

## Call for General Sessions

*Emergency & Disaster Preparedness and Response:  
Using Cognitive and Behavioral Science to Make an Impact*

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The COVID-19 pandemic revealed incredible strengths and formidable weaknesses in our preparedness and response to a global health emergency. While many questioned how vaccines were brought to market seemingly quickly, it was years of basic science and theory development that provided the foundation for effective translation to practice. ABCT's 56th Annual Convention will spotlight research that helps us answer the question of where we are in developing the robust theory and sound science to be able to respond to health emergencies and syndemics that we face. Public discussions around changing behavior to end the COVID-19 pandemic were often not led by scientists with expertise in behavior change and consequently many efforts were not empirically based. Concurrently, additional emergencies were revealed, some of which were caused or exacerbated by COVID, others were longstanding but became more noticeable (e.g., police brutality, mass shootings, hate-based crimes, opiate addiction, youth suicide, rise in disasters due to climate change).

Do we have the basic science to respond to these emergencies? Do we know enough about the mechanisms of action and essential ingredients of our interventions so that we can quickly develop, adapt, and deploy cognitive and behavioral interventions to prepare and respond to emergencies (e.g., epidemics, pandemics, syndemics, disasters)? Do we have the public health systems and evidence-based policies in place to recognize mental/public health emergencies and respond to them effectively? Do we have evidence-based ways to communicate the evidence for cognitive behavioral interventions to the public and policymakers to effect change? Are we equipping current and future professionals with the necessary tools to respond to disasters? Finally, do we have the contingencies in our field to encourage this kind of science?

We encourage submissions across the spectrum of science (i.e., basic, translational, clinical, and public policy) to effectively meet the behavioral health needs of our communities during and after emergencies/disasters. We are particularly interested in highlighting research from multidisciplinary teams that address these issues in novel ways. Example topics include:

- Basic science or clinical/translational studies examining evidence-based approaches to addressing health emergencies
- Panel discussions of evidence-based approaches to changing public policy in the way that behavioral health emergencies are addressed or prevented (e.g., substance use, trauma, mental health disparities)
- Empirical studies/theoretical papers on effective methods of graduate/professional training on how to develop/implement the science of emergency/crises preparedness and response, particularly those that address evidence-based approaches to the development of cultural competence needed to address these issues
- Studies examining a theory-based mechanism of change in cognitive-behavioral interventions and statistical and methodological advances to better test mechanistic hypotheses
- Examinations of evidence-based CBT approaches within different cultural contexts and developmental levels to address mental health emergencies and behavioral change that impacts health and well-being across the US and its territories, as well as globally
- Basic science or clinical/translational studies on effective public information campaigns, particularly those aimed at promoting scientific literacy and promoting evidence-based health behaviors during emergencies
- Validation of measures of target mechanisms, particularly those implicated by behavioral theory, which are largely missing from current repositories, or reports on development of repositories for such measures
- Empirical studies/discussions of methods to modify professional contingencies or develop resources to facilitate a greater focus on theory development and high-quality basic science and translational research in behavioral health. Examples include open-science efforts and resources, efforts to affect reimbursement, and evidence-based approaches to peer review
- Examination of ways to facilitate and support novel methods of treatment delivery (telehealth, apps), particularly in underserved communities or communities in which mental health treatment is particularly stigmatized, which can be leveraged during emergencies

Submissions may be in the form of symposia, clinical round tables, panel discussions, and posters.

- The online submission portal for general submission opens February 7, 2022
- The online submission portal for general submission closes March 7, 2022