Level 1 / Helen Mayo North
30 Frome Road
ADELAIDE SOUTH AUSTRALIA 5000

Telephone: 08 8313 5200

Facsimile: 08 8313 5368

Date of Birth: 27 May 1952

Nationality: Australian

Education: Collegiate School of St Peters - 1958-1969

1964 Henry Ayers Scholarship – awarded to a boy in Prep who will be proceeding to the Senior School in the following year. Selected based on school results, ability and keenness in School sports, general character and good behaviour

1964 Year VII Proficiency Prize for Top Student

1967 Caterer Scholarship – for ability in school lessons, fondness and/or proficiency in school games and sports, and in particular strength of character, loyalty to the School and powers of leadership

1967 May Scholarship – highest Chemistry score in the end of year examinations

1968 Bill Bullock Memorial Prize – House prize

1968 Top of State Leaving Economic History Examination

1969 Bowman Scholarship - highest Physics score in the end of year examinations

1969 Robin Callaghan Memorial Prize – award for Scouting on recommendation of Heads of Departments

1969 WH Irwin Memorial Prize – for Modern History in the Sixth Forms

1969 18th in the State Year 12 Matriculation Examination

SPORTING PRIZES AND MEDALS

1965 Under 13 Athletics Champion and 75 yards Hurdles record holder

1969 Open Javelin Champion.

1973 CB Sangster Medal for the Most Improved Player in the University of Adelaide
A1 Amateur League Australian Rules Football Team

QUALIFICATIONS

1976	M.B., B.S., with Hons, University of Adelaide.
1980	M.R.A.N.Z.C.P. Royal Australian and New Zealand College of Psychiatrists
1983	Diploma of Psychotherapy, University of Adelaide.
1985	F.R.A.N.Z.C.P. Royal Australian and New Zealand College of Psychiatrists
1990	M.D., University of Adelaide.

PRIZES, SCHOLARSHIPS AND AWARDS

1972	The Herbert John Wilkinson Memorial Prize (Top Distinction in Anatomy).
1972	The Wood Jones Scalpel (Top Distinction in Practical Gross Anatomy).
1973	The Junior Roche Prize (Top Distinction in Pharmacology). The Smith Kline and French Prize in Microbiology. The Dr. Davies-Thomas Scholarship (Top Distinction in Fourth Year).
1974	The Keith Sheridan Prize (Top Distinction in Fifth Year). The Mead Johnson Paediatric Prize (Top Distinction in Paediatrics).
1975	The Everard Scholarship (Top Distinction in Final Year).
1975	The William Gardner Scholarship (Top Distinction in Surgery).
1975	The William Gardner Prize (for merit in Surgery and other subjects).
1975	The Thomas L Borthwich Memorial Prize (Top Distinction in Public Health and Preventative Medicine).
1975	The H.K. Fry Memorial Prize for Psychological Medicine (Top Distinction

in an essay in the field of Psychological Medicine).

- 1975 Frank S. Hone Memorial Prize (Top Distinction in Medicine).
- 1986 Organon Junior Research Award:
Awarded by R.A.N.Z.C.P. to a Fellow under the age of 35 who has published the most significant research work.
- 2003 Robert S. Laufer, PhD, Memorial Award
For Outstanding Scientific Achievement in the field of Post Traumatic Stress Disorder.
- 2005 Winner – 2005 Victorian Public Health Research Excellence Awards for the Australian Gulf War Veterans' Health Study, International Academy.
- 2008 Winner – RANZCP's Organon Senior Research Award.
- 2008 Winner – Australasian Society for Psychiatric Research – Founders Medal for outstanding contributions to psychiatric research in Australia.
- 2009 Winner of Lifetime Membership Award – Australasian Society for Traumatic Stress Studies.
- 2011 Officer of the Order of Australia – Australia Day Honors List – The award recognises outstanding contribution to medical research in the field of psychiatry, particularly posttraumatic stress disorders, to veterans' mental health management, and as an author.
- 2012 Winner of the Lifetime Achievement Award – International Society of Traumatic Stress Studies. This award recognises years of service and leadership in the field of traumatic stress.
- 2017 Honorary Fellowship of the American College of Psychiatrists

PRESENT POSITIONS

- 2011 to present Director of The University of Adelaide, Centre for Traumatic Stress Studies, South Australia.
- 2005 to 2011 Director of The University of Adelaide Node of the Centre for Military and Veterans Health, South Australia.
- 2004 to 2012 Clinical Professor at University of Queensland.
- 2001 to 2011 Director for the Centre for Military and Veterans Health.
Senior Psychiatric Advisor, Australian Centre for Posttraumatic Mental Health.
- 2000 to present Senior Advisor to Director General, Defence Health Service Branch on Mental Health.
Advisor in Psychiatry to Department of Veterans' Affairs.

1998 to 2005	Head, Department of Psychiatry, The University of Adelaide, South Australia.
1991 to present	Clinical Professor, The Flinders University, South Australia.
1990 to present	Professor of Psychiatry, The University of Adelaide, South Australia. Senior Visiting Medical Specialist, Royal Adelaide Hospital, South Australia.
1990 to 2005	Senior Visiting Medical Specialist, The Queen Elizabeth Hospital, South Australia.
1990 to 2000	Senior Visiting Medical Specialist, Flinders Medical Centre, South Australia.
2000 to present	Chief Advisor in Psychiatry to Department of Veterans' Affairs.
2005 to present	Clinical Professor at University of Queensland.

OTHER ASSOCIATIONS, APPOINTMENTS AND MEMBERSHIPS

A. Associations

1976 to present	Australian Medical Association.
1981 to present	Australian Society for Psychiatric Research.
1986 to present	International Society for the Study of Traumatic Stress Studies.
1990 to present	South Australian Salaried Medical Officers Association.
1991 to present	Australasian Society for Traumatic Stress Studies.

B. Appointments

1972 to 1973	The University of Adelaide Union Council.
1974 to 1976	The University of Adelaide Council.
1975 to 1976	Clause 4C Committee, The University of Adelaide Council (Committee for Student Preclusion).
1976	Secretary, Royal Adelaide Hospital Resident Medical Officers Association. Working Party on Youth Unemployment, South Australian Council of Social Services.
1982 to present	South Australian Psychiatry Training Committee.
1984	Acting Member of Classification of Publications Review Board of South Australia.
1984 to 1988	Chairman, Crisis and Disaster Committee, Royal Australian and New Zealand College of Psychiatrists and South Australian Representative.
1985 to 2000	Visiting Research Fellow, Department of Rheumatology, University of Sydney, New South Wales.
1986 to present	National Health and Medical Research Council, Panel of Independent Assessors.
1986, 1989, 1992	The Royal Australian & New Zealand College of

	Psychiatrists.
2002	Examiner.
1988	Chairman, Social Issues Committee of the Royal Australian and New Zealand College of Psychiatrists.
	Corresponding Member, Royal Australasian College of Physicians Social Issues Committee.
1988 to 1990	Research Committee, School of Medicine, The Flinders University, South Australia.
1988 to 1991	Chairman, Ministerial Committee Examining the Management of Post Disaster Psychiatric Morbidity.
1989 to 1994	Committee of American Psychiatric Association Examining the Diagnostic Criteria for Posttraumatic Stress Disorder for the Fourth Edition of the Diagnostic and Statistical Manual of the American Psychiatric Association.
1989	Arthritis Foundation of Australia, Panel of Independent Assessors for Research Awards.
1989 to 1990	Evaluation Sub-Committee of Fellowship Board, RANZCP.
1989 to 1993	Chairperson, Survivors of Torture and Trauma Assistance and Rehabilitation Service.
1990	Co-opted Member, International Liaison Committee, International Society for the Study of Traumatic Stress.
1990 to 1991	Member, Clinical Advisory Committee, South Australian Health Commission. Occupational Trauma and Stress Working Party, International Society for the Study of Traumatic Stress.
1990 to 1992	Deputy Chairperson, Research and Ethics Committee, Hillcrest Hospital, South Australia.
1990 to 2001	Regional Grants Interviewing Committee of National Health and Medical Research Council, Canberra, ACT.
1990 to 1993	Chair person, Library Committee, Hillcrest Hospital, South Australia.
1990 to 1993	Member, Steering Committee of South Australian Chapter of the Australasian Society for the Study of Traumatic Stress.
1990 to present	Member, SA Salaried Medical Officers Association.
1991	Member, Board of Directors, Hillcrest Hospital, Gilles Plains, South Australia.
1991	Chairperson, Committee examining Diagnostic Related Groups in Psychiatry, South Australian Health Commission.
1991 to 1992	Peer Review Advisor in Psychiatry for Work Cover Corporation.
1991 to 1992	Royal Australian and New Zealand College of Psychiatrists Working Group examining Diagnostic Related Groups.
1991	Member, Executive Committee, Australian Network of Brain Research into Mental Disorders.
1991 to 2005	Research Committee, Faculty of Medicine, The University of Adelaide.
1991 to present	Member, Australian Society for Traumatic Stress Studies.
1993	Deputy Convenor, Research Committee, Faculty of Medicine, The University of Adelaide.

1992 to 2000	Elected Board Member, International Society for Traumatic Stress Studies.
1992 to 2000	International Liaison Committee International Society for Traumatic Stress Studies. Co-opted member, Planning and Development Committee of ISTSS Australian Liaison Representative. Nominations Committee of ISTSS.
1992 to 1995	Research and Ethics Committees, South Australian Mental Health Service.
1993	Chair, Clozapine Implementation Committee, South Australian Mental Health Service.
1993	Chair, Northern Region Liaison Committee.
1993	Clinical Management Committee, South Australian Mental Health Service.
1993 to 1998	Member of the Committee for Australasian Society for Traumatic Stress Studies, S.A. Chapter.
1993 to 2001	Representative for The Royal Australian and New Zealand College of Psychiatrist on the Australian National Disaster Relief Committee of the Department of Health, Housing and Community Services.
1994 to present	Board of Research, RANZCP.
1994 to 1995	Treasurer, International Society for Traumatic Stress Studies.
1994 to 1999	Member of Executive, International Society for Traumatic Stress Studies.
1994 to 1999	Member of Clinical Reference Committee for the National Centre for War Related Post Traumatic Stress Disorder.
1995 to 1997	Convenor, Research Committee, Faculty of Medicine, University of Adelaide.
1995 to 1996	Vice President Australasian Society for Traumatic Stress Studies.
1995 to 2001	Director of Clinical Services, North Western Adelaide Mental Health Service.
1995 to 2006	Chair, International Advisory Board, State Development Office in Kuwait.
1995 to 2012	Director of Mental Health Consultative Group – RAAF Specialist Reserve, ADF.
1995 to 2012	Director of Clinical Reference Group, ADF.
1995 to 2012	Director of Research Advisory Group, ADF.
1997 to 1999	President, Australasian Society for Traumatic Stress Studies.
1996 to 1997	Secretary, International Society for Traumatic Stress Studies.
1997	President Elect, International Society for Traumatic Stress Studies.
1998 to 1999	President, International Society for Traumatic Stress Studies.
1998 to 2003	Member Mental Health Strategic Development Implementation Steering Committee.
1998 to 1999	Chair, Mental Health Services for Older People Focus Group.

2000 to present	Senior Specialist Adviser to the Australian Centre for Posttraumatic Mental Health.
2000 to present	Chair, Mental Health Consultative Group, Australian Defence Force.
2002 to present	Chair, ADF Mental Health Research and Surveillance and Advisory Group.
2003 to present	ADF Alcohol and Other Drugs Advisory Group.
2005 to present	Head of Adelaide Node of Centre for Military and Veterans' Health.
2005 to present	Chair, Scientific Advisory Committee for the Study into the Health of the Children of Vietnam Veterans.
2005 to present	Scientific Advisory Committee for the Prevalence Study of the Mental Health of Australian Defence Force Members.
2005 to present	Senior Investigators Committee for the Mental Health and Wellbeing Study of the Australian Defence Force Members. <i>See Referee for Publications.</i>
2006 to 2011	Chief Investigator Middle East Area of Operations, Deployed Health Surveillance Project, Centre of Military and Veterans' Health.
2007 to present	Program Grant Assessors Committee.
2008 to present	Department of Veterans' Affairs – Veterans' Health Advisory Council.
2009 to present	Department of Veterans' Affairs – Veterans' Health Advisory Council – Mental Health Sub-Committee.
2012 to present	ISTSS Leadership Development Task Force.
2012 to present	ISTSS Nominations Committee.
2010 to present	World Psychiatry Association Committee.
2010 to present	Department of Veterans' Affairs – Rehabilitation Advisory Committee.
2013 to present	SCHEMA Steering Committee.
2015 to 2017	Director, Veterans Mental Health Oversight Panel and Research Partnerships Work Group, Transforming Health, SA Health, Government of South Australia.

C. Board Memberships

1987 to 2000	National Health and Medical Research Council, RADCAG.
1988 to present	Australian and New Zealand Journal of Psychiatry, Assessor. Psychological Medicine, Assessor. The Medical Journal of Australia, Assessor.
1991 to present	The Journal of Nervous and Mental Disease. The Journal of Rheumatology. Stress Medicine. Journal of Traumatic Stress. Book Referee for Oxford University Press/Cambridge University Press.
1992 to present	Anxiety, Stress, and Coping.
1992 to 2000	Editorial Board, Journal of Traumatic Stress.
1992 to present	MRC, United Kingdom Assessor.

1993	MRC, New Zealand Assessor.
1993	The Wellcome Trust, London, U.K.
	American Journal of Psychiatry.
	Archives of General Psychiatry.
	Biological Psychiatry.
	Psychological Medicine.
	Social Psychiatry and Psychiatric Epidemiology and other journals.
2003 to 2005	MAC Advisory Board re Non-Demonstrable Injury.
2004 to present	Board of the Centre of Military & Veterans Health.
2006 to present	Associate Editor (under contract). In G. Reyes, J. D. Elhai, & J. D. Ford (Eds.), Encyclopedia of psychological trauma. Hoboken, New Jersey: John Wiley & Sons.
2004 to present	Scientific Advisory to Brain Resource Company.
2009 to present	Member, Medical Panels SA.
2009 to present	Community Safety Research Project, Chief Investigators. Committee, Maari Ma Health Aboriginal Corp of UNSW.
2010 to present	Councillor to Specialist Medical Review Council, Australian Government.
2010 to present	NATO HFM RTG 175 on medically unexplained physical symptoms in military personnel.
2010 to present	Veterans Health Advisory Council.
2011 to present	Australian Defence Force Mental Health Advisory Group.
2011 to present	Australian Defence Force Health Research Committee.
2011 to present	Board Member, Repatriation Daw Park Foundation.
2011 to present	South Australian Metropolitan Fire Service Medical Board.
2012 to present	University of New South Wales Workplace Mental Health Reference Group Committee.

D. Conference Committees

April 1984	Advisor, Australian Counter Disaster College re Workshop, "Human Behaviour in Disasters", Mt Macedon.
1989 to 1991	Scientific Program Committee, 1991 Royal Australian and New Zealand College of Psychiatrists Annual Congress.
1992	Organising Committee, First International Meeting of International Society for the Study of Traumatic Stress, Amsterdam.
1992	Organising Committee, Adelaide meeting of the Australian Society for Psychiatric Research and Ciba Geigy Meeting.
1993	Australian Society for Traumatic Stress Studies Meeting in April in Adelaide.
1994	Organising Committee, Perth Meeting of the Australian Society for Psychiatric Research and Ciba Geigy Meeting.
1994	South Australian Mental Health Service, November 1994.
1995	Co-Chair of the Scientific Programme Committee for the 2 nd World Conference of the International Society for Traumatic Stress Studies, Israel June 1996.

1998	Year 2000 World Conference for the ISTSS: Scientific Advisory Committee.
2000	Scientific Chair of the Australian Society for Traumatic Stress Studies.
2005	Meeting Committee for the Australian Society for Traumatic Stress Studies.

POSITIONS HELD

1976	Intern, Royal Adelaide Hospital Adelaide, South Australia.
1977 to 1980	Trainee Psychiatrist, Flinders Medical Centre, South Australia.
1980 to 1985	Lecturer in Psychiatry, The Flinders University, South Australia.
1985 to 1990	Senior Lecturer in Psychiatry, The Flinders University, South Australia.
1989 to 1990	Head, Department of Psychiatry, The Flinders University, South Australia.
1990 to 1994	Director, Research and Training, Hillcrest Hospital, South Australia.
1991	Acting Head and Chairman, Department of Psychiatry, The University of Adelaide, South Australia.
1995	Director, Medical Research and Training, South Australian Mental Health Service, South Australia.
1995 to 2001	Director of Clinical Services, North Western Adelaide Mental Health Service.
1998 to 2005	Head, Department of Psychiatry, University of Adelaide, South Australia.
2005-2011	Head of the University of Adelaide Node of the Centre for Military and Veterans Health, South Australia.
2011-present	Director of the Centre for Traumatic Stress Studies, The University of Adelaide, South Australia.
2015-	Honorary Fellowship of the American College of Psychiatrists.

DETAILS OF CAREER DEVELOPMENT

- Leaving Certificate 6:1's, Top Distinction in Economic History.
- Matriculation Certificate 5 A's, 1B: 18th position in General Honours List.
- First Year Medicine: Attended the Flinders University, South Australia - Overall result, Distinction: Biology, Top Distinction.
- Top Distinction in 5th and Final Year of MB, BS.
- First Professional Examination at The University of Adelaide - Overall result, Top Distinction.
- Awarded the Robert S. Laufer Memorial Award for Outstanding Scientific Achievement in October 2003.

DETAILS OF POST-GRADUATE TEACHING RESPONSIBILITIES

Postgraduate Teaching

1991 to present	Individual and group supervision of Trainee Psychiatrists in the South Australian Mental Health Service.
1980 to 1990	Individual and group supervision of Trainee Psychiatrists at the Flinders Medical Centre, South Australia.
1982 to 1987	Representative on the Post-Graduate Training in Psychiatry Committee at The Flinders University, South Australia.
1990 to 1994	Hillcrest Hospital, South Australia, representative on the Postgraduate Training in Psychiatry Committee.
1982 to 2006	Participation in the South Australian Psychiatry Training Committee's Teaching Program.

Principal Supervisor, PhD and MD Students

1988 to 1999	Dr Cao Hua	Completed <i>"The aetiology, prevalence and phenomenology of posttraumatic stress disorder in ethnic Chinese"</i> Awarded PhD 1999.
1993 to present	Dr Cherrie Galletly	Completed <i>"A Typology of Schizophrenia based on ANN analysis of ERP"</i> PhD.
1993 to 1996	Dr C. Bookless	Completed <i>"The Cognitive Appraisal of Depressive Disorder"</i> PhD.
1994 to present	Dr. Katharine Shaw	<i>"Post Traumatic Reactions to Psychiatric Disorder"</i> .
1995 to 2004	Mr Darren Weber	Completed The Flinders University of South Australia <i>"High Resolution Electroencephalographic Indices of Attention and Memory Processes in PTSD"</i> .
1995 to 1998	Dr Maria Crotty	Completed <i>"Psychological Determinants of Disease Severity and Disability in Rheumatoid Arthritis"</i> PhD.
1997 to 2005	Ms Katherine Moores	Completed <i>"Functional Brain Dynamics in PTSD"</i> .
1998	Ms Denise Keenan	University of South Australia <i>"Identification and Understanding of Psychological Distress amongst firefighters"</i> PhD.
1998 to 2000	Mr Chris Barton	Completed <i>"Glucocorticoid sensitivity in health and disease"</i> Master of Medical Science.
2000 to 2005	Mr Gelaye Nadew	Completed <i>"Epidemiological Study of the Mental Health of Aborigines"</i>

	<i>in the Geraldton Region</i> " PhD.	
2000 to 2008	Mr Bob Coxon	Completed
	<i>"The follow up of acute stress disorders in a cohort of Vietnam Veterans"</i> PhD.	
2000 to present	Dr Alex Bordujenko	
	<i>"A Health Study of Australia's Gulf War Veterans in Intermission"</i> PhD.	
2001 to present	Ms Elizabeth Goble	
	<i>"Acetylcholine Function in Post Traumatic Stress Disorder – A Controlled Clinical Trial of Acetylcholinesterase".</i>	
2000 to 2008	Dr Abdulla Al-Hammadi	Completed
	<i>"The Impact of War Injuries on the Neurobiology of PTSD"</i> PhD.	
2004 to present	Mr William Hough	Completed
	<i>"Abnormalities of Smell as a predictor of PTSD following accidents"</i> PhD.	
2004 to 2008	Ms Therese Mayo	Completed
	<i>"Spatial Working Memory in Post Traumatic Stress Disorder – An event-related potential investigation of cognitive information processing"</i> PhD.	
2004	Dr Gordon Cable	Withdrawn
	<i>"Measures of Brain Function in Hypobaric Decompression".</i>	
2004 to 2011	Ms Miranda Van Hooff	Completed
	<i>"Patterns of outcomes of childhood psychological distress in young adults"</i> PhD.	
2005	Ms Anne Lucas	Withdrawn
	<i>"An investigation of trajectories of psychiatric morbidity using psychometric data for possible early diagnosis of PTSD in military personnel"</i> PhD.	
2005	Mr Derek Browne	Withdrawn
	<i>"Somatic Manifestations of distress in Motor Accident Victims"</i> PhD.	
2005 to present	Ms Vikki Wise	Completed
	<i>"An integrate neuroscience profile of panic disorder"</i> PhD.	
2005 to present	Ms Alison Kane	
	<i>"Alcohol and Substance Abuse in ADF members"</i> PhD.	
2005 to present	Ms Jacqueline Beall	Completed
	<i>"The biological and behavioural effects of maternal trauma and posttraumatic stress disorder on child development".</i>	
2006 to present	Mr Mike Musker	Completed
	<i>"Posttraumatic Stress and related disorders in Forensic Mental Health".</i>	
2003 to present Commenced 2008	Ms Melinda Veltmeyer Sobhanian, Farahnaz	Thesis submitted
	<i>"Cognitive, Neurotoxic, Behavioural and Psychiatric Predictors of Adult IQ: A Follow up of the Port Pirie Cohort into Adulthood".</i>	
2010 to present	MAJ Nianne Bennett	

2011 to present	<p><i>"Identifying risk and resilience factors in high risk groups: Can neurocognitive indicators predict psychological outcomes and effects of sustained combat operations in Special Forces personnel?"</i></p> <p>Carolyn Berryman Completed</p> <p><i>Seeing the wood for the tress. Somatic hypervigilance and cognitive impairment in chronic pain.</i></p>
2012 to 2017	<p>Jason Blunt Completed</p> <p><i>Hyperarousal: The contribution of criterion D to posttraumatic stress disorder and other posttraumatic psychopathology.</i></p>
2010 to present	<p>Geoff Orme</p> <p><i>The post deployment reintegration of Australian Army Reservists.</i></p>

Honours and Masters Students Supervised, and Supplementary Supervisor for PhD Students

1990	<p>Mr Robert Holt Completed</p> <p><i>"The Role of Selective Attention in Post Traumatic Stress Disorder"</i></p> <p>The Flinders University, South Australia.</p>
1990	<p>Ms Rebekah Doley Completed</p> <p><i>"Coping and Post Traumatic Stress Disorder"</i></p> <p>The Flinders University, South Australia.</p>
1990 to 1991	<p>Ms Margaret Green Completed</p> <p><i>"Post Traumatic Stress Disorder and the Physical Outcome of Motor Vehicle Accidents"</i></p> <p>Master of Applied Science, University of South Australia.</p>
1991	<p>Mr Darren Weber Completed</p> <p><i>"Selective Attention in Panic Disorder and Post Traumatic Stress Disorder"</i></p> <p>The Flinders University, South Australia.</p>
1991- 1994	<p>Ms Nicky Marshall Completed</p> <p><i>"Impact of the compensation process on PTSD"</i></p>
Thesis	<p>Master of Applied Psychology, The University of Adelaide.</p>
1991	<p>Ms Cynthia Elliott Completed</p> <p><i>"An Appraisal of Critical Incident Stress Debriefing"</i> The University of South Australia.</p>
1994	<p>Dr. A. Bearman Completed</p> <p>The University of Adelaide, South Australia.</p> <p><i>"Hormonal Function in Acute Stress"</i></p> <p>Master of Clinical Science.</p>
1995 to present	<p>Mr. Ric Marshall Completed</p> <p>The University of Adelaide, South Australia.</p> <p>PhD - <i>"Health Care Utilisation of Vietnam Veterans"</i></p>
1996	<p>Ms. Jane Richards Completed</p> <p>The Flinders University, South Australia.</p>

1998-2000	Master of Applied Psychology. Mr. Christopher Barton	Completed
2000 to 2002	Master of Clinical Science Ms. Lynne Socha	Completed
2002	Master of Psychology. Mr. Mark Lehmann	Completed
2003 to present	Master of Psychology. Ms. C. Gauvin	
2004	Bachelor of Medical Science Scholarship Mr. Tim Hall	Completed
2004	Batchelor of Medical Science Scholarship Ms. Anita Ingham	Completed
2004	Honours of Psychology. Ms. Vikki Wise	Completed
2004 to present	<i>"Cognitive aspects of somatic distress in a normal volunteer sample".</i> Honours of Psychology. Ms. Hanna Wilson	
2006	<i>"Personality and Trauma".</i> Ms Nadia Del Col	Completed
2006	Partial fulfilment of Degree of Master of Psychology (Clinical). <i>"Sexual Victimization in the community: Lifetime trauma and the prediction of psychopathology"</i> Ms Josephine Millar	Completed
2018	Partial fulfillment of Degree of Master of Psychology (Clinical). <i>"The Predictive role of Childhood Trauma, Parenting Style and Depressive Symptoms on World Assumptions"</i> Paula Dabovich	Completed
	(Master of Clinical Science). <i>"From well to wounded and back again: Identity and agency in high risk/highly cohesive soldiers undergoing rehabilitation in the Australian Army".</i>	

PUBLICATIONS

Scientific or Refereed Publications

1. McFarlane AC, Spironolactone and acute mountain sickness, Medical Journal of Australia, 1976;2(24):923.
2. McFarlane AC, Spironolactone and acute mountain sickness, Medical Journal of Australia, 1977;2(18):616.
3. McFarlane AC, Hamra LK, Reiss-Levy E, Hansman D. Pneumococcal peritonitis in adolescent girls, Medical Journal of Australia, 1979;1(3):100-101.

