2537th Conference



5th International Conference on

Mental Health and Human Resilience

March 07-08, 2019 | Barcelona, Spain

Posters

Mental Health 2019

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Towards an understanding of substance use risk and prevention factors to promote mental health and human resilience among high school age youth

Alexander Reznik Ben Gurion University of the Negev, Israel

Substance use was studied among 537 Israeli male (76%; n=407) and female (24%; n=130) high school youth (M age-15.0 years) from 2013-2016. A valid and reliable data collection instrument was used. Demographic factors used for analysis were age, gender, country of origin (e.g., Israel, former Soviet Union, and Ethiopia), and regular or residential school status. The study aim was to understand substance risk and protection factors that may influence resilience to prevent substance use. For the entire study cohort, findings evidence current last 30 day cigarette smoking (37.6%); alcohol use (53.9%) including binge drinking (21.0%); as well as inhalant (5.5%) and cannabis (3.9%) use. No differences were found among the youth based on gender status. Immigrant origin youth reported higher levels of smoking, alcohol, cannabis and inhalant use than those with Israeli origin status. Youth in residential facilities reported higher levels of substance use than those attending regular school. Family low socio-economic and/or immigrant status were risk factors linked to substance use among residential school youth. For both regular and residential high school youth, the main risk factors were easy access of harmful substances and being involved with non-structured night activity. Religiosity and good relationships with family members and friends were protection factors for both study groups. Study findings have relevance for policy, service provision, and the training of program personnel to promote mental health and human resilence among youth.

Biography

Alexander Reznik is Senior Research Associate of the Regional Alcohol and Drug Abuse Research Center, Ben Gurion University. He received his PhD from the Russian Academy of Sciences - the Institute of Psychology, (Moscow). He has served in key education and research roles with the Far Eastern Federal University and the Maritime State University (Russia). He is author of books and scientific publications on substance abuse among high risk populations including issues of immigration, school dropout and acculturation. His research interests include multicultural aspects of substance abuse, resilience factors of substance abuse and statistical methods in addictology.

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A qualitative study on the resilience of public health nurses who supported sufferers of the Great East Japan earthquake over the last six years

Manami Amagai¹, Tomoko Yamanouti¹, Mayumi Nitta², Yumiko Takeuchi³, Yumiko Sawada³ and Takahashi Makiko⁴ Kyoto University, Japan

Purpose: Seven years have passed since the Great East Japan Earthquake and subsequent Fukushima Nuclear Disaster occurred in Fukushima in 2011. Residents are still faced many difficulties. The role of public health nurses that supports those victims continuously is large in the community. However, how to support themselves as public health nurses is an urgent task, but it is in a fumbling state. The purpose of this study was to clarify the resilience of public health nurses who supported evacuee residents from the disaster aftermath for six years and to examine a support approach that is tailored to the feelings of the public health nurses.

Methodology: The content of the interview was divided into two aspects: the difficulty and support for public health nursing activities after the disaster. They were analyzed qualitatively.

Findings: Public health nurses assisted evacuees in the shortage of supplies and information immediately after the disaster, and became overworked. In addition, a new health problem due to prolonged evacuation life, human relations with residents who turn to hostile hostility, situations where self-care can't be done despite being victims by job priority was under pressure. However, supplementary support by the medical team, mutual cooperation with residents, emotional support by close friends, pride as a public health nurse were supposed to be supported.

Conclusion & Significance: Due to the disaster, the sense of responsibility to be a public health nurse is the driving force of the activity. On the other hand, they become heavy pressure, causing physical and mental exhaustion. It was suggested that a support system is needed to consult the public health nurse herself so that mental health can be maintained.

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Biography

Manami Amagai is a Professor in the field of Psychiatric Nursing at Kyoto University in Japan. She interested in mental health to residents and supporters after the disaster occurred. She is searching internationally for collaborators who develop mental health services after disasters.

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The lived experience of GP burnout

Philippa Shaw University of Westminster, UK

General practice, the foundation of our primary care in England, is in crisis. Over the last decade there have been a growing number of patients with increasing complex health needs - a trend of mounting workload for GPs which has failed to be matched by the necessary funding and workforce. Recently concern for the wellbeing of our GPs has risen, with over half of the GPs across Britain showing signs of burnout. Burnout has been described as a syndrome characterised by emotional exhaustion, depersonalization and a lack of personal accomplishment. The suggested associations with burnout for a GP are far reaching, from a reduced ability to listen and empathize with patients to increased rates of depression and suicide. To date, no research has tried to directly explore the shared personal experience of burnout for GPs within the current NHS climate. It is important to give voice to GPs working on the front line of healthcare to inform future research and healthcare policy. Therefore, the aim of this study is to increase our understanding of the experiences of GPs who self-identify as experiencing burnout. In person interviews were organized with GPs which explored topics such as overall experience of burnout and techniques the GP uses to maintain work quality. Transcribed interviews were analysed using interpretive phenomenology analysis, an approach within qualitative research which allows the researcher to gain insights into a subjective experience and interpret how the participant makes sense of their experience, in this case, the experience of GP burnout.

Biography

Philippa Shaw is in her second year of study working towards a PhD in Psychology. She is investigating the topic the impact of GP burnout on patient care, at the University of Westminster. The presented study is one of the pieces of research which will contribute to her PhD thesis.

