



3rd International Conference on

Mental Health and Human Resilience

June 21-23, 2017 London, UK

Special Session

Day 1

Mental Health 2017

3rd International Conference on

Mental Health and Human Resilience

June 21-23, 2017 London, UK



Shauna McKay-Burke

Canada

Patients are People first

A dozen or so years ago when the author has started in psychiatry, nursing was very different, often rigid and routine, sadly this was the expectation. Patients were looked at more statistically and less interpersonally. The author's days were kept busy with acquiring vitals and handing out pills, often with basic staff-patient dialogue, aimed at a more basic assessment, and then passing along same to the psychiatrist. The highlight of the author's day was meal time when the author could watch and interpret the candour of the patients without the presence of a magnifying glass on them. The author has also applied for 3 months to work in recreation activities. There the patients soared. They weren't so afraid to talk or show their passions, and there were a great many artists, intellects, gregarious personalities, athletes and those quiet and introverted. The author has learned more in those 3 months about the public and served, then the author has ever did working the actual nursing floor. Most of the entire author learned that psychiatric patients are people first. They may be anyone; even sometimes friends, family, colleagues, but they are person first. You can't realistically expect to walk into someone's life and ask them the most intimate questions of their psyche without first establishing relevant repoire and respect. The author once heard a colleague describing a patient as the schizophrenic in room 9. The author didn't like that term very much and decided to tell them then and there, that is found incredibly disrespectful. Apparently someone noticed, because it gave me a bit of reputation as an advocate. Back in 2006 with the advent of Tidal Model Nursing the author has got first glimpse of what it means to embrace the patient/client as a person foremost. It spoke to me of autonomy and to respect the individual as they ultimately know their limitations, experiences and tribulations better than anyone. The author has decided that she wanted to be a leader in her own area of education. She took numerous courses often with advancement, in such things as: SRAI (suicide risk), psychotropic medication and ultimately a 2 year distance psychiatric distance program through Douglas College. The LPN Mental Health Nursing Program focused on nursing practices like the nurse-patient relationship, interpersonal skills, nursing diagnosis, assessment, human emotions and stress for the patient and for the clinician. How we talk with and to our clients/patients has changed profoundly and that she is glad to say is for the better. With more dialogue comes acceptance and understanding so that we better support the cognitive, emotional and social aspects of the patient. She is also been fortunate enough to attend and speak at several conferences within my own country and internationally to support anti-stigma in Mental Health. She would have never dreamed such things at the start of my career. It has brought me to a much broader awareness and understanding of the plight of those with mental illness and their loved ones. It is bittersweet however, because my own family has been statistic themselves, yet she still believes in hope and that the will of the individual is far greater than that of the adversity.

Biography

Shauna Mckay-Burke, is a licenced practical nurse with experience in adolescent, adult and forensic psychiatry, she has also worked in geriatrics, VON and the OR. Mom of 3, she has also experienced her child's admission to psychiatric hospital for 3 months duration. She understands what it is like to be on either side of the hallway.

smckay_burke@hotmail.com



3rd International Conference on

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Scientific Tracks & Abstracts Day 1

Mental Health 2017

Human Resilience | Mental Health-Types | Mental Disorders | Women's Mental Health

Session Chair
Joanne Zanetos
College of Coastal Georgia, USA

Session Co-chair
Ren VanderLind
Texas State University, USA

Session Introduction

Title: Stigma and Resilience in College Students with Mental Illness

Ren VanderLind, Texas State University, USA

Title: Psychotherapy : The power of mind to change brain cells

Aboelezz Kalboush, Alnoor Specialist Hospital, Saudi Arabia

Title: The Mental Health Syndrome Paradigm: A New Paradigm to Improve Child Development and Protection

Colin Pritchard, Bournemouth University, UK

Title: Neurocognitive, Biologicals and Genetics factors and the Risk of Developing Borderline Intellectual Functioning (BIF) Disease among Kurdish Societies

Mohammad Reza Dawuodi, Turku University of Applied Sciences, Finland

Title: From Mouth to Mind: The Emotional Toll of an Obese Child

Vishnukumar S, Eastern University, Sri Lanka

Title: Evaluation of a compassionate mind training intervention with teachers to improve well-being

Frances A. Maratos, University of Derby, UK

Title: Ethical obligations of mental health practitioners towards psychiatric patients: A case study analysis

Annie M Temane, University of Johannesburg, South Africa

Title: Good Practices, Foods and Nutrition for the Brain

Kaufui Vincent Wong, University of Miami, USA

Title: EATING DISORDERS – ANOREXIA NERVOSA - A Deeper Perspective-From The Sufferers' Eyes

Begum Engur, King's College London, UK

Title: Overlapping Structural and Functional Abnormalities in Early- and Adult-Onset Schizophrenia patients

Tumbwene E. Mwansisya, The Aga Khan University of East Africa, Tanzania

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Stigma and resilience in college students with mental illness

Ren VanderLind

Texas State University, USA

In a duoethnographic study, two college students with bipolar disorder were investigated for their experiences of being college students diagnosed with mental illness. Through qualitative inquiry, it emerged that both participants have differing experiences of stigmatization due to having a diagnosed mental illness. This stigmatization occurred both from internal and external sources and varied by participant and life-domain (e.g., academic versus personal life). Feelings of stigmatization were also found to be mediated by the student's academic discipline, implying that some may be more open to issues surrounding mental illness than others. Another finding of note was that the participants demonstrated significant resilience in their management of symptoms while pursuing academics. This was often unrecognized by the participants, a type of unseen resilience that may indicate individuals with mental illness exhibit greater resilience than they perceive. This talk will cover the importance of stigma and resilience in the experiences of individuals with mental illness with a specific focus on college students. In addition to the duoethnographic data, autoethnographic data from my experiences as an individual with bipolar disorder will be used to further exemplify the complex nature of resilience and stigmatization that individuals with mental illness face, particularly in academia. If possible, research from a third study will be incorporated to add additional detail to the picture of stigma and resilience among college students with mental illness. This study examines students' experiences of stigmatization and resilience as related to their mental illnesses and includes a larger dataset.

Biography

Ren VanderLind studies phenomena related to the experiences of college students with mental illness. She is currently working on her Doctorate in developmental education with a focus on literacy and is researching how stigma and resilience affect students with mental illness in terms of their identity development. Although her degree is within education, her research agenda focuses specifically on supporting students with mental illness in their academic pursuits and development of self-concept. She is an advocate for destigmatizing mental illness and opening social discussions of this important issue.

lr16@txstate.edu

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3rd International Conference on

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Psychotherapy: The power of mind to change brain cells

Aboeizz Kalboush

Al Noor Specialist Hospital, Saudi Arabia

Introduction: Psychotherapy is evidenced to be as effective as pharmacological treatment in treating a wide range of psychiatric disorders including major depressive disorder, obsessive compulsive disorder and different anxiety disorders. Most of antidepressants have clear and well known mechanisms of action and cause specific brain changes. Regarding psychotherapy; it has been used effectively for decades without knowing a clear mechanism of action for it.