4. Brooks PM, McFarlane AC. Total patient management in rheumatoid arthritis, *Medical Journal of Australia*, 1983;1(9):399-400.
5. Davies J, Hall J, McFarlane A, Methodological standards in studies evaluating the dexamethasone suppression test, *Australian and New Zealand Journal of Psychiatry*. 1984;18(3):273-276.
6. Kalucy RS, Gilchrist PN, McFarlane CM, McFarlane AC, The evolution of multitherapy orientation. In: Garner DM, Garfinkel PE, editors. *Handbook of Psychotherapy for Anorexia Nervosa and Bulimia*. New York: The Guilford Press; 1984. p. 458-487.
7. McFarlane AC, The Ash Wednesday bushfires in South Australia. Implications for planning for future post-disaster services, *Medical Journal of Australia*, 1984;141(5):286-291.
8. McFarlane AC, The chronic outcome in anorexia nervosa, *Medical Journal of Australia*, 1984;141(4):207-208.
9. McFarlane AC, Impairment, disability and handicap, *Medical Journal of Australia*, 1984;140(9):564-565.
10. McFarlane AC, Mental Health Legislation, *Medical Journal of Australia*, 1984;140(8):503.
11. McFarlane AC, Life events, disasters and psychological distress, *Mental Health in Australia*, 1984;1(13):4-6.
12. McFarlane AC, Raphael B. Ash Wednesday: The effects of a fire, *Australian and New Zealand Journal of Psychiatry*, 1984;18(4):341-351.
13. McFarlane AC, The effects of stressful life events and disasters: research and theoretical issues, *Australian and New Zealand Journal of Psychiatry*, 1985;19(4):409-421.
14. McFarlane AC, Nuclear war: lessons from disaster, *Medicine and War*, 1985;1(2):101-108.
15. McFarlane AC, Wallace M, Cook P. Australian research into the psychological aspects of disasters, *Disasters*, 1985; 9(1): 32-34.
16. Gilchrist PN, McFarlane CM, McFarlane AC, Kalucy RS, Family therapy in the treatment of anorexia nervosa, *International Journal of Eating Disorders*, 1986;5(4):659-668.
17. Goldney RD, McFarlane AC, Assessment in undergraduate psychiatric education, *Medical Education*, 1986;20(2):117-122.
18. McFarlane AC. Victims of trauma and the news media, *Medical Journal of Australia*, 1986;145(11-12):664.
19. McFarlane AC, Long-term psychiatric morbidity after a natural disaster. Implications for disaster planners and emergency services, *Medical Journal of Australia* 1986;145(11-12):561-563.
20. McFarlane AC, Posttraumatic morbidity of a disaster: A study of cases presenting for psychiatric treatment, *Journal of Nervous and Mental Disease*, 1986;174(1):4-13.
21. McFarlane AC, Posttraumatic phenomena in a longitudinal study of children following a natural disaster, *Journal of the American Academy of Child and Adolescent Psychiatry*, 1987;26(5):764-769.
22. McFarlane AC, The relationship between patterns of family interaction and psychiatric disorder in children, *Australian and New Zealand Journal of Psychiatry*, 1987;21(3):383-390.

23. McFarlane AC, Life events and psychiatric disorder: the role of a natural disaster *British Journal of Psychiatry*, 1987;151:362-367.
24. McFarlane AC, Family functioning and overprotection following a natural disaster: the longitudinal effects of post-traumatic morbidity, *Australian and New Zealand Journal of Psychiatry*, 1987;21(2):210-218.
25. McFarlane AC, Hobbin ER, Kneebone CS, The determinants of illness behaviour in stroke patients, *Psychiatric Medicine*, 1987;5(2):133-141.
26. McFarlane AC, Kalucy RS, Brooks PM, Psychological predictors of disease course in rheumatoid arthritis, *Journal of Psychosomatic Research*, 1987; 31(6):757-764.
27. McFarlane AC, Policansky SK, Irwin C, A longitudinal study of the psychological morbidity in children due to a natural disaster, *Psychological Medicine*, 1987;17(3):727-738.
28. McFarlane A, Brooks P, The questionnaire versus the direct observation approach to functional assessment-reply, *British Journal of Rheumatology*, 1988;27:326-327.
29. McFarlane AC, Posttraumatic stress disorder and blindness, *Comprehensive Psychiatry*, 1988;29(6): 558-560.
30. McFarlane AC, Recent life events and psychiatric disorder in children: the interaction with preceding extreme adversity, *J Child Psychology and Psychiatry*, 1988;29(5): 677-690.
31. McFarlane AC, The International Classification of Impairments, Disabilities and Handicaps: its usefulness in classifying and understanding biopsychosocial phenomena. *Aust N Z J Psychiatry*. 1988; 22(1): 31-42.
32. McFarlane AC, Relationship between psychiatric impairment and a natural disaster: the role of distress, *Psychological Medicine*, 1988;18(1): 129-139.
33. McFarlane AC, The phenomenology of posttraumatic stress disorders following a natural disaster, *Journal of Nervous and Mental Disease*, 1988; 176(1): 22-29.
34. McFarlane AC, The aetiology of post-traumatic stress disorders following a natural disaster, *British Journal of Psychiatry*, 1988;152:116-121.
35. McFarlane AC, The longitudinal course of posttraumatic morbidity: The range of outcomes and their predictors, *Journal of Nervous and Mental Disease*, 1988;176(1):30-39.
36. McFarlane AC, Brooks PM, An analysis of the relationship between psychological morbidity and disease activity in rheumatoid arthritis, *Journal of Rheumatology*, 1988;15(6):926-931.
37. McFarlane AC, Brooks PM, Determinants of disability in rheumatoid arthritis, *British Journal of Rheumatology*, 1988;27(1):7-14.
38. McFarlane AC, McFarlane CM, Gilchrist PN, Posttraumatic bulimia and anorexia nervosa. *International Journal of Eating Disorders*, 1988;7(5):705-708.
39. McFarlane AC, Blindness and anorexia nervosa, *Canadian Journal of Psychiatry*, 1989;34(5): 431-433.
40. McFarlane AC, The treatment of post-traumatic stress disorder, *British Journal of Medical Psychology* 1989;62 (Pt 1):81-90.

41. McFarlane AC, The aetiology of post-traumatic morbidity: predisposing, precipitating and perpetuating factors, *British Journal of Psychiatry*, 1989;154:221-228.
42. McFarlane AC, The prevention and management of the psychiatric morbidity of natural disasters: An Australian experience, *Stress Medicine*, 1989;5(1):29-36.
43. McFarlane AC, Goldney RD, Kalucy RS, A factor analytic study of clinical competence in undergraduate psychiatry, *Medical Education*, 1989;23(5):422-428.
44. McFarlane A, Post-traumatic stress syndrome revisited. In: Parad H, Parad L, editors. *Crisis intervention, Book 2, The practitioner's sourcebook for brief therapy*. Milwaukee, Wisconsin: Family Service America; 1990. p. 69-92.
45. McFarlane AC, Post-traumatic stress disorder, *British Journal of Psychiatry*, 1990;157:782-783.
46. McFarlane AC, Vulnerability to posttraumatic stress disorder. In: Wolf ME, Mosnaim AD, editors. *Posttraumatic stress disorder: Aetiology, phenomenology, and treatment*. Washington, DC US: American Psychiatric Association; 1990. p. 3-20.
47. McFarlane AC, An Australian disaster: The 1983 Bushfires, *International Journal of Mental Health*, 1990;19(2):36-47.
48. McFarlane AC, Posttraumatic stress syndromes revisited. In: Parad H, Parad E, editors. *Crisis Intervention, Book Two: The Practitioner's Source Book for Brief Therapy*. Milwaukee, Wisconsin: Family Services America; 1990. p. 69-92.
49. McFarlane AC, Brooks PM, Psychoimmunology and rheumatoid arthritis: concepts and methodologies, *International Journal of Psychiatry Medicine*, 1990;20(3):307-322.
50. McFarlane AC, Post-traumatic stress disorder, *International Review of Psychiatry*, 1991;3(2):203-213.
51. McFarlane AC, Acute reactions to stress, *Current Opinion in Psychiatry*, 1991;4: 308-312.
52. McFarlane AC, Victims and survivors, *Current Opinion in Psychiatry*, 1991;4:833-836.
53. McFarlane AC, Posttraumatic stress disorder: A synthesis of research and clinical studies of one disaster. In: Raphael B, Wilson J, editors. *The International Handbook of Traumatic Stress Syndromes*. New York: Plenum Press; 1991. p. 421-9.
54. McFarlane AC, Posttraumatic stress disorder. In: Judd FK, Burrows GD, editors. *Handbook of Studies of General Hospital Psychiatry*. Amsterdam: Elsevier; 1991. p. 332-47.
55. McFarlane AC, Posttraumatic stress disorder. In: Carr VJ, Kosky RJ, Eshkevari HS, editors. *Mental Health and Illness: A Textbook for Australasian Health Science Students*. Sydney: Butterworths; 1991. p. 236-40.
56. McFarlane AC, Cao H, The study of a major disaster in the People's Republic of China. The Yunnan Earthquake. In: Raphael B, Wilson J, editors. *The International Handbook of Traumatic Stress Syndromes*. New York: Plenum Press; 1991. p. 493-8.

57. Clayer JR, McFarlane AC, Wright G, Epidemiology by computer, *Social Psychiatry and Psychiatric Epidemiology*, 1992;27(6):258-262.
58. McFarlane AC, Avoidance and intrusion in posttraumatic stress disorder, *Journal of Nervous Mental Disease*, 1992;180(7):439-445.
59. McFarlane AC, Posttraumatic stress disorder among injured survivors of a terrorist attack: Predictive value of early intrusion and avoidance symptoms, *Journal of Nervous and Mental Disease*, 1992;180(9):599-600.
60. McFarlane AC, Papay P, Multiple diagnoses in posttraumatic stress disorder in the victims of a natural disaster, *Journal of Nervous and Mental Disease*, 1992;180(8):498-504.
61. Crotty M, Ahern MJ, McFarlane AC, Brooks PM, Clinical rheumatology training of Australian medical students, A national survey of 1991 graduates, *Medical Journal of Australia*, 1993;158(2):119-120.
62. Green MM, McFarlane AC, Hunter CE, Griggs WM, Undiagnosed post-traumatic stress disorder following motor vehicle accidents, *Medical Journal of Australia*, 1993;159(8):529-534.
63. McFarlane AC, PTSD: Synthesis of research and clinical studies, the Australia bushfire disaster. In: Wilson JP, Raphael B, editors. *International Handbook of Traumatic Stress Syndrome*. New York: Plenum Press; 1993.
64. McFarlane AC, Post traumatic stress disorder: Issues for general psychiatry. In: Schrader G, editor. *Environmental Factors in Psychiatry*. Pendle Hill: Ciba Geigy Australia Ltd; 1993. p. 15-21.
65. McFarlane AC, Weber DL, Clark CR, Abnormal stimulus processing in posttraumatic stress disorder, *Biological Psychiatry*, 1993;34(5):311-320.
66. Smith EM, North CS, McFarlane AC, Lundin T, Mardberg B, Otto U, Grace MC, Green BL, Lindy JD, Trauma related to disasters of natural and human origin. In: Wilson JP, Raphael B, editors. *International handbook of traumatic stress syndromes*. New York, NY US: Plenum Press; 1993. p. 405-525.
67. Spurrell MT, McFarlane AC, Post-traumatic stress disorder and coping after a natural disaster, *Social Psychiatry and Psychiatric Epidemiology*, 1993;28(4): 194-200.
68. Atchinson M, McFarlane AC, A review of dissociation and dissociative disorders, *Australian and New Zealand Journal of Psychiatry*, 1994;28(4): 591-599.
69. Crotty M, McFarlane AC, Brooks PM, Hopper JL, Bieri D, Taylor SJ, The psychosocial and clinical status of younger women with early rheumatoid arthritis: a longitudinal study with frequent measures, *British Journal of Rheumatology*, 1994;33(8):754-760.
70. Hunter CE, McFarlane AC, DRGs and Australian psychiatry, *Australian & New Zealand Journal of Psychiatry*, 1994;28(1):114-120.
71. McFarlane AC, Individual psychotherapy for post-traumatic stress disorder, *Psychiatric Clinics of North America*, 1994;17(2):393-408.
72. McFarlane AC, Atchison M, Rafalowicz E, Papay P, Physical symptoms in post-traumatic stress disorder, *Journal of Psychosomatic Research*, 1994;38(7):715-726.
73. Ahern MJ, McFarlane AC, Leslie A, Eden J, Roberts-Thomson PJ, Illness behaviour in patients with arthritis, *Annals of Rheumatic Diseases*, 1995;54(4):245-250.

74. Clayer JR, McFarlane AC, Bookless CL, Air T, Wright G, Czechowicz AS, Prevalence of psychiatric disorders in rural South Australia, *Medical Journal of Australia*, 1995;163(3):124-5,8-9.
75. McFarlane AC, Helping the victims of disasters. In: Freedy JR, Hobfoll SE, editors. *Traumatic stress: From theory to practice*. New York, NY US: Plenum Press; 1995. p. 287-314.
76. McFarlane AC, PTSD in the medico-legal setting: Current status and ongoing controversies, *Psychiatry, Psychology and Law*, 1995;2(1):25-35.
77. McFarlane AC, Stress and disaster. In: Hobfoll SE, de Vries MW, editors. *Extreme stress and communities: Impact and intervention*. New York, NY US: Kluwer Academic/Plenum Publishers; 1995. p. 247-265.
78. McFarlane AC, The severity of the trauma: Issues about its role in posttraumatic stress disorder. In: Kleber RJ, Figley CR, Gersons BPR, editors. *Beyond trauma: Cultural and societal dynamics*. New York, NY US: Plenum Press; 1995. p. 31-54.
79. Morris P, Hopwood M, Norman T, McFarlane A, Does your veteran suffer from post traumatic stress disorder? *Veteran's Health*, 1995;56:10-12.
80. Raphael B, Meldrum L, McFarlane AC, Does debriefing after psychological trauma work? *British Medical Journal*, 1995;310(6993):1479-1480.
81. Spurrell MT, McFarlane AC, Life-events and psychiatric symptoms in a general psychiatry clinic: the role of intrusion and avoidance, *British Journal of Medical Psychology*, 1995; 68 (Pt 4): 333-340.
82. Yehuda R, McFarlane AC, Conflict between current knowledge about posttraumatic stress disorder and its original conceptual basis, *American Journal of Psychiatry*, 1995;152(12):1705-1713.
83. Brooks PM, McFarlane AC, Psychologic aspects of arthritis, *New Standards in Arthritis Care*, 1996;5(2):9-11.
84. Clark CR, McFarlane AC, Weber DL, Battersby M, Enlarged frontal P300 to stimulus change in panic disorder, *Biological Psychiatry*, 1996;39(10): 845-856.
85. Davidson JRT, McFarlane AC, Introduction. In: Mak FL, Nadelson CC, editors. *International Review of Psychiatry*. Washington D.C.: American Psychiatric Press; 1996. p. 147-149.
86. de Girolamo G, McFarlane AC, Epidemiology of posttraumatic stress disorder among victims of intentional violence: A review of the literature. In: Mak FL, Nadelson CC, editors. *International review of psychiatry*, Vol 2. Washington, DC: American Psychiatric Association; 1996. p. 93-119.
87. de Girolamo G, McFarlane AC. The epidemiology of PTSD: A comprehensive review of the international literature. In: Marsella AJ, Friedman MJ, Gerrity ET, Scurfield RM, editors. *Ethnocultural aspects of posttraumatic stress disorder: Issues, research, and clinical applications*. Washington, DC: American Psychological Association; 1996. p. 33-85.
88. Galletly CA, Clark CR, McFarlane AC, Artificial neural networks and psychiatric disorders, *British Journal of Psychiatry*, 1996;169(6):793-794.
89. Galletly CA, Clark CR, McFarlane AC, Artificial neural networks: a prospective tool for the analysis of psychiatric disorders, *Journal of Psychiatry Neuroscience*, 1996;21(4):239-247.
90. McFarlane AC, The longitudinal course of trauma, *Bailliere's Clinical Psychiatry: International Practice & Research*, 1996; 2(2):353-370.

91. McFarlane AC, Attitudes to victims: issues for medicine, the law and society. In: Sumner C, Israel M, O'Connor M, Sarre R, editors. *International Victimology: selected papers from the 8th International Symposium on Victimology*. Canberra: Australian Institute of Criminology; 1996.
92. McFarlane AC, de Girolamo G, The nature of traumatic stressors and the epidemiology of posttraumatic reactions. In: van der Kolk BA, McFarlane AC, Weisaeth L, editors. *Traumatic stress: The effects of overwhelming experience on mind, body, and society*. New York, NY US: Guilford Press; 1996. p. 129-154.
93. McFarlane AC, van der Kolk BA, Trauma and its challenge to society. In: van der Kolk BA, McFarlane AC, Weisaeth L, editors. *Traumatic stress: The effects of overwhelming experience on mind, body, and society*. New York, NY US: Guilford Press; 1996. p. 24-46.
94. McFarlane AC, van der Kolk BA, Conclusions and future directions. In: van der Kolk BA, McFarlane AC, Weisaeth L, editors. *Traumatic Stress: The Effects of Overwhelming Experience on Mind, Body and Society*: Guilford Press; 1996. p. 559-575.
95. McFarlane AC, Van Der Kolk BA, The long-term effect of psychological trauma: A public health issue in Kuwait, *Medical Principles and Practice*, 1996;5(2):59-75.
96. McFarlane AC, Yehuda RA, Resilience, vulnerability, and the course of posttraumatic reactions. In: van der Kolk BA, McFarlane AC, Weisaeth L, editors. *Traumatic stress: The effects of overwhelming experience on mind, body, and society*. New York, NY US: Guilford Press; 1996. p. 155-181.
97. Pitman RK, Sparr LF, Saunders LS, McFarlane AC, Legal issues in posttraumatic stress disorder. In: van der Kolk BA, McFarlane AC, Weisaeth L, editors. *Traumatic stress: The effects of overwhelming experience on mind, body, and society*. New York, NY US: Guilford Press; 1996. p. 378-397.
98. Raphael B, Meldrum L, McFarlane AC, Does debriefing after psychological trauma work? Time for randomised controlled trials, *Accident and Emergency Nursing*, 1996;4(2):65-67.
99. Raphael B, Wilson J, Meldrum L, McFarlane AC, Acute preventative interventions. In: van der Kolk BA, McFarlane AC, Weisaeth L, editors. *Traumatic stress: The effects of overwhelming experience on mind, body, and society*. New York, NY US: Guilford Press; 1996. p. 463-479.
100. Solomon Z, Laor N, McFarlane AC, Acute posttraumatic reactions in soldiers and civilians. In: van der Kolk BA, McFarlane AC, Weisaeth L, editors. *Traumatic stress: The effects of overwhelming experience on mind, body, and society*. New York, NY US: Guilford Press; 1996. p. 102-114.
101. Turnbull GJ, McFarlane AC, Acute treatments. In: van der Kolk BA, McFarlane AC, Weisaeth L, editors. *Traumatic stress: The effects of overwhelming experience on mind, body, and society*. New York, NY US: Guilford Press; 1996. p. 480-490.
102. Turner SW, McFarlane AC, van der Kolk BA, The therapeutic environment and new explorations in the treatment of posttraumatic stress disorder. In: van der Kolk BA, McFarlane AC, Weisaeth L, editors. *Traumatic stress:*

- The effects of overwhelming experience on mind, body, and society. New York, NY US: Guilford Press; 1996. p. 537-558.
103. van der Kolk BA, McFarlane AC, The black hole of trauma. In: van der Kolk BA, McFarlane AC, Weisaeth L, editors. Traumatic stress: The effects of overwhelming experience on mind, body, and society. New York, NY US: Guilford Press; 1996. p. 3-23.
 104. van der Kolk BA, McFarlane AC, van der Hart O, A general approach to treatment of posttraumatic stress disorder. In: van der Kolk BA, McFarlane AC, Weisaeth L, editors. Traumatic stress: The effects of overwhelming experience on mind, body, and society. New York, NY US: Guilford Press; 1996. p. 417-440.
 105. van der Kolk BA, Pelcovitz D, Roth S, Mandel FS, McFarlane AC, Herman JL, Dissociation, somatization and affect dysregulation: the complexity of adaptation to trauma, *American Journal of Psychiatry*, 1996;153(7 suppl.S):83-93.
 106. Atchison M, McFarlane A, Clinical patterns of acute psychological response to trauma. In: Mitchell M, editor. The aftermath of road accidents: Psychological, social and legal consequences of an everyday trauma. London: Routledge; 1997. p. 49-57.
 107. Brooks P, McFarlane AC, Newman S, Rasker JJ, Psychosocial measures, *Journal of Rheumatology*, 1997;24(5):1008-1011.
 108. Drane D, Berry G, Bieri D, McFarlane AC, Brooks P, The association between external weather conditions and pain and stiffness in women with rheumatoid arthritis, *Journal of Rheumatology*, 1997;24(7):1309-1316.
 109. Galletly CA, Clark CR, McFarlane AC, Weber DL, Relationships between changes in symptom ratings, neuropsychological test performance and quality of life in schizophrenic patients treated with clozapine, *Psychiatry Research*, 1997;72(3):161-166.
 110. McFarlane AC, Post-traumatic stress disorder: the importance of clinical objectivity and systematic research, *Medical Journal of Australia*, 1997;166(2):88-90.
 111. McFarlane AC, The prevalence and longitudinal course of PTSD. Implications for the neurobiological models of PTSD, *Annals of the New York Academy of Sciences*, 1997;821:10-23.
 112. McFarlane AC, Atchison M, Yehuda R, The acute stress response following motor vehicle accidents and its relation to PTSD, *Annals of New York Academy of Sciences*, 1997;821:437-441.
 113. McFarlane AC, Brooks PM, The assessment of disability and handicap in musculoskeletal disease, *Journal of Rheumatology*, 1997;24(5): 985-989.
 114. McFarlane AC, Clayer JR, Bookless CL, Psychiatric morbidity following a natural disaster: an Australian bushfire, *Social Psychiatry and Psychiatric Epidemiology*, 1997;32(5):261-268.
 115. Shaw K, McFarlane A, Bookless C, The phenomenology of traumatic reactions to psychotic illness, *Journal of Nervous and Mental Disease*, 1997;185(7):434-441.
 116. Cardena E, Holen A, McFarlane AC, Solomon Z, Wilkinson C, Spiegel D, A multi site study of acute stress reactions to a disaster. In: Widiger T, Frances A, Pincus H, Ross R, First M, Davis W, et al., editors. DSM-IV

- Sourcebook. Washington DC: American Psychiatric Association; 1998. p. 376-391.
117. Charney DS, Davidson JRT, Friedman M, Judge R, Keane T, McFarlane A, Martenyui F, Mellman TA, Petty F, Plewes J, Putman F, Romano S, van der Kolk B, Yehuda R, Zohar J, A consensus meeting on effective research practice in PTSD. *CNS Spectrums, The International Journal of Neuropsychiatric Medicine*, 1998;3(7(Suppl 2)):7-10.
 118. Clayer J, Bookless C, Air T, McFarlane A, Psychiatric disorder and disability in a rural community, *Social Psychiatry and Psychiatric Epidemiology*, 1998;33(6):269-273.
 119. Goldney RD, McFarlane AC, Stress management and counselling in primary care, *Medical Journal of Australia*, 1998;168(11):582-583.
 120. McFarlane AC, Epidemiological evidence about the relationship between PTSD and alcohol abuse: the nature of the association, *Addictive Behaviour*, 1998;23(6):813-825.
 121. McFarlane AC, de Girolamo EG, Post traumatic stress disorder: Will the future be different from the past? *Epidemiologia E Psichiatria Sociale*, 1998;7(1).
 122. Moritz KM, Butkus A, McFarlane AC, Albiston A, Salenmi R, Wintour EM, Regulation and function of steroid production by mid gestation ovine foetal adrenal cortex in vivo, *Endocrine Research*, 1998;24(3-4):937-941.
 123. Yehuda R, McFarlane AC, Shalev AY, Predicting the development of posttraumatic stress disorder from the acute response to a traumatic event, *Biological Psychiatry*, 1998;44(12):1305-1313.
 124. Creamer M, McFarlane A, Post-traumatic stress disorder, *Australian Prescriber*, 1999;22(2):32-34.
 125. Galletly CA, Clark CR, McFarlane AC, Weber DL, Effects of clozapine for non-treatment-resistant patients with schizophrenia, *Psychiatric Services*, 1999;50(1): 101-103.
 126. McFarlane AC, Risk factors for the acute biological and psychological response to trauma. In: Yehuda R, editor. *Risk factors for posttraumatic stress disorder*. Washington, DC US: American Psychiatric Association; 1999. p. 163-190.
 127. McFarlane AC, Post-traumatic stress. In: Freckelton I, Selby H, editors. *Expert Evidence*. Sydney: The Law Book Company; 1999. p. 1601-1844.
 128. McFarlane AC, Potts N, Posttraumatic stress disorder: Prevalence and risk factors relative to disasters. In: Saigh PA, Bremner JD, editors. *Posttraumatic stress disorder: A comprehensive text*. Needham Heights, MA US: Allyn & Bacon; 1999. p. 92-102.
 129. van der Kolk BA, McFarlane AC, van der Hart O, Rice-Smith E, Treatment of posttraumatic stress disorder and other trauma-related disorders. In: Spiegel D, editor. *Efficacy and cost-effectiveness of psychotherapy*. Arlington, VA US: American Psychiatric Publishing, Inc.; 1999. p. 63-83.
 130. Ballenger JC, Davidson JRT, Lecrubier Y, Nutt DJ, Foa EB, Kessler RC, McFarlane AC, Consensus statement on posttraumatic stress disorder from the international consensus group on depression and anxiety. *Journal of Clinical Psychiatry*. 2000;61(5):60-66.
 131. Bisson JL, McFarlane AC, Rose S, Psychological debriefing. In: Foa EB, Keane TM, Friedman MJ, editors. *Effective treatments for PTSD: Practice*

- guidelines from the International Society for Traumatic Stress Studies. New York, NY US: Guilford Press; 2000. p. 39-59.
132. Bookless C, Clayer J, McFarlane AC, Individual differences in appraisal of depression. *Personality and Individual Differences*, 2000;28(1):7-15.
 133. Clark CR, Egan GF, McFarlane AC, Morris P, Weber D, Sonkkilla C, Marcina J, Tochon-Danguy HJ, Updating working memory for words: a PET activation study, *Human Brain Mapping*, 2000;9(1):42-54.
 134. den Velde WO, Hovens JE, Bramsen I, McFarlane AC, Aarts PGH, Falger PRJ, de Groen JHM, van Duijn H, A cross-national study of posttraumatic stress disorder in Dutch-Australian immigrants, *Australian and New Zealand Journal of Psychiatry*, 2000;34(6):919-928.
 135. Galletly CA, Clark CR, McFarlane AC. Treating cognitive dysfunction in patients with schizophrenia, *Journal of Psychiatry Neuroscience*, 2000;25(2):117-124.
 136. Galletly CA, Clark CR, McFarlane AC, Weber DL, The effect of clozapine on the speed and accuracy of information processing in schizophrenia, *Progress in Neuro-Psychopharmacology & Biological Psychiatry*, 2000;24(8):1329-1338.
 137. Goldney RD, Wilson D, Dal Grande E, Fisher LJ, McFarlane AC, Suicidal ideation in a random community sample: attributable risk due to depression and psychosocial and traumatic events, *Australian & New Zealand Journal of Psychiatry*, 2000;34(1):98-106.
 138. McFarlane A, Can debriefing work? Critical appraisal of theories of interventions and outcomes, with directions for future research. In: Raphael B, Wilson JP, editors. *Psychological debriefing: Theory, practice and evidence*. New York, NY US: Cambridge University Press; 2000. p. 327-336.
 139. McFarlane AC. Traumatic stress in the 21st century, *Australian & New Zealand Journal of Psychiatry*, 2000;34(6):896-902.
 140. McFarlane AC, On the social denial of trauma and the problem of knowing the past. In: Shalev AY, Yehuda R, McFarlane AC, editors. *International handbook of human response to trauma*. Dordrecht Netherlands: Kluwer Academic Publishers; 2000. p. 11-26.
 141. McFarlane AC, Posttraumatic stress disorder: A model of the longitudinal course and the role of the risk factors, *Journal of Clinical Psychiatry*, 2000;61(5):15-23.
 142. McFarlane AC, Ethnocultural issues. In: Nutt D, Davidson J, Zohar J, editors. *Post Traumatic Stress Disorder: Diagnosis, Management and Treatment*. London: Martin Dunitz Ltd.; 2000. p. 187-198.
 143. McFarlane AC, Yehuda R, Clinical treatment of posttraumatic stress disorder: conceptual challenges raised by recent research, *Australian & New Zealand Journal of Psychiatry*, 2000;34(6):940-953.
 144. Taylor AW, Wilson DH, Dal Grande E, Ben-Tovim D, Elzinga RH, Goldney RD, MacFarlane AC, Cheok F, Kirke K, Mental health status of the South Australian population, *Australian and New Zealand Journal of Public Health*, 2000;24(1):29-34.
 145. Bookless C, McFarlane A, Clayer J, Personal appraisal of the experience of a depressive disorder, *British Journal of Medical Psychology*, 2001;74 Part 3:399-412.