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Study on the resilience and its related factors of disaster victims who live in evacuation areas for an extended time: Five years after the Great East Japan earthquake

Tomoko Yamanouchi, Manami Amagai, Mayumi Nitta, Yumiko Takeuchi, Yumiko Sawada and Takahashi Makiko Kyoto University, Japan

Introduction: The Great East Japan Earthquake in 2011 caused unprecedented damage, forcing victims to live in evacuation areas for an extended time until now. Understanding the psychological stresses experienced by the evacuees and their will (resilience) to cope with numerous hardships that accompany the changes in the living environment is essential to provide continuous long-term support in the future.

Objective: This study aimed to understand the resilience and its related factors of disaster victims who live for an extended time in evacuation areas, five years after the Great East Japan earthquake.

Methods: A questionnaire-based survey was conducted in 2016, five years after the earthquake. Connor-Davidson Resilience Scale (CD-RISC 10) was used as the resilience scale. The questionnaire consisted of mental health, demographic data, activity status, social capital-related items, stressors, and stress relieving methods. Multiple logistic regression analysis was carried out by using the factors with the value of Cramer association greater than 0.1 and CD-RISC10 total score as the independent and dependent variables, respectively.

Findings: A questionnaire-based survey was conducted for 8564 people, and responses were obtained from 3389 people (39.5% collection rate). After excluding data with missing values, the data from 2908 subjects were analyzed. Multiple logistic regression analysis showed that being purposeful (OR:1.77,95% CI:1.39-2.25), accepting myself (OR:2.07,95% CI:1.66-2.59), not worrying too much (OR:2.03,95% CI:1.60-2.58), acquisition of social resources and information (OR:1.50,95% CI:1.19-1.89), and laughter (OR:1.40,95% CI:1.11-1.75) were significantly related to resilience.

Conclusions: Our results suggest that two-pronged assistance that focuses on realistic countermeasures, such as obtaining information and having specific goals, and emotional coping methods, such as accepting oneself and laughing, are necessary to improve the resilience of disaster victims who live uncertainly in evacuation areas for an extended time.

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Biography

Tomoko Yamanouchi works as an Assistant Professor in the field of Psychiatric Nursing at Kyoto University, after working as a nurse at a mental hospital. Her research mainly deals with the changes in mental health of disaster victims and mental health in nursing workplaces.

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The characteristics of substance abusers attending a detox hospital in Oman and patterns of their utilization of healthcare services

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Introduction: It is indicated that Oman is witnessing an increase in issues pertinent to alcohol and drug abuse.

Aim: The aim of this study was to identify the characteristics of drug abusers attending a detox hospital in Oman and the pattern of their healthcare services utilization. Related aim was to ascertain the age group most vulnerable to alcohol and drug abuse.

Method: A cross sectional study was conducted in a tertiary care center for alcohol and drug abuse in Oman. The patients who are in treatment for detox were selected from a convenience sample from among patients who were seeking consultation for alcohol and drug abuse at the center. A six-part questionnaire was designed to solicit their socio-demographic background and clinical history, as well as healthcare utilization and its perceived barriers. Chi-square analysis was used to evaluate significance of differences among categorical data. Logistic regression modelling was used to obtain measures of associations after adjusting for confounding factors.

Results: Among patients (n=293) seeking detox, 99% were male and younger than 30 years. A peer influence on the initiation to substance abuse problems was significant. Most patients had poly-substance abuse problems including intravenous drug abuse. Cannabis and alcohol were the first substances consumed by most patients. Hepatitis C and psychiatric disorders were found to be the most common co-morbidities. Those dependent on cannabis and benzodiazepines were more likely to perceive "improvement" upon receiving detox.

Conclusion: This study indicates that males below 30 years of age with poly substance abuse problems are likely to attend a detox hospital in Oman. This study has identified the socio-demographic background, risk factors and perceived barriers that could lay groundwork for further scrutiny on emerging substance abuse problems in Oman.

Biography

Al Khatib Rashid Al Saadi, MD, graduated from college of Medicine at Sultan Qaboos University in Oman and first year Psychiatry Resident in Oman Medical Speciality Board. He is interested in drug addiction and participant in community psychiatry awareness programs and campaigns.

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Is fatphobia or psychosomatically expressed psychological distress central to deliberate food restriction? An exploration of populations from the Arabian Gulf

Harith Hamood Said Al-Aamri¹, Samir Al-Adawi², Sangeetha Mahadevan¹, Nasser Al-Sibani², Ibrahim Al-Zakwani² and Atsu S S Dorvlo² ¹Oman Medical Specialty Board, Oman ²Sultan Qaboos University. Oman

Introduction: Existing psychiatric nomenclature has dwelled on the view that cardinal distress among youngsters with deliberate food restriction is termed "fatphobia". As per international psychiatric classifications, deliberate self-harm is often conceived as being an integral part of anorexia nervosa. Follow-up data from non-western populations have minimized the centrality of this condition.

Aims: To compare the performance on indices of deliberate food restriction, fatphobia and psychosomatically expressed psychological distress among Euro-American and Omani children living in Oman, an Arabian Gulf country.

Methods: The presence of eating disorders was tapped into using the Eating Attitude Test. Eating Disorder Inventory and Bradford Somatic Inventory solicited the presence of psychosomatically expressed psychological distress among Euro-American and Omani children living in the urban areas of Oman.