Objectives: This presentation will highlight the changes that the psychotherapy causes in the brain which mediates its treating effects; and how the change in minds of the patients (i.e., their thoughts) can cause changes in the function and more interestingly the structure of the brain cells themselves.

Methods: Critical review of various current and most updated literature on the topic.

Results: Psychotherapy can cause molecular changes on the level of the receptors and transporters of different neuro-transmitters. Brain function changes on the level of brain networks and circuits and brain physiological response to certain chemicals. Brain structure changes on the level of both grey matter and white matter.

Conclusions: Although still preliminary, the studies using neuroimaging for measuring change caused by psychotherapy will in the long run lead to a more understanding of how different psychotherapies work. This may lead to a development in which specific modes of psychotherapy can be designed to target specific brain circuits.

Biography

Aboeizz Kalboush is an Egyptian Consultant Psychiatrist. He has received his Master's degree in Psychiatry and Neurology from Ain-Shams University, Egypt in 2007, Arab Board in Psychiatry in 2007 and Egyptian Board in Psychiatry in 2008. He is the Head of Psychiatry Department in Al Noor Specialist Hospital, Saudi Arabia since June 2013. He is responsible for training of medical students (both undergraduates & postgraduates) in Psychiatry. He has participated as a speaker in international conferences in psychiatry beside his continuous educational activities directed to non-psychiatric doctors and health care staff to provide them with the updates in field of psychiatry as they have an important midway role between the psychiatric patients and the psychiatrist. He works in parallel on two main goals: Exploring the neuro-biological basis of both the different psychiatric disorders specially the challenging ones and their psychotherapeutic treatments.

aboulez@gmail.com

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3rd International Conference on

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The mental health syndrome paradigm: A new paradigm to improve child development and protection

Colin Pritchard

Bournemouth University, UK

This is a journey the team has shared as we gave up established ideas about child neglect/abuse, which is challenging as we confront anxieties about adding to stigma surrounding mental health problems. Consequently, colleagues might also find this difficult. Based on recent and new research our thesis is that practitioners need to consider the child-development-protection and psychiatric interface in a new preventative and protection paradigm. Rather than consider separate psychiatric diagnoses, psychoses, depression, personality disorder, alcohol, substance abuse, we urge they are considered as an over-lapping mental health syndrome paradigm that can improve child development and protection against neglect/abuse. Evidence is that Child-Abuse-Related-Death (CARDS) assailant's problems essentially psychological, although compounded by socio-economic factors the majority of assailants had mental health problems, psychosis or severe personality disorders: Neglect deaths are a minority. We show the mental health problems has a far higher death rate for young people than CARDS and challenge the concept of a neglect to abuse continuum at the extreme leads to CARD's. High UK child mortality is linked to relative poverty which needs a greater societal/political response. Mental health syndrome paradigm is based on a normative child development perspective, focusing on the often ignored impact parental mental illness on child's psychosocial development. Depression, suicidal behavior and mental health problems in adolescents and young adults are linked to history of adverse childhood, especially parental mental illness, but are ignored until the difficulties subsequently manifest themselves. The MHSP indicates we need a real integrated inter-agency holistic approach that is intergenerational to more effectively enhance the child's development, whilst making them safer.

Biography

Colin Pritchard is Britain's longest Research Active Social Work Professor, an Emeritus Professor, School of Medicine, University of Southampton involved in psychiatric training of medical students and psychiatric trainees. His research is very cross disciplinary, publishing recently in *British Journal of Neurosurgery-Social Work-Cancer*, *Scandinavian Journal Public Health* and *Journal of Social Work - Community Mental Health*.

cpritchard@bournemouth.ac.uk

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3rd International Conference on

Mental Health and Human Resilience

June 21-23, 2017 London, UK

Neurocognitive, biological and genetics factors and the risk of developing borderline intellectual functioning (BIF) disease among Kurdish societies

Mohammad Reza Dawoudi

Turku University of Applied Sciences, Finland

Differences in intelligence are the most significant factor in explaining levels of social progress and development. One measure scientists use to determine differences in intelligence is Intelligence Quotient (IQ), which is derived from standardized tests designed to assess human intelligence. Individuals with IQ scores between 90 and 109 are considered average intelligence and those with scores of 89 to 80 are considered below average or dullness. In this study our analysis of the literature has assessed the level of Kurdish intelligence quotient. The area of Kurdish nation, located in four different countries includes Iran, Iraq, Syria and Turkey. The average IQ of Iranian people is 84, Iraqi people 87, Syrian people 83 and Turkey people is 90. These numbers came from a work carried out from 2002 to 2006 by Richard Lynn, a British Professor of Psychology and Tatu Vanhanen, a Finnish Professor of Political Science, who conducted IQ studies in more than 80 countries. Based on this study, we estimate the average Kurdish IQ ranges between 83 and 90. Vanhanen and Lynn argue that IQ and the Wealth of Nations analyses the relation between national IQ scores and measures of economic performance. In this study, we aimed to assess the association between IQ (intelligence quotient) and neurocognitive, biological and genetics factors among Kurdish populations and then we drew inferences about the state of social progress and development of Kurdish societies and genetic characteristics based on a statistical pattern.

Biography

Mohammad Reza Dawoudi is a Data Com Engineer, Bioinformatician for nursing students and is the CEO of Finno Bio Stock Oy, championing the business of biomedical stock in Finland as well as a Manager of Research, Development and Innovation Lab in FBSC.

m.reza.dawoudi@abo.fi

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3rd International Conference on

Mental Health and Human Resilience

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From mouth to mind: The emotional toll of an obese child

Vishnukumar S¹ and Sujirtha N²¹Eastern University, Sri Lanka²University of Peradeniya, Sri Lanka

Childhood overweight and obesity have dramatically increased throughout the world over last three decades largely due to increased food craving and lack of physical activity. Apart from the known physical comorbidities obesity has significant psychological impact on growing children and adolescents thus it receives great interest in psychological research. Obesity imposes the risk of stronger psychological strain to both the child and the parents as obesity is a highly visible disorder. These experienced problems fulfill the diagnostic criteria of psychiatric disorders in about 10-20% of the children and adolescents. Obese child and parents are thought to be responsible for the weight of the child. The child who looks different among his peers is at increased risk of discrimination hence obese children are neglected while severely obese children are rejected by their peers. Obese children are facing social discrimination including teasing experiences, emotional problems such as depression or low self-esteem, school and functional restrictions and adverse effects on overall quality of life. There are consistent discriminations for obese people for education, employment and healthcare facility which are considered as three important area of life. Unraveling the relationship of the childhood obesity to psychological illness is important to recognize the impact of the disease for the development of effective primary, secondary and tertiary prevention strategies. From this work it is concluded that obese children have increased number of worse reported outcome in emotional and psychological health. Parents, teachers and clinicians should be made aware on the specific psychological impact of childhood obesity to target the effective interventions. Future studies should focus on the psychological impact of the childhood obesity to design the multifactorial interventional programs to overcome this health care burden.