146. Creamer M, Burgess P, McFarlane AC, Post-traumatic stress disorder: findings from the Australian National Survey of Mental Health and Well-being, *Psychological Medicine*, 2001;31(7):1237-1247.
147. Galletly C, Clark CR, McFarlane AC, Weber DL, Working memory in posttraumatic stress disorder--an event-related potential study, *Journal of Traumatic Stress*, 2001;14(2):295-309.
148. McFarlane A, Comparing CIDI and clinical assessment, *Australian and New Zealand Journal of Psychiatry*, 2001;35(6):858-859.
149. McFarlane A, Raphael B, Trauma and its effects. In: Bloch S, Singh BS, editors. *Foundations of Clinical Psychiatry*: Melbourne University Press.; 2001. p. 149-161.
150. McFarlane AC, Dual diagnosis and treatment of PTSD. In: Wilson JP, Friedman MJ, Lindy JD, editors. *Treating psychological trauma and PTSD*. New York, NY US: Guilford Press; 2001. p. 237-254.
151. McFarlane AC, How to treat: Post traumatic stress disorder, *Australian Doctor*, 2001;July 6:I-VIII.
152. McFarlane AC, Bookless C, The effect of PTSD on interpersonal relationships: Issues for emergency service workers, *Sexual and Relationship Therapy*, 2001;16(3): 261-267.
153. McFarlane AC, Bookless C, Air T, Posttraumatic stress disorder in a general psychiatric inpatient population, *Journal of Traumatic Stress*, 2001;14(4):633-645.
154. Goldsworthy PD, McFarlane AC, Howard Florey, Alexander Fleming and the fairy tale of penicillin, *Medical Journal of Australia* 2002;176(4):176-178.
155. McFarlane A, Phenomenology of posttraumatic stress disorder. In: Stein D, Hollander E, editors. *Textbook of Anxiety Disorders*: American Psychiatric Press; 2002. p. 359-371.
156. McFarlane AC, Managing the psychiatric morbidity of disasters, *World Psychiatry*, 2002;1(3): 153-154.
157. McFarlane AC, Relevance of traumatic stress to serious mental illness. *Contemporary Clinical Challenges in Psychiatry*, Sydney: Pfizer Neuroscience, 2002; p. 11-14.
158. McFarlane AC, Golier J, Yehuda R, Treatment planning for trauma survivors with PTSD: What does a clinician need to know before implementing PTSD treatments? In: Yehuda R, editor. *Treating trauma survivors with PTSD*. Washington DC: APA; 2002. p. 1-19.
159. McFarlane AC, Yehuda R, Clark CR, Biologic models of traumatic memories and post-traumatic stress disorder: The role of neural networks, *Psychiatric Clinics of North America*, 2002;25(2):253-270.
160. Shaw K, McFarlane AC, Bookless C, Air T, The aetiology of postpsychotic posttraumatic stress disorder following a psychotic episode, *Journal of Traumatic Stress*, 2002;15(1):39-47.
161. Shaw ME, Strother SC, McFarlane AC, Morris P, Anderson J, Clark CR, Egan GF, Abnormal functional connectivity in posttraumatic stress disorder, *NeuroImage*, 2002;15(3):661-674.
162. Cao H, McFarlane AC, Klimidis S, Prevalence of psychiatric disorder following the 1988 Yun Nan (China) earthquake. The first 5-month period, *Social Psychiatry and Psychiatric Epidemiology*, 2003;38(4):204-212.

163. Chan AOM, Air TM, McFarlane AC, Posttraumatic stress disorder and its impact on the economic and health costs of motor vehicle accidents in South Australia, *Journal of Clinical Psychiatry*, 2003;64(2):175-181.
164. Clark CR, McFarlane AC, Morris P, Weber DL, Sonkkilla C, Shaw M, Marcina J, Tochon-Danguy HJ, Egan GF, Cerebral function in posttraumatic stress disorder during verbal working memory updating: a positron emission tomography study, *Biological Psychiatry*, 2003;53(6):474-481.
165. McFarlane A, Posttraumatic stress disorder: The intersection of epidemiology and individual psychobiological adaptation, *Current Opinion in Psychiatry*, 2003;16(1):57-63.
166. McFarlane AC, Debriefing: care and sympathy are not enough, *Medical Journal of Australia*, 2003;178(11):533-534.
167. McFarlane AC, Military mental health in the 21st century. *ADF Health: Journal of the Australian Defence Health Service*, 2003;4(1):1-2.
168. McFarlane AC, Early reactions to traumatic events. The diversity of diagnostic formulations. In: Orner R, Schnyder U, editors. *Reconstructing early intervention after trauma: Innovations in the care of survivors*: Oxford University Press; 2003. p. 45-65.
169. Orr SP, Metzger LJ, Lasko NB, Macklin ML, Hu FB, Shalev AY, Pitman RK, Eisen SA, Gilbertson MW, Gillette GM, Goldberg J, Gurvits TV, Henderson WG, Keane TM, Lyons MJ, McFarlane AC, Paige SR, True WR, Tsuang MT, Weathers FW, Yehuda R, Physiologic responses to sudden, loud tones in monozygotic twins discordant for combat exposure: Association with posttraumatic stress disorder, *Archives of General Psychiatry*, 2003;60(3):283-288.
170. Forbes AB, McKenzie DP, Mackinnon AJ, Kelsall HL, McFarlane AC, Ikin JF, Glass DC, Sim MR, The health of Australian veterans of the 1991 Gulf War: Factor analysis of self-reported symptoms, *Occupational and Environmental Medicine*, 2004;61(12):1014-1020.
171. Ikin JF, Sim MR, Creamer MC, Forbes AB, McKenzie DP, Kelsall HL, Glass DC, McFarlane AC, Abramson MJ, Ittak P, Dwyer T, Blizzard L, Delaney KR, Horsley KWA, Harrex WK, Schwarz H, War-related psychological stressors and risk of psychological disorders in Australian veterans of the 1991 Gulf War, *British Journal of Psychiatry*, 2004;185(2):116-126.
172. McFarlane A, The contribution of epidemiology to the study of traumatic stress, *Social Psychiatry and Psychiatric Epidemiology*, 2004;39(11):874-882.
173. McFarlane AC, Assessing PTSD and Comorbidity: Issues in Differential Diagnosis. In: Wilson JP, Drozdek B, editors. *Broken spirits: The treatment of traumatized asylum seekers, refugees, war and torture victims*. New York: Brunner-Routledge; 2004. p. 81-103.
174. McFarlane AC, The relationship between personality and posttraumatic stress disorder. In: Strelau J, editor. *Osobowosc A Ekstremalny Stres*. Gdansk: Wydawnictwo Psychologiczne; 2004. p. 5-16.
175. McKenzie DP, Ikin JF, McFarlane AC, Creamer M, Forbes AB, Kelsall HL, Glass DC, Ittak P, Sim MR, Psychological health of Australian veterans of the 1991 Gulf War: An assessment using the SF-12, GHQ-12 and PCL-S, *Psychological Medicine*, 2004;34(8):1419-1430.

176. Creamer M, Carboon I, Forbes AB, McKenzie DP, McFarlane AC, Kelsall HL, Sim MR, Psychiatric disorder and separation from military service: A 10 year retrospective study. Canberra: Department of Veterans Affairs and the Australian Defence Force; 2005.
177. Creamer M, McFarlane AC, Burgess P, Psychopathology following trauma: the role of subjective experience, *Journal of Affective Disorders*, 2005;86(2-3):175-182.
178. Galletly CA, Clark CR, McFarlane AC, Clozapine improves working memory updating in schizophrenia, *European Journal of Neuropsychopharmacology*, 2005;15(6):601-608.
179. Ikin JF, McKenzie DP, Creamer MC, McFarlane AC, Kelsall HL, Glass DC, Forbes AB, Horsley KW, Harrex WK, Sim MR, War zone stress without direct combat: the Australian naval experience of the Gulf War, *Journal of Traumatic Stress*, 2005;18(3):193-204.
180. McFarlane A, Mental health services required after disaster: Learning from the lasting effects of disasters, *Japanese Bulletin of Traumatic Stress Studies*, 2005;1:11-25.
181. McFarlane A, Clark CR, Bryant RA, Williams LM, Niaura R, Paul RH, Hitsman BL, Stroud L, Alexander DM, Gordon E, The impact of early life stress on psychophysiological, personality and behavioural measures in 740 non-clinical subjects, *Journal of Integrative Neuroscience*, 2005;4(1):27-40.
182. McFarlane AC, Psychiatric morbidity following disasters: Epidemiology, risk and protective factors. In: Lopez-Ibor JJ, Christodoulou G, Maj M, Sartorius N, Okasha A, editors. *Disasters and mental health*. New York, NY US: John Wiley & Sons Ltd; 2005. p. 37-63.
183. Veltmeyer MD, Clark CR, McFarlane AC, Felmingham KL, Bryant RA, Gordon E, Integrative assessment of brain and cognitive function in post-traumatic stress disorder, *Journal of Integrative Neuroscience*, 2005;4(1): 145-159.
184. Weber DL, Clark CR, McFarlane AC, Moores KA, Morris P, Egan GF, Abnormal frontal and parietal activity during working memory updating in post-traumatic stress disorder, *Psychiatry Research*, 2005;140(1):27-44.
185. Benight CC, McFarlane AC, Norris FH, Formulating questions about post disaster mental health. In: Norris FH, Galea S, Friedman MJ, Watson PJ, editors. *Methods for disaster mental health research*. New York, NY US: Guilford Press; 2006. p. 62-77.
186. Cohen RA, Grieve S, Hoth KF, Paul RH, Sweet L, Tate D, Gunstad J, Stroud L, McCaffery J, Hitsman B, Niaura R, Clark CR, McFarlane A, Bryant R, Gordon E, Williams LM, Early life stress and morphometry of the adult anterior cingulate cortex and caudate nuclei, *Biological Psychiatry*, 2006;59(10): 975-982.
187. Creamer M, Carboon I, Forbes AB, McKenzie DP, McFarlane AC, Kelsall HL, Sim MR, Psychiatric disorder and separation from military service: A 10-year retrospective study, *American Journal of Psychiatry*, 2006;163(4):733-734.

188. Davidson JR, McFarlane AC, The extent and impact of mental health problems after disaster, *Journal of Clinical Psychiatry*, 2006;67 Suppl 2:9-14.
189. Foa EB, Stein DJ, McFarlane AC, Symptomatology and psychopathology of mental health problems after disaster, *Journal of Clinical Psychiatry*, 2006;67 Suppl 2:15-25.
190. Kelsall H, Sim M, McKenzie D, Forbes A, Leder K, Glass D, Ikin J, McFarlane A, Medically evaluated psychological and physical health of Australian Gulf War veterans with chronic fatigue, *Journal of Psychosomatic Research*, 2006;60(6):575-584.
191. McFarlane A, The relationship between personality and posttraumatic stress disorder. In: Strelau J, Klonowicz T, editors. *People Under Extreme Stress*: Nova Science; 2006. p. 1-14.
192. McFarlane A, Creamer M, Current knowledge about psychological trauma: A response to Milton, *Journal of the Australian Defence Health Service*, 2006;7:78-82.
193. McFarlane A, Schrader G, Bookless C, Browne D, Prevalence of victimization, posttraumatic stress disorder and violent behaviour in the seriously mentally ill, *Australian and New Zealand Journal of Psychiatry*, 2006;40(11-12):1010-5.
194. McFarlane AC, Norris FH, Definitions and concepts in disaster research. In: Norris FH, Galea S, Friedman MJ, Watson PJ, editors. *Methods for disaster mental health research*. New York: Guilford Press; 2006. p. 3-19.
195. McKenzie DP, McFarlane AC, Creamer M, Ikin JF, Forbes AB, Kelsall HL, Clarke DM, Glass DC, Ittak P, Sim MR, Hazardous or harmful alcohol use in Royal Australian Navy veterans of the 1991 Gulf War: identification of high risk subgroups, *Addictive Behaviour*, 2006;31(9):1683-1694.
196. Veltmeyer MD, McFarlane AC, Bryant RA, Mayo T, Gordon E, Clark CR, Integrative assessment of brain function in PTSD: Brain stability and working memory, *Journal of Integrative Neuroscience*, 2006;5(1):123-138.
197. Veltmeyer MD, Clark CR, McFarlane AC, Bryant RA, Gordon E, 04-02 Topography of event-related potentials to visuoverbal working memory updating and target detection in PTSD, *Acta Neuropsychiatrica*, 2006;18:322.
198. Benight CC, McFarlane AC, Challenges for disaster research: Recommendations for planning and implementing disaster mental health studies, *Journal of Loss & Trauma*, 2007;12(5):419-434.
199. Forbes D, Creamer M, Phelps A, Bryant R, McFarlane A, Devilly GJ, Matthews L, Raphael B, Doran C, Merlin T, Newton S, Australian guidelines for the treatment of adults with acute stress disorder and post-traumatic stress disorder, *Australian and New Zealand Journal of Psychiatry*, 2007;41(8):637-648.
200. Forbes D, Creamer MC, Phelps AJ, Couineau AL, Cooper JA, Bryant RA, McFarlane AC, Devilly GJ, Matthews LR, Raphael B, Treating adults with acute stress disorder and post-traumatic stress disorder in general practice: a clinical update, *Medical Journal of Australia*, 2007;187(2):120-123.

201. Galletly CA, McFarlane AC, Clark CR, Impaired updating of working memory in schizophrenia. *International Journal of Psychophysiology*, 2007;63(3):265-274.
202. Galletly CA, McFarlane AC, Clark CR, Erratum 'Impaired updating of working memory in schizophrenia', *International Journal of Psychophysiology*, 2007;66(3):271.
203. McFarlane A, Raphael B, Trauma and its effects. In: Bloch S, Singh BS, editors. *Foundations of Clinical Psychiatry*. 3rd ed: Melbourne University Press.; 2007. p. 164-175.
204. McFarlane AC, Stress-related musculoskeletal pain, *Best Practice & Research Clinical Rheumatology*, 2007;21(3):549-565.
205. McFarlane AC, Bryant RA, Post-traumatic stress disorder in occupational settings: anticipating and managing the risk, *Occupational Medicine (London)*, 2007;57(6):404-410.
206. Silove D, Steel Z, Bauman A, Chey T, McFarlane A, Trauma, PTSD and the longer-term mental health burden amongst Vietnamese refugees: A comparison with the Australian-born population, *Social Psychiatry and Psychiatric Epidemiology*, 2007;42(6):467-476.
207. Treloar S, McFarlane A, Ellis N, Initiating an Australian Deployment Health Surveillance Program, *Journal of Military and Veterans Health*, 2007;16:6-7.
208. Barton CA, Dobson A, Treloar SA, McClintock C, McFarlane AC, The Deployment Health Surveillance Program: Vision and challenges of health surveillance for Australian military cohorts, *Australian and New Zealand Journal of Public Health*, 2008;32(6):529-534.
209. Brooks R, Silove D, Bryant R, O'Donnell M, Creamer M, McFarlane A, A confirmatory factor analysis of the acute stress disorder interview, *Journal of Traumatic Stress*, 2008;21(3): 352-355.
210. Bryant RA, Creamer M, O'Donnell M, Silove D, McFarlane AC, A multisite study of initial respiration rate and heart rate as predictors of posttraumatic stress disorder, *Journal of Clinical Psychiatry*, 2008;69(11):1694-1701.
211. Bryant RA, Creamer M, O'Donnell ML, Silove D, McFarlane AC, A multisite study of the capacity of acute stress disorder diagnosis to predict posttraumatic stress disorder, *Journal of Clinical Psychiatry*, 2008;69(6):923-929.
212. Falconer EM, Felmingham KL, Allen A, Clark CR, McFarlane AC, Williams LM, Bryant RA, Developing an integrated brain, behaviour and biological response profile in posttraumatic stress disorder (PTSD), *Journal of Integrative Neuroscience*, 2008;7(3):439-456.
213. Galletly CA, McFarlane AC, Clark R, Differentiating cortical patterns of cognitive dysfunction in schizophrenia and posttraumatic stress disorder, *Psychiatry Research*, 2008;159(1-2):196-206.
214. McFarlane A, Psychiatric morbidity following disasters: Epidemiology, risk and protective factors. In: Freeman H, Stansfeld S, editors. *The Impact of the Environment of Psychiatric Disorder*: Routledge; 2008. p. 284.
215. McFarlane A, Posttraumatic stress disorder. In: Reyes G, Elhai JD, Ford JD, editors. *The Encyclopedia of Psychological Trauma*: Wiley; 2008. p. 483-491.

216. McFarlane A, The transitions from military life. In: Arthur N, Petersen J, editors. *Critical incidents in counselling for international transitions*. Alexandria, VA: American Counselling Association; 2008.
217. McFarlane AC, Predictors of post-traumatic stress disorder after major injury, *ANZ Journal of Surgery*, 2008;78(7):533-534.
218. McFarlane AC, Ellis N, Barton C, Browne D, Van Hooff M, The conundrum of medically unexplained symptoms: questions to consider, *Psychosomatics*, 2008;49(5):369-377.
219. McFarlane AC, McKenzie DP, Van Hooff M, Browne D, Somatic and psychological dimensions of screening for psychiatric morbidity: a community validation of the SPHERE Questionnaire, *Journal of Psychosomatic Research*, 2008;65(4):337-345.
220. Moores KA, Clark CR, McFarlane AC, Brown GC, Puce A, Taylor DJ, Abnormal recruitment of working memory updating networks during maintenance of trauma-neutral information in post-traumatic stress disorder, *Psychiatry Research*, 2008;163(2):156-170.
221. O'Donnell ML, Creamer MC, Parslow R, Elliott P, Holmes ACN, Ellen S, Judson R, McFarlane AC, Silove D, Bryant RA, A predictive screening index for posttraumatic stress disorder and depression following traumatic injury, *Journal of Consulting and Clinical Psychology*, 2008;76(6):923-932.
222. Peres JFP, McFarlane A, Nasello AG, Moores KA, Traumatic memories: Bridging the gap between functional neuroimaging and psychotherapy, *Australian and New Zealand Journal of Psychiatry*, 2008;42(6):478-488.
223. Shankman SA, Silverstein SM, Williams LM, Hopkinson PJ, Kemp AH, Felmingham KL, Bryant RA, McFarlane A, Clark CR, Resting electroencephalogram asymmetry and posttraumatic stress disorder, *Journal of Traumatic Stress*, 2008;21(2):190-198.
224. Westwood M, Black TG, Kammhuber S, McFarlane AC, Case incident 18: The transition from veteran life to the civilian world. In: Arthur N, Pedersen P, editors. *Case incidents in counseling for international transitions*. Alexandria, VA US: American Counseling Association; 2008. p. 297-311.
225. Bisson JL, McFarlane AC, Rose S, Ruzek JL, Watson PJ, Psychological debriefing for adults. In: Foa EB, Keane TM, Friedman MJ, Cohen JA, editors. *Effective treatments for PTSD: Practice guidelines from the International Society for Traumatic Stress Studies*. 2nd ed. New York: Guilford Press; 2009. p. 83-105.
226. Brooks R, Bryant RA, Silove D, Creamer M, O'Donnell M, McFarlane AC, Marmar CR, The latent structure of the Peritraumatic Dissociative Experiences Questionnaire, *Journal of Traumatic Stress*, 2009;22(2):153-157.
227. McFarlane AC, McKenzie DP, Van Hooff M, Browne D, Somatic and psychological dimensions of screening for psychiatric morbidity: a community validation of the SPHERE Questionnaire, *Journal of Psychosomatic Research*, 2008;65(4):337-345.
228. McFarlane AC, Ellis N, Barton C, Browne D, Van Hooff M, The conundrum of medically unexplained symptoms: Questions to consider, *Psychosomatics*, 2008;49(5):356-367.

229. Broomhall LG, Clark CR, McFarlane AC, O'Donnell M, Bryant R, Creamer M, Silove D, Early stage assessment and course of acute stress disorder after mild traumatic brain injury, *Journal of Nervous and Mental Diseases*, 2009;197(3):178-181.
230. Bryant RA, Creamer M, O'Donnell M, Silove D, McFarlane AC, A study of the protective function of acute morphine administration on subsequent posttraumatic stress disorder, *Biological Psychiatry*, 2009;65(5):438-440.
231. Carboon I, Creamer M, Forbes AB, McKenzie DP, McFarlane AC, Kelsall HL, The relationship between deployment and turnover in Australian Navy personnel, *Military Psychology*, 2009;21:233-240.
232. Clark CR, Galletly CA, Ash DJ, Moores KA, Penrose RA, McFarlane AC, Evidence-based medicine evaluation of electrophysiological studies of the anxiety disorders, *Clinical EEG and Neuroscience*, 2009;40(2):84-112.
233. Creamer M, O'Donnell M, Carboon I, Lewis V, Densley K, McFarlane A, Silove D, Bryant R, Evaluation of the dispositional hope scale in injury survivors, *Journal of Personality Research*, 2009;43(4):613-617.
234. Devilly GJ, McFarlane AC, When wait lists are not feasible, nothing is a thing that does not need to be done, *Journal of Consulting and Clinical Psychiatry*, 2009;77(6):1159-1168.
235. Kemp AH, Hopkinson PJ, Hermens DF, Rowe DL, Sumich AL, Clark CR, Drinkenburg W, Abdi N, Penrose R, McFarlane A, Boyce P, Gordon E, Williams LM, Fronto-temporal alterations within the first 200 ms during an attentional task distinguish major depression, non-clinical participants with depressed mood and healthy controls: A potential biomarker? *Human Brain Mapping*, 2009;30(2):602-614.
236. Kenny L, Bryant R, Silove D, Creamer M, O'Donnell M, McFarlane A, Distant memories: A prospective study of vantage point of trauma memories, *Psychological Science*, 2009;20(9):1049-1052.
237. McFarlane AC, The duration of deployment and sensitization to stress, *Psychiatric Annals*, 2009;39(2):81-88.
238. McFarlane AC, Military deployment: The impact on children and family adjustment and the need for care. *Current Opinion Psychiatry*, 2009;22(4):369-373.
239. McFarlane AC, Phenomenology of Posttraumatic Stress Disorder. In: Stein D, Hollander E, Rothbaum B, editors. *Textbook of Anxiety Disorders*. 2nd ed. Arlington, VA: American Psychiatric Publishing; 2009. p. 547-565.
240. McFarlane AC, Browne D, Bryant RA, O'Donnell M, Silove D, Creamer M, Horsley K, A longitudinal analysis of alcohol consumption and the risk of posttraumatic symptoms, *Journal of Affective Disorders*, 2009;118(1-3):166-172.
241. McFarlane AC, Hinton D, Ethnocultural issues. In: Nutt DJ, Stein MB, Zohar J, editors. *Post Traumatic Stress Disorder: Diagnosis, Management and Treatment*. 2nd ed. London: Informa; 2009. p. 163-175.
242. McFarlane A, Raphael B, After the fires: Looking to the future using the lessons from the past, *Medical Journal of Australia*, 2009;190(6):291-292.
243. McFarlane A, Van Hooff M, Impact of childhood exposure to a natural disaster on adult mental health: 20-year longitudinal follow-up study, *British Journal of Psychiatry*, 2009;195(2):142-148.
244. McFarlane AC, Van Hooff M, Goodhew F, Anxiety disorders and PTSD. In:

- Neria Y, Galea S, Norris F, editors. *Mental Health and Disasters*. New York: Cambridge University Press; 2009. p 47-66.
245. McFarlane AC, Williamson P, Barton C, The impact of traumatic stressors in civilian occupational settings, *Journal of Public Health Policy*, 2009;30(3):311-327.
 246. McGuire A, Waller M, Loos C, McClintock C, McFarlane AC, Nielsen L, Treloar SA, Dobson A, D'Este C, Self-reported indicators of psychological health, *Psychiatric Annals*, 2009;39(2):46-55.
 247. Metzger LJ, Clark CR, McFarlane AC, Veltmeyer MD, Lasko NB, Paige SR, Pitman RK, Orr SP, Event-related potentials to auditory stimuli in monozygotic twins discordant for combat: Association with PTSD, *Psychophysiology*, 2009;46(1):172-178.
 248. O'Donnell ML, Creamer M, Elliott P, Bryant R, McFarlane A, Silove D, Prior trauma and psychiatric history as risk factors for intentional and unintentional injury in Australia, *Journal of Trauma, Injury, Infection and Critical Care*, 2009;66(2):470-476.
 249. O'Donnell ML, Holmes AC, Creamer MC, Ellen S, Judson R, McFarlane AC, Silove DM, Bryant RA, The role of posttraumatic stress disorder and depression in predicting disability after injury, *Medical Journal of Australia*, 2009;190:S71-S74.
 250. Shaw ME, Moores KA, Clark RC, McFarlane AC, Strother SC, Bryant RA, Brown GC, Taylor JD, Functional connectivity reveals inefficient working memory systems in post-traumatic stress disorder, *Psychiatry Research*, 2009;172(3):235-241.
 251. Van Hooff M, McFarlane AC, Baur J, Abraham M, Barnes DJ, The stressor Criterion-A1 and PTSD: A matter of opinion? *Journal of Anxiety Disorders*, 2009;23(1):77-86.
 252. Veltmeyer MD, Clark CR, McFarlane AC, Moores KA, Bryant RA, Gordon E, Working memory function in post-traumatic stress disorder: an event-related potential study, *Clinical Neurophysiology*, 2009;120(6):1096-1106.
 253. Bryant RA, Creamer M, O'Donnell M, Silove D, Clark CR, McFarlane AC, Post-traumatic amnesia and the nature of post-traumatic stress disorder after mild traumatic brain injury, *Journal of the International Neuropsychological Society*, 2009 Nov;15(6):862-867.
 254. Wise V, McFarlane A, Clark CR, Battersby M, Event-related potential and autonomic signs of maladaptive information processing during an auditory oddball task in panic disorder, *International Journal of Psychophysiology*, 2009;74(1):34-44.
 255. McFarlane A, Van Hooff M, Impact of childhood exposure to a natural disaster on adult mental health: 20-year longitudinal follow-up study, *British Journal of Psychiatry*, 2009;195(2):142-148.
 256. McFarlane AC, Van Hooff M, Goodhew F, Anxiety disorders and PTSD. In: Neria Y, Galea S, Norris F, editors. *Mental Health and Disasters*. New York: Cambridge University Press; 2009. p47-66.
 257. Barton C, McGuire A, Waller M, Treloar S, McClintock C, Dobson A, McFarlane A, D'Este C, Smoking prevalence, its determinants and short term health implications in the Australian Defence Force, *Military Medicine*, 2010; 175(4):267-272.