Results: The data suggest dichotomous performance with nonwestern children showing higher endorsement on indices of psychosomatically expressed psychological distress than western counterpart who showed more propensity toward fatphobia.

Conclusion: If the present finding withstands further scrutiny, existing psychiatric nomenclatures need to incorporate data from non-western societies that comprise of 80% of the global population. The present finding has significant implications for unearthing what is universal, versus what is cultural in order to lay the groundwork for understanding the emerging epidemic of deliberate food restriction around the world.

Biography

Harith Hamood Said Al Aamri, MD, graduated from College of Medicine at Sultan Qaboos University in Oman. Currently he is in the third year of Psychiatry residency in Oman Medical Speciality Board. He is interested in eating disorders and somatoform disorders and participant in community psychiatry awareness programs and campaigns.

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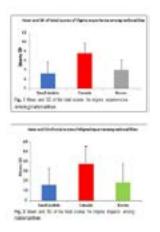
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The experience and impact of stigma in Saudi people with a mood disorder

Hanoof AlKhalaf King Saud University, Saudi Arabia

Stigma plays a powerful role in an individual's attitude towards mental illness and in their seeking psychiatric and psychological services. Assessing stigma from the perspective of people with mood disorders is important as these disorders have been ranked as major causes of disability. Our aim in this study is to determine the extent and impact of stigma experiences in Saudi patients with depression and bipolar disorder, and to examine stigma experiences across cultures. Ninety-three individuals with a mood disorder were interviewed at King Saud University Medical City using the Inventory of Stigmatizing Experiences (ISE). We detected no significant differences in experiences of stigma or stigma impact in patients with bipolar vs. depressive disorder. However, over 50% of respondents reported trying to hide their mental illness from others to avoiding situations that might cause them to feel stigmatized. In comparison with a Canadian population, the Saudi participants in this study scored significantly lower on the ISE, which might be due to cultural differences. More than half of the Saudi participants with a mood disorder reported avoiding situations that might be potentially stigmatizing. Comparing stigma there are higher levels of stigma in Canada and Korea than in Saudi Arabia. Our results suggest that cultural differences and family involvement in patient care can significantly impact self-stigmatization. The ISE is a highly reliable instrument across cultures.



Biography

Hanoof Alkhalaf is a graduate of King Saud Medical School. She trained in psychiatry at the University of Saud department of psychiatry .Hanoof interested in mental health researches and awareness. She is planning to build up program of stigma awareness in Saudi Arabia .Hanoof is member in National committee for mental Health promotion. She is active participant in Empowerment Program, which aims to empower medical students to face and overcome their psychological stressors that affect their academic performance. She is volunteering in program and research about Prevalence of stress &Psychiatric illness among residents of the Saudi commission for Health Specialties.

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Procedural processing in Tourette's syndrome

Alexandra Radosi, Szabo E D, Tóth-Faber E, Bunford N and Takacs A Research Centre for Natural Sciences, Hungary

Objective: Tourette's syndrome is a neurodevelopmental disorder characterized by tics, which are fast, repeated but not rhythmic involuntarily and suddenly appearing movements or vocalizations. These symptoms are associated with significant subjective and social burden. To date, neuropsychological studies have primarily focused on deficits and, albeit findings are mixed, those generally implicate cognitive flexibility, inhibition, and verbal fluency in the disorder. However, mapping potential strengths is also a key, as those may reflect relevant resilience factors. There is a reason to believe that faster procedural processing, which results from hyperkinetic over activity due to the dysfunctional frontal lobe and basal ganglia processing, is one such area of strength. The aim of this study was to explore the association between individual differences in procedural processing and verbal fluency in children with Tourette's syndrome and typically developing peers.

Methods: Participants were 42 children (6 girls) with Tourette's syndrome (Mage=148.43 (months), SD=16.41) and age- and gender-matched healthy controls (Mage=149.38, SD=16.98), tested on three types of verbal fluency tasks: action, semantic and phonemic. We hypothesized that the Tourette group would perform better in the action and phonemic fluency tasks.

Results & Discussion: Findings showed that in the phonemic fluency task, children with Tourette's syndrome listed more verbs (t(1)=295.23, p<0.001) and made fewer errors (listing an incorrect word: t(1)=7.81, p=0.005; repeating a word t(1)=8.19, p=0.004) than controls. These results confirm strength in phonemic fluency in patients with Tourette's syndrome. In the poster, implications for clinical/ neuropsychological conceptualization and prevention and treatment will be discussed.

Biography

Alexandra Radosi earned a BA degree in Psychology from Eötvös Loránd University (ELTE), Faculty of Education and Psychology, in 2016. She also obtained her MA at same university in 2018. The title of her master's thesis was procedural processing in Tourette's syndrome. Following graduation, she joined the Lendület Developmental and Translational Neuroscience Research Group as a Pre-Doctorate Research Assistant at the Institute of Cognitive Neuroscience and Psychology, at the Research Centre for Natural Sciences (RCNS) of the Hungarian Academy of Sciences. She is planning to begin her PhD studies, focusing on neuroimaging of individual differences in motivational and emotional functioning.