Biography

Vishnukumar S is a dedicated Researcher with a strong background in health science especially in Pediatrics. He has expertise in evaluation and passion in improving the health and wellbeing. After obtaining his MBBS degree at Eastern University in 2012, he has obtained Postgraduate Diploma in Child Health in Sri Lanka. Currently he is following his MD in Pediatrics at Postgraduate Institute of Medicine, University of Colombo, Sri Lanka. He holds an appointment of Lecturer of Pediatrics at the Faculty of Healthcare Sciences, Eastern University, Sri Lanka. He is also a Member of the Sri Lanka Medical Council (SLMC), Sri Lanka Medical Association (SLMA), Young Scientist Forum (YSF), Perinatal Society of Sri Lanka (PSSL) and Nutritional Society of Sri Lanka (NSSL) where he contributes to the functional platform.

vishnukumars@esn.ac.lk

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3rd International Conference on

Mental Health and Human Resilience

June 21-23, 2017 London, UK

Evaluation of a compassionate mind training intervention with teachers to improve well-being

Frances A Maratos
University of Derby, UK

There is growing evidence that focusing on the cultivation of compassion-based emotions has important effects on mental states and well-being, with research demonstrating compassion-focused therapy and compassionate mind training (CMT) is effective in clinical and non-clinical populations respectively. Very recently, CMT initiatives have begun to be embraced within the UK educational system. Yet no rigorous evaluation of these interventions within a school setting has been progressed nor is there a standardized format in which the intervention is delivered. Therefore, the purpose of the present work was to assess the feasibility of conducting CMT interventions in school settings as well as evaluate the potential efficacy of such interventions. To this end, we provided all staff of a school specializing in the education of adolescents with social, emotional and behavioral difficulties, with a six session CMT intervention. The intervention included both educational aspects (e.g., emotional processing systems of the human brain and how/when these can be problematic) and specific exercises and practices (e.g., breathing exercises and imagery) to activate the parasympathetic nervous system and up-regulate positive soothing emotions. In evaluation, we adopted a mixed-methods approach. We took measures of well-being, including burn-out, anxiety, stress, depression, self-criticism and occupational self-compassion, pre and post the intervention. Additionally, to gain in-depth feedback concerning the actual CMT initiative we conducted a post intervention focus-group discussion with six staff members. In this talk, I will outline why compassion in school settings is potentially important, as well as overview the specific initiative staff undertook in the current work. I will further present the preliminary quantitative and qualitative results of the study, sharing our plans for the next phase of the research and inviting discussion.

Biography

Frances A Maratos is a Reader in Emotion Science. Her main interests are concerned with emotion processing and well-being, including self-compassion self-criticism, the role of attention processes in anxiety-related disorders and threat/emotional processing. To aid the comprehensive and robust investigation of research in these fields, over her 15 plus years researching emotion she has chosen to adopt an integrative approach and regularly uses a wide variety of experimental methods in her research.

f.maratos@derby.ac.uk

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3rd International Conference on

Mental Health and Human Resilience

June 21-23, 2017 London, UK

Ethical obligations of mental health practitioners towards psychiatric patients: A case study analysis

Annie M Temane and Marie Poggenpoel
University of Johannesburg, South Africa

Statement of the Problem: Mental health laws and policies are promulgated to safeguard the needs of psychiatric patients. It is a fundamental human right that psychiatric patients be treated in mental health services that are accessible and acceptable. Mental health care professionals are accountable for protecting the human rights of psychiatric patients. A recent incident in South Africa has appeared to infringe on the basic human rights of the provision of accessible and acceptable mental health services. One hundred psychiatric patients died due to hunger starvation, dehydration and lack of acceptable mental health services and being cared for by skilled mental health practitioners. The purpose of this paper is to investigate the ethical responsibilities of mental health practitioners towards their psychiatric patients.

Methodology & Theoretical Orientation: A qualitative, descriptive design with an interpretative approach was utilized. This issue is addressed through document analysis of articles published between 2015 and 2016 in newspapers. In-depth individual interviews will be conducted with mental health care professionals in order to understand their ethical obligations towards psychiatric patients.

Conclusion & Significance: Mental health practitioners are bound by their oath taking to speak up when there are violations of human rights. When these rights are violated and they take no action to protect their psychiatric patients, it may seem that their silence is assent. Mental health professionals are not exonerated from being unethical sound towards caring for psychiatric patients in mental health services.

Biography

Annie M Temane is a Psychiatric Nursing Lecturer for seven years. She has a passion for supervising doctoral and masters' candidates. She serves as a Research Ethics Committees Member and Ministerial Advisory Board Member on Mental Health. She has previously worked in various psychiatric health care settings and projects related to mental health. Her current interests are ethics and supervision and facilitating mental health of individual, groups and families.

anniet@uj.ac.za

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3rd International Conference on

Mental Health and Human Resilience

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Recommended Practices, Foods, and Nutrition for the Brain

Kaufui Vincent Wong
University of Miami, USA

This work strives to list the significant practices which are good for the body, practices which are especially good for the brain, as well as foods and nutrition which are especially good for the brain. The objective is to help researchers and promote brain health among the public. It is suspected that several of the practices may not be commonly known. The generation of discussion is healthy in the field of science, and this is a secondary function of this publication. Any omission of significant actions which can be easily adopted by anyone are regretted. This mini review also produced a listing of commonly available brain-healthy foods.

Below are some of the many ways to protect the health of one's body, including the brain.

- Eat a balanced diet of fruits and vegetables, whole grains, proteins and fats.
- Exercise regularly and properly.
- Think of food as one of the two essentials for a healthy body; the other being regular and proper exercise. Practices Especially Good for the Brain

Below are some of the many ways to protect the health of one's brain.

- Physically protect your brain e.g. wearing a helmet while on a motor-cycle.
- Do not partake of mind-altering drugs, including marijuana.
- Teach others about this and other good practices and conduct of life.
- Be a goose, rather than a chicken. In other words, be a leader in matters of brain fitness rather than a follower.

Below are some of the major foods that could help protect the health of one's brain.

- Eat dark chocolate.
- Keep one's body hydrated at all times.
- Avoid the 'weapons of mass destruction in the food world, eg. refined sugar, gluten,
- Eat more fruits and vegetables in the ratio of 1:2.
- Eat a daily supplement e.g. multivitamin tablet suitable for your age group.