258. Bryant RA, Creamer M, O'Donnell M, Silove D, McFarlane AC, Sleep disturbance immediately prior to trauma predicts subsequent psychiatric disorder, *Sleep Disturbance, Trauma and Psychiatry Disorders*, 2010;33(1):69-74.
259. Bryant RA, O'Donnell ML, Creamer M, McFarlane AC, Clark CR, Silove D, The psychiatric sequelae of traumatic injury, *American Journal of Psychiatry*, 2010;167(3):312-320.
260. Daniels JK, McFarlane AC, Bluhm RL, Moores KA, Clark CR, Shaw ME, Williamson PC, Densmore M, Lanius RA, Switching between executive and default mode networks in posttraumatic stress disorder: Alterations in functional connectivity, *Journal of Psychiatry Neuroscience*, 2010;35(4):258-266.
261. Davidson J, Zhang W, Connor K, Ji J, Jobson K, Lecrubier Y, McFarlane A, Newport D, Nutt D, Osser D, Stein D, Stowe Z, Tajima O, Versiani M, A psychopharmacological treatment algorithm for generalised anxiety disorder (GAD), *Journal of Psychopharmacology*, 2010;24(1):3-26.
262. Forbes D, Parslow R, Creamer M, O'Donnell M, Bryant R, McFarlane A, Silove D, Shalev A, A longitudinal analysis of posttraumatic stress disorder symptoms and their relationship with Fear and Anxious-Misery disorders: Implications for DSM-V, *Journal of Affective Disorders*, 2010;127(1-3):147-152.
263. Gilbertson MW, McFarlane AC, Weathers FW, Keane TM, Yehuda R, Shalev AY, Lasko NB, Goetz JM, Pitman RK, Is trauma a causal agent of psychopathologic symptoms in posttraumatic stress disorder? Findings from identical twins discordant for combat exposure, *Journal of Clinical Psychiatry*, 2010;71(10):1324-1330.
264. Kemp AH, Pe Benito L, Quintana DS, Clark CR, McFarlane A, Mayur P, Harris A, Boyce P, Williams LM, Impact of depression heterogeneity on attention: An auditory oddball event related potential study, *Journal of Affective Disorders*. 2010;123(1-3):202-207.
265. Lanius RA, Brewin CR, Bremner JD, Daniels JK, Friedman MJ, Liberzon I, McFarlane A, Schnurr PP, Shin L, Stein M, Vermetten E, Does neuroimaging research examining the pathophysiology of posttraumatic stress disorder require medication-free patients? *Journal of Psychiatry Neuroscience*, 2010;35(2):80-89.
266. Liedl A, O'Donnell M, Creamer M, Silove D, McFarlane A, Knaevelsrud C, et al, Support for the mutual maintenance of pain and post-traumatic stress disorder symptoms, *Psychological Medicine*, 2010;40(7):1215-1223.
267. McFarlane AC, The long-term costs of traumatic stress: Intertwined physical and psychological consequences, *World Psychiatry*, 2010;9(1):3-10.
268. McFarlane AC, The delayed and cumulative consequences of traumatic stress: Challenges and issues in compensation settings, *Psychology, Injury and Law*, 2010;3(2):100-110.
269. McFarlane AC, Barton CA, Briggs N, Kennaway DJ, The relationship between urinary melatonin metabolite excretion and posttraumatic symptoms following traumatic injury, *Journal of Affective Disorders*, 2010;127(1-3):365-369.
270. McKenzie DP, Creamer M, Kelsall HL, Forbes AB, Ikin JF, Sim MR,

- McFarlane AC, Temporal relationships between Gulf War deployment and subsequent psychological disorders in Royal Australian Navy Gulf War veterans, *Social Psychiatry Psychiatric Epidemiology*, 2010;45(9):843-852.
271. O'Donnell ML, Creamer M, Holmes AC, Ellen S, McFarlane AC, Judson R, Silove D, Bryant RA, Posttraumatic stress disorder after injury: does admission to intensive care unit increase risk? *Journal of Trauma*, 2010;69(3): 627-632.
 272. O'Donnell ML, Creamer M, McFarlane AC, Silove D, Bryant RA, Should A2 be a diagnostic requirement for posttraumatic stress disorder in DSV-V? *Psychiatric Research*, 2010;176(2-3):257-260.
 273. O'Donnell ML, Creamer MC, McFarlane AC, Silove D, Bryant RA, Does access to compensation have an impact on recovery outcomes after injury? *Medical Journal of Australia*, 2010;192(6):328-333.
 274. Bleier J, McFarlane AC, McGuire A, Treloar S, Waller M, Dobson A, Risk of adverse health outcomes associated with frequency and duration of deployment with the Australian Defence Force, *Military Medicine*, 2011; 176(2):139-146(8).
 275. McFarlane AC, Barton CA, Yehuda R, Wittert G, Cortisol response to acute trauma and risk of posttraumatic stress disorder, *Psycho neuroendocrinology*, 2011;36(10):1587.
 276. Bluhm RL, Clark CR, McFarlane AC, Moores K, Shaw M, Lanius R, Default network connectivity during a working memory task, *Human Brain Mapping*, 2011;32(7):1029-1035.
 277. Bryant RA, Brooks R, Silove D, Creamer M, O'Donnell M, McFarlane AC, Peritraumatic dissociation mediates the relationship between acute panic and chronic posttraumatic stress disorder, *Behavioural Research and Therapy*, 49(5):346-351.
 278. Bryant RA, Creamer M, O'Donnell M, Silove D, McFarlane AC, Heart rate after trauma and the specificity of fear circuitry disorders, *Psychological Medicine*, 2011;41(12):2573-2580.
 279. Bryant RA, Felmingham KL, Silove S, Creamer M, O'Donnell M, McFarlane AC. The association between menstrual cycle and traumatic memories, *Journal of Affective Disorders*, 2011;131(1-3):398-401.
 280. Bryant RA, O'Donnell ML, Creamer M, McFarlane AC, Silove D, Posttraumatic intrusive symptoms across psychiatric disorders, *Journal of Psychiatric Research*, 2011;45(6):842-847.
 281. Forbes D, Fletcher S, Lockwood E, O'Donnell M, Creamer M, Bryant RA, McFarlane A, Silove D, Requiring both avoidance and emotional numbing in DSM-V PTSD: Will it help? *Journal of Affective Disorders*, 2011;130(3): 483-486.
 282. Forbes D, Lockwood EL, Elhai JD, Creamer M, O'Donnell M, Bryant RA, McFarlane A, Silove D, An examination of the structure of posttraumatic stress disorder in relation to the anxiety and depressive disorders, *Journal of Affective Disorders*. 2011;132(1-2):165-172.
 283. Galletly CA, McFarlane AC, Van Hooff M, Psychotic Symptoms in Young Adults Exposed to Childhood Trauma - A 20 year follow-up study, *Schizophrenia Research*. 2011; 127(1-3):76-82.
 284. McFarlane A, Barton C, Yehuda R, Wittert G, Cortisol response to a motor

- vehicle accident and risk of posttraumatic stress disorder, *Psychoneuroendocrinology*. 2011;36(5):720-727.
285. Mills KL, McFarlane AC, Slade T, Creamer M, Silove D, Teesson M, Bryant R, Assessing the prevalence of trauma exposure in epidemiological surveys, *Australian & New Zealand Journal of Psychiatry*, 2011;45(5):407-415.
 286. Rees S, Silove D, Chey T, Ivancic L, Steel Z, Creamer M, Teesson M, Bryant R, McFarlane AC, Mills KL, Lifetime prevalence of gender-based violence in women and the relationship with mental disorders and psychosocial function, *JAMA*, 2011;306(5):513-521.
 287. Wise V, McFarlane AC, Clark CR, Battersby M, An integrative assessment of brain and body function 'at rest' in panic disorder: A combined quantitative EEG/autonomic function study, *International Journal of Psychophysiology*, 2011;79(2):155-165.
 288. Bryant RA, Creamer M, O'Donnell M, Silove D, McFarlane AC, The capacity of acute stress disorder to predict posttraumatic psychiatric disorders, *Journal of Psychiatric Research*, 2012;46(2):168-173.
 289. Chapman C, Mills K, Slade T, McFarlane AC, Bryant RA, Creamer M, Silove D, Teesson M, Remission from post-traumatic stress disorder in the general population, *Psychological Medicine*, 2012;42(8):1695-1703.
 290. McFarlane A, Bryant R, Genes, Biology, Mental Health and Human Rights: The Effects of Traumatic Stress as a Case Example. In: Dudley M, Silove D, Gale F, editors. *Mental Health and Human Rights*: Oxford University Press; 2012.
 291. McFarlane AC, Williams R, Mental health services required after disasters: learning from the lasting effects of disasters, *Depression Research & Treatment*, 2012;2012:970194. doi: 10.1155/2012/970194. Epub 2012 Jul 1.
 292. Mills V, Van Hooff M, Baur J, McFarlane AC, Predictors of mental health service utilisation in a non-treatment seeking epidemiological sample of Australian adults, *Community Mental Health Journal*, 2012;48(4):511-521.
 293. Waller M, Treloar SA, Sim MR, McFarlane AC, McGuire AC, Bleier J, Dobson AJ, Traumatic events, other operational stressors and physical and mental health reported by Australian Defence Force personnel following peacekeeping and war-like deployments, *BMC Psychiatry*, 2012;12:88.
 294. McFarlane AC, Health surveillance of deployed military personnel occasionally leads to unexpected findings, *BMC Medicine*, 2012 Oct 24;10:126.
 295. Yehuda R, Vermetten E, McFarlane A, Understanding depression as it occurs in the context of post-traumatic stress disorder, *Depression Research & Treatment*, 2012;2012:178261.
 296. McFarlane AC, The Occupational Implication of the Prolonged Effects of Repeated Exposure to Traumatic Stress, *International Handbook of Workplace Trauma Support*, 2012;121-138.
 297. Hall T, Galletly CA, Clark CR, Veltmeyer M, Metzger L, Gilbertson M, Orr SP, Pitman RK, McFarlane A, The Relationship between Hippocampal Asymmetry and Working Memory Processing in Combat-related PTSD: a Monozygotic Twin Study, *Biology of Mood & Anxiety Disorders*,

- 2012;2:21.
298. Galletly C, Clark L, Van Hooff M, McFarlane A, Childhood trauma and subclinical psychotic experiences in young adulthood: a 20-year longitudinal analyses of two cohort studies, *Schizophrenia Research*, 2012;136:S63-S64.
 299. Berecki-Gisolf J, McKenzie SJ, Dobson AJ, McFarlane A, McLaughlin D, A History of comorbid depression and anxiety predicts new onset of heart disease, *Journal of Behavioural Medicine*, 2013;36(4):347-353.
 300. Forbes D, Fletcher S, Parslow R, Phjelps A, O'Donnell M, Bryant RA, McFarlane A, Silove D, Creamer M, Trauma at the hands of another: longitudinal study of differences in the posttraumatic stress disorder symptom profile following interpersonal compared with noninterpersonal trauma, *Journal of Clinical Psychiatry*, 2012;73(3):372-376.
 301. O'Donnell ML, Varker T, Holmes A.C, Ellen S, Wade D, Creamer M, Silove D, McFarlane A, Bryant RA, Forbes D, Disability after injury: The cumulative burden of physical and mental health, *Journal of Clinical Psychiatry*, 2013;72(2):137-143.
 302. Berryman C, Stanton TR, Jane Bowering K, Tabor A, McFarlane A, Lorimer Moseley G, Evidence for working memory deficits in chronic pain: A systematic review and meta-analysis, *Pain* 2013, 154;1181-1196.
 303. McFarlane AC, Searle AK, Van Hooff M, Baghurst PA, Sawyer MG, Galletly C, Sim MR, Clark LS, Prospective associations between childhood low-level lead exposure and adult mental health problems: The Port Pirie cohort study, *Neurotoxicology*, 2013 Aug 16;39C:11-17.
 304. Yehuda R, Neylan TC, Flory JD, McFarlane AC. The use of biomarkers in the military: from theory to practice, *Psychoneuroendocrinology*, 2013;38(9):1912-1922.
 305. Rosenfeld JV, McFarlane AC, Bragge P, Armonda RA, Grimes JB, Ling GS. Blast-related traumatic brain injury, *The Lancet Neurology*, 2013;12(9):882-893.
 306. Bryant RA, O'Donnell ML, Creamer M, McFarlane AC, Silove D. A multisite analysis of the fluctuating course of posttraumatic stress disorder, *JAMA Psychiatry*, 2013;70(8):839-846.
 307. Kilpatrick DG, McFarlane AC, Post Traumatic Stress Disorder and the Law, Forensic Considerations, *Handbook of PTSD, Science and Practice* edited by Friedman, Keane & Resick, October 2013, Chapter 30;540-553.
 308. O'Donnell ML, Varker T, Creamer M, Fletcher S, McFarlane AC, Silove D, Bryant RA, Forbes D. Exploration of delayed-onset posttraumatic stress disorder after severe injury, *Psychosom Med*. 2013 Jan;75(1):68-75.
 309. McFarlane AC, Biology not culture explains dissociation in posttraumatic stress disorder. *Biological Psychiatry*, 2013;73:296-297.
 310. McDonald P, Bryant RA, Silove D, Creamer M, O'Donnell M, McFarlane AC, The expectancy of threat and peritraumatic dissociation, *European Journal of Psychotraumatology*, 2013;doi: 10.3402.ejpt.v4i0.21426.
 311. Mela M, McFarlane A, Sajobi TT, Rajani H, Clinical correlates of fetal alcohol spectrum disorder among diagnosed individuals in a rural diagnostic clinic, *Journal of Population Therapeutics and Clinical Pharmacology*, 2013;20(3):e250-8. Epub 2013 Sep 10.

312. McFarlane AC, PTSD and DSM-5: unintended consequences of change, *The Lancet Psychology*, 2014;1(4):246-247).
313. Vermetten E, Greenberg N, Boeschoten M, Delahaije R, Jetly R, Castro C, McFarlane A, Deployment-related mental health support: comparative analysis of NATO and allied ISAF partners, *European Journal of Psychotraumatology*, 2014 Aug 14;5. doi: 10.3402/ejpt.v5.23732. eCollection 2014.
314. O'Donnell M, Alkemade N, Nickerson A, Creamer M, McFarlane A, Silove D, Bryant R, Forbes D, Impact of the diagnostic changes to posttraumatic stress disorder for DSM-5 and the proposed changed to ICD-11, *British Journal of Psychiatry*, 2014;205(3):230-235.
315. McFarlane A, Van Hooff M, Learning for the future: The challenge of disaster research, *Australian & New Zealand Journal of Psychiatry*, 2014;48(7):600-602.
316. Goodhew F, Van Hooff M, Sparnon A, Roberts R, Baur J, Saccone E, McFarlane A, Psychiatric outcomes amongst adult survivors of childhood burns, *Burns* 2014.
317. Searle A, Baghurst P, Van Hooff M, Sawyer M, Sim M, Galletly C, Clark L, McFarlane A, Tracing the long-term legacy of childhood lead exposure: A review of three decades of the Port Pirie Cohort study, *Neurotoxicology*, 2014;43:46-56.
318. Van Hooff M, McFarlane A, Davies C, Searle A, Fairweather-Schmidt K, Verhagen A, Benassi H, Hodson S, PTSD in the Military: Prevalence, Pathophysiology, Treatment. The Australian Defence Force Mental Health Prevalence and Wellbeing Study: design & methods, *European Journal of Psychotraumatology*, 2014 Aug 14;5. doi: 10.3402/ejpt.v5.23950. e Collection 2014.
319. Berryman C, Stanton TR, Boweing KJ, Tabor A, McFarlane A, Moseley GL, Do people with chronic pain have impaired executive function? A meta-analytical review, *Clinical Psychology Review*, 2014;34:563-579.
320. Keage HAD, Muniz G, Kurylowicz L, Van Hooff M, Clark L, Searle AK, Sawyer MG, Baghurst P, McFarlane A, Age 7 Intelligence and paternal education appear best predictors of educational attainment: The Port Pirie Cohort Study, *Australian Journal of Psychology*, 2014;doi: 10.1111/ajpy.12083
321. Rees S, Steel Z, Creamer M, Teesson M, Bryant R, McFarlane AC, Mills KL, Slade T, Carragher N, O'Donnell M, Forbes D, Silove D, Onset of common mental disorders and suicidal behaviour following women's first exposure to gender based violence: a retrospective, population-based study, *BMC Psychiatry*, 2014;14:312.
322. Nickerson A, Barnes JB, Creamer M, Forbes D, McFarlane AC, O'Donnell M, Silove D, Steel Z, Bryant RA, The temporal relationship between posttraumatic stress disorder and the problems of alcohol use following traumatic injury, *Journal of Abnormal Psychology*, 2014;123(4):821-834.
323. Yehuda R, Vermetten E, McFarlane AC, Lehrner A, PTSD in the military: special considerations for understanding prevalence, pathophysiology and treatment following deployment, *European Journal of Psychotraumatology*, 2014 14 Aug 14;5. doi: 10.3402/ejpt.v5.25322. e Collection 2014.

324. Forbes D, Lockwood E, Phelps A, Wade D, Creamer, Bryant RA, McFarlane A, Silove D, Rees S, Chapman C, Slade T, Mills K, Teesson M, O'Donnell M, Trauma at the hands of another: distinguishing PTSD patterns following intimate and nonintimate interpersonal and noninterpersonal trauma in a nationally representative sample, *Journal of Clinical Psychiatry*, 2014;75(2):147-153.
325. Bryant RA, Creamer M, O'Donnell M, McFarlane AC, Silove D, A prospective study of rapid breathing and the development of posttraumatic panic disorder, *Psychological Trauma*, 2014;6(4):370-374.
326. McFarlane AC. The psychiatric consequences of physical injury in military personnel: predicting and managing the risk, *Occupational and Environmental Medicine*, 2015;72(4):241-242.
327. Forbes D, Lockwood E, Creamer M, Bryant RA, McFarlane AC, Silove D, Nickerson A, O'Donnell M, Latent structure of the proposed ICD-11 posttraumatic stress disorder symptoms: implications for the diagnostic algorithm, *British Journal of Psychiatry*, 2015;206(3):245-251.
328. McFarlane AC and Van Hooff M, The counterintuitive effect of a disaster: the need for a long-term perspective, *Australian and New Zealand Journal of Psychiatry*, 2015;49(4):313-314.
329. Wright BK, McFarlane AC, Clarke DM, Sim MR, Kelsall HL, Symptom attribution and symptom reporting in Australian Gulf War veterans, *Journal of Psychosomatic Research*, 2015;79:674-679.
330. McFarlane AC, One hundred years of lessons about the impact of war on mental health; two steps forward, one step back, *Australasian Psychiatry*, 2015;23:392-395.
331. Davy CP, Lorimer M, McFarlane A, Hodson S, Crompvoets S, Lawrence-Wood E, Neuhaus SJ, The Well-Being of Australian Service Mothers, *Womens Health*, 2015;21:1-17.
332. McFarlane AC, Forbes D, The journey from moral inferiority to post-traumatic stress disorder, *Medical Journal of Australia*, 2015;202(7):348-349.
333. Searle AK, Van Hooff M, McFarlane AC, Davies CE, Fairweather-Schmidt AK, Hodson SE, Benassi H, Steele N, The validity of military screening for mental health problems: diagnostic accuracy of the PCL, K10 and AUDIT scales in an entire military population, *International Journal of Methods in Psychiatric Research*, 2015;24(1):32-45.
334. Forbes D, Lockwood E, Elhai JD, Creamer M, Bryant R, McFarlane A, Silove D, Miller MW, Nickerson A, O'Donnell M, An evaluation of the DSM-5 factor structure for posttraumatic stress disorder in survivors of traumatic injury, *Journal of Anxiety Disorder*, 2015;29:43-51.
335. McFarlane Alexander C, The Duty of Care and Peacekeeping: Mental Health Disorder in the Australian Defense. In: Powles A, Partow N, Nelson N, editors, *United Nations Peacekeeping Challenge, The Importance of the Integrated Approach*, 2015;13:167-180.
336. Forbes D, Nickerson A, Alkemade N, Bryant RA, Creamer M, Silove D, McFarlane AC, Van Hooff M, Fletcher SL, O'Donnell ML, Longitudinal analysis of latent classes of psychopathology and patterns of class migration in survivors of severe injury, *Journal of Clinical Psychiatry*, 2015 76(9):1193-1199.

337. Yehuda R, Hoge CW, McFarlane AC, Vermetten E, Lanius RA, Nievergelt CM, Hobfoll SE, Koenen KC, Neylan TC, Hyman SE, Post-traumatic stress disorder, *Nature Reviews Disease Primers*, 2015;1:1-22.
338. Bennett N, Davy C, Lawrence-Wood E, McFarlane A, The association between inflammatory markers and psychological disorders in veterans and military personnel: a systematic review protocol, *JBIC Database of Systematic Reviews & Implementation Reports*, 2015;13(4):41-50.
339. O'Donnell ML, Grant G, Alkemade N, Spittal M, Creamer M, Silove D, McFarlane A, Bryant RA, Forbes D, Studdert, DM, Compensation seeking and disability after injury: The role of compensation-related stress and mental health, *Journal of Clinical Psychiatry*, 2015 Aug;76(8):e1005. doi: 10.4088/JCP.14m09211.
340. McFarlane AC, The impact of war on mental health: lest we forget, *World Psychiatry* (2015);14(3):351-353.
341. Schweininger S, Forbes D, Creamer M, McFarlane A, Silove D, Bryant R, O'Donnell M, The temporal relationship between mental health and disability after injury, *Depression and Anxiety*, 2015;32(1);64-71.
342. Bryant RA, Nickerson A, Creamer M, O'Donnell M, Forbes D, Galatzer-Levy I, McFarlane AC, Silove D, Trajectory of posttraumatic stress following traumatic injury: a 6-year follow up, *British Journal of Psychiatry*, 2015;206(5):417-423.
343. Bryant RA, Creamer M, O'Donnell M, Silove D, McFarlane AC, Forbes D, A Comparison of the capacity of DSM-IV and DSM-5 acute stress disorder definitions to predict posttraumatic stress disorder and related disorders, *Journal of Clinical Psychiatry*, 2015;76(4):391-397.
344. Lawrence-Wood E, Van Hooff M, Baur J, McFarlane AC, Re-experiencing phenomena following a disaster: The long-term predictive role of intrusion symptoms in the development of post-trauma depression and anxiety, *Journal of Affective Disorders*, 2016;190:278-281.
345. Ikin JF, McKenzie DP, Gwini SM, Kelsall HL, Creamer M, McFarlane AC, Clarke DM, Wright B, Sim M, Major depression and depressive symptoms in Australian Gulf War veterans 20 years after the Gulf War, *Journal of Affective Disorders*, 2016;189:77-84.
346. Gwini SM, Kelsall HL, Sim MR, Ikin JF, McFarlane AC, Forbes AB, Stability of symptom patterns in Australian Gulf War veterans: 10-year longitudinal study, *Occupational Environmental Medicine*, 2016.
347. Forbes D, O'Donnell M, Brand RM, Korn Sm, Creamer M, McFarlane AC, Sim MR, Forbes AB, Hawthorne G, The long-term mental health impact of peacekeeping: prevalence and predictors of psychiatric disorder, *British Journal of Psychiatry*, 2016;2:32-37.
348. Galletly CA, Clark LS, McFarlane AC, Searle AK, Sawyer MG, Sim MR, Baghurst PA, Van Hooff M, Childhood lead exposure, childhood trauma, substance use and subclinical psychotic experiences – a longitudinal cohort study. *Psychological Medicine*, 2016;239:54-61.
349. Bryant RA, McFarlane AC, Silove D, O'Donnell ML, Forbes D, Creamer M, The Lingering Impact of Resolved PTSD on Subsequent Functioning, *Clinical Psychological Science*, 2016;4:493-498.
350. Bryant R, O'Donnell M, Forbes D, McFarlane A, Silove D, Creamer M, The course of suicide risk following traumatic injury. *Journal of Clinical*

- Psychiatry, 2016;77(5):648-653.
351. O'Donnell ML, Alkemade N, Creamer MC, McFarlane AC, Silove D, Bryant RA, Forbes D, The long-term psychiatric sequelae of severe injury: A 6-year follow-up study. *Journal of Clinical Psychiatry*, 2016;77(4):e473-e479. doi: 10.4088/JCP.14m09721.
 352. McFarlane A, Accountability for the Psychological Costs of Military Service: A Benchmark Set by the Canadian Armed Forces, *Canadian Journal of Psychiatry*, 2016;61(1 Suppl):7S-9S.doi:10.1177/0706743715625423.
 353. Hoge CW, Yehuda R, Castro CA, McFarlane AC, Vermetten E, Jetly R, Koenen KC, Greenberg N, Shalev AY, Rauch SAM, Marmar CR, Rothbaum BO, Unintended consequences of changing the definition of posttraumatic stress disorder in DSM-5, *JAMA Psychiatry*, 2016;73:750-752.
 354. Ikin JF, Kelsall HL, McKenzie DP, Gwini SM, Forbes AB, Glass DC, McFarlane AC, Clarke D, Wright B, Del Monaco A, Sim MR, Cohort Profile: The Australian Gulf War Veterans' Health Study cohort, *International Journal of Epidemiology*, 2016,1-9, doi:10.1093/ije/dyw025.
 355. Forbes D, Alkemade N, Nickerson A, Bryant RA, Creamer M, Silove D, McFarlane AC, Van Hoof M, Phelps AJ, Rees S, Steele Z, O'Donnell M, Prediction of Late-Onset Psychiatric Disorder in Survivors of Severe Injury: Findings of a Latent Transition Analysis, *Journal of Clinical Psychiatry*, 2016;77:807-812.
 356. Gwini SM, Kelsall HL, Ikin JF, Sim MR, McFarlane AC, Forbes AB, New Onset of Chronic Diseases and changes in Lifestyle Risk Factors Among Gulf War Veterans: A Longitudinal Comparison of High and Low Symptom Reporters, *Journal of Occupational & Environmental Medicine*, 2016;58:770-777.
 357. Nickerson A, Creamer M, Forbes D, McFarlane AC, O'Donnell ML, Silove D, Steel Z, Felmingham K, Hadzi-Pavlovic D, Bryant RA, The longitudinal relationship between posttraumatic stress disorder and perceived social support in survivors of traumatic injury, *Psychological Medicine*, 2016;47(1):115-126.
 358. Berryman C, Wise V, Stanton TR, McFarlane A, Moseley L, A case-matched study of neurophysiological correlates to attention/working memory in people with somatic hypervigilance, *Journal of Clinical and Experimental Neuropsychology*, 2016;doi:10.1080/13803395.2016.1203869.
 359. Vermetten E, Baker DG, Jetley R, McFarlane AC, Concerns Over Divergent Approaches in the Diagnostics of Posttraumatic Stress Disorder, *Psychiatric Annals*, 2016;46:498-509).
 360. O'Donnell ML, Alkemade N, Creamer M, McFarlane AC, Silove D, Bryant RA, Felmingham K, Steel Z, Forbes D, A Longitudinal Study of Adjustment Disorder After Trauma Exposure, *The American Journal of Psychiatry*, 2016;173:1231-1238.
 361. Hodson S, McFarlane A, Australian veterans – Identification of mental health issues, *Australian Family Physician*, 2016;45:98-101.
 362. McFarlane AC, Lawrence-Wood E, Van Hoof M, Malhi GS, Yehuda R, The Need to Take a Staging Approach to the Biological Mechanisms of PTSD and its Treatment, *Current Psychiatry Reports*, 2017;19(2):1-9).
 363. Searle AK, van Hooff M, Lawrence-Wood E, Grace BS, Saccone EJ, Davy CP,

- Lorimer M, McFarlane AC, The impact of antecedent trauma exposure and mental health symptoms on the post-deployment mental health of Afghanistan-deployed Australian troops, *Journal of Affective Disorders*, 2017;220:62-71.
364. McFarlane AC, Is screening for the psychological effects of war useful? *The Lancet*, 2017;April 8;389.
 365. Bryant RA, Creamer M, O'Donnell M, Forbes D, Felmingham KL, Silove D, Malhi G, van Hooff M, McFarlane AC, Nickerson A, Separation from parents during childhood trauma predicts adult attachment security and post-traumatic stress disorder, *Psychological Medicine*, 2017;May 24:1-8.
 366. Post-traumatic stress disorder is a systemic illness, not a mental disorder: is Cartesian dualism dead? *Medical Journal of Australia*, 206(6);3 April 2017.
 367. Van der Kolk, B and McFarlane, AC, The Black Hole of Trauma. Chapter in *Literary Theory: An Anthology*, Pages 487-502.
 368. Zuj Z, McFarlane A, Van Hooff M, Lawrence-Wood E, et al. Neural Activity and Emotional Processing Following Military Deployment: Effects of mild Traumatic Brain Injury and Posttraumatic Stress Disorder, *Brain and Cognition*, 2017;118:19-26.
 369. Searle AK, Van Hooff M, Lawrence-Wood ER, Grace BS, Saccone EJ, Davy CP, Lorimer M, McFarlane AC, The impact of antecedent trauma exposure and mental health symptoms on the post-deployment mental health of Afghanistan-deployed Australian troops, *Journal of Affective Disorders*, 2017;220:67-71.
 370. Silove D, Baker JR, Mohsin M, Teesson M, Creamer M, O'Donnell M, Forbes D, Carragher N, Slade T, Mills K, Bryant R, McFarlane A, Steel Z, Felmingham K, Rees S, The contribution of gender-based violence and network trauma to gender differences in Post-Traumatic Stress Disorder, *PLoS One*, 2017; Feb 16;12(2):30171879. doi: 10.1371/journal.pone.0171879. e Collection 2017.
 371. Bryant RA, Creamer M, O'Donnell M, Forbes D, McFarlane AC, Silove D, Hadzi-Pavlovic D, Acute and Chronic Posttraumatic Stress Symptoms in the Emergence of Posttraumatic Stress Disorder – A Network Analysis, *JAMA Psychiatry*, 2017;74:135-142.
 372. Forbes D, O'Donnell M, Bryant R, Psychosocial recovery following community disaster: An International collaboration (2016), *Australian and New Zealand Journal of Psychiatry*, doi: 10.1177/0004867416679737.
 373. Varker T, Metcalf O, Fores D, Chisolm K, Harvey S, Van Hooff M, McFarlane A, Bryant R, Phelps AJ, Research into Australian emergency services personnel mental health and wellbeing: An evidence map, *Australian & New Zealand Journal of Psychiatry*, 2018;52:129-148.
 374. Forbes D, Nickerson A, Bryant RA, Creamer M, Silove D, McFarlane AC, Van Hooff M, Phelps A, Felmingham KL, Malhi GS, Steel Z, Fredrickson J, Alkemade N and O'Donnell M, The impact of post-traumatic stress disorder symptomatology on quality of life: The sentinel experience of anger, hypervigilance and restricted affect, *Australian & New Zealand Journal of Psychiatry*, 2018 May 1:4867418772917. doi: 10.1177/0004867418772917.