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Resilience moderated by lack of sense of security in anorexic adolescents

Andrea Kovesdi, Krisztina Toro, Eva Hadhazi and Rita Foldi Fodorne Karoli Gaspar University, Hungary

Introduction: Resilience is a personality trait that is closely related to adaptability, including positive management of change, positive self-image, and self-acting behavior (Masten, 2001). Previous studies have shown the reverse relationship between resilience and depression (Schiavone et al., 2013; Vuitton, de Wazières, Dupond, 1999). The lack of sense of security has a profound effect on affective factors leading to dysfunctional functioning, preventing the possibility of flexible adaptation. Several studies have confirmed the negative impact of insecurity, hope and resilience (Haase et al., 1999, Haase, 2004, Woodgate, 1999). In this study we examine the moderating effect of the lack of sense of security in terms of mood dimensions, such as sadness and hopelessness. Higher resilience value is a significant protective factor against depression (Birmahe 1996). Also, higher resilience is a protects against the development of psychiatric diseases (Bachen, Chesney, Criswell, 2009, Erim et al., 2010). Anorexia is a severe psychosomatic disease (Túry, Pászthy, 2008), that can become chronic in adolescence. Deaths are 6-10% within 10 years (Fisher, 2006). Anorexia is one of the psychosomatic diseases Rief et al., 1992) In their semi-structured interviews, have shown that the somatoform disorder appears to be (73%) preceded by affective disorders (Rief et al., 1992). In the comparison of the two groups, Resilience shows a significant difference t (53) = $4.174 \text{ p} \cdot .001 \text{ r} =$.497, the control group is higher (Graph 1). Correlation is the strongest negative correlation with Resilience there is sadness (r = -. 610), Hopelessness, Anhedonia, Inadequacy, Lack of sense of security is almost the same (r = -. 5 to -6) correlation and the weakest with guilt (r = -414). There is no significant relationship between Irritability and Resilience (Figure 2). Sadness itself is an explanatory factor in the model. We found a positive correlation between Ruthlessness and Hopelessness; the Feeling of Sadness, the more the Hope appears (Table 2). The lack of a sense of Security moderates the effect of Sadness on Hopelessness (Figure 2). Discussion; According to our results, in the group comparison, the value of resilience is lower for anorexic adolescents. Similar results were found among researchers in adult eating disorders (Hayas et al., 2014). In the regression model, we have found significant explanatory power in the Depression Scale, Sadness subscales. Previously, a negative relationship between Sadness and Hopelessness was described with Resilience (Haase et al., 1999, Haase, 2004, Woodgate, 1999). In our study, we confirmed the moderating role of the Lack of Security on the Sadness and Hopelessness. Furthermore, the lack of a higher sense of Security increases the negative impact of Hope on Resilience. The lack of a higher sense of security increases its vulnerability through its moderating role. Conclusion; Negative affective factors exhibit vulnerability to Resileincie, as has been shown earlier. According to our study, the strongest effect of Depression on Dimension is on Resilience in the whole sample. This effect is exacerbated by the moderating effect of the lack of Security. The relationship between Sadness and Hopelessness is negatively affected by the lack of Security, increasing the Hope that has a negative effect on Resilience. All in all, in terms of Resilience we underline the importance of Sadness, Hopelessness, and Lack of sense of security as negative moderator of the two above.

Biography

Andrea Kovesdi examines the resilience of adolescents in several ways. It focuses on emotional regulation, affective components, and different self states on the sine morbo and anorexic patterns. In addition, resilience and psychosomatic relationships are also sought in the hope of contributing to the research results of recovery from the disease. The Resilience Development Research Group is looking for broader relationships of resilience during pregnancy, the effect of divorce on children and children with ADHD.

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Stigma towards mental illness among Saudi laypeople

Abrar Almajed King Saud University, Saudi Arabia

Introduction: Although healthcare delivery system in Saudi can be considered as one of the best in the region, the field of mental health is still sadly underestimated. It appears that when people suffer from mental health problems, they seek assistances from healers who use usually exorcism for driving out demons, envy and witchcraft, some of them might be on reciting Quran, as such may lead to developing negative attitudes towards mental illness, therefore stigma is there, based on all. However, destigmatization has increasingly become a national demand for improving the field of mental health services and facilitating the way for getting better mental health preventively and therapeutically. This project aims at ascertaining the amount of stigma in Saudi Arabia and the way it can be well understood.

Methods: An online questionnaire will be distributed to a sample of five hundred male and female individuals. Designed to assess the amount of stigma towards mental ill will be utilized. It includes a demographical sheet and themes related to the etiologic of mental illness, the way it could be treated and lastly the social distance. The response of participants on the questionnaire related to the social distance follows Likert-type "strongly agree up to strongly disagree".

Statistical analysis: SPSS Software package will be used for data analysis through appropriate certain statistical formulas linked to hypothetical assumptions.

Outcomes: Results of data will be discussed inclusively on light of the literature, the way they can be implemented clinically and for establishing destigmatisation campaigns on personal, family, community and institutional levels.