Biography

Dr. Kaufui Vincent Wong, Life ASME Fellow, Life AIAA Assoc. Fellow Energy and the Environment. Renewable energy from the Wind, Water and the Sun (WWS). Renewable bioresources. Energy-Water-Food nexus and associated global issues. Decoupling of power generation from water. Climate change and its effects, both current and predicted, and mitigation at the local, national and worldwide levels; education, policies and devices. Drones and flight. Nanotechnology in the energy sciences, the environment and smart devices. Oil spill science, innovative oil boom systems, and environmental impact of spills. Groundwater transport and contamination – monitoring, modelling, predicting. Municipal solid wastes and medical wastes. Disposal, energy derivation and environmental impact. Health, nutrition and disease as they affect the human condition. Holistic view of human health, with nutrition and environmental factors influence factors..

kwong@miami.edu

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3rd International Conference on

Mental Health and Human Resilience

June 21-23, 2017 London, UK

Eating disorders-anorexia nervosa a deeper perspective from the sufferers' eyes

Begum Engur

King's College London, UK

Anorexia is, simply stated, starving yourself' to death. It comes from an obsessive fear and a desperate desire to maintain control over that fear. The symptoms of anorexia nervosa include refusal to maintain the minimal normal body weight for corresponding height, body type, age and activity level, intense fear of weight gain or being fat, feeling fat or overweight despite dramatic weight loss, loss of menstrual periods in post pubescent women and girls. Along with excessive exercise, restrictive eating (or binge and purge type) and extreme concern with body weight and shape. Every holiday it was always the same. Endless, insipid observations about her appearance are how big she had become and how tall she was getting. Then last year that comment by her uncle, spoken in a whisper when no one else was around, about how much weight she had gained. She shivered in disgust every time she thought of it. The author was thinking about food or about what she had just eaten or what she was just about to get rid of every minute of every half hour of every day. It was all consuming. That is the obsession of an eating disorder. It takes over your life; it took over my life. The cost has been enormous. Waiting for the food to arrive is always the hardest part. The author was starving, because Ed never lets her to eat any other meal on days that she goes out to eat. All she can think about is food. The author cannot pay attention in the conversation with friends, she just nod her head in the right places. The main aim of this speech is to provide a deeper perspective into anorexia nervosa, a very serious mental disorder having the highest mortality rate among females, instead of giving book/lecture-based descriptions about what the disorder is.

Biography

Begum Engur has completed her BSc in Psychology in Istanbul with high honor and as an International Baccalaureate Scholarship student. During the undergraduate years, she has served as a volunteer and did Internships in various CAMHS settings. In addition to the works, she has completed numerous trainings, earned certificates from institutions worldwide in the same area of interest. She has completed her MSc in Child Adolescent Mental Health at King's College London, Institute of Psychiatry, Psychology and Neuroscience. During MSc, she has completed her clinical placement as a Trainee Psychologist at South London and Maudsley NHS - Conduct, Adoption and Fostering Team; there she worked with adopted/fostered children having emotional, behavioral difficulties, anxiety disorders, pervasive developmental disorders, attachment disorders, traumatic stress and got trained and worked on parenting intervention. Scholar's Press published some of her academic works in various international journals and her MSc dissertation as a book.

begumengur@hotmail.com

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3rd International Conference on

Mental Health and Human Resilience

June 21-23, 2017 London, UK

Overlapping Structural and Functional Abnormalities in Early- and Adult-Onset Schizophrenia patients

Tumbwene E Mwansisya^{1,2}, Jingjuan Wang³, Guowei Wu¹, Chang Liu¹, Wiedan Pu¹, Haojuan Tao¹, Lena Palaniyappan⁴, Zheming Xue¹, Baoci Shan³ and Zhening Liu^{1,5}

¹Mental Health Institute of the Second Xiangya Hospital, Key Laboratory of Psychiatry and Mental Health of Hunan Province, Central South University, China

²The Aga Khan University of East Africa, Tanzania

³Key Laboratory of Nuclear Analysis Techniques, Institute of High Energy Physics, Chinese Academy of Sciences, China

⁴Centre for Translational Neuroimaging in Mental Health, Division of Psychiatry & Applied Psychology, Institute of Mental Health, Triumph Road, Nottingham, United Kingdom.

⁵The State Key Laboratory of Medical Genetics, Central South University, China

Statement of the Problem: Age of onset has a significant influence on the course and overall outcome in schizophrenia. However, the similarities and differences in the pathophysiology of early-onset (EOS) and adult-onset schizophrenia (AOS) remain elusive. The purpose of this study was to characterize the convergent neurobiological abnormalities in EOS and AOS as compared to their respective healthy controls by using a multimodal MRI approach; combined VBM, DTI and fMRI techniques.

Methodology & Theoretical Orientation: Using Magnetic Resonance Imaging, we investigated the gray matter morphometry, white matter integrity and functional connectivity in 73 participants; 17 patients with EOS and 20 with AOS were compared with age-, sex-, and educational status - matched healthy controls (HC) (n=16 and 20, respectively).

Findings: The superior temporal gyrus (STG) showed convergent structural and functional impairment in both EOS and AOS as compared to their respective HC. In a direct comparison between EOS and AOS, we found the EOS group to exhibit wider and increased FC of the STG, especially with the sensorimotor areas, default mode, visual recognition, subcortical and the auditory networks. The functional connections that exhibited hypo-connectivity in the EOS group were found to be correlated with clinical symptoms.

Conclusion & Significance: The variations in the structural and functional connectivity of this region in EOS and AOS subjects may explain the differences in psychopathology and treatment outcomes between these patients groups.

Biography

Dr. Mwansisya has a PhD from Central South University, People's Republic of China- Majoring in Clinical Psychiatry and Mental Health that made him to obtain a Doctorate of Medicine. He also has a Masters of Science in Mental Health from Muhimbili University of Health and Allied Sciences (MUHAS) and a Bachelor of Science in Nursing from University of Dar es Salaam, Tanzania. Prior to joining Aga Khan University where he is working currently, he worked as the head of department of clinical nursing and community health at the University of Dodoma for 7 years and mental health specialist at Mirembe Psychiatric Hospital for 2 years. Dr. Mwansisya has extensive experience in clinical Psychiatry and mental health. To date, he published 38 peer reviewed articles in International SCI Journals in the area of neuroimaging and community services. He is a professional registered mental nurse in Tanzania with an excellent academic and community services.

mwansisya@yahoo.co.uk

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Young Researchers Forum

Day 1

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Neural mechanisms of behavioral inflexibility in psychostimulant addiction: Markers of vulnerability and compulsive symptoms

Peter Zhukovsky

University of Cambridge, UK

Statement of the Problem: Behavioral flexibility is at the core of many disorders of compulsivity, including substance use disorder (SUD), obsessive-compulsive disorder (OCD) and schizophrenia. Inflexible behavior has been found to be at the core of these disorders; yet the precise neural changes underpinning the behavioral impairments remain to be clarified. In addition, inflexibility could predispose to development of the disorder rather than arise as a consequence of it. We previously found that diminished serotonergic signaling is crucial to inflexible, perseverative behavior. The current objectives include testing the hypothesis that trait-like variation in behavioral flexibility predicts SUD and exploring the neural mechanisms of compulsivity.

Methodology & Theoretical Orientation: Using rat models of human behavior, a carefully controlled study featuring baseline flexibility and anxiety assays, a long-access cocaine self-administration period and further flexibility assays was conducted. Neural changes in receptor availability, inflammatory markers and neurotransmitter availability were examined *ex vivo* using receptor autoradiography, qRT-PCRs and HPLC. Further, blood samples were analyzed for monoamine content and major serotonergic gene expression. Blood and brain biomarkers were linked to explore the translational role of blood serotonergic and dopaminergic measures in identifying addiction vulnerability.