375. Spittal MJ, Grant G, O'Donnell M, McFarlane A, Studdert DM, Development of prediction models of stress and long-term disability among claimants to injury compensation systems: a cohort study, *BMJ Open* 2108;8:e020803.doi:10.1136/bmjopen-2017-020803.
376. Baecher K, Kangas M, Taylor A, O'Donnell ML, Bryant R, Silove D, McFarlane A, Wade D, The role of site and severity of injury as predictors of mental health outcomes following traumatic injury, *Stress and Health*, 2018;doi/abs/10.1002/smi.2815.
377. Rebecca Jones, Sarah Lee, Darryl Maybery, Alexander McFarlane, (2018) "Experiences of a prolonged coal-mine fire", *Disaster Prevention and Management: An International Journal*, <https://doi.org/10.1108/DPM-05-2018-0145>.
378. Lau W, Silove D, Edwards B, Forbes D, Bryant R, McFarlane A, Hadzi-Pavlovic D, Steel Z, Nickerson A, Van Hooff M, Felmingham K, Cowlishaw Sa, Alkemade N, Kartal D, O'Donnell M, Adjustment of refugee children and adolescents in Australia: outcome from wave three of the Building a New Lie in Australia study, *BMC Medicine*, 2018;16:157. doi: 10.1186/s12916-018-1124-5.
379. Nickerson A, Liddell BJ, Keegan D, Edwards B, Felmingham KL Forbes D, Hadzi-Pavlovic D, McFarlane AC, O'Donnell M, Silove D, Steel Z, Van Hooff M, Bryant RA, Longitudinal association between trust, psychological symptoms and community engagement in resettled refugees, *Psychological Medicine*, 2018, Aug 30:1-9. doi: 10.1017/S0033291718002246.
380. Bryant R, Edwards B, Creamer M, O'Donnell M, Forbes D, Felmingham KL, Silove D, Steel Z, Nickerson A, McFarlane AC, Van Hooff M, Hadzi-Pavlovic D, The effect of post-traumatic stress disorder on refugees parenting and their children's mental health: a cohort study, *Lancet Public Health*, 2018; May;3(5):e249-e258. doi: 10.1016/S2468-2667(18)30051-3.
381. McFarlane AC, Van Hooff M, The challenges and benefits of conducting linked epidemiological and neurobiological health surveillance into the impacts of military deployment in Australia, *Australian & New Zealand Journal of Psychiatry*, 2018;52:107-109.
382. O'Donnell ML, Schaefer I, Varker T, Kartal D, Forbes D, Bryant RA, Silove D, Creamer M, McFarlane A, Malhi G, Felmingham K, Van Hooff M, Hadzi-Pavlovic D, Nickerson A, Steel Z, A systematic review of person-centered approaches to investigating patterns of trauma exposure, *Clinical Psychological Review*, 2017;57:208-225.
383. McFarlane AC, Treatment Resistance in Post-traumatic Stress Disorder (PTSD). In: Yong-Ku Kim, editor, *Treatment Resistance in Psychiatry*, Springer Nature, Singapore Pte Ltd, 2019.
384. Johnson AL, Dipnall JF, Dennekamp M, Williamson GJ, Gao CX, Carroll MTC, Dimitriadis C, Ikin JF, Johnston FH, McFarlane AC, Sim MR, Stub DA, Abramson MJ, Go Y, Fine particulate matter exposure and medication dispensing during and after a coal mine fire: A time series analysis from the Hazelwood health study, <http://doi.org/10.1016/j.envpol.2018.12.085>.
385. McFarlane AC, Adult trauma and Posttraumatic Stress Disorder – contemporary concepts, *Humanising Mental Health Care in Australia –*

- Introducing a Trauma-informed Approach, Edited by Richard Benjamin, Joan Haliburn and Serena King, ??, Chapter 7;??.
386. Olf M, MFarlane AC, Phenomenology of Posttraumatic Stress Disorder, The American Psychiatric Association Textbook of Anxiety, Trauma and OCD related Disorders, Edited by ??,??, Chapter??.

REPORTS

1. Clayer JR, Bookless-Pratz C, McFarlane AC. *The health and social impact of the Ash Wednesday Bushfires: A survey of the twelve months following the bushfires of February 1983*. Adelaide: Mental Health Research and Evaluation Centre, South Australian Health Commission, 1985.
2. McFarlane AC. Response to the Royal Commission in the *Use and Effects of Chemical Agents on Australian Personnel in Vietnam*, for the Royal Australian and New Zealand College of Psychiatrists, 1987.
3. McFarlane AC. *Response to the Public Enquiry into the Counselling and Auxiliary Services for Vietnam Veterans*, for the Royal Australian and New Zealand College of Psychiatrists, 1988.
4. McFarlane AC. National Health and Medical Research Council and Statement of the *Psychological Effects of Natural Disaster*, 1990.
5. McFarlane AC. *The Validity of the Al Riggae Research Project*, Report to the World Health Organisation, Geneva, 1993.
6. Clayer, JR, McFarlane, AC, Czechowicz, AS, Wright, G. *Mental Health in the Riverland: A report of the findings of the 1991 Prevalence of Mental Illness, Associated Disability and Needs in the Riverland study*. Adelaide: South Australian Health Commission, 1991.
7. McFarlane AC, Creamer M, Carboon I, Forbes A, McKenzie D, Sim M. *Separations from the Royal Australian Navy 1991-2001: Information from the Gulf War Veterans Health Study*. Australian Department of Defence, 2004.

Mental Health Prevalence and Wellbeing Study, Australian Defence Force

1. Searle, A. K., Tran, T., & McFarlane, A. C. (2013). *Improving the identification and prediction of mental disorder within ADF mental health screening: Results from the 2010 ADF Mental Health Prevalence and Wellbeing dataset*. Report for Joint Health Command, Department of Defence: Canberra.
2. Searle, A. K., Van Hooff, M., Davies, C., Baur, J., Lorimer, M., Fairweather-Schmidt, A. K., & McFarlane, A. C. (2013). *Prevalence of mental health symptoms and psychological outcomes in Australian Defence Force Romans: Results from the 2010 ADF Mental Health Prevalence and Wellbeing dataset*. Report for Joint Health Command, Department of Defence: Canberra.
3. Searle, A. K., Fairweather-Schmidt, A. K., Saccone, E., McFarlane, A. C., Van Hooff, M., Tran, T., Hedges, L., & Lorimer, M. (2013). *Detailed associations*

- between deployment and disorder in the Australian Defence Force: Results from the 2010 ADF Mental Health Prevalence and Wellbeing dataset.* Report for Joint Health Command, Department of Defence: Canberra.
4. Van Hooff, M., McFarlane, A. C., Lorimer, M., Saccone, E., Searle, A. K., & Fairweather-Schmidt, A. K. (2012). *The prevalence of lifetime trauma exposure in the Australian Defence Force: Results from the 2010 ADF Mental Health Prevalence and Wellbeing dataset.* Report for Joint Health Command, Department of Defence: Canberra.
 5. Searle, A. K., Baur, J., Van Hooff, M., Lorimer, M., & McFarlane, A. C. (2012). *Aspects of ADF members' personal relationships, and their associations with demographic and military factors, traumatic events, and psychological disorder: Results from the 2010 ADF Mental Health Prevalence and Wellbeing dataset.* Report for Joint Health Command, Department of Defence: Canberra.
 6. Van Hooff, M., Searle, A. K., Tran, T., & McFarlane, A. C. (2012). *An initial examination of lifetime ICD-10 disorder in temporal relation to commencement of ADF service and first deployment: Results from the 2010 ADF Mental Health Prevalence and Wellbeing dataset.* Report for Joint Health Command, Department of Defence: Canberra.
 7. Fairweather-Schmidt, A. K., Van Hooff, M., & McFarlane, A. (2012). *Suicidality in the Australian Defence Force: Results from the 2010 ADF Mental Health Prevalence and Wellbeing Dataset.* Report for Joint Health Command, Department of Defence: Canberra.
 8. Searle, A. K., Van Hooff, M., Lorimer, M. & McFarlane, A. C. (2012). *Psychological differences between LASER-Resilience study and ADF Mental Health Prevalence and Wellbeing Study (MHPWS) participants.* Report for Joint Health Command, Department of Defence: Canberra.
 9. Van Hooff, M., Hodson, S., Lorimer, M., & McFarlane, A. (2012). *Stigma and barriers to care in the ADF - a detailed analysis: Results from the 2010 ADF Mental Health Prevalence and Wellbeing Dataset.* Report for Joint Health Command, Department of Defence: Canberra.
 10. Van Hooff, M., Baur, J., Davies, C., & McFarlane, A. (2011). *Tobacco Use and Nicotine Dependence in the Australian Defence Force: Results from the 2010 ADF Mental Health Prevalence and Wellbeing Dataset.* Report for Joint Health Command, Department of Defence: Canberra.
 11. Davy C, Dobson A, Lawrence-Wood E, Lorimer M, Moores K, Lawrence A, Horsley K, Crockett A, McFarlane A (2012). *The Middle East Area of Operations (MEAO) Health Study: Prospective Study Summary Report.* University of Adelaide, Centre for Military and Veterans' Health, Adelaide, Australia.
 12. Van Hooff M, Lawrence-Wood E, Hodson S, Sadler N, Benassi H, Hansen C, Grace B, Avery J, Searle A, Iannos M, Abraham M, Baur J, McFarlane A, 2018, Mental Health Prevalence, Mental Health and Wellbeing Transition Study, the Department of Defence and the Department of Veterans' Affairs, Canberra.

13. Forbes D, Van Hooff M, Lawrence-Wood E, Sadler N, Hodson S, Benassi H, Hansen C, Avery J, Varker T, O'Donnell M, Phelps A, Frederickson J, Sharp M, Searle A, McFarlane A, 2018, Pathways to Care, Mental Health and Wellbeing Transition Study, the Department of Defence and the Department of Veterans' Affairs, Canberra.

Transition and Wellbeing Research Programme (TWRP)

1. *Mental Health Prevalence*
Van Hooff M, Lawrence-Wood E, Hodson S, Benassi H, Hansen C, Avery J, Searle A, McFarlane A, 2017, Mental Health Prevalence, Mental Health and Wellbeing Study, the Department of Veterans' Affairs, Canberra.
2. *Pathways to Care*
Forbes D, Van Hooff M, Lawrence-Wood E, Sadler N, Hodson S, Benassi H, Hansen Ca, Aver J, Varker T, O'Donnell M, Phelps A, Frederickson J, Sharp M, Searle A, McFarlane A, 2017, Pathways to Care, Mental Health and Wellbeing Study, the Department of Veterans' Affairs, Canberra.
3. *Physical Health Status*
Kelsall H, Sim M, Van Hooff M, Lawrence-Wood El, Benassi H, Sadler N, Hodson S, Hansen C, Avery J, Searle A, Ighani H, Iannos M, Abraham M, Baur J, Saccone E, McFarlane A, 2018, Physical Health Status Report, Mental Health and Wellbeing Transition Study, the Department of Veterans' Affairs, Canberra.
4. *Technology Use and Wellbeing*
Burns J, Van Hooff M, Lawrence-Wood E, Benassi H, Sadler N Hodson S, Hansen C, Avery J, Searle A, Iannos M, Abraham M, Baur J, McFarlane A, 2018, Technology Use and Wellbeing Report, Mental Health and Wellbeing Study, the Department of Defence and the Department of Veterans' Affairs, Canberra.
5. *Impact of Combat*
Technical Report
Lawrence-Wood E, McFarlane A, Sadler N, Hodson S, Benassi H, Brant R, Korgaoknar M, Rosenfeld J, Sim M, Kelsall J, Abraham M, Bair K, Howell S, Hansen C, Iannos M, Searle A, Van Hooff M, 2018, Impact of Combat Report, Impact of Combat Study, the Department of Veterans' Affairs, Canberra.
Technical Report, Chapter 7
Rosenfeld J, Kelsall H, Sim M, Bryant R, Korgaoknar M, Lawrence-Wood E, McFarlane A, Lawrence A, Hodson S, Sadler N, Benassi H, Abraham M, Baur J, Howell S, Hansen C, Iannos M, Searle A, Van Hooff M, 2018, Impact of Combat Report: Chapter 7, Detailed Examination of Head Injury and TBI, Impact of Combat Study, the Department of Veterans' Affairs, Canberra.
Technical Report, Chapter 8
Bryant R, Korgaoknar M, Rosenfeld J, Sim M, Kelsall H, Lawrence-Wood E, McFarlane A, Lawrence A, odson Sa, Sadler N, Benassi H, Abraham M, Baur J, Howell S, Hansen C, Iannos M, Searle A, Van Hooff M, 2018, Impact

- of Combat Report: Chapter 8, Pilot neuroimaging investigation of white matter integrity, Impact of Combat Study, the Department of Veterans' Affairs, Canberra.
6. *A Longitudinal Perspective*
Bryant R, Lawrence-Wood E, Baur J, McFarlane A, Hodson S, Sadler N, Benassi H, Howell S, Abraham M, Iannos M, Hansen C, Searle A, Van Hooff M, 2018, Mental Health Changes Over Time, A Longitudinal Perspective: Mental Health and Wellbeing Study, the Department of Veterans' Affairs, Canberra.
 7. *Reservist Paper*
Searle A, Van Hooff M, Lawrence-Wood E, Iannos M, Sadler N, Benassi H, Hodson S, McFarlane A, Military attitudes and belongingness, perceived support, and life stressors and the psychological distress of Australian Reservists, Mental Health and Wellbeing Study, the Department of Veterans' Affairs, Canberra. (proposed citation). ??
 8. *Psychosocial Paper*
Hansen C, McFarlane A, Iannos M, Sadler N, Benassi H, Lawrence-Wood E, Hodson S, Searle A, Van Hooff M, Psychosocial factors associated with psychological distress and functional difficulties in recently transitioned and current serving Regular Australian Defence Force members, Mental Health and Wellbeing Study, the Department of Veterans' Affairs, Canberra. (proposed citation). ??

Publications Submitted and/or Accepted (In Press)

1. Hoge C, McFarlane A, et al. *Head-to-head comparison DSM-5 vs DSM-IV symptom criteria*. Lancet Psychiatry.
2. Dabovich PA, Elliott JA & McFarlane AC, Culture, Medicine and Psychiatry: an international journal of comparative cross-cultural research, 2016.

ABSTRACTS

1. McFarlane A, Clark C. A disorder of selective attention in posttraumatic stress disorder. Biological Psychiatry. 1991; 29: 635-8.
2. Crotty M, McFarlane A, Brooks P, Bieri D, Hopper J, Taylor S. Adjustment over time – The importance of psychological factors in early rheumatoid arthritis. Arthritis and Rheumatism. 1992; 35: S178.
3. Crotty M, McFarlane A, Brooks P, Bieri D, Hopper J, Taylor S. Functional improvement in early rheumatoid-arthritis - A longitudinal study with frequent measures of the clinical course. Arthritis and Rheumatism. 1992; 35: S221.
4. McFarlane A, Crotty M, Brooks P, Bieri D, Hopper J, S T. A longitudinal study of disability in women with early rheumatoid arthritis - the importance of pain. Australian and New Zealand Journal of Medicine. 1993; 23(5): 536.

5. McFarlane A, Crotty M, Brooks PM, Bieri D, Hooper JL, Taylor S. Determinants of psychological status in early rheumatoid arthritis. *Australian and New Zealand Journal of Medicine*. 1993; 23(5): 536.
6. Galletly C, Clark C, McFarlane A, Weber D. The effect of clozapine on information processing in schizophrenia. *Biological Psychiatry*. 1997; 42S(1): 141S.
7. Clark C, Egan G, McFarlane A, Morris P, Weber D, Sonkilla C. A high resolution ERP and PET study of verbal working memory. *Brain Topography*. 1998; 11(1): 80-1.
8. Clark C, McFarlane A, Morris P, Egan G, Weber D, Sonkilla C, Marcina J, Tochon-Danguy H. Neurobiological evidence of everyday working memory dysfunction in PTSD using PET and high-density EEG. *Australian and New Zealand Journal of Psychiatry*. 2000; 34: A13.
9. Clark CR, Moores KA, Lewis A, Fitzgibbon SP, Orr R, Weber DL, Taylor DJ, Brown GC, Egan GF, Morris P, McFarlane AC, Puce A. Investigations of human working memory function using multimodal imaging. *International Journal of Psychophysiology*. 2000; 35(1): 3.
10. Ellen S, Morris P, Olver J, Reutens D, Norman T, Tochon-Danguy H, Constant E, Ignatiadis S, McFarlane A, Egan G, Burrows G. A positron emission tomography study of benzodiazepine receptors in posttraumatic stress disorder. *Australian and New Zealand Journal of Psychiatry*. 2000; 34: A21.
11. Galletly C, Clark C, McFarlane A, Weber D. The effects of treatment with clozapine on ERP indices of working memory in schizophrenia. *Australian and New Zealand Journal of Psychiatry*. 2000; 34: A25.
12. Galletly C, Clark C, McFarlane A, Weber D. ERP indices of working memory in schizophrenia. *Brain Topography*. 2000; 12(4): 307.
13. McFarlane A. Neuroimaging and memory in PTSD. *Australian and New Zealand Journal of Psychiatry*. 2000; 34: A43.
14. McFarlane A. The way trauma moulds the language of literature. *Australian and New Zealand Journal of Psychiatry*. 2000; 34: A43.
15. McFarlane A, Clark C, Moores K, Lewis A, Brown G, Puce A, Egan G, Taylor D. Linking sensory and motor representations in working memory plan formation. *NeuroImage*. 2000; 11(5): S77.
16. McFarlane A, Puce A, Clark C, Orr R, Weber D, Moores K, Lewis A, Pomeroy D, Fitzgibbon S, Taylor D, Brown G, Egan G. Differentiating working memory processes using multimodal imaging. *Brain Topography*. 2000; 12(4): 304.
17. Clark C, McFarlane A, Morris P, Weber D, Sonkilla C, Marcina J, Tochon-Danguy H, Egan G. Cortical network dysfunction in posttraumatic stress disorder. *NeuroImage*. 2001; 13(6): S1038.
18. McFarlane A, Moores K, Clark D, Grown G, Taylor J, Lewis A, Puce A. Comparing methods for cortically constrained source localisation. *NeuroImage*. 2001; 13(6): S206.
19. McFarlane AC, Moores KA, Clark CR, Brown G, Taylor J, Lewis A, Puce A. Distinguishing executive operations from content representation during working memory function. *Proc Intl Soc Magn Res Med*. 2001; 9: 1283.

20. Moores KA, Clark CR, Brown GC, Taylor DJ, Puce A, Greenblatt RE, A.C. M. Comparing methods for cortically constrained source localisation. *NeuroImage*. 2001; 13(6): S206.
21. Clark C, McFarlane A, Morris P, Weber D, Sonkkilla C, Marcina J, Tochon-Danguy H, Egan G. Investigating the generators of the scalp P300 using cortically constrained source localisation. *Neuroimage*. 2002; 15:S1038.
22. Weber D, Clark C, McFarlane A, Morris P, Egan G. Selective attention and stimulus evaluation in posttraumatic stress disorder. *Neuroimage*. 2003; 19(2): S638.
23. Weber D, Clark C, McFarlane A, Morris P, Egan G. Abnormal stimulus evaluation in Posttraumatic Stress Disorder (PTSD). *Aust Journal of Psychology*. 2003; 55: 29-30.
24. Galletly C, McFarlane AC, Clark CR. Differentiating cortical patterns of cognitive dysfunction in PTSD and schizophrenia. *Biological Psychiatry*. 2004; 1: 68.
25. McFarlane AC. Terrorism and disaster in the 21st century. *The Lancet*. 2004; 9405: 336.
26. Weber DL, Clark CR, McFarlane AC, Morris P, Egan GF. Event-related potentials indicate deficient working memory in posttraumatic stress disorder. *Clinical EEG and Neuroscience*. 2004; 35(4): 238-9.

BOOKS PUBLISHED

1. van der Kolk BA, McFarlane AC, Weisaeth L, editors. *Traumatic stress: The effects of overwhelming experience on mind, body, and society*. New York: Guilford Press; 1996.
2. Yehuda R, McFarlane AC, editors. *Psychobiology of posttraumatic stress disorder*. New York: New York Academy of Sciences; 1997.
3. Shalev AY, Yehuda R, McFarlane AC, editors. *International handbook of human response to trauma*. New York: Kluwer Academic/Plenum Publishers; 2000.

CONFERENCE PROCEEDINGS

(Abstracts not Included)

1. McFarlane, AC. Ash Wednesday - How many victims were there on Ash Wednesday II? *The Volunteer*, 1983, 17: 37.
2. McFarlane, AC. Compensation neurosis - A source of confusion for clinicians. Selected papers published of the 3rd Annual Scientific Meeting of Australian College of Rehabilitation Medicine in the Conference Proceedings, 1984.
3. McFarlane, AC. The psychological effects of bushfires for firefighters. *Emergency Response*, 1984, 1:9 34-35.
4. McFarlane, AC. Ash Wednesday and CFS firefighters. *The Volunteer*, 1984, 20: 8-9.

5. McFarlane, AC. Firefighters and Ash Wednesday. Turn Out, Autumn 1984, 15.
6. McFarlane, AC. Children and Bushfires. The Volunteer Annual, 1984, 22: 14.
7. McFarlane, AC. Psychiatric disorders in primary school children following a natural disaster. Proceedings of research workshop on Human Behaviour in Disaster in Australia. Australian Counter Disaster College, Victoria, 25-27 April 1984.
8. Wallace, M, Cook, P, McFarlane, AC. The effects of bushfire disasters on firefighters. Proceedings of research workshop on Human Behaviour in Disaster in Australia. Australian Counter Disaster College, Victoria, 25-27 April 1984.
9. McFarlane, AC, Frost, M. Assessment of the bushfire relief unit. Proceedings of research workshop on Human Behaviour in Disaster in Australia. Australian Counter Disaster College, Victoria, 25-27 April 1984.
10. McFarlane, AC, Croft, G. Posttraumatic stress disorder in firefighters. Proceedings of research workshop on Human Behaviour in Disaster in Australia. Australian Counter Disaster College, Victoria, 25-27 April 1984.
11. McFarlane, AC. Physician patient communication. Conference proceedings broadsheet, 1986. Pfizer Pharmaceuticals, Sydney.
12. McFarlane, AC. Long-term follow-up of bushfire victims: Crisis intervention and the long-term effects of a natural disaster. Proceedings of First National Conference of Crisis Intervention, 1986.
13. McFarlane, AC. The longitudinal effects of a disaster on emergency service personnel. Proceedings of conference Dealing with Stress and Trauma in Emergency Services, Melbourne, 1988.
14. McFarlane, AC. Posttraumatic stress disorder missed opportunities and new horizons.
15. McFarlane AC, Clark CR. A disorder of selective attention in posttraumatic stress disorder. In: Racagni G, Brunello N, Fukuda T, editors. Proceedings of the Fifth World Congress of Biological Psychiatry. Amsterdam: Elsevier; 1991. p. 635-8.
16. McFarlane, AC. Traumatic Stress and Depression. Directions in Depression, Forum 2, NSW: Excerpta Medica Communications, 1995.
17. Brooks P, McFarlane AC, Newman S, Rasker JJ. Psychosocial Measures Workshop Report, Omeract 3, April 1996.
18. McFarlane AC. Post-traumatic stress disorder and schizophrenia. Directions in Psychiatry Forum 4. NSW: Excerpta Medica Communications; 1997. p. 13-15.
19. McFarlane AC. The biology of PTSD / Psychological stress response (positive and negative aspects) and the relationship to PTSD. In: Raphael B, Morris P, Bordujenko A, editors. Proceedings of the RMA Consensus Conference on Stress and Challenge, Health and Disease. Brisbane: Repatriation Medical Authority; 1999. p. 185-96.
20. McFarlane AC. The traumatic effects of crime on front line service providers. In: O'Connell M, editor. Victims of Crime: working together to improve services: conference proceedings: South Australian Institute of Justice Studies; 2001. p. 84-99.