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The relation between substance abuse and psychiatric disorders in adolescence and young adulthood

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ata of substance abuse gathered from all over the world, has indicated that Substance use and dependence cause a significant burden on societies and individuals across the globe. The World Health Report 2002 indicated that 8.9% of the total burden of disease comes from the use of psychoactive substances a WHO, 2004. In 2005, the WHO reported that there are about 200 million addicts around the world. With a population of around 80 million inhabitants, drug addiction is considered one of the serious problems that worry both the people and the government. It affects young people within their productive years and may lead to many problems such as social maladaptation, decreased work productivity and job loss. As can be further proven by our study, stress has long been recognized as one of the most powerful triggers for drug abuse, craving and relapse. People who experience major trauma and those with PTSD or depression may self-medicate with drugs or alcohol to relax and cope with stress a Williams, 2002. Stress exists in various forms in our lives; it could be in the form of parents separating, money troubles, dropping out of school, etc.. In today's modern age, it's extremely difficult to remain resilient with all the distress that surrounds us. Therefore, people who face strong stressors in their lives, often do resort to substance use to mask the pain of everything they are going through. That's why adolescence is a very critical stage, as teens are extremely vulnerable to peer pressure, often leading to substance abuse. As will be clearly seen by our results, substance abuse in adolescents is a grave problem with direct consequences that affects a marked percentage of adolescents nowadays. Psychiatric disorders could present as risk factors for substance abuse; hence, management of these comorbid psychiatric disorders may prevent the persistence of this problem into adulthood. To sum up, substance use remains a public health problem among adolescents. Comorbidity is the rule rather than the exception, and psychiatric disorders often predate SUD. However, treatment can alleviate impairment caused by comorbid psychiatric and SUDs. The earlier we initiate the treatment of these adolescents, the better the outcome. The longer the time an adolescent spends in treatment, the better the prognosis.

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The impact of traumatic experiences on people with severe mental illness in rural Ethiopia

Eyerusalem Getachew Serba¹ and Lauren C Ng² ¹Addis Ababa University, Ethiopia ²Boston University, USA

In most low- and middle-income countries (LMICs), such as Ethiopia, people with severe mental illness (SMI) experience high rates of stigma and human rights abuses. However, little is known about the types of events that people with SMI in LMICs view as traumatic or how these events impact their lives. Purposeful sampling was used to recruit 48 patients, caregivers, health care providers, and leaders from Sodom District, Ethiopia. Semi-structured, in-depth interviews were conducted, recorded, transcribed in Amharic and translated into English. Two coders conducted thematic analysis using NVIVO 12. Commonly occurring potentially traumatic events (PTEs) included beatings, sexual assault, and sudden death of loved ones. In addition to PTEs that met DSM-5 requirements, participants described other frightening experiences that caused suffering or emotional pain including being chained, inability to afford basic needs like food, stressful marital relationships, serious illnesses, and stigma and discrimination. Many participants attributed the onset of SMI to PTEs. In response to PTEs, participants described experiencing PTSD symptoms including avoidance, hyperarousal, re-experiencing, and negative thoughts as well as worsening of SMI. In rural Ethiopia many PTEs do not fit DSM-5 criteria but are still associated with PTSD symptoms and illness onset and exacerbation.

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Use of a crisis protocol tool in the treatment of substance use disorders

Federico Pavlovsky Dispositivo Pavlovsky, Argentina

In the treatment of substance use disorders one of the main goals is to prevent relapse. Relapse is a process with different stages, and relapse prevention is a cognitive behavioural approach with the goal of identifying early stages of that process and preventing high risk situations. As a part of an intensive outpatient treatment program we have developed a tool called "crisis protocol" designed to provide the person with a road map every time a sign of relapse is identified. The "crisis protocol" has four components: make a call to a designated reference for that purpose; perform a relaxation exercise; to use a motivational flashcard with reasons not to consume; and carry out an action that is incompatible with the use of substances. All steps of the protocol are trained and put into practice in a group setting. In order to evaluate the effectiveness of the tool in the treatment, we developed a weekly self-registration card in which patients record their use and state whether they used the crisis protocol. After a month, we collected the information provided by the patients and analyzed it to determine if the intervention had been successful in preventing substance use.

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A micro genetic approach to the relationship between creativity and aggression in mental disorders

Hilla Yaniv Bar-Ilan University, Israel

The lecture will present a research investigates the connection between creativity and aggression in different mental disorders, and examining their mutual influence on each other, in reference to Eysenck's three dimensions of personality, as well as to other personality's traits. The study examines five different groups: (1-2) individuals dealing with mental disorders – with or without a background of aggression; (3) creative-individuals; (4) aggressive-individuals; (5) and a control group. The main comparison focuses on examining cognitive psychopathology, which leads the positive aspect to creativity on the one hand, and the negative aspect to aggression on the other hand. These topics are investigated by using various questionnaires as well as by the micro genetic-method, which uses visual stimulation, in these study artworks. By using this method, it is possible to investigate the influence of visual perception of stimuli and the way individual projects his or her inner world and personality is tested by examining the projection content toward the stimulus. The expectation is to find relationship between creativity and aggression, especially in psychopathology groups. This relationship connects broadly to the psychoticism dimension of Eysenck's three personality dimensions, which is also expected to be high among the pathology's groups. These pathology populations were deliberately chosen because they are on the extreme expression of various personality traits and dimensions, particularly the aspects related to measures of creativity and aggression. Consequently, psycho-therapy for those populations can be suited specifically to the individual's profile, using different creative therapy methods.