Findings: The neural substrates of compulsive behavior include different aspects of serotonergic circuits, including monoamine oxidase (MAO) activity, serotonin receptor availability and metabolism in prefrontal areas (OFC, mPFC), the striatum and dorsal raphe nuclei of the brainstem. Trait-like variation in compulsive behavior and anxiety has been found to predict subsequent escalation of drug taking along with impulsivity and other traits that were identified previously. Further, self-administration of cocaine resulted in differential changes in neuroinflammatory signals in prefrontal and striatal regions and was related to the changes in dopaminergic and serotonergic receptor binding.

Conclusion & Significance: Identifying a predisposition to lose control over drug taking and seeking is crucial to developing interventions that help prevent substance abuse in the first place. Various personality traits, including impulsivity, anxiety and novelty seeking have been found to predict aspects of SUD and clarifying the neural substrates of these traits alongside their correlates in blood could prove vital to translational research seeking to identify the same vulnerabilities in humans.

Biography

Peter Zhukovsky specializes in neurobiology of compulsive disorders, with a focus on rodent models of psychostimulant addiction. His aims are two fold; firstly, to help identify vulnerability for drug abuse and thus help prevent it and secondly, to elucidate its key neural mechanisms to help find treatments, both pharmacological and behavioral. Using a recently developed rodent task measuring an aspect of cognitive flexibility, he combines a longitudinal approach with an ecologically valid self-administration paradigm to elucidate neural mechanisms of psycho stimulant addiction.

pz249@cam.ac.uk

Notes:

3rd International Conference on

Mental Health and Human Resilience

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Men's recovery from schizophrenia in Northern Nigeria

Bello Utoblo, Alan White and Steve Robertson
Leeds Beckett University, UK

Statement of the problem: Schizophrenia is a chronic and severe mental illness that affects over twelve million males worldwide. In Nigeria, estimates indicate that there are more males than females living with schizophrenia. Although, there have been studies on men and health in Nigeria, these have focused on sexual health. In contrast, men's experience of schizophrenia and the role of gender in influencing their beliefs about recovery has not been studied. The purpose of this study is to explore the factors influencing men's recovery from schizophrenia in northern Nigeria.

Methodology: Qualitative data obtained through in-depth interviews with, 30 male outpatients and 10 mental health professionals recruited through Nigerian psychiatric hospital outpatient clinics. Data were analysed for themes.

Findings: Participants in this study identified western medicine, traditional medicine, and family support as of significance to recovery from schizophrenia. The presence of gender flexibility within household members, where their contributions changed over time, was also a notion seen as influencing the men's ability to become involved in recovery from the mental illness. In particular, providing for the family needs becomes a shared responsibility, where the departure from traditional gender expectations imposes fewer family hardships, thus aiding the men's willingness to seek help, which rolls over to their recovery.

Conclusions & Significance: The influence of gender flexibility demonstrated in this study has implications for understanding men's management of recovery from schizophrenia. Recommendations are made for gender transformative programs for the men and those involved in their care that would help engage participants in discussions relevant to facilitate change in gender expectations. Future research is needed to further explore what aspects of gender can impact on men's mental health within the Nigerian and wider African context.

Biography

Bello Utoblo studied Mental Healthcare and obtained MSc in Mental Health. He is currently a Doctoral student at the School of Health and Community Studies in Leeds Beckett University, UK. He is keen on developing the understanding of the cause of schizophrenia and approaches to its recovery. He has built this current approach through exploration of the perceptions and experiences of male services users and their mental healthcare professionals within a community in northern Nigeria.

b.utoblo@leedsbeckett.ac.uk

Notes:



3rd International Conference on

Mental Health and Human Resilience

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Scientific Tracks & Abstracts Day 2

Mental Health 2017

Session 1

Day 2 June 22, 2017

Management and treatment of Mental Health issues | Mental Health & Rehabilitation | Mental Health care patterns

Session Chair
Sailaxmi Gandhi
NIMHANS, India

Session Co-chair
Ren VanderLind
Texas State University, USA

Session Introduction

- Title: Herbal-Drug Interactions: Poison vs. Medicine: How is Your Patient Coping?**
Joanne Zanetos, College of Coastal Georgia, USA
- Title: Central Human Functional Capabilities as a Framework for Health and Well-being**
Tahmineh Mousavi, Tehran University of Medical Sciences, Iran
- Title: Strengthening Resilience and preserving optimal mental health in Grief**
Sailaxmi Gandhi, NIMHANS, India
- Title: Can an e-recovery portal play a role in shifting practices towards recovery?**
Deede Gammon, Oslo University Hospital, Norway
- Title: Enhancing Resiliency after Combat Trauma Exposure**
Alan L Peterson, University of Texas Health Science Center, USA
- Title: Improving Outcomes for Criminal Offenders with Serious Mental Illness**
Lorena Fulton, Ohio State University, USA
- Title: How music therapy affects the emotional and physiological responses of hospitalized pediatric patients: Project of the Music Therapy and Health Foundation**
María Jesús del Olmo, Autonomous University of Madrid, Spain

3rd International Conference on

Mental Health and Human Resilience

June 21-23, 2017 London, UK

Herbal-drug interactions, poison vs. medicine: How is your patient coping?

Joanne Zanetos

College of Coastal Georgia, USA

The prevalence of non-traditional medicine is on the rise. More and more patients are turning to herbal medicine to casually treat what ails them. As a health care practitioner, it is important to recognize that concurrent use of herbs and drugs can exacerbate or minimize the effects of primary prescriptive drugs. Synergistic effects can create a cascade of pharmacodynamics chaos creating not only safety issues within mental health clients, but all persons who mix over the counter concoctions with their current medication profile. Integrating the six core competencies of the Quality and Safety Education for Nursing (QSEN) can provide patient-centered care that promotes safety through the use of interdisciplinary collaboration, evidence based practice, informatics and quality improvement. Collaborating with clients and their interdisciplinary team will enhance a better understanding of how to prevent the pharmaceutical effects of prescribed medications from transforming into poisonous tentacles.

Biography

Joanne Zanetos has her expertise in nursing education, specifically pharmacology in a patient-centered approach. She has utilized interactive teaching strategies concentrating on the six core competencies of quality and safety education in nursing (QSEN) in the clinical and didactic settings. She is a graduate from Duquesne University earning her DNP in Nursing Education, Master's degree in Nursing Education from Capital University and her Bachelor's degree in Nursing from Capital University in Columbus, OH.

jzanetos@hotmail.com

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Central human functional capabilities as a framework for health and well-being

Tahmineh Mousavi

Tehran University of Medical Sciences, Iran

Statement of the Problem: One approach related to addressing patients' rights that may provide a meaningful basis for conceptualizing the rights of people with disabilities is the capability or capabilities approach. People with mental illness typically experience challenges which can be related to Nussbaum's Central Human Functional Capabilities (CHFCs).