21. McFarlane AC. Treatment adherence: The central role of traumatic attachment. Directions in Psychiatry Forum. Tasmania: Orielton Partnership; 2002. p. 23-5.

INVITED CONFERENCE PAPERS AND LECTURES

1. *"As They See Us"*. Address to the Annual Meeting of the Australasian College of Dermatologists. Member of a Panel of speakers including a Plastic Surgeon, a Physician, a Pharmacist and a Nurse, May 1976.
2. *"Psychological Aspects of the Disease Course in Rheumatoid Arthritis"*. Annual meeting of the South Australian Arthritis Association, 1982.
3. *"A Pocket Guide to Psychiatry for Dentists"*. Address to South Australian Branch Meeting Australian Dental Association, Adelaide, December 1982.
4. *"Psychological Determinants of Disability in Rheumatoid Arthritis"*. Hillcrest Hospital Grand Round, 1982.
5. *"Psychological Management of Disasters"*. Address to Lower Murray General Practitioners Association, 20 April 1983.
6. Invited member of a panel for seminar *"Prevention and Management of Child Abuse"*. Organised by the South Australian Health Commission, Mt Gambier, 23-24 September 1983.
7. *"The Psychological Impact of the Ash Wednesday Bushfires"*. Glenside Hospital Grand Round, 1983.
8. *"Psychological Reactions to Trauma"*. Hillcrest Hospital General Practitioners' Refreshers week, June 1983.
9. Guest speaker at South Australian Mental Health Association Annual General Meeting, 1983.
10. *"Natural Disasters: Lessons for Nuclear War"*. Address to Meeting of South Australian Branch of Doctors for the Prevention of Nuclear War, September 1983.
11. *"Lessons from 1983 Bushfires"*. Address to Public Seminar arranged by The University of Adelaide, 1984.
12. *"Grief in the Setting of a Natural Disaster"*. Address to the South Australian Loss and Grief Association. Adelaide, 17 June 1985.
13. *"Physician Patient Communication: Understanding the Psychology of the Arthritic Patient"*. Sydney, 13 May 1986.
14. *"The Individual and Disaster: Converting Disaster Scholarship into Effective Disaster Management"*. Keynote speaker at Australian Counter Disaster College, Mt Macedon, 8 August 1986.
15. *"The Treatment of Posttraumatic Stress Disorder: The issues and uncertainties"*. Presented at Symposium on the Treatment of Posttraumatic Stress Disorder. Bardon Professional Development Centre, Brisbane, Queensland, 29 October 1986.
16. *"The Long Term Psychological Morbidity of Natural Disasters: What is the Role of Crisis Intervention?"* First National Conference of Crisis Intervention, Adelaide, 26 November 1986.
17. *"Posttraumatic Stress Disorder in General Medical Practice"*. Presented to

- Physicians' Grand Round, Royal North Shore Hospital, Sydney, 24 March 1987.
18. *"Posttraumatic Stress Disorder and the Effects of Ash Wednesday Bushfires"*. Presented to the Physicians' Grand Round, The Queen Elizabeth Hospital, Adelaide, 24 June 1987.
 19. *"Posttraumatic Stress Disorder and its Relationship to Theories of Psychopathology"*. Presented to the Annual General Meeting of the South Australian Branch of the R.A.N.Z.C.P., Adelaide, March 1988.
 20. *"The Long Term Effects of Trauma: Posttraumatic Stress Disorder"*. Presented to the Vietnam Veterans Counselling Service Information Package Launching, Adelaide, March 1988.
 21. *"Unease or Disease"*. Presented to the Opening Plenary Session of the World Psychiatric Association Regional Meeting, Sydney, May 1988.
 22. *"The Longitudinal Effects of Australian Forest Fires"*. Presented to the Disaster and Society Meeting of the Social and Cultural Section of R.A.N.Z.C.P., Cairns, May 1988.
 23. *"The Longitudinal Effects of Disaster on Emergency Service Workers: The Role of Debriefing"*. Presented to Crisis Service Training Programme, Adelaide, May 1988.
 24. *"Stress and Depression: The Role of the General Practitioner"*. Presented to South Australian Post-Graduate Medical Education Depression Update, Adelaide, August 1988.
 25. *"The Longitudinal Effects of Ash Wednesday Disaster on Firefighters"*. Presented to "Dealing with Stress and Trauma in Emergency Services", Melbourne, August 1988.
 26. *"The Psychological Effects of Disaster"*. Presented to Disaster Conference, Adelaide, 31 August - 1 September 1988.
 27. *"Traumatic Stress and Emergency Service Personnel"*. Presented to Australian Counter Disaster College External Training Course, Adelaide, October 1988.
 28. *"Life Events and Depression: Aspects of Management"*. 11-12 August 1988, Continuing Education Program for South-East General Practitioners' Association.
 29. *"Vulnerability and Invulnerability"*. CIBA-Geigy Symposium, Adelaide, 3 December 1988.
 30. *"The Systematic Assessment of Psychosocial Factors in Chronic Illness"*. 25th Annual Royal Australian and New Zealand College of Psychiatrists' Congress, Hawaii, 14-19 May 1989.
 31. *"Psychiatric Morbidity of Natural Disasters"*. Beijing Institute of Mental Health, Beijing, 24 May 1989.
 32. *"Methodological Issues in Disaster Research"*. Beijing Institute of Mental Health, Beijing, 26 May 1989.
 33. *"The Diagnosis of Clinical Management of Anorexia Nervosa and Bulimia"*. Beijing Institute of Mental Health, Beijing, 31 May 1989.
 34. *"Posttraumatic Syndromes in General Practice"*. Barossa Valley General Practitioners' Association, South Australia, 2 June 1989.
 35. *"Traumatic Stress and Torture"*. South Australian Refugee Week Committee, Seminar on Torture and Trauma, Adelaide, 21 June 1989.
 36. *"Clinical Research and Treatment Issues in Traumatic Stress Disorders"*.

- A Mental Health Update Conference and the Second Australian Conference on Anxiety Disorders, Brisbane, 28-29 July 1989.
37. *"The Effects of Traumatic Stress"*. Eastern Suburbs Medical Practitioners' Association. Adelaide, 20 September 1989.
 38. *"Occupational Posttraumatic Stress Disorder: Posttraumatic Stress Disorder in the Workplace"*. Adelaide, 26 February 1990.
 39. *"Psychological Aspects of Pain in Rheumatoid Arthritis"*. International Pain Society Meeting, Adelaide, 4 April 1990.
 40. *"Psychological Issues in Disaster Management"*. Brisbane, 27 April 1990.
 41. *"An Approach to Rehabilitation Psychiatry In-Service Training Program"*, Hillcrest Hospital, 26 July 1990.
 42. *"The Reclassification of Post Traumatic Stress Disorder in DSM-IV"*. South Australian Chapter for the Australian Society for the Study of Traumatic Stress, August 1990.
 43. *"Four Consequences of Disasters for Victims; Organizational and Administrative Issues"*. Lecture to Mixed Course, South Australian Institute of Technology, 22 August 1990.
 44. *"Development of Skills in Post Disaster Debriefing"*. SGIC Rehabilitation Team, Adelaide, 24 August 1990.
 45. *"Posttraumatic Stress Disorder in the Rehabilitation Setting"*. Training Seminar for SGIC Rehabilitation Unit, Adelaide, December 1990.
 46. *"Post Traumatic Stress Disorder: Problems of Diagnosis in a Medico-Legal Setting"*. Addressed to the South Australian Association for Psychiatry, Psychology and The Law, 28 August 1990.
 47. *"Post Traumatic Stress Disorder and its Relationship to Depression"*. Royal Adelaide Hospital, Department of Psychiatry, 6 September 1990.
 48. *"Post Traumatic Stress Disorder and Natural Disasters"*. South Coast Medical Association Annual Update Meeting, Prince Henry Hospital, 13 September 1990.
 49. *"A Rehabilitation Approach to Schizophrenia"*. Schizophrenia Fellowship, Kent Town, Adelaide, 17 September 1990.
 50. *"Current Issues and the Treatment and Diagnosis of Post Traumatic Stress Disorder"*. South Australian Branch of the Royal Australian College of Psychiatry Continuing Education Meeting, 20 September 1990.
 51. *"Multiple Diagnoses in Posttraumatic Stress Disorder in the Victims of a Natural Disaster"*. Sixth Annual Meeting of the Society for Traumatic Stress Studies, New Orleans, 28-31 October 1990.
 52. *"Stress and Psychiatric Illness"*. Seminar sponsored by WorkCover Corporation, Adelaide, 29 November 1990.
 53. Inaugural Lecture: *"The Isolation of Psychosis"*. University of Adelaide, 30 November 1990.
 54. *"Compensation and Psychiatric Illness in the Workplace"*. Seminar for exempt employers sponsored by Baker O'Loughlin, Adelaide, 11 December 1990.
 55. *"Schizophrenia and Nijinsky"*. Presentation to Clinical Meeting at Hillcrest Hospital, Gilles Plains, 6 March 1991.
 56. *"Traumatic Reactions in Adults: A Longitudinal Perspective"*. International Conference on Posttraumatic Stress Disorder, The Institute of Psychiatry, London, 23 April 1991.

57. *"Posttraumatic Stress Disorder: Comprehensive Assessment and Treatment Planning"*. Discussant at Session of 144th Annual Meeting of the American Psychiatric Association, New Orleans, 11-16 May 1991.
58. *"Stress Induced Physical Illness: Medico Legal Aspects"*. 27th Annual Congress of the Royal Australian and New Zealand College of Psychiatrists, Adelaide, 19-23 May 1991.
59. *"Assessment and Decision Making in Community Treatment Teams"*. 27th Annual Congress of the Royal Australian and New Zealand College of Psychiatrists, Adelaide, 19-23 May 1991.
60. *"A Disorder of Selective Attention in Posttraumatic Stress Disorder"*. Fifth World Congress of Biological Psychiatry, Florence, Italy, 9-14 June 1991.
61. *"Posttraumatic Stress Disorder in a General Hospital"*. Physicians Grand Round, Royal Adelaide Hospital, 25 June 1991.
62. *"Update - Issues in PTSD"*. Presentation to Clinical Meeting at Hillcrest Hospital, Gilles Plains, 21 August 1991.
63. *"Prevention following a Natural Disaster"*. Northern Child Adolescent and Family Mental Health Service. Adelaide Children's Hospital, 19 September 1991.
64. *"Work Related Stress: Peer Review Issues"*. Seminar organized by WorkCover Corporation, Adelaide, 5 September 1991.
65. Opening Address - Mental Health Week, Adelaide, 21 October 1991.
66. *"Disability and Compensation Issues in Posttraumatic Stress Disorder"*. In-Service Training for Commonwealth Medical Officers, Adelaide, 4 November 1991.
67. *"Trauma and Healing"* Training Seminar for STTARS, Hillcrest Hospital, 3 April 1992.
68. *"Psychiatric Assessment and Disability in Workers Compensation"*. SAPMEA Symposium. AMA House North Adelaide, 18 March 1992.
69. *"Rehabilitation Issues for the Chronically Mentally Ill"*. Invited Lecturer, Lakeside Hospital Ballarat, 20 - 21 May 1992.
70. *"Current Issues in General Practice Psychiatry"*. Hills Medical Association 4 June 1992.
71. *"Impact of Trauma on Emergency Service Workers"*. First World congress of ISTSS, 22 - 24 June 1992.
72. *"The Aetiology of PTSD, Research and Methodological issues"*. First World Congress of ISTSS, 22-24 June 1992.
73. *"Psychological Impact of Armed Holdups"*. Satellite Symposium. First World Congress of ISTSS, 22-24 June 1992.
74. *"Depression in General Practice"*. World Congress of ISTSS, 26 August 1992.
75. *"Current Issues in PTSD"*. South Australian Chapter of the ASTSS, 11 September 1992.
76. *"Current Issues in Psychiatric Rehabilitation"*. Seminar at Larundel Hospital Victoria, September 1992.
77. *"New antidepressants in General Practice"*. Salisbury and Elizabeth Medical Association, Adelaide, 10 November 1992.
78. *"Debriefing and Psychological Trauma from Motor Vehicle Accidents"*. Royal Australian College of Surgeon Seminar, *"Road Trauma - The First Twelve Hours"*, Adelaide, 21 November 1992.

79. *"Post Traumatic Stress Disorder: Missed Opportunities and New Horizons"*. Lyngard Symposium Hunter Institute of Psychiatry, Newcastle, 27 November 1992.
80. *"Avoidance and Intrusion in PTSD - Methodological problems"*. ASPR Adelaide, 3 December 1992.
80. *"Posttraumatic Psychopathology and Psychiatric Illness"*. Ciba Geigy Symposium, Adelaide, 5 December 1992.
81. *"Post Traumatic Stress Disorder and Victims of Crime"*. Annual General Meeting of Victims of Crime Association, Adelaide, 7 December 1992.
82. *"Conundrums of Posttraumatic Stress Disorders"*. Colloquium, Department of Psychiatry, University of Queensland, 5 March 1993.
83. *"Advances in Treatment and Diagnosis in PTSD"*. Belmont Hospital Medical Foundation, Brisbane, 5 March 1993.
84. *"Current Issues in Psychiatric Rehabilitation"*. Belmont Hospital Medical Foundation, Seminar, Brisbane, 6 March 1993.
85. *"The forgotten lessons of trauma"*. Combined Hillcrest-Glenside Meeting, Adelaide, 24 March 1993.
86. *"Impairment and Disability in Psychiatry"*. Victorian RANZCP Brauer Scientific Meeting, Melbourne, 30 March 1993.
87. *"Difficulties in Getting there"*. Seminar to combined Geigy Meeting, Adelaide, 2 April 1993.
88. *"The Effects of Litigation on Litigants"*. The Law Society of South Australian, Annual Conference, Adelaide, August 1993.
89. *"The Trauma of Disasters - The Issue of Prevention"*. Dr. Graham Dick Memorial Lecture, Hobart, October 1993.
90. RANZCP, Forensic Section, Brisbane, December, 1993.
91. The Australian National University National Health & Medical Research Council, Social Psychiatry Research Unit, Invited Participant Disability Working Group, *"Workshop on Advances in the Measurement of Disability"*, Canberra, 21-22 February 1994.
92. *"Assessment of Post Traumatic Stress Syndromes"*, Australian Faculty of Rehabilitation Medicine, 2nd Annual Scientific Meeting, March, 1994, Adelaide.
93. Workshop (Invited Chairperson) Consumer Outcomes in Mental Health, Queensland Department of Health, Brisbane, 20th April, 1994.
94. Presentation for the Psychological Trauma course, *"The Longitudinal Course of PTSD"*, Harvard University, 10-11 June, 1994.
95. Grand Round, Massachusetts General Hospital, Department of Psychiatry, *Updates of the treatment of post traumatic stress disorder*, June, 1994.
97. *"Stress and Disaster"*, NATO Advanced Research Workshop, Stress and Communities, Bonas France, 14-18th June, 1994.
98. *"Whiplash - Psyche or Soma"*, New Concepts in "Whiplash" Symposium
99. *Manipulative Physiotherapists Association of Australia, July, 1994.* *"Attitudes to Victims: Issues for Medicine, the Law and Society"*
100. *Ongoing Controversies*, Post Traumatic Stress Disorder and the Legal System, Key-Note Address: Australian and New Zealand Association of Psychiatry, Psychology and Law, Lorne, September, 1994.
101. *"Longitudinal Course of PTSD: Issues for Treatment"*, ASTSS Scientific

- Meeting, Melbourne, September, 1994.*
102. International Society for Traumatic Stress Studies, "Trauma, Memory and Dissociation", *"Relationship between Arousal, Dissociation and Memory in Acute Trauma"*, Chicago 7th November 1994.
 103. Continuing Medical Education Program, University of Oslo, *"Nature of Post Traumatic Reactions"*, *"Treatment of Post Traumatic Stress Disorder"*, *"Child and Adolescent Presentations of Traumatic Stress"*. 7th to 9th November, 1994.
 104. South Australian Mental Health Service '94, *Issues and Dilemmas in Resource Allocation*, Adelaide, November, 1994.
 105. *"The Effects of Trauma: Issues for Medicine and Psychiatry"*, Kuwait University, Faculty of Medicine, 30th November to 11th December, 1994.
 106. *"The relevance of psychological trauma in general psychiatric settings"*. Kuwait Psychiatric Hospital, 30th November to 11th December, 1994.
 107. *"The Long Term Effects of Trauma"*, American College of Neuropsychopharmacology, 33rd Annual Meeting, Puerto Rico, 12-16th December, 1994.
 108. Invited Discussant, Royal Australian & New Zealand College of Psychiatrists, Continuing Medical Education Seminar, *"Contemporary Issues in Forensic Psychiatry" - A Clinical Service for Victims of Trauma: Old Wine in New Bottles"*, Adelaide, 12th January 1995
 109. 5TH Australasian Psychophysiology Conference. *Even-related potential indices of attention and working memory in posttraumatic stress disorder*. Australia. December 8-10, 1995.
 109. *Issues in Research about Post Traumatic Stress Disorder"*, ASTSS/ACISA Stress and Trauma Conference, Hobart, 5-8th March, 1995.
 110. Department of Veterans Affairs, Management of PTSD Workshop, *"The Role of Psychopharmacology in the Eclectic Management of PTSD"* Hobart, 9th March, 1995.
 111. Department for Veterans Affairs, Satellite Broadcast, National Centre for War Related Post Traumatic Stress Disorder, 21st March, 1995, Sydney.
 112. Moving in on Pain Conference *"A Multidisciplinary Analysis of a Chronic Pain Patient"* The Australian Physiotherapy Research Foundation, 20th April, 1994, Adelaide.
 113. The Royal Australian & New Zealand College of Psychiatrists, Scientific and Education Sub Committee *"The Psychiatry of Road Trauma Victims"* 24th April, 1995, Melbourne.
 114. The Royal Australian & New Zealand College of Psychiatrists, Forensic In-service Educational Meeting, *Victims - Post Traumatic Stress Disorder"*, 24th April, 1995, Melbourne.
 115. Fourth European Conference of Traumatic Stress, Plenary Symposium, *"Nosography of Psychotraumatic Responses"*, Paris, 7-11th May, 1995.
 116. Smith Kline Beecham Seminar, *"Psychiatry for Psychiatrists"*, Clare, 3-4/6/95
 117. 2nd International Conference on New Directions in Affective Disorders, *"Abnormal Processing of Neutral Stimuli in Post Traumatic Stress Disorder: Implications for Theory and Treatment"*, Jerusalem, 3-8th September 1995.
 118. 4th Annual Conference Australian Association of Trauma & Dissociation

- Inc., Key-note speaker, *"Post traumatic stress disorder and Dissociation: Acute and Chronic Adaptations"*, Melbourne, 15-17th September 1995.
119. 56th Edward Stirling Memorial Lecture, *"Understanding the Effects of Psychological Trauma: The Costs and Benefits to Medicine"*, University of Adelaide, 20/9/95.
 120. South Australian ASA/ANZCA, Continuing Medical Education Committee Meeting, *"Trauma: The Anaesthetists Desire to Alter Awareness"*, Adelaide, 23rd September 1995.
 121. Eli Lilly - Symposium *Post Traumatic Stress Disorders in Australian Vietnam Veterans* - Perth, 29/9/95.
 122. GROW, South Australia's Mental Health Week Seminar on Sexual Abuse and Mental Health, *"Sexual Abuse and Traumatic Stress as a Cause of Mental Illness"*, Adelaide, 16th October 1995.
 123. National Conference on Trauma Rehabilitation, Innovations in Trauma Rehabilitation Conference, Bethesda Hospital, *"The Need for Eclectic Treatment for PTSD"*, Melbourne, 12-14th November 1995.
 124. The Royal Australian and New Zealand College of Psychiatrists, 21st Annual Conference of the Socio Cultural Section, *"The Ambivalence to the Personal Testimony of Victims - A Critical Issue for Psychiatry"*, Victor Harbor, 19-23rd November 1995.
 125. "Psychosocial Measures in Musculoskeletal Trials - Impact on Disability", OMERACT 3, Cairns, 16-19th April 1996.
 126. *"Trauma: The Cross Roads of Psychiatry: What Direction in the Future"* 2nd World Conference of the ISTSS Jerusalem 9-14 June, 1996
 127. *"A Conceptual problem of the Relationship Between Symptoms and Disability in Post Traumatic Stress Disorder"*. 2nd World Conference of the ISTSS, Jerusalem, 9-14 June, 1996.
 128. *"Coping and Adjustment Following Motor Vehicle Accidents"*. 2nd World Conference of the ISTSS, Jerusalem, 9-14 June, 1996.
 129. *On the Cutting Edge of Trauma*, Melbourne, 6th August, 1996
 130. *"Interaction of Cognitive-Behavioural Therapies and Psychopharmacology"* On the Cutting Edge of Trauma, Traumatology Forum, Melbourne, 7th August, 1996
 131. *"Traumatic Stress Reactions: Psychology or Biology?"*, On the Cutting Edge of Trauma, Traumatology Forum, Melbourne, 7th August, 1996
 132. Symposium: *"Does Trauma Cause PTSD?"* International Society for Traumatic Stress Studies 12th Annual Meeting, San Francisco, November, 1996.
 133. Symposium: *"Is Debriefing A Good Practice for Individuals and Groups Exposed to Traumatic Stress?"* International Society for Traumatic Stress Studies 12th Annual Meeting, San Francisco, November, 1996.
 134. Symposium: *"Working Memory in PTSD: an ERP Perspective"*. International Society for Traumatic Stress Studies, San Francisco, November, 1996.
 135. Symposium: *"The Longitudinal Course of PTSD: Chronic Effects and Treatment of Choice"*. International Society for Traumatic Stress Studies, San Francisco, November, 1996.
 136. National Mental Health Conference. Mental Health for All: What's the Vision - *"Developments in rehabilitation psychiatry"*, Newcastle, 13-15th

- February, 1997.
137. Harvard Medical School: Psychological Trauma Conference. *Establishing Mindfulness to Overcome the Tyranny of the Past and What are we Treating and When: A longitudinal Perspective on the Treatment of Trauma*. Boston, 21-22 March, 1997
 138. RANZCP Conference. *PTSD Research in Australia*. Sydney, 6/5/97
 139. Australasian Society for Traumatic Stress Studies *Theories of PTSD*. Sydney, 9-10th May, 1997
 140. Fifth European Conference on Traumatic Stress. *Emerging Neurobiology of PTSD and its Relevance to Aetiology and Treatment*, 29/6/97 to 3/7/97 Maastricht, The Netherlands.
 141. Pt. Arthur Conference. Hobart, 2-3/8/97
 142. 33rd Anniversary of Winstone Noble Unit. *"The Aetiology of Post Traumatic Stress Disorder as a Longitudinal Process", "The Challenges of Treatment" and "The Boundaries of Post Traumatic Syndromes"*. Brisbane 4-7/8/97.
 143. Australian Defence Force Stress Workshop. *History of PTSD, Nature of Trauma, Diagnosis of traumatic Stress Syndromes, Course and prognosis of ASD and PTSD*. 11-12/8/97, Melbourne.
 144. Galletly CA, Clark Cr, McFarlane AC, Weber DL. *The effect of clozapine on information processing in schizophrenia*. 6th World Congress of Biological Psychiatry, Nice, France. June 22-27, 1997.
 145. Functional Brain Mapping Symposium. *PET-ERP correlational studies of cognitive deficits in PTSD Patients*. Newcastle, February, 1997.
 146. 7th Australasian Psychophysiology Conference, *High resolution event-related potential indices of working memory in posttraumatic stress disorder*. Melbourne, 1997.
 147. International Society for Traumatic Stress Studies Conference, *Information processing of neutral stimuli in PTSD*. Montreal. November 1997.
 144. 14th World Congress on Psychosomatic Medicine. *"Somatisation in PTSD and information processing perspective"*. Cairns, 31/8-5/9/97.
 145. Australian Association of Trauma & Dissociation 6th Annual Conference: Current Developments in Trauma and Dissociation. *"A Longitudinal Model of the Neurobiology of Traumatic Reactions" and "The Role of Narrative in the Treatment of Trauma"*. Brisbane, 12-14/9/97.
 146. 12th Tokyo Institute of Psychiatry International Symposium. *"The nature and Longitudinal Course of PTSD"*. Tokyo, 6-7/10/97.
 147. Disaster Victim Assistance Program. *"The Range of Long Term Outcomes of Natural Disasters"*. Kobe, 8-10/10/97.
 148. International Society for Traumatic Stress Studies 13th Annual Meeting. *"Does Trauma Damage the Brain? How to Evaluate Neuronatomical Findings in PTSD, Information Processing of Neutral Stimuli" and "Traumatic Adaptation: Dissociation as a Consequence of Structure and Time"*. Montreal, 6-10/11/97.
 149. Stress Workshop *"Overview of PTSD"*. Modena, Italy 12/11/97.
 150. Repatriation Medical Authority - 1998 Consensus Conference. *"Stress and Challenge - Health and Disease". "The biology of PTSD/Psychological stress response (positive and negative aspects) and the relationship to*

- PTSD" Brisbane 9-11th February, 1998
151. Opioids & Chronic Pain. Pain and the Poppy. *The psychobiology of posttraumatic stress disorder*. Hobart, Tasmania. 29/3/98.
 152. Contemporary Clinical Challenges in Psychiatry. *Where does the usefulness of the trauma model start and stop?*. Sydney, 3-5/4/98.
 153. 2nd Dutch Conference on Psychology and Health. Keynote address: *A neurobiological perspective of the Longitudinal course of post traumatic psychopathology*. The Netherlands 26/5/98.
 154. Kuwait University. *Physical Health Consequences of PTSD*. Kuwait. 2/6/98.
 155. Functional Brain Mapping symposium, *Verbal working memory in PTSD: a combined PET and high resolution ERP study*. Melbourne, 1998.
 156. Presented at Australian Society for Psychiatric Research "*Disturbed selective attention and posttraumatic stress disorder*", Adelaide, 2 December 1988.
 157. 5th World congress of biological Psychiatry. Florence, *A disorder of selective attention in posttraumatic stress disorder*. Italy. June 9-14, 1991.
 155. Comorbidity Across the Addictions. *Epidemiological Evidence about the Relationship Between PTSD and Alcohol Abuse: The Nature of the Association*. Newcastle on Tyne, England, 25-27 September, 1998.
 156. Second World Congress on Stress. *Long Term Treatment of Post Traumatic Stress Disorder*. Melbourne, 26th October, 1998
 158. XIV Annual Meeting ISTSS. *The Impact of Trauma on Therapeutic Attachment*" Washington DC, 20-23 November, 1998.
 159. Human Brain Mapping, *Updating working memory for words: a PET activation study*. Montreal, 1998.
 158. SASTSS: Traumatic Stress in South Africa - Working Towards Solutions, *Longitudinal Model of the Neurobiology of Post Traumatic stress Disorder*, Johannesburg, 27-29 January, 1999.
 159. The Costs of Violence Seminar. *Psychological Trauma: The Challenge for a Rational Response from Administrators*. Adelaide, 12/2/99
 160. Southern Division of General Practice. *Post Traumatic Stress Disorder Seminar*. Adelaide, 24th February, 1999.
 161. RANZCP Special Interest Group on Psychological Trauma, 27-28/2/99, Sydney.
 162. 10th World Congress of the International Society for Brain Electromagnetic Topography, Adelaide, Australia, October 9-13 1999 "*Differentiating working memory processes using multimodal imaging*".
 163. U.K. Master Class Series, *Longitudinal Perspectives on Post Traumatic Stress Disorder: Implications for Treatment and Theory*, 22/4/99, London.
 163. International Consensus Group on Depression and Anxiety, 28-30/4/99, Italy.
 164. Keynote Address - 6th European Conference on Traumatic Stress - 4-7th June, 1999, Istanbul, Turkey.
 165. PTSD Workshop - Brisbane 14/9/99
 166. PTSD Symposium - Copenhagen - 16-18/9/99
 167. APLA Conference - "*The Nature of the Costly Connection Between*

- Traumatic Stress and Psychiatric Injury*" 22/10/99, Sydney
168. ISTSS Annual General Meeting, 14/11/99-17/11/99. Florida, USA.
 169. International Symposium on Disaster Mental Health, Keynote Address, *"Long Term Lessons from Disasters: Maintaining a Focus on Current and Future Trauma"*, 3-5/2/00, Kobe, Japan
 170. Third World Conference for ISTSS: Long Term Outcomes of Trauma in Individuals and Society. Keynote Address: *"Framing Scientific Perspectives of Trauma"*. 16-19 March, 2000, Melbourne, Victoria.
 171. Third World Conference for ISTSS: Long Term Outcomes of Trauma in Individuals and Society. Keynote Address: *"The Historical Views of the Longitudinal Course of PTSD"*. 16-19 March, 2000, Melbourne, Victoria.
 172. The Royal Australian & New Zealand College of Psychiatrist Annual Congress *"Psychobiology, Kindling and Allostasis"* Hyatt Hotel, Adelaide, South Australia. 26-29 April 2000.
 173. XXIInd Collegium Internationale Neuro-Psychopharmacologicum *"The Difference Between the Normal Response to Stress and PTSD: A Neuroendocrinological Perspective"* 9-13 July, 2000, Brussels.
 174. University of Zurich, Department of Psychiatry, *PTSD an overview*. Zurich, 19/7/00.
 175. University College, London. *Working Memory Abnormalities, and PTSD*. 5th April, 2000.
 176. ANZ II Symposium *"Management of PTSD: Do Atypicals Play a Role?"* Gold Coast, Queensland. 10-13/8/00
 177. South African Society of Psychiatrists. *"The Neurobiology and Treatment of PTSD"* Durban, South Africa. 15-19/9/00.
 178. South African Society of Psychiatrists. *"Difficulties in Comparing Treatment Modalities and the Development of Treatment Guidelines in the Traumatic Stress Field"*, Durban, South Africa. 15-19/9/00.
 179. The Rehab Challenge: Working Together Beyond 2000. *"PTSD"* Auckland, New Zealand. 12-14/10/00.
 180. The Rehab Challenge: Working Together Beyond 2000. Keynote Address *"Compounding Psychological Effects of Trauma"*. Auckland, New Zealand. 12-14/10/00.
 181. 16th Annual Meeting of International Society for Traumatic Stress Studies. *"Resilience in the Face of Exposure to Trauma"*. San Antonio, Texas. 16-19/11/00.
 182. 16th Annual Meeting of International Society for Traumatic Stress Studies. *"Abnormal Neurocognitive Function in the Presence of Normal Hippocampal Volume"*. San Antonio, Texas. 16-19/11/00
 183. 16th Annual Meeting of International Society for Traumatic Stress Studies. *"Hippocampal Volume and Neurocognitive Changes in PTSD"*. San Antonio, Texas. 16-19/11/00.
 184. 16th Annual Meeting of International Society for Traumatic Stress Studies. *"A Position Emission Tomography Study of Benzodiazepine Receptors in Post Traumatic Stress Disorder"*. San Antonio, Texas. 16-19/11/00.
 185. 16th Annual Meeting of the International Society for Traumatic Stress Studies. *"The Relationship Between Dissociation and Arousal"*. San Antonio, Texas. 16-19/11/00.