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I am just a kid with an IEP LLC

Jordan Toma USA

I believe I have a strong and inspiring message for young students with learning disabilities. My story is geared towards 8th grade to high school students their parents and teachers or anyone that has ever struggled in school or in life. My life has been a roller-coaster with this "Learning Disability" and I let it control my confidence and outlook on life for the first 18 years. I let it define me - it became a permanent label stuck to my shirt every day. I will give you an idea of what I mean. You know when you are attending a conference and they give you a name tag to pin to your shirt? As far as I was concerned, I had a permanent name tag. But mine said "You're not as smart as everyone else. You can't do this". This happened to me because of my experience in school and it grew roots into everything I did.

I would feel helpless in class. I struggled to understand why I couldn't just pick up information like everyone else. I remember sitting in class telling myself I am going to try really hard to understand everything in class today just like everyone else and be a normal student, but I just couldn't grasp it! I was made fun of because sometimes I had to have special lessons. Other students, even so-called "friends" called me dumb.

I let this problem control me until I graduated in 2008. I was accepted into a life changing program called Step Ahead at Centenary University. I remember moving in filled with fear and anxiety. I went into the bathroom looked at myself in the mirror and promised myself I was going to change. I knew I couldn't let this label last forever. After that I started building a foundation of confidence and belief in myself brick by brick. It has brought me to where I am today. This journey has just started for me but now I believe it's time to help young students that can relate to my story. My objective is to create the foundations of the belief, the confidence, the work ethic and everything that you need to become the best you can be now and not let anything ever get in your way.

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Mental Health and Human Resilience

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The risk factors of postpartum depression among Arab women

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Objectives: Postpartum depression (PPD) is the most common and serious mental health complication among postnatal women globally. The symptoms have a significant effect on the mother's mental and, physical health (Moh'd Yehia, Callister, & Hamdan-Mansour, 2013). For the Arab population, research in PPD has been limited to comparison of the prevalence and risk factors between Arab population and non-Arab populations. The objective of this study is to review literatures on the risk factors associated with PPD in childbearing Arab women.

Methods: A total of five articles were selected and critiqued based on date of publication, quality, and extent of coverage of the many Arab countries. Edinburgh Postnatal Depression Scale (EPDS) scores was used to assess PDD symptoms.

Results: The studies resulted in some different and also some common risk factors in the development of PPD among Arab women. Social support, consanguineous marriage, education level, employment level, marital problems, formula feeding versus breast feeding, complication during pregnancy, marital problems, stressful life events, infertility, unplanned pregnancy, C-section and past history of depression were the common factors that had been reviewed.

Conclusion: Most importantly this review identifies the importance and impact of social support on the development of PPD in Arab women and suggests improved screening and education for women and families regarding social support in hopes of decreasing rates of PPD in Arab women. Decreasing rates of PPD in Arab women in turn helps the wellness of their babies, and in turn the family in the long term.

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Mental Health and Human Resilience

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Reduction of false code blue alarm in Institute of Mental Health, Singapore

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Background: Evidence has consistently shown that patients with mental illness have greater physical health morbidity and mortality compare to general population. It is a unique for patient with mental illnesses partly due to symptoms of illness that generate unhealthy lifestyle, side effect of medications and inadequate physical healthcare in specialist psychiatry setting. In view of that, a true code blue alarm system announced in Mental Hospital is crucial for a team of providers to rush to location and begin resuscitative efforts to reduce the mortality in Mental Hospital.

Methods: We traced all the code blue messages that sent to oncall team daily and investigated on false alarms. Team included doctors, nurses and IT system officers involved to discuss further intervention and improve the code blue system.

Results: Most of code blue alarm was accidentally triggered in view of the code blue alarm was too similar to electrical switch. Intervention like education to staffs and install a transparent cover to cover code blue alarm. Data collected after the intervention shown reduction of false code blue alarms.

Conclusions: True code blue alarm is a critical alarm that help to activate a team of provider to provide essential resuscitative efforts to reduce the mobidity and mortality in Mental Health Hospital. Interventions implemented also help in confident and accuracy of the true code blue situation to alert all the staff nurses in the ward to response promptly while waiting for team provider to improve the suvival rate.

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The impact of vicarious trauma on the emergency psychiatric responder: Simple systematic approaches to self-care

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S AMHSA reports researchers estimate 30 percent of first responders develop behavioral health conditions that can include depression and post-traumatic stress disorder. That's compared to 20 percent in the general population. Crisis responders are often the first to respond to phone calls and situations in their local communities that require hasty and clinical decision-making. De-escalating mental health crisis, involving children and adults who are experiencing a mental illness or substance use disorder. Often time crisis responders are in a state of do first and feel later; over time this can build up and take a mental and physical toll on their health. This in turn impacts the quality of life for the responder and individuals they serve. Research has found that over time, the buildup of unrecognized and untreated trauma can open a door to maladaptive behaviors, compassion fatigue, burnout, and place the responder at a higher risk for Post-Traumatic Stress Disorder. This presentation will aim to provide emergency psychiatric responders and organizations simple approaches to creating work environments that prioritize the well-being of a crisis responder. The provision and access to specialized systematic training, mental health and substance abuse treatment resources, and support from colleagues and supervisors for responders seeking to improving their emotional and mental health. To take care of others, responders must be feeling well and thinking clearly.