Purpose: The purpose of the study is to explore the views of Canadian occupational therapists related to the CHFCs and their understanding and perceived relevance, with respect to their professional practice.

Methods: An exploratory sequential mixed methods design was used. Phase one of the study consisted of a qualitative exploration of the views of occupational therapists about the CHFCs based on interviews. Findings generated from the qualitative study informed the development of a questionnaire survey that was used to collect data from a larger population of Canadian OTs.

Conclusion: Results indicated that CHFCs are related to mental health practice. CHFCs can be considered as a client-centered approach and a framework for health and well-being when working with clients with mental health issues.

Biography

Tahmineh Mousavi completed her PhD from the University of British Columbia in Rehabilitation Sciences in Vancouver, Canada. She currently is an Assistant Professor in the Department of Occupational Therapy in the School of Rehabilitation Sciences at Tehran University of Medical Sciences (TUMS). Her research has concentrated on the Capabilities Approach as an approach may provide a meaningful basis for conceptualizing the needs and rights of people with disabilities. Her study provides insights in terms of what the basic capabilities are and how health professionals can enhance their clients' capabilities. It provides a new conceptual framework for practitioners and researchers to pay more attention to their clients' urgent needs and rights, rather than simply focusing on their medical ones. Her researches also provide insights in terms of the applicability of central human functional capabilities in both health sciences' theories and practices.

t.mousavi@alumni.ubc.ca

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Strengthening resilience and preserving optimal mental health in grief

Sailaxmi Gandhi

National Institute of Mental Health and Neurosciences, India

Resilience is a process of healthy adaptation when confronted by stressors which could be loss (sudden death, loss of job, financial loss, etc.), trauma or a tragedy. The stressor could be any event that throws one off track and affects the individual's mental health. The capacity of the individual to bounce back to optimal mental health is resilience. This is not a trait that people are born with but rather consists of behavior, thoughts or actions that could be learned or developed in anyone. Resilience is personal and varies between individuals. Amongst various influencing factors, culture plays an important role. Grief is a process which involves several stages of denial, anger, bargaining, depression and acceptance. As one travels through these various stages, the individual's resilience or the capacity to bounce back defines one's mental health. A single case study analysis of one woman's story when struck by a personal tragedy – the sudden shocking demise of the spouse who was otherwise healthy reveals how strongly resilience preserves optimal mental health despite the most acute stressors. Some of the facilitators of resilience were inner reserve of strength, social support in the form of children (who were also in grief), friends, close relatives and neighbors; taking one day at a time (short term goals), trying to establish routine at the earliest, pets who had to be cared for, ceremonies which diverted and kept one occupied (diversion). Some of the barriers were traumatic ceremonies, financial problems, and lack of social support after the initial one week, official procedures, red tapism and attitude to women. This case study emphasizes the importance of inner reserve of strength, social support and diversion as key to preserving mental health and building resilience in the face of trauma. Societal changes which need to occur are doing away with traumatic ceremonies, red tapism and positive attitude to vulnerable women and official procedures that are more user-friendly for women in bereavement.

Biography

Sailaxmi Gandhi is an expert in stress management and psychiatric rehabilitation nursing. She is a Clinical Psychiatric Nursing Consultant as well as an additional Professor in the post-graduate and doctoral program in Psychiatric Nursing, working in an Institute of National Importance of NIMHANS, India. She has been awarded the Best Nursing Teacher Award by the President of India on International Nurses Day in 2014.

sailaxmi63@yahoo.com

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Can an e-recovery portal play a role in shifting practices towards recovery?

Deede Gammon, Monica Strand, Eng, Børøsd, Varsi and Ruland
Oslo University Hospital, Norway

Background: Mental health care for those persons with persistent care needs is shifting from a primary focus on symptom reduction towards personal recovery-oriented care. Web-based portals may facilitate this shift, but little is known about how such tools will be used, or the role they may play in personal recovery.

Objective: Describe the use of and experiences with the e-recovery portal ReConnect as an adjunct to ongoing community mental health care and explore its potential role in shifting practices towards recovery.

Methods: ReConnect was introduced into two Norwegian community mental health care services which used it for six months with the aim of supporting personal recovery and between service users and health care providers. Inclusion criteria were long-term care needs, at least one provider willing to interact with users through ReConnect. The portal augmented ongoing collaboration as each service user-provider dyad found appropriate, and comprised of: (1) a toolbox of resources for articulating and monitoring recovery processes, e.g., status/goals/activities relative to life domains (e.g., employment, social network and health), medications, network map and exercises (e.g., sleep hygiene and mindfulness), (2) secure messaging with providers having partial access to toolbox content, (3) a peer support forum. Quantitative data (system log and questionnaires) were analyzed using descriptive statistics. Qualitative data (e.g., focus groups and forum postings) are presented relative to the four common denominators of recovery-oriented practices; personally defined recovery, promoting citizenship, working relationships and organizational commitment.

Results: 56 participants (29 service users and 27 providers) made up 29 service user-provider dyads/teams. Service users reported having 11 different mental health diagnoses with an average of two diagnoses each (range 1-7). The 27 providers represented nine different professional backgrounds. Forum was the most frequently used module with 1870 visits and 542 postings. Service users control over toolbox resources (e.g., defining and monitoring personal goals), along with the 24/7 availability of peer-support, activated service users in their personal recovery processes and in community involvement. The collaborating dyads used the portal resources in highly diverse ways and both service users and providers reported needing more than six months to discover and adapt optimal uses relative to their individual and collaborative needs. The community with policies committed to recovery-oriented care pursued implementation of ReConnect as a permanent service following the six months, while the other declined.

Conclusions: Regardless of providers' portal use, service users' control over toolbox resources, coupled with peer-support offered an empowering common frame of reference that represented an immediate shift towards recovery-oriented practices within communities. While service users' autonomous use of the portal could eventually influence providers in the direction of recovery practices, a fundamental shift is unlikely without broader organizational commitments aligned with recovery principles, e.g., quantified goals for service user involvement in action plans.