186. 16th Annual Meeting of the International Society for Traumatic Stress Studies. *"Comparison of EMDR with CBT in PTSD Patients"*. San Antonio, Texas. 16-19/11/00.
187. Psychological and Psychiatric Injury. *"Early Detection and Management of Psychological and Psychiatric Injuries"*. Sydney, NSW. 1-2/12/00
188. ASPR *"Consciousness: how traumatic stress disrupts the capacity to integrate experience"*. December, 2000, Adelaide, South Australia.
189. RANZCP CME Meeting. *"Somatic Presentations of Post Traumatic Stress Disorder: The Social Formulation of Disease"*. 15/2/2001
190. ASEAN 8th Congress of the Federation of Psychiatry and Mental Health, *"PTSD or Comorbidity"* and *"Victims of Violence Assessment and Management"*. 17-18th March, 2001
191. ISTSS Conference, Edinburgh, Scotland, 26-29/5/01. Keynote Address *What the Effects of Overwhelming Experience tell us about the nature of Consciousness.*
192. 7th Annual Meeting of the Organisation for Human Brain Mapping, Brighton, United Kingdom, June 10-14 2001 *"Comparing methods for cortically constrained source localisation."*
193. 9th Annual Meeting of the International Society for Magnetic Resonance in Medicine, Glasgow, UK, April 21-27 2001 *"Distinguishing executive operations from content representation during working memory function"*
194. PTSD Workshop, Bangkok, 22/6/01
195. RANZCP Forensic Section, Brisbane - 10/8/01 *"PTSD in a Legal Setting"*
196. Anxiety & Trauma Conference, Gold Coast, Queensland, *"Drug Treatments for PTSD - Clinical Aspects on the use of Medicine in the Treatment of PTSD"* and *"Clinical Update - Recent Advances in PTSD"* 11-12/8/01.
197. AMMA 10th Annual Scientific Conference, Gold Coast, Queensland, 20/10/01. *"Combating the Hidden Morbidity in the ADF - New Initiatives in Mental Health"*
198. Department of Defence - Annual Tri-Service Health Seminar -17/11/01, Keswick, South Australia. *"Australian Centre for Post Traumatic Mental Health"*.
199. 197. Ninth Annual ASTSS Conference on Traumatic Stress, Auckland, New Zealand *"How does the present reflect the past? The impact of the confusion about the relationship between acute stress reactions and the long term effects of trauma"* 7-10th March, 2002.
201. Pfizer Australian Workshop. *"Relevance of Traumatic Stress to Serious Mental Illness"* Melbourne 20/4/02
202. Sydney, 26-28/7/02 Defence Health Symposium *"Military Mental Health – an Australian Context"*
203. Royal Society of Tasmania *"The Origin of Personal and community Trauma and the History of its Study"*, Hobart, 20/8/02
204. RANZCP Forensic Conference, *"PTSD: The Concept, Use and Abuse"*, Queenstown, N.Z. 5-8/9/02
205. ASD, PTSD & Recovery Conference – Sydney, 8/10/02 *"Can Psychiatric Disorders such as Schizophrenia and Bipolar be 'Triggered' by Trauma"*.
206. International Society for Traumatic Stress Studies 18th Annual Meeting: *"PTSD prevalence rates in very large treatment seeking Medicaid*

- samples*", Baltimore, USA 7-10/11/02
207. International Society for Traumatic Stress Studies 18th Annual Meeting: *"Phenomenology and Biology of the Acute Stress Response in PTSD"* Baltimore, USA 7-10/11/02
 208. International Society for Traumatic Stress Studies 18th Annual Meeting *"A Public Health Perspective of Traumatic Stress"* Baltimore, USA 7-10/02.
 209. *"Relevance of Traumatic Stress to Serious Mental Illness"*. Contemporary Clinical Challenges in Psychiatry. Pfizer, Melbourne. 20/4/02.
 210. Pfizer Neurosciences Meeting *"The Relationship Between Trauma and Somatisation"* Brisbane, 22/2/03
 211. Queensland Ambulance Service, Workshop on PTSD, Brisbane, 6/3/03
 212. Adelaide Diocesan Justice and Peace Commission, St. Paul's Retreat, Adelaide, 14/6/03
 213. Human Brain Mapping Conference, 18-22/6/03, New York *"The Impact of Early Life Stress on Psychophysiological, Personality and Behaviour Measures in 740 Non-clinical subjects"*, New York.
 214. 14th Annual Trauma and Dissociation Conference, 25-26/6/03, two day Workshop, Quebec. Canada.
 215. World Psychiatric Association, *"The Adult Outcomes of Brain Development"*,
 216. 9/7/03, Paris. World Psychiatric Association, *"Assessing the Adult Outcomes of Childhood Trauma"* 10-11/7/03, Paris.
 217. IACAPAP Conference *"The Adult Outcomes of Brain Development"*, 16-19/7/03, Rome
 218. IACAPAP Conference *"Assessing the Adult Outcomes of Childhood Trauma"* 16-19/7/03, Rome
 219. International Society for Traumatic Stress Studies, 19th Annual Meeting, Chicago 29/10/03 to 1/11/03, *"Comparison of CBT and EMDR"*.
 220. International Expert Meeting 2003, The Hague, 3-4/11/03 *"National and Professional Mental Health Resources needed after Disasters"*
 221. International Expert Meeting 2003, The Hague, 3-4/11/03 *"Immediate and Long Term Tasks and Roles of Mental Health Consultants after Disasters"*.
 222. International Expert Meeting 2003, The Hague, 3-4/11/03 *"Possibilities for the Prevention of Health Problems: Anticipating Persistence"*.
 223. Pfizer Neuroscience Forum. 21-22/2/04. *"Pain in Post Traumatic Stress Disorder and Behavioural Changes"*, Melbourne.
 224. Australian Society of Orthodontists, 2004 Biennial Congress *"Trauma, Pain and Facial Injury: How a Psychiatrist Sees Orthodontists"*. 23-27/2/04, Adelaide.
 225. Special address: *"How to Learn from the Lasting Effects of Disasters"*. International Symposium on Mental Health in Post-Crisis Restoration/Rehabilitation, Kobe, Japan, 28/3/04.
 226. IV International Congress of Psychiatric Trauma and Traumatic Stress 23-25/7/04. *"Epidemiology of PTSD: Comorbidity, Disability and the Role of Trauma in Suicide"*. Argentina
 227. 3rd Annual Trauma Conference 25-27/6/04. *"Information Processing Disorders in PTSD: How trauma disrupts the capacity to manage day to*

- day information". Vancouver
232. 11th Annual Conference for ASTSS, Advancing Traumatology: from violence, trauma & human suffering... to healing & hope 10-11/09/04. *"Victimisation of Psychiatric Patients"*.
 233. NSW Institute of Psychiatry: Trauma Conference, 17/09/04. *"Neuroimaging Research in Trauma"*.
 234. ASAM Aviation Conference – Adelaide 18/09/04. *"Assessing Psychological Disorders in Aviators"*.
 235. World Psychiatric Association Conference, Florence, November 2004. *"Understanding and managing the consequences of violence and trauma"*.
 236. 30th Annual Scientific Meeting on Intensive Care – Adelaide 20-23/10/05. *"Post traumatic stress disorder in survivors of critical illness"*
 237. 21st Annual Meeting for the International Society for Traumatic Stress Studies – *"Psychological Screening and Monitoring in Military Settings"*
 238. 21st Annual Meeting for the International Society for Traumatic Stress Studies *"The Challenges of Developing New Strategies in Disaster Research"*
 239. 21st Annual Meeting for the International Society for Traumatic Stress Studies *"Dealing with the Challenge of Planning and Service Development Following the Tsunami: a Public Mental Health Approach"*.
 240. 9th Annual meeting of the Australasian Society for Psychophysiology, Sydney, Australia, February 8-13 2000 *"Identifying the functional organization of working memory updating using fMRI."*
 241. 10th Annual meeting of the Australasian Society for Psychophysiology, Adelaide, Australia, December 3-5 2000 *"Regional timing of cortical networks during verbal working memory function"*
 242. 10th Annual meeting of the Australasian Society for Psychophysiology, Adelaide, Australia, December 3-5 2000 *"Transformation of the scalp ERP signal for cortically-constrained, disturbed source localisation using real-head boundary element modelling"*
 243. 10th World Congress of Psychophysiology, Sydney, Australia, February 8-13 2000 *"Stimulus and response set during updating of working memory"*
 244. 10th World Congress of Psychophysiology, Sydney, Australia, February 8-13 2000 *" Investigations of human working memory function using multimodal imaging techniques"*
 245. 35th Annual Congress of the RANZCP. *Neurobiological evidence of everyday working memory dysfunction in PTSD using PET and high density EEG*. Adelaide, 2000.
 246. 6th Annual Meeting of Organisation for Human Brain Mapping, San Antonio, Texas, USA, June 12-16 2000 *"Linking sensory and motor representations in working memory plan formation"*.
 247. THEMHS Conference. *The effect of treatment with clozapine on quality of life in schizophrenia*. Adelaide, 2000.
 248. 10th Annual Meeting of the Australasian Society for Psychology, Adelaide, Australia December 3-5, 2000. *Timing of cortical networks during working memory function*.
 249. Third World congress for the ISTSS. *Multi-modal brain imaging in the analysis of PTSD*. Melbourne, 2000.
 250. Human Brain Mapping. *Cortical network dysfunction in PTSD*. UK, July

- 2001.
251. RANZCP conference, PTSD paper, Sydney, May 2005
 252. Boston, May 2005 Trauma Conference. *"PTSD as an information processing disorder and a historical perspectives of posttraumatic stress disorder in a military context"*.
 253. ASTSS Conference, Perth September 2005. *"The impact of childhood trauma across the lifespan: historical denial – current challenges"*. *"Long-term impact on children following large scale trauma: children and the Ash Wednesday bushfires 20 years on"*.
 254. Australasian Epidemiological Association Conference, Newcastle, NSW, October 2005. *Medically evaluated chronic fatigue and chronic fatigue syndrome in Australian veterans of the 1991 Gulf War*.
 255. Australian Military Medicine Association 14th Annual Scientific conference, Tasmania, October 2005. *Medical evaluation of the physical and psychological health of Australian Gulf War veterans with chronic fatigue*.
 256. JICA Training Conference – Hyogo Institute for Traumatic Stress, Japan, December 2005. *Mental health services required after disaster: How to learn from the lasting effects of disaster*.
 257. Tsunami Reconstruction Conference, Bangkok, February 2006. Invited member of an International Group of Experts to discuss disaster relief following the Tsunami.
 258. 4th International Conference on Anxiety, Phobic and Compulsive Disorders. Auckland, 28-29 July 2006. *Emerging issue in the identification and treatment of PTSD*.
 259. IACAPAP Conference, 12 September 2006, Melbourne.
 260. ASTSS Conference 14-16 September 2006, Adelaide. *Dilemmas and challenges of the trauma researcher*.
 261. AMMA Conference, Brisbane, 19-22 October 2006.
 262. ISTSS Conference, Hollywood 2-7 November 2006. CITRM presentation, *The challenge of constructing instruments that measure the impact of traumatic events*.
 263. Neuroscience Round Table Conference, Adelaide, 15-16 February 2007. *Chemo Prophylactic Drugs for Treatment of traumatic Stress*.
 264. National Vietnam Veterans' Conference, Adelaide, 18 April 2007. *Transition from Military to Civilian Life: To be sick or not to be sick, that is the question*.
 265. Department of Veterans' Affairs – *PTSD Update*. 18th May, 2007.
 266. Wyeth Workshop – *Posttraumatic Stress Disorder*. Adelaide, 28th July 2007.
 267. ADF Mental Health Symposium – *Issues in Mental Care in ADF*, Canberra, 11th August 2007.
 268. PTSD Public Guidelines: Public Launch, Adelaide, 15th August, 2007.
 269. Invited Plenary. International Health Conference, Gold Coast, 17th August 2007. *Recent Research into PTSD: Implications for Treatment*.
 270. PTSD Public Guidelines: Public Launch, Brisbane, 30th August 2007
 271. ESCAP 13th International Congress, Florence, 28th August 2007. *Neurobiology of Trauma*.
 272. Pre-meeting Institute ISTSS Baltimore, 13th-14th November, 2007. *The*

- DHPS: An Australian Perspective.*
273. 23rd ISTSS Conference, Preventing Trauma and its Effects, Baltimore, USA, Nov 15-17 2007. *Theoretical and practical issues in early intervention.*
 274. 23rd ISTSS Conference, Preventing Trauma and its Effects, Baltimore, USA, Nov 15-17 2007 – *The Endemic Issues in Abuse by Professionals and Clergy.*
 275. 23rd ISTSS Conference, Preventing Trauma and its Effects, Baltimore, USA, Nov 15-17 2007. *Do the facts confirm the Theory about Early Intervention.* Invited Symposium. Clergy.
 276. 23rd ISTSS Conference, Preventing Trauma and its Effects, Baltimore, USA, Nov 15-17 2007. *Abnormal Recruitment of Brain Networks during Trauma-Neutral Working Memory Processing in PTSD.*
 277. *Florence Nightingale: A sufferer of a post-deployment syndrome. When the Soldier returns.* Brisbane, 28-30 November 2007.
 278. *Post-Deployment Syndromes following Wars in the nineteenth and early Twentieth Century. When the Soldier Returns.* Brisbane 28-30 November 2007.
 279. *Temporal relationships between war deployment and subsequent psychological disorders.* World Psychiatric Association International Congress, Melbourne, 28 November–1 December 2007.
 280. *Advising Politicians and Other Affected Persons.* Invitational Conference on 'The Psychosocial Aspects of Threat and Protection', The Hague, Holland, 12-13 March 2008.
 281. *Introducing the Report Psychosocial Effects of Threat and Protection.* Closed Expert Meeting on 'The Psychosocial Aspects of Threat and Protection' - The Hague, Holland. 12th March, 2008.
 282. *Integrating Epidemiology with Neuroscience.* Mental Health in South Australia. SA Department of Health. Adelaide, March 2008.
 283. *Traumatic Stress and Its Place in 21st Century Psychiatry.* RANZCP Conference, Invited Plenary, Melbourne, May 2008.
 284. *PTSD in Occupational Settings: Anticipating and Managing the Risk.* Invited Plenary ANZOM Conference Darwin, May 2008.
 285. *Service & Science: Applying the evidence in the field of military and veterans' health to a contemporary military compensation system.* Repatriation Medical Authority Forum, Canberra, May 2008.
 286. *How do they inform Clinical Practice.* ISTSS Symposium, Longitudinal Studies in PTSD, Invited Plenary, London, June 2008.
 287. *Planning mental health services following disaster – a public health approach.* International Society for Psychotherapy conference, Beijing October 2008.
 288. *Implications for Kuwait for rebuilding Afghanistan + "A Neural network Model of PTSD" + "Challenges in Providing Protection to Politicians" + "Trauma and its impact on art and culture".* International Society for traumatic Stress Studies – Chicago 13-17 November 2008.
 289. *Trauma awareness and recovery from PTSD Forum,* Townsville, October 2008.
 290. *Managing trauma in the workplace.* Invited plenary International Health Conference, Surfer's Paradise, August 2008.

291. *PTSD Guidelines Conference – Darwin*
292. *The Deployment Health Surveillance Program*. Regional ADF Health Reserve Symposium, Adelaide 2008.
293. *Medicolegal issues and challenges in PTSD + The Conundrum of Medically Unexplained Symptoms*. ASTSS Conference, Melbourne, September 2008.
294. *Perspectives in deployment health and data: Deployment health surveillance*. Australian Military Medicine Association Conference. Hobart, October 2008.
295. *The Contribution of the study of Traumatic Stress to Psychiatry*. Australasian Society for Psychiatric Research Plenary Lecture, Newcastle, December 2008.
296. *Research Challenges with Deployment*. Daw Park Foundation, Adelaide, September 2008.
297. *How stressed are our emergency service and welfare workers*. Hobart Clinic Public Oration - Hobart November 2008.
298. *The failure of language to speak of trauma*. Nieman Foundation for Journalism, Harvard, Boston, 26-28 February, 2009.
299. *Health Surveillance in the 21st Century: An integrated approach to the assessment of health and the maintenance of health in the ADF*. SA Defence Veterans' Health Research Paper Day, Adelaide, July 2009.
300. *The Cumulative Effects of Traumatic Events: The challenge and costs for treatment services*. Plenary Lecture World Psychiatric Association, Florence, 1-4 April 2009.
302. *Protective Factors in the Long-term Outcomes following a Disaster in Childhood*. Invited symposium 2nd April, 2009. "Reactions of children and adolescents to trauma: from coping to PTSD".
303. *The Cumulative Effect of Childhood Traumatic Stress on Adult Mental and Physical Health*. Invited Satellite Meeting – Florence, 31 April 2009. New Perspectives in Child and Adolescent Psychiatry.
304. *Topics covered included history, phenomenology, aetiology, neuroimaging and case discussions*. Copenhagen, 16-17 April 2009. 2 Day Workshop of the Working Group for Trauma Psychology.
305. *The challenge of defining entitlements for PTSD in Australian Veterans: Lessons from the Statements of Principles*. The Netherlands Meeting at the Veterans Institute Doorn to consider decorations for psychological injury in the Dutch Military - Doorn, 21 April 2009.
306. *Treatment of PTSD in Military Settings*. Special Grand Round Netherlands Military Hospital - Utrecht, 21 April 2009.
307. *The Conundrum of Medically Unexplained Symptoms: Questions to be considered*. Special MUPS Working Group of the Netherlands Armed Forces - Amsterdam, 22nd April 2009.
308. *PTSD in Veterans: The challenge of the intersecting worlds of medicine and the law*. Veterans Review Tribunal Annual Meeting - Glenbrook, 6th May.
301. *Mental health screening – panel discussion*. Joint Health Command and VVCS Counselling Service National Conference, Canberra, 1 May, 2009.
302. *Antidepressant use on deployments*. Mental Health Consultative Forum, Canberra, 2 May 2009.

303. *The Stiff Upper Lip – symptoms minimisation and post deployment syndrome: What are the mental health costs of military deployment*. Key note - Royal College of Psychiatrists Conference, Liverpool, 2-5 June 2009.
304. *Reorganising the disorganised brain*. 20th Annual International Trauma Conference, Boston, 3-7 June 2009.
305. *PTSD and functional integration: An issue for treatment*. 20th Annual International Trauma conference, Boston, 3-7 June 2009.
306. *Integrating past and present: PTSD as an information processing disorder*. Key note - 20th Annual International Trauma Conference, Boston, 3-7 June 2009.
307. *The impact of childhood stress on adult mental health and drug and alcohol use: Preliminary findings*. Drug and Alcohol Nurses of Australasia Conference, 2009, Gold Coast, Queensland.
308. *Managing Trauma in the Workplace*. International Mental Health Conference, Surfers Paradise, 14 August 2009.
309. *What are the mental health outcomes of deployment?* Australian Military Medicine Association, Gold Coast, 30 October 2009.
310. *Preventing psychological distress by advising people in a situation of ongoing life threat*. ISTSS Conference, Atlanta, USA, 4 November 2009.
311. *An evolving process: Post deployment mental health support in the Australian Defence Force*. Symposium – ISTSS Conference, Atlanta, USA, 5 November 2009.
312. *Multimodal imaging of working memory in PTSD: Combined data from ERP and fMRI*. Symposium – ISTSS Conference, Atlanta, USA, 6 November 2009.
313. *Internationalisation throughout medicine, law, psychology, psychiatry and beyond*. ISTSS Conference, Atlanta, USA, 7 November 2009.
314. *Psychophysiology of Stress*. Antares Foundation Inc Australian, Annual Forum, Melbourne, 13 November 2009.
315. *Community responses and challenges following disasters: What do we learn?* ISTSS Conference, Kobe, Japan, 6 March 2010.
316. *Bushfires*. ANZAPT (SA) Annual Trainees Symposium, Adelaide, 9 April, 2010.
317. *How Trauma Affects Communication*. Emergency Media and Public Affairs Conference, Sydney, 12 April, 2010.
318. *Incidence and management of workplace trauma*. National ARPA Conference, Sydney, 17th May, 2010.
319. *The psychology of the remembrance, memorials rituals, and symbols with a focus on natural disasters*. Victorian Bushfire Recovery Forum, 21st May, Melbourne.
320. *Integrating the Past and Present PTSD – Information Processing Disorder*. Keynote EMDR European Conference, Hamburg, 10 June 2010.
321. *Understanding Traumatic Stress Reactions – The Linking of Phenomenology, Aetiology and Treatment Plan*. EMDR European Conference, Hamburg. "Trauma and Beyond". 11 June, 2010
322. *"Medically unexplained physical symptoms in military personnel"*. NATO HRMRTG Ottawa, Canada, 23-25 June 2010.
323. *The relationship between trauma and substance abuse: Is self-medication*

- an explanation.* Drug & Alcohol Nurses Conference, Gold Coast, Queensland, 16 July, 2010.
324. *Psychosocial aspects of disaster.* Monash University Courses on Disaster and Humanitarian Response. Melbourne, 12 August 2010.
 325. *PTSD and Mild traumatic brain Injury.* Keynote address. PTSD, Traumatic Brain Injury & Post-concussion Syndrome Symposium, Kingscliff, NSW, 13 August, 2010.
 326. *PTSD, Traumatic Brain Injury & Post-Concussion Syndrome Symposium,* Focus Group Facilitator – guidelines for treatment. Kingscliff, NSW, 13 August, 2010.
 327. *The long term effects of childhood trauma on mental illness, drug and alcohol use.* RANZCP Congress, Auckland, 2010.
 328. Psychotrauma Conference 26-28 August. Medical record writing and court room skills. Singapore, 26-27 August 2010.
 329. *Emerging issues in PTSD for aetiology and treatment.* Changi General Hospital. 27 August 2010.
 330. *Integrating the past and present: Post Traumatic Stress Disorder.* 19th Annual RBWH Health Care Symposium, 12th October 2010.
 331. *Towards a better understanding of the physical and mental health of ADF personnel.* AMMA Conference, Canberra, 29 October 2010.
 332. *Neuroendocrine correlates of PTSD before and after treatment.* Symposium, ISTSS, Montreal, Canada, 4 November, 2010.
 333. *PTSD as an information processing disorder: Implications for treatment.* Grand Rounds Presentation, Royal Ottawa Hospital, Canada, 10 November 2010.
 334. *The responsibility to serving members and veterans; two decades of experience in Australia.* 1st Canadian Military and Veteran Health Research Forum, Kingston, Canada, 16 November 2010.
 335. *The relationship between childhood trauma, adult trauma, mental illness, drug and alcohol use.* APSAD, Canberra, 28 November 2010.
 336. *Medical Unexplained Physical Symptoms in Military Personnel.* NATO HFM-175/RTG Working Group, Amsterdam, 7-8 April, 2011.
 337. *Trauma assessment and treatment: current research.* NSW Victims Services: Practitioners Day. Sydney, 20 May 2011.
 338. Expert Forum. ACPMH 'Many Paths, One Purpose', Melbourne, 12 August, 2011.
 339. *The Complexities of the Relationship between Alcohol Consumption & Psychiatric Disorder.* Cutting Edge Conference, Auckland, 1 September 2011.
 340. *The Comorbidity of Alcohol and Trauma.* Cutting Edge Conference, Auckland, 2 September 2011.
 341. Symposium. 15th World Psychiatry Association Congress, Buenos Aires, 20 September, 2011.
 342. *Do we learn from history? Pathology of memory and the field of traumatic stress.* Keynote speaker. 15th World Psychiatry Association Congress, Buenos Aires, 21 September 2011.
 343. *The prolonged and unanticipated impact of traumatic stress.* RANZCP Keynote address, Queenstown, New Zealand, 30 September 2011.
 344. *The role of CL & Health Psychology Services when Disaster Strikes.*