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Suffering in silence: Effect of composite package of laughter yoga on perceived stress, quality of sleep and caregiver burden among caregivers of mentally ill clients in AIIMS, New Delhi

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Background: The well-being of an ill person is directly related to the nature and quality of the care provided by their caregiver. These demands can bring significant levels of stress for the caregiver and can affect their overall quality of life.

Aim: To assess the effect of laughter yoga on perceived stress, quality of sleep and caregiver burden among caregivers of mentally ill clients in AIIMS, New Delhi.

Methodology: A quasi experimental study of 60 caregivers of mentally ill patients split into control (n=30) and experimental group (n=30). The caregivers in the experimental group were administered 7 sessions of laughter yoga consecutively. Pre-test was taken before the intervention and post-test was taken on 8th day and 14th day. Data was collected using Perceived stress scale, Pittsburgh sleep quality index and Zarit caregiver burden.

Results: In the experimental group after 7 sessions of laughter yoga there was a significant reduction in perceived stress scores of the caregivers on 8th day (p<0.001) and 14th day (p<0.001); a significant reduction in quality of sleep scores on 8th day (p<0.001) and 14th day (p<0.001) and in the caregiver burden scores on 8th day (p<0.001) and 14th day (p<0.001 day (p<0.001 day (p<0.001 day (p<0.001 day (p<0.001 day (p<0.001 day

Conclusion: Caregivers of mentally ill clients suffer from high levels of stress and caregiver burden as well as poor quality of sleep. Therefore, special attention should be given to manage the caregiver's stress and burden to improve the quality of care provided by them.

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Binge eating addiction among women who suffer from psychological abuse in their relationship: The moderating role of defense mechanisms

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Objectives: The participants will be able to recognize the predictors of binge eating addiction among women who suffer from psychological abuse in their relationships and will recognize the role of woman's defense mechanisms in moderating the association between psychological abuse and binge eating addiction.

Methods: A convenience sample of 380 Israeli women in relationships were located *via* the Internet, and after consenting to participate in the study, they completed a series of structured questionnaires (The Yale Food Addiction Scale; The Defense Style Questionnaire; Psychological maltreatment of women by their male partners; Level of Differentiation of Self; sociodemographic questionnaire).

Results: The higher the level of differentiation and mature defense mechanisms, the less addictive a woman is. However, the level of addiction among women who experience psychological abuse with in their intimate relations, is higher than women who do not experience psychological abuse in their relationship. Among women who experienced psychological abuse in their relations, the defense mechanisms moderate the association between psychological abuse within intimate relations and the extent of the addiction to binge eating.

Conclusions: The study contributes to the therapy of women with binge eating addictions, as it raises awareness of therapeutic-related content that could strengthen women and help them to cope with situations in their lives without the need to Binge. One of the significant variables for therapeutic work is the level of differentiation of the self. In addition, identifying the types of defense mechanisms might help to match treatment to the woman's emotional needs. The current study found also that it is important to identify the environmental systems by which the addict is surrounded, such as whether woman is in an abusive relationship. Finally, the study leads to the recognition that Binge Eating, which is usually treated with an emphasis on nutritional behavior change, is an addiction, and as such, it requires a combination of mental, nutritional and behavioral therapy. In view of this approach it is recommended that treating a woman who is addicted to Binge Eating should involve a multi-disciplinary team comprised of physicians, clinical dietitians and clinical psychotherapists.

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Cultivating mental health resilience in people not equipped with the perceived physiology of human resilience

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Human Resilience is the psychological ability enabled by behavioural coping abilities to manage and overcome stress. Humans have phases, events and occurrences in their lives which brings them immense pain, trauma, loss and abuse. The ability to progress with normal functionality with minimal disturbance and a positive outlook is the pillar of resilience. Yet, not every human has shown resilience in times of adversity. What sets the truly resilient humans apart from the others? Is resilience an in-built aspect present physiologically in some people or is it a cognitive function which can be cultivated to aid more people in dealing with adversity and trauma. The author argues on the cultivation and building of resilience in those who have previously broken down and been unable to show resilience when faces with calamity. The author draws parallel between environmental factors, societal conditioning and inner psychology that can affect resilience in individuals.

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Mental Health and Human Resilience

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Use of a crisis protocol tool in the treatment of substance use disorders

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In the treatment of substance use disorders one of the main goals is to prevent relapse. Relapse is a process with different stages, and relapse prevention is a cognitive behavioural approach with the goal of identifying early stages of that process and preventing high risk situations. As a part of an intensive outpatient treatment program we have developed a tool called "crisis protocol" designed to provide the person with a road map every time a sign of relapse is identified. The "crisis protocol" has four components: make a call to a designated reference for that purpose; perform a relaxation exercise; to use a motivational flashcard with reasons not to consume; and carry out an action that is incompatible with the use of substances. All steps of the protocol are trained and put into practice in a group setting. In order to evaluate the effectiveness of the tool in the treatment, we developed a weekly self-registration card in which patients record their use and state whether they used the crisis protocol. After a month, we collected the information provided by the patients and analyzed it to determine if the intervention had been successful in preventing substance use.