Biography

Deede Gammon is a Psychologist and a Senior Scientist at Norwegian Centre for Telemedicine (NST), University Hospital in North-Norway and at Oslo University Hospital. She has also been an Associate Professor at University of Tromsø and a Guest Scientist at University of Oregon, USA. She has headed numerous interdisciplinary ehealth research projects, particularly with a focus on patients' and the public's use of information and communication technologies (ICT) to cope with illness.

deede.gammon@rr-research.no

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Enhancing resiliency after combat trauma exposure

Alan L Peterson

University of Texas Health Science Center at San Antonio, USA

Most people experience recurrent stress and challenges throughout their lives. Many of the greatest pleasures and accomplishments in life such as going to university, pursuing a career, getting married and having children are also challenges that can add significant stress to our lives. A universal goal for most people is to remain resilient during these life challenges or to bounce back and recover after suffering from significant adversity and sometimes even traumatic life events. This presentation will focus on psychological resiliency and strategies to manage life stressors, enhance resiliency, and recover from trauma. Much of what has been learned about psychological resiliency over the past decade has come from studies of trauma exposure and resiliency in deployed military personnel. Since 9-11-2001, almost 3 million United States military personnel have deployed to Iraq, Afghanistan and surrounding locations. Current estimates are that about 14% of returning veterans are at risk for posttraumatic stress disorder (PTSD) and up to 30% for some type of behavioral health disorder. This presentation will focus on enhancing resiliency after combat trauma exposure. The presentation will review evidence-based assessment and treatment approaches for PTSD and related conditions and describe factors which may lead to enhanced resiliency and posttraumatic growth in military service members and veterans. Examples will be used of military resiliency training and methods to facilitate recovery from posttraumatic stress. Applications for civilians to survive in life's battlefields will also be provided.

Biography

Alan L Peterson is the Director of the STRONG STAR Consortium and the Consortium to Alleviate PTSD. He is retired from the United States Air Force in 2005 after 21 years of active duty service including deployments in support of Operations Noble Eagle, Enduring Freedom and Iraqi Freedom. He is currently an Endowed Professor at the University of Texas Health Science Center at San Antonio, USA. He has clinical and research expertise in the areas of behavioral medicine, psychological trauma and resiliency. He has published 7 books and over 150 scientific manuscripts and has given over 300 presentations at national and international meetings.

petersona3@uthscsa.edu

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Improving outcomes for criminal offenders with serious mental illness

Lorena Fulton

Ohio State University, USA

Recidivism among repeat criminal offenders with serious mental illness is higher than recidivism among non-impaired offenders. Offenders with mental illness, who are released from jail are homeless and utilize publically funded human services, cost communities in terms of crime victimization, or become a burden to taxpayers as indigent patients in medical or psychiatric hospitals. These ongoing problems may be mitigated with effective program and treatment coordination during the incarceration and after release, because it will increase emotional stability and decrease psychiatric symptoms during the admission and upon release. Outpatient service adherence and formal community supervision are positive factors in reducing re-incarceration for inmates with serious mental illness. The lack of coordination between mental health services and the judicial system and inadequate continued care between incarceration and community settings places communities at risk of crime and offenders at risk of continuing to cycle through the system. Procedure for improving outcomes in the community for offenders with serious mental illness must involve both interagency collaboration and advocacy. Ideally, a small group of stakeholders can come together to create a plan that addresses barriers at different system levels. Sometimes advocacy associated with reducing stigma and educating stakeholders is the first step. For other communities, the first step is to determine the conduits for collaboration between agencies. This process requires both a micro and a macro intervention; our efforts to improve collaboration and advocacy must address the system of care simultaneous to addressing the needs of individual persons.

Biography

Lorena Fulton has been advocating for improved access to care and quality care for offenders with serious mental illness since 2007. She has served as a Member of the Prisoner Review Team and collaborated with professionals within the justice and mental health service systems and eventually worked as part of a team that formed the County's Mental Health Court.

Fulton1@ohio.edu

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How music therapy affects the emotional and physiological responses of hospitalized pediatric patients: Project of the music therapy and health foundation

Maria Jesus del Olmo Barros and Alicia Lorenzo
Autonomous University of Madrid, Spain

The present study aims at observing and analyzing the music of the enabling element of communication, as an organizing, change and transformation in pediatric patients, carried out in the Pediatric I plant of the University Hospital La Paz, Madrid. This project aims to direct care and research in the field of music and health. Likewise, we will try to analyze how the communication occurs, what are the elements that generate such changes in the patient and how to use them, always adapting them to the motor's potential, their physiology, their emotions, their cultural context and the time and place of therapy, whose specific therapeutic objectives are determined by the hospital's health team, families and by the therapist's own observation, so that it can be maintained, improve and/or restore the patient's quality of life. It is a situation created so that it can be expressed with freedom and confidence, without judgment, where he/she is the protagonist of its recovery and supported and guided by the therapist for such purpose. Although the study carried out with a very small sample of patients (10), it can be concluded that music therapy favors the wellbeing of patients, with changes in their constants and in some psychological responses, especially in the smile, continuing in this state at least until half an hour after the sessions.

Biography

Maria Jesus del Olmo Barros was graduated in Musical Pedagogy, Madrid Royal Conservatory, Spain. She has received degree as Music Therapist from Center for Music Therapy Research. She is a Member of the Atelier de Musicotherapie de Bordeaux, France and the President of the patronage of Music Therapy Foundation and Health. She is a Professor in the Music Department and Director of the Music Therapy Master Degree at Universidad Autonoma, Spain. She is also the Director of the Music Therapy Program at La Paz Hospital, Madrid and Chairperson of the Music Therapy and Health Foundation, Spain.

mjesus.delolmo@uam.es

Notes:

Session 2

Day 2 June 22, 2017

Nursing Interventions | Psychosis | Psychiatric Healing techniques

Session Chair
Sailaxmi Gandhi
NIMHANS, India

Session Co-Chair
Ren VanderLind
Texas State University, USA

Session Introduction

Title: A applicability of psycho-educational intervention for primary caregivers of people with eating disorders or attention deficit hyperactivity disorder

Margret Gisladdottir, Landspítali University Hospital, Iceland

Title: Learning to Become Resilient: An Empirical Study on Pathways

Ming-hui Li, St. John's University, USA

Title: Global burden of mental disorders in Mexico and the health system intervention

Lina Díaz-Castro, National Autonomous University of Mexico, Mexico

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An applicability of psycho-educational intervention for primary caregivers of people with eating disorders or attention deficit hyperactivity disorder

Margret Gisladdottir

Landspítali University Hospital, Iceland

Statement of the problem: Caregivers of young people with eating disorders (EDs) or attention deficit hyperactivity disorder (ADHD) are known to suffer difficulties and require support. Individuals with EDs usually develop impaired mental, physical, and social health, resulting in diminished insight. ADHD may affect the performance in school and social relationships including emotional instability. This can burden the caregivers of individuals with EDs or ADHD and some suffer from distress and depression. A training intervention for caregivers can equip them with the necessary supportive skills. The purpose of the study was to develop and evaluate the benefit of a therapeutic conversation intervention (TCI) for caregivers of daughters/sons with EDs or ADHD.

Methodology & Theoretical Orientation: A quasi experimental design was used and effects were assessed for statistical significance using ANOVAs and paired t-tests. The Calgary Family Assessment and Intervention models, the Illness Beliefs Model and the New Maudsley method were used as theoretical frameworks. The study was based on caregivers (N=50) of individuals (12-24 years) with EDs (A) and on caregivers (N=60) of individuals (13-17 years) with ADHD (B). Measurements were conducted post-intervention and at follow-up.

Findings & Significance: The EDs study revealed significant differences in primary caregivers perceived support, illness beliefs and quality of life, self-efficacy, care giving demands and patient behavioral difficulties post intervention and at follow-up. The ADHD study revealed significant improvement in primary caregivers' quality of life post intervention and at follow-up.