- Keynote speaker. Queensland Consultation Liaison Psychiatry Symposium, Brisbane, 11 October, 2011.
345. *An epidemiological study of mental health in serving Australian Defence Force Personnel: The Mental Health Prevalence Study.* Military Health Shaping the Future, AMMA Conference, Melbourne, 21 October 2011.
 346. *The prolonged and unanticipated effects of traumatic stress.* RANZCP Victorian Branch Conference, 22-23 October 2011.
 347. *What does the average ADF member look like and what are the risks to physical and psychological health in the ADF.* Defence Human Sciences Symposium, 15 February 2012.
 348. *Coping with adversity: The impact of traumatic stress on health.* Women's Health Conference, Gold Coast, 24 February 2012.
 349. *Longitudinal cohort studies commencing in childhood: What does this tell us about adult psychological health?* Childhood Trauma Conference, Gold Coast, 4-5 July 2012.
 350. *The Longitudinal Course of Posttraumatic Sensitization Disorder: The long tail of impact of war like service.* DVA Research Seminar, Canberra, 10 July 2012.
 351. *Disaster in social and cultural perspective: impact, response, memory.* Australian Historical Association Conference, Adelaide, 12 July 2012.
 352. *Long-term psychological adjustment in adult survivors of paediatric burns: A 25 year follow-up of children admitted to South Australia's major children's trauma hospital.* ANZBA Conference, 9-12 October 2012.
 353. *Emerging Mental Health Issues.* Mental Health Forum, Adelaide, 26 October 2012.
 354. *PTSD – Evidence from medical Witnesses.* Legal Services Communications Conference, 2 April 2012.
 355. *The continuum from injury through rehabilitation and recovery.* ADF Workshop, Canberra, April 2014.
 356. *Duty of care and peacekeeping.* Pacific Armies Chiefs Conference VIII (PACC), 9 September 2013.
 357. *Duty of care and peacekeeping.* Pacific Armies' Management Seminar XXXVII. 11 September 2013.
 358. *Incidence and management of workplace trauma.* Australian Society of Rehabilitation Counsellors Nation Conference, Sydney, 24-26 October 2013.
 359. *3rd National Conference of Medical Clinical Psychology, Guangzhou, China 22-24 November, 2013.*
 360. *One hundred years of lessons about the impact of war on mental health: Two steps forward, one step back.* Conference "The impact of Great Wars and Beyond: Medical and Military Psychotraumatology. Leiden, May 22, 2014.
 361. *Current perspectives of the psychological costs of the impact of World War I on the Australian Forces.* World Psychiatric Conference, 9-14 September 2014.
 362. *Lessons for psychiatry learned from the Great War.* Symposium, Netherlands Embassy, Madrid, 15 September 2014.
 363. *Research Challenges and Epidemiological findings in Australian Military Mental Health Research.* Presentation to the Kings College, London,

- Military Research Group, 2014.
364. *A randomised controlled trial of neuro-feedback for chronic PTSD.* Symposium-ISTSS Conference, Miami, 8 November, 2014.
 365. *A prospective study of the differential impact of mTBI and PTSD on cortical arousal.* Symposium-ISTSS Conference, Miami, 8 November 2014.
 366. *The prolonged and unanticipated consequences of exposure to traumatic stress.* Presentation to the Department of Psychiatry at New York University, 2014.
 367. *Recent History of Military and Veterans Health and the Continuing Challenges,* Key Note Speaker ANZAC Symposium, Adelaide, July 2015.
 368. *The prolonged and unanticipated consequences of exposure to traumatic stress.* Presentation to the Tasmanian Branch of the RANZCP, August 2015.
 369. *The Prevalence of PTSD and Future Directions in Research,* Key Note Speaker, Standing Tall for PTSD Meeting, Brisbane, September 2015.
 370. *The Challenges of Delivering Health Care to Veterans and Emergency Service Personnel,* Veterans Health Advisory Meeting, Christchurch, September 2015.
 371. *Mental Health and the Wellbeing Transition Study,* Key Note Speaker, The National RSL Conference, September 2015.
 372. *Comparison of the Mental Health of the Australian Defence Force within the Australian Community,* Symposium, International Society for Traumatic Stress Studies, New Orleans, November 2015.

WORKSHOP AND CONFERENCE PAPERS

1. *"Life Events Stress in the Massively Obese".* Presented at the Brisbane Conference of the Royal Australian and New Zealand College of Psychiatrists, 1977.
2. *"Congenital Blindness in Anorexia Nervosa".* Presented at the Hong Kong Conference of the Royal Australian and New Zealand College of Psychiatrists, 1981.
3. *"Determinants of Disability in Rheumatoid Arthritis".* Accepted for presentation at the Herbinden Society Meeting in London, 1981.
4. *"Patterns of Illness Behaviour in Rheumatoid Arthritis".* Presented at the Second Scientific Meeting of the Australian College Rehabilitation Medicine, Sydney, 1982.
5. *"The Relationship Between Psychological Symptoms and Disease Activity in Rheumatoid Arthritis".* Presented at the Annual Congress of the Australian Rheumatological Association, Newcastle, 1983.
6. *"Ash Wednesday the Effects of Fires on School Children".* Presented at the Royal Australian and New Zealand College of Psychiatrists' Conference, October 1983.
7. *"The Determinants of Abnormal Illness Behaviour".* Presented at the Royal Australian and New Zealand College of Psychiatrists' Conference, October 1983.

8. Davies, J, Hall, J and McFarlane, A C, "*Methodological Assessment of the Dexamethasone Suppression Test*". Presented at the Royal Australian and New Zealand College of Psychiatrists Conference, October 1983.
9. "*Psychiatric Disorder in Primary School Children Following a Natural Disaster*". Presented at the Workshop "Human Behaviour in Disaster" at the Australian Counter Disaster College, Mt Macedon, 25-27 April 1984.
10. McFarlane, A C and Croft, G. "*Post traumatic Stress Disorders in Firefighters: Ash Wednesday*". Presented at the Workshop "Human Behaviour in Disaster" at the Australian Counter Disaster College, Mt Macedon, 25-27 April 1984.
11. McFarlane, A C and Frost, M. "*Evaluation of the Bushfire Relief Team*". Presented at the Workshop "Human Behaviour in Disaster" at the Australian Counter Disaster College, Mt Macedon, 25-27 April 1984.
12. Cook, P, Wallace, M and McFarlane, A C. "*The Effects of Bushfire Disaster on Firefighters and their Families*". Presented at the Australian Counter Disaster College, Mt Macedon, 25-27 April 1984.
13. McFarlane, A C, Hobbin, E and Kneebone, C. "*Determinants of Disability in Stroke Patients*". Presented at the First International Conference on Illness Behaviour, Adelaide, 15-17 August 1984.
14. "*The Relationship Between Psychiatric Impairment and a Natural Disaster: The Role of Distress*". Presented at the Australian Society for Psychiatric Research, Sydney, 2-3 December 1984.
15. "*Psychoimmunology and Arthritis*". Presented at the XVI International Congress of Rheumatology, Sydney, 20-21 May 1985.
16. "*Psychological Aspects of Aetiology and Determinants of Disability in Rheumatoid Arthritis*". Presented at the XVI International Congress of Rheumatology, Sydney, 20-21 May 1985.
17. "*The Psychological Dimensions of Arthritis*". The Community Organizations Program at the XVI International Congress of Rheumatology, Sydney, 20-21 May 1985.
18. "*Posttraumatic Stress Disorders: A Separate Diagnostic Entity - the Phenomenology and Validity of the Concept*". Presented at the 1985 Annual Congress of the R.A.N.Z.C.P., Hobart, 6-10 May 1985.
19. McFarlane, A C and McFarlane, C M. "*An Epidemiological Study of the Relationship Between Weight Disorder and Psychological Symptoms and Family Functioning in Primary School Children*". Presented at the Second International Conference of Eating Disorders, Sydney, March 1986.
20. "*Diagnostic criteria and the International Classification of Impairments, Disabilities and Handicaps*". Presented at the Annual Congress of the R.A.N.Z.C.P., Auckland, 11-15 May 1987.
21. "*Psychoimmunology and the Disease Course of Rheumatoid Arthritis*". Presented at the Ninth World Congress of the International College of Psychosomatic Medicine, Sydney, 30 August to 10 September 1987.
22. Leslie, A, Ahern, M, Roberts-Thomson, P, Clark, M and McFarlane, A C. "*Illness Behaviour in Rheumatic Diseases*". Presented at the Australian Rheumatoid Arthritis Conference, May 1988.
23. "*Workers Compensation, Posttraumatic Stress Disorder and the Workplace*". 1st World Congress ISTSS Amsterdam, 22-24 June 1992.

24. *"Conundrums of Workers Compensation"*. Annual Congress RANZCP Canberra, 28 September to 2 October, 1992.
25. Symposium *"Emergency Issues in PTSD research"*. 8th Annual Meeting ISTSS, Los Angeles, 22-25 October 1992.
26. Crotty, M., McFarlane, A C., Brooks, P M., Bieri, D., Hopper, J L. and Taylor, S. *"Longitudinal study of disability in women with early rheumatoid arthritis - the importance of pain"*. Presented at Australian Rheumatology Association National Scientific Meeting, Adelaide, May 1993.
28. McFarlane, A C., Crotty, M., Brooks, P M., Bieri, D., Hopper, J L. and Taylor, S. *"Determinants of psychological 'status in early rheumatoid arthritis'"*. Presented at Australian Rheumatology Association National Scientific Meeting, Adelaide, May 1993.
29. Symposium *"The Role of Memory in Response to Trauma"*. 9th Annual Meeting ISTSS, San Antonio, Texas, 24-27 October 1993.
30. Symposium *"Comorbidity and Traumatic Stress"*. 9th Annual Meeting ISTSS, San Antonio, Texas, 24-27 October 1993.
31. Symposium *"The Longitudinal Changes in the Processing of Traumatic Memories"*: APA Meeting, Philadelphia, Pennsylvania, May 21-26, 1994
32. Symposium *"Relationship Between Arousal Dissociation and Memory"*, Philadelphia, May 1994
33. Symposium *"Trauma, Memory and Dissociation"*, *"The Longitudinal Changes in the Processing of Traumatic Memories"*, 10th Annual Meeting ISTSS, 5-9th November, 1994.
34. Symposium *"Attentional Deficits Due to Trauma in Children"*, American Psychiatric Association 148th Annual Meeting, Miami, Florida, 20-25th May, 1995.
35. Clinical Evening, The Australian Physiotherapy Association, *"Post Traumatic Stress Disorder"*, Adelaide, 7th June 1995.
36. Consensus Conference *"Diagnosis and Assessment in PTSD Research"*, Department of Veterans Affairs, Boston, Massachusetts, Nov. 7-8, 1995.
37. Symposium: Electrophysiological Abnormalities in Combat PTSD. *"Working Memory in PTSD: an ERP Perspective"*. International Society for Traumatic Stress Studies, San Francisco, November 1996.
38. Symposium: The Changing Treatment Picture: Reprocessing of Traumatic Memory and the Chronic Effects of Trauma. *The Longitudinal Course of PTSD: Chronic Effects and Treatment of Choice*. International Society for Traumatic Stress Studies.
39. *"Does Trauma Cause PTSD?"* International Society for Traumatic Stress Studies 12th Annual Meeting, San Francisco, November 1996.
40. *"Acute Stress Disorder: Assessment, Process, and Treatment"*. International Society for Traumatic Stress Studies XIVth Annual Meeting, Washington DC, 20-23rd November, 1998.
41. *"Psychological Disorders in Australian Gulf War Veterans"*, Annual Conference of the Royal Australian College of Physicians, Hobart (2003).
42. *"Dealing with the challenge of planning and service development following the Tsunami: a public mental health approach"*. *"Psychological screening and monitoring in Military settings"*. *"The challenges of developing new strategies in disaster research. Mental health services required after disaster: learning from the lasting effects of disasters"*. ISTSS Conference,

- Toronto, November 2005. 3 papers.
43. *Mild traumatic brain injury (mTBI): Traumatic stress by another name?* Symposium, ISTSS, Montreal, Canada, 6 November 2010.
 44. *"Integrated Perspectives of Neuroimaging in PTSD"* Symposium, ISTSS, Montreal, Canada, 6 November 2010.
 45. ISTSS, Baltimore, 2-5 November 2011.
 46. *New research in PTSD: Clinical and applied research.* ISTSS Conference, 2-5 November 2012.
 47. *A unique study of posttraumatic mental health: An epidemiological study of serving Australian Defence Force personnel.* ISTSS Conference, 2-5 November 2012.
 48. ISTSS Conference, Philadelphia, 7-9 November 2013.
 49. ISTSS, Miami, 6-8 November 2014.

Invited External Examining

1. Kuwait University, Faculty of Medicine, Department of Psychiatry, 16th to 21st June 2007

Invited and Directed Research

Dissociative Reactions Following Extreme Stress

Based on my data set collected after the Ash Wednesday bushfires, the DSM-IV Sub-Committee of the American Psychiatric Association examining dissociative disorders has contracted me to contribute information about the prevalence and type of dissociative phenomena seen in disaster victims.

What are the effects of having an illness or injury whilst deployed on post deployment mental health? A population based record linkage study of UK Army personnel who have served in Iraq or Afghanistan

4 August 2012 - Invitation to write a commentary article for the BMC Medicine on the above research.

GRANTS RECEIVED

1. Brooks, P and McFarlane, A C. "Determinants of Disability in Rheumatoid Arthritis". Funded by South Australian Rheumatism Association - \$2,000.
2. McFarlane, A C. "Firefighters in the Ash Wednesday Fires: A Study of Psychological Morbidity and Post Traumatic Stress Disorders". Jointly funded with: McFarlane, A C, Irwin, C and Policansky, S: "Children in Disaster - The Ash Wednesday Bushfires". Funded by Flinders Medical Centre Research Foundation - \$7,950.

3. McFarlane, A C. "Firefighters in the Ash Wednesday Fires: A Study of Psychological Morbidity and Post Traumatic Stress Disorders". Funded by S.A. Great South Australian Country Fires Services Training and Research Foundation - \$3,958.
4. McFarlane, A C. "The Psychological Morbidity in Primary School Children following the Ash Wednesday Fires". Funded by Channel 10 Medical Research Foundation of South Australia - \$2,507.
5. Brooks, P M and McFarlane A C. "Determinants of Disability in Chronic Arthritis". Special Purpose Grant. National Health and Medical Research Council Grant - \$10,000: 1985.
6. McFarlane, A C. "Long Term Outcome of Posttraumatic Stress Disorder Following Treatment". The Flinders University of South Australia Research Budget Grant - \$1,984: 1986.
7. McFarlane, A C. "A Longitudinal Study of Posttraumatic Stress Disorders". The Flinders University of South Australia Research Budget Grant - \$1,600: 1986.
8. Brooks, P M and McFarlane, A C. "Determinants of Disability in Early Rheumatoid Arthritis". Funded by National Health and Medical Research Council - \$75,765. Project Grant 1986, 1987 and 1988.
9. McFarlane, A C and Kalucy, R S. "Long Term Outcome of Posttraumatic Stress Disorder Following Treatment". Funded by National Health and Medical Research Council - \$75,442.70. Project Grant 1987, 1988.
10. McFarlane, A C. "The Attention Process in Posttraumatic Stress Disorder". Funded by The Flinders University of South Australia, University Research Budget - \$1200: 1988.
11. McFarlane, A C. "The Clinical Usefulness of the International Classification of Impairments, Disabilities and Handicaps in General Psychiatric Patients". Project Grant funded by National Health and Medical Research Council - \$156,185.06: 1989, 1990, 1991.
12. McFarlane, A C and Brooks, P M. "Effect of Psychological Treatment on Disease and Disability in Arthritis". Project Grant funded by National Health and Medical Research Council - \$70,000 annually: 1990, 1991, 1992.
13. McFarlane, A C and Clark C R. "The Role of Disturbed Selective Attention in Anxiety Disorders". Project Grant funded by National Health and Medical Research Council - \$38,151.79 annually: 1990, 1991, 1992.
14. McFarlane, A C and Clayer, J R. "Prevalence of Mental Illness and Needs in the Riverland". Project Grant funded by Research and Development Grants Advisory Committee - \$71,789 annually: 1990, 1991, 1992.
15. McFarlane, A C. "Early Distress Response as a Predictor of Posttraumatic Stress Disorder in Trauma Victims". Project Grant funded by National Health and Medical Research Council - \$53,056 annually: 1993, 1994, 1995.
16. University of Adelaide grants:
 - 1) Project from University Research Grants - \$15,000 & \$28,740.
 - 2) B1 Research Grant - \$6,000
 - 3) B3 Research Grant - \$3,200 and \$2,000
17. McFarlane, A C and Clark, C R. "Stimulus Processing in Posttraumatic Stress Disorder by ANN Analysis of ERP Patterns". Project Grant funded

- by National Health and Medical Research Council - \$58,000 annually:
1994, 1995, 1996.
18. University of Adelaide B1 grant
1997 - \$10,000
 19. A study of drug (Fluoxetine) vs cognitive behavioural therapy in the
treatment of PTSD – National Health and Medical Research Council -
1996 \$43931
1997 \$87091
1998 \$88659
1999 \$44329
 20. The Relationship between HPA function in acute stress and the
development
of PTSD - Department of Veterans Affairs
1998 - \$80378
1999 - \$81978
2000 - \$81978
 21. A study of cerebral benzodiazepine receptors in posttraumatic stress
disorder - Department of Veterans Affairs
1998 - \$86562
1999 - \$86562
2000 - \$86562
 22. Study of the cerebral dynamics of central executive function in PTSD,
using fMRI and ERPs - National Health and Medical Research Council
1998 58,675
1999 50,980
2000 52,450
 23. Adult Consequences of Childhood Exposure to Psychological Trauma -
NHMRC
2002 \$140,000
2003 \$115,000
2004 \$ 35,000
 24. Donepezil Study – Pfizer Pty. Ltd.
2002 \$ 26,004
 25. Separations from the Royal Australian Navy 1991-2001: Information from
the Gulf War Veterans Health Study
Australian Defence Force, Canberra
\$20,000
 26. Post Traumatic Mental Health: Enhancing Resilience and recovery.
National Health and Medical Research Council Program Grant -
2004 \$243,000
2005 \$243,000
2006 \$249,490
 27. Follow-up of the Port Pirie lead cohort into adulthood study.
National Health & Medical Research Council -
2007 \$ 211,750
2008 \$ 219,200
2009 \$ 134,700
 28. PTSD Dunlop Foundation
Risk factors and symptom patterns associated with PTSD in Australian

- Gulf War veterans: Subgroup analysis and development of brief screening tests.
2007 \$ 19,342.
29. Middle East Area of Operations Health Prospective Study
2007 \$ 354,000
2008 \$ 167,000
2009 – 2013 \$10,900,000
 30. Gulf War Study Followup
2010 (1st quarter) \$ 125,336
 31. NHMRC Program Grant: Posttraumatic Mental Health: Advancing Understanding of Diagnosis, Treatment and Mechanisms
2010-2014 \$7,500,000
 32. Middle East Area of Operations – Health and Wellbeing Survey
Phase 1
2009-2013 \$912,473
Phase 2
2009-2013 \$ 1,468,228
 33. Adult Outcomes of Childhood Burn Injury
Burns SA
2010 \$ 53,000
 34. NHMRC - Enhancing mental health in Aboriginal people: Reducing violence and developing Resilience
2007-2010 \$ 1,650,000
 35. Mild Traumatic Brain Injury Literary Review – Department of Veterans Affairs
2011 \$ 75,000
 36. Middle East Area of Operations Deployment Health Surveillance Program
2008-2012 \$11,421,000
 37. ADF Mental Health Prevalence and Wellbeing Study
Department of Defence
2012-2013 \$ 319,000
2013-2014 \$ 455,000
2014-2015 \$ 144,900
 38. What the number and type of head injuries does to the brain in Australian troops deployed to Afghanistan
Defence Health Foundation
2013-2015 \$ 87,000
 39. Department of Veterans' Affairs - Mothers in the Middle East Area of Operations
2013/2014 \$ 168,000
 40. NHMRC Partnership Grant - SA Metropolitan Fire Service NHMRC GNT1076594
2014-2016 \$ 472,000
 41. Department of Veterans' Affairs and Department of Defence - Transition and Wellbeing Research Program
2014-2017 \$ 3,150,000
 42. NHMRC Program Grant - Translating Science into Better Posttraumatic Health
2015-2019 \$12,500,000

EVIDENCE TO PUBLIC ENQUIRIES

1. "Select Committee on the circumstances related to the Stirling Council pertaining to and arising from the Ash Wednesday 1980 bushfires and related matters." Legislative Council, Parliament House, Adelaide, 30 August 1991.
2. "Select Committee on the Housing Co-operatives Bill." House of Assembly, Parliament House, Adelaide, 15 October 1991.
3. "Joint Select Committee on the Workers Rehabilitation and Compensation System (WorkCover)." House of Assembly and Legislative Council, Parliament House, Adelaide, 15 October 1991.
3. "National Inquiry Concerning the Human Rights of People with Mental Illness". Presented before Commissioner B Burdekin, Human Rights and Equal Opportunity Commission, Adelaide, 21 October 1991.

ADDENDUM TO CV FOR A C McFARLANE

EXPERIENCE IN COMPENSATION AND MEDICO-LEGAL ARENAS

1. Consultancies

A) World Health Organisation - Kuwait - 1993

I was requested by the World Health Organisation to examine a large epidemiological study which investigated the psychological impact of the Iraqi occupation on the Kuwaiti population. The specific aim of this consultancy was to assess the way in which the evidence collected in this study could assist in the United Nations Compensation Commission's assessment of claims for psychological injury. This involved an examination of the validity of the data set and the conclusions drawn from this study.

The consultancy required extensive examination of the other available information about the psychological impact of the Iraqi occupation and the valid record of the human rights abuses which occurred during this period of time. A series of recommendations were made both about the study and its implications for the future management of mental health in Kuwait.

Subsequently I have been asked to chair an International Advisory Group, looking at how to improve the management of post traumatic morbidity.

B) Vietnam Veterans Counselling Service

I was invited in 1993 to conduct a detailed review of the Vietnam Veterans Counselling Service in Australia at the request of the Department of Veterans' Affairs. I declined the invitation because the review would have taken approximately six months full time and I was unable to free myself from my other responsibilities for such a period. I have been invited to provide an independent opinion to this review. One issue being addressed in this review is the issue of diagnostic practise and quality control issues in psychiatric diagnosis by psychiatrists for the purpose of pension determination.

2. Peer Review Advisor in Psychiatry to WorkCover Corporation

The WorkCover Corporation is the sole provider of workers' compensation to the population of South Australia. I held this position in 1991 and 1992 when I resigned.

This task involved assisting the Corporation develop its policy and improve the administration of workers' compensation claims, particularly in the area of psychological disorders.

I was involved in assisting with the re-drafting of the legislation which was amended during this period of time. Apart from assisting in policy development and advice to managerial staff, the majority of the responsibilities involved assisting in claims adjudication and advising staff about claims management. This included advising about the appropriate use of legal counsel.

The position also involved reviewing the clinical and diagnostic practises of other psychiatrists.

3. Disaster Litigation.

My clinical practise has now involved me in the litigation of four major disasters. Apart from the research conducted after the 1983 Ash Wednesday bushfire disasters, I have also been involved in the assessment of personal injury claims for many of the victims. These fires were caused by the of power lines and the Electricity Trust of South Australia was the defendant. This experience has provided an unusual opportunity of dealing with a large number of claimants from the same event and to make a series of observations about both the impact of the process of litigation and the legal decision-making process under a Westminster system of justice.

A Russian cruise ship, the 'Mikhail Lermintov', sank off the coast of New Zealand. A large litigation case was heard in the Admiralty Court of New South Wales. I was asked to act as both an adviser to the counsel for the plaintiffs, as well as providing a general opinion to the court about a range of issues under question. This involved dealing with the issues relating to post traumatic stress disorder in a different jurisdiction from the Ash Wednesday bushfires. This experience highlighted a number of the questions concerning the definition of nervous shock and psychiatric caseness.

A further bushfire that occurred in South Australia in 1980 which destroyed 50 homes. I was involved in the ongoing litigation case of the plaintiffs against the Stirling District Council. This litigation was ultimately settled by a mediator. A series of issues arose about the legal process and I was invited to give evidence to a Parliamentary Select Committee of the Legislative Council of South Australia investigating this matter.

4. Medico-Legal Practice.

A proportion of my rights to private practice are spent providing medico-legal opinions about patients. The significant majority of these cases have posttraumatic stress disorder and I am often requested to assist in difficult or controversial matters regarding such patients.

5. Clinical Work with Post Traumatic Stress Disorder Patients

By the nature of my ongoing clinical work, a number of the patients who I consult on a regular basis are involved in litigation because of the involvement of a third party in causing their traumatic experience. In these cases, I am required to

provide medico-legal opinions as well as assisting the patients dealing with the medico-legal process.

6. Research in the Medico-Legal Area

A) Longitudinal Outcome of Patients involved in Medico-Legal Cases

Following the 1983 bushfires, I have followed approximately 90 patients who have been involved in the litigation process. In this study, I have been documenting the long-term effects of the litigation as well as with the assistance of a Masters student in Psychology, enquiring about their perceptions of the legal process and its impact. This study has also provided a setting for examining the issue of caseness and its assessment in the medico-legal setting.

B) Quality Assurance Issues.

In Australia, the legal system involves an adversarial process. This raises a series of important questions about the quality assurance of professional opinions. With the assistance of a PhD student, I have examined the diagnostic specificity and sensitivity of clinicians, by using a variety of methods of structured assessment of patients.

C) Relationship Between Impairment Disability and Handicap in Compensation Patients.

An important question in the assessment of damages is not only the presence of a psychiatric disorder, but the extent of the associated disability and handicap. In this study, an attempt is being made to examine the question as to whether unusual levels of disability emerge in the medico-legal setting in contrast to non-compensation settings.

D) Cross Cultural Issues of Disasters and Method of Relief Provision.

With a PhD student, I have been involved in examining an earthquake which occurred in the Yunan Province of Southern China which killed 800 people. This study has provided an opportunity to both look at the epidemiology of posttraumatic stress disorder as well as a number of the cross-cultural issues. As well, this is a setting in which no possibility of compensation could arise. It therefore provides a valuable setting in which to determine questions of severity and caseness.

I have given a series of presentations about these, including the Forensic Section of The Australian and New Zealand College of Psychiatrists, the Annual Meeting of the International Society of Traumatic Stress Studies, the Annual Congress of The Australian and New Zealand College of Psychiatrists and the Dr. Graham Dick Memorial Lecture and to the Law

Society of South Australia.

7. Law Reform

As a result of my experiences in both the compensation and third party litigation, I have been attempting to interest both the South Australian and Commonwealth Governments in Australia in the issue of law reform relating to victims of trauma. This group of people, particularly in actions where there is a single defendant in a number of claims, raises a number of questions about the organisation of courts in Australia and the presentation of evidence.