Conclusion: The study's results shed light on how health care professionals may help caregivers of young people with EDs and ADHD in their supporting role. In turn, the treatment information can improve service in health care centers and hospitals.

Biography

Margret Gisladdottir has expertise and passion in helping caregivers of adolescents and young people suffering from mental disorder in developing their skills in their supportive role and to enhance outcomes for patients and caregivers in terms of self-efficacy, burden and quality of life. She has developed and evaluated a therapeutic intervention after years of practice, research and teaching, both in clinical and academic settings.

marggisl@lsh.is

Notes:

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Learning to become resilient: An empirical study on pathways

Ming-hui Li

St. John's University, USA

Statement of the Problem: The resilience process has been considered a learning process. Researchers indicated that resilience is developed in the process of individual-environment interactions. The ability to learn from individual-environment interactions (life experiences) may play an important role in developing resilience. Few if any studies have empirically explored the relationship between life experience-learning (LEL) and resilience. This study addressed this gap in the literature.

Methods & Theoretical Orientation: Based on literature on human resilience, this study has developed and evaluated a path model that links attachment anxiety, attachment avoidance, LEL, self-compassion, self-efficacy and resilience. Specifically, the study explored (1) how are attachment anxiety and attachment avoidance related to LEL and resilience, (2) can LEL influence resilience directly and indirectly through self-efficacy and self-compassion, (3) how stable are the relationships among the six previously mentioned variables, under the influence of stress and generalized anxiety? A total of 187 participants took part in the study. Data were collected using scales that have good validity and reliability. Structural equation modeling and Haye's moderated mediation approach were applied to analyze data.

Findings: Attachment anxiety and attachment avoidance each negatively influenced LEL and resilience. LEL could directly influence resilience and indirectly influence resilience via self-efficacy and self-compassion. Neither stress nor generalized anxiety could intervene direct and indirect effect from LEL to resilience.

Conclusion & Significance: The direct and indirect relationships between LEL and resilience were stable and consistent they were not changed by stress or generalized anxiety. Attachment anxiety and attachment avoidance each was more detrimental than stress and generalized anxiety were negatively impacting the relationship between LEL and resilience. Practical implications: (1) Enhancing LEL, self-compassion and self-efficacy can promote resilience and (2) Resilience programs can be more effective when they include elements that can reduce the impact of attachment anxiety and attachment avoidance.

Biography

Ming-hui Li is a Clinician, a Researcher, and a Professor. He is a licensed Mental Health Counselor in New York State and a licensed Professional Counselor in the State of Pennsylvania. In addition, he is a National Certified Counselor and a Nationally Certified Psychologist in the USA. His clinical and research interests include stress coping and resilience development. Some of his research projects on resilience are cross-cultural studies. He has published 18 articles in national journals such as *Journal of Counseling & Development* and *Journal of Multicultural Counseling & Development* and in international journals such as *International Journal of Stress Management*. He has conducted 40 presentations at national conferences and 41 presentations in meetings at the local, regional or international levels.

lim@stjohns.edu

Notes:

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Global burden of mental disorders in Mexico and the health system intervention

Lina Diaz-Castro

National Autonomous University of Mexico, Mexico

Demographic and epidemiological changes reflect the distribution and impact of the global burden of disease in the world. The main change from 1990 to 2010 was the reduction of infectious diseases and an increase of non-communicable diseases, including mental disorders, which increased from 5.4% in 1990 to 7.4% in 2010. Worldwide, mental and substance use disorders accounted for 183.9 million DALYs (Disability Adjusted Life Years). The depression has the highest prevalence, the number of DALYs for this condition increased 38% from 1990 to 2010. 13% of the total global burden of disease is generated by mental disorders. In Mexico, we quantify the global disease burden attributable to mental and substance use disorders and explore variations in burden by disorder type and age. Summarizes DALYs assigned to each mental and substance use disorder in 2010. These disorders as a group ranked as the 50 leading cause of DALYs after diabetes and cardiovascular diseases, major depressive disorder was responsible for the highest proportion of mental disorders with 7.02% of DALYs. Mental disorders are a principle cause of the global burden of disease in the world and in low-to-middle-income countries (LMICs) such as Mexico. But health systems have not responded adequately to confront this problem. Treatment rates for these disorders are low, particularly in LMICs, where there are treatment gaps of more than 90%. Historically, major health policy decisions have been informed by mortality statistics. Although the understanding of disease causing premature mortality expanded as a result, the lack of emphasis on morbidity undervalued the global impact of prevalent and disabling disorders with lower mortality, such as mental and substance use disorders. The politics of mental health in LMICs such as Mexico make access to the health system difficult moreover services are insufficient and not well distributed.

Biography

Lina Diaz-Castro has completed PhD in Sciences in Health Systems in the National Institute of Public Health (NIPH), Mexico. She has obtained her Master's degree in Epidemiology in the NIPH, Mexico. She studied Medicine in the School of Medicine of the National Autonomous University of Mexico (UNAM). She has a degree in Medical Specialty in Psychiatry in the UNAM and the Fray Bernardino Álvarez Psychiatric Hospital, Mexico. She is certified by the Mexican Board of Psychiatry as a Member of the Mexican Society of Biological Psychiatry and Member of the World Federation of Societies of Biological Psychiatry (WFSBP). She is an Instructor of a postgraduate course in Psychiatry for medical residents specializing in psychiatry in the School of Medicine of the UNAM.

dralaindiaz.ld@gmail.com

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Video Presentations Day 2

Mental Health 2017

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Childhood and adolescent mental health and transgenerational and cumulative traumata in the Middle East region

Leyla Akoury Dirani

American University of Beirut, Lebanon

The Middle East has lived decades of wars and displacements. More recently the world has witnessed major population displacements after the ISIS reign. Displaced as well as hosting communities experience traumatic events, cultural tensions and increase of the communitarianism and youth radicalization. This phenomenon contaminated the western world. This presentation will give an overview of the situation in the Arab region and will particularly focus on the case of Lebanon. The leading question will be whether the ongoing turmoil has created resiliency or helplessness in Arab children and adolescents. To try to give an answer, we will analyze the prevalence of mental health disorders in children and adolescents, the trajectories of posttraumatic stress symptoms in refugee population and the impact of the psychosocial interventions on their wellbeing. Future perspectives for more effective mental health and psychosocial supports are discussed.

Biography

Leyla Akoury Dirani has earned her PhD in Clinical Psychology and Psychopathology from Paris. She is currently an Associate Professor in the Department of Psychiatry of the American University of Beirut, Lebanon. She provides clinical services and teaches medical students and clinical psychology interns. She is also the Director of the Child Protection Program and Member of the Ethics Committee at the American University of Beirut Medical Center. As a Scholar, she focuses her research on prevention and intervention studies in the field of child and adolescent mental health. She is also the current President of the Lebanese Psychological Association.

la55@aub.edu.lb

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