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Resilience in the Bhagavad Gita: A discourse analysis

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The Bhagavad Gita is a book of dialogic conversations between Lord Krishna and Arjuna in the battlefield during a time of confusion and crisis. It has since then been adopted by many as a book of spiritual guidance, and known to provide insight into profoundly important aspects of life and death, one of them being resilience. Resilience refers to an individual's responses to stressors that empower him to bounce back from those situations and function efficiently. It represents the dynamics between an individual's risk, vulnerable and protective factors. Research literature has shown innumerable frameworks wherein the interaction among several elements promote resilience as a cumulative effect, making it a multi-dimensional concept. The current study aimed at uncovering the picture of resilience in the Bhagavad Gita in presenting resilience. For this purpose, the method of foucauldian discourse analysis was adopted in order to view resilience as a discursive object, and various constructions of this discursive object were identified in the Bhagavad Gita. These were then placed into the wider discourses of attainment, letting go, control and learning. The significance of these discourses, their implications for action and subjectivity were discussed. The impact of this study on mental health was also explored.

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Protecting our youth: Conversion therapy & institutional abuse

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Institutional abuse is a national epidemic that our country has chosen to ignore. Many parents send their children to Residential Treatment Facilities when the child's behavior becomes too much for the parent to handle. Other parents send their children to these facilities when the child comes out to them and they want a quick fix to what they view as a problem. While treatment facilities and educational reparative environments can be a great resource and beneficial to those they offer treatment to, many abuse their power and physically, emotionally, and sexually abuse the children they are there to care for. This epidemic is ongoing, and many lawsuits have been filed, but the abuse has not stopped. Advocates have worked with legislation to change laws, but this work has not been enough. This is true of Conversion Therapy as well, as it has not been outlawed federally. In fact, it is a common practice in many of these facilities. The truth about conversion therapy is frightening and this workshop will touch on the facts, details and all other information to what occurs behind Residential Facility's closed doors. Television and other forms of media often make these types of environments look fun, friendly, and safe; but the truth is they often result in youth leaving with PTSD, physical disorders, and sometimes, death (by suicide). This workshop will help attendees become familiar with institutional abuse and how they can advocate against it; in addition to connecting survivors to resources. This workshop will be from a Social Work lens, and very interactive.

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Mental Health and Human Resilience

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Role of mindful emotional regulation in cognitive reappraisal

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The most widely used psychological techniques and disciplines is the practice of mediation, and in the last twenty years it has been increased drastically, especially mindfulness meditation. The purpose of this paper is to review the role of psychological mechanisms behind mindfulness practice and explore its positive impact on emotional regulation. It is being argued that mindfulness has achieved its outcomes in the several treatments of anxiety, depression and various other psychological disorders to emotional regulation. It has been considered that there are many factors that mindfulness meditation adds on to bring effectiveness in emotional regulation. We observed in this paper that there is experimental evidence which is evidently seen in cognitive reappraisal mechanism. This paper aims at proposing a specific model for psychological and neural mechanism involved in mindfulness and its effect in emotional regulation process in cognitive reappraisal.

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Quality of life among Filipino amputees after prosthetic rehabilitation at the UERMMMCI Philippine School of Prosthetics and Orthotics Charity Clinic

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Quality of life is frequently associated with one's personal health. Amputation is a disease state that affects the quality of life of an individual and is often associated with depression, isolation, and anxiety resulting in changes in social functioning. It results in a remarkable change of an individual's life and function. Thus, this study aims to determine the quality of life of amputees after prosthetic rehabilitation. Results of the study may contribute to the limited studies done on quality of life after prosthetic rehabilitation and aid in the holistic management of the amputees. This was a longitudinal study that compared the quality of life of amputees before and after prosthetic rehabilitation. The study was conducted at the UERM Philippine School of Prosthetics and Orthotics in Quezon City from November 2016 to November 2017. Questionnaires administered included Short Form-36 version 2 Philippines (Tagalog) and UERM Out-Patient Satisfaction Survey. Twelve participants were included in the study. Majority of the participants were male adults between the ages 22 and 69 years and all of the participants were unemployed. The changes in physical and mental component scores before and after prosthetic rehabilitation yielded no significant results. Stratification analysis revealed significant changes in scores in bodily pain and general health scales for females while males and participants with multiple co-morbidities had significant changes in vitality scores. Factors affecting these results may be explored and looked into by structured interviews.

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Stigma related mental health knowledge among community health workers - a cross sectional assessment

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The Accreted Social Health Activists (ASHAs) or the community health workers have been involved in improving maternal and child health over a decade in rural India. There is growing evidences that in mental health resource poor settings, a 'task-shifting' strategy would be advantageous, where the community or the lay health workers (like ASHAs) provides front-line mental health care, instead of mental health professional at a primary care level. However, there is limited data on delivering the mental health services delivered through ASHAs in mental health resource scarce urban slums setting. The aim of the present study is to assess the knowledge and attitude towards mental illness among ASHAs serving in government primary health centres in urban Bengaluru, India. A cross-sectional study was conducted among randomly selected ASHA workers (n=150) in urban Bengaluru in the Karnataka state. Data were collected through Mental Health Knowledge Schedule (MAKS), and Reported and Intended Behaviour Scale (RIBS), self-administered questionnaire designed assess mental health knowledge and attitude towards mental illness. Data were computed using SPSS. The mean age of the participants was 38.6±5.68 years and educated at least tenth grade (66.1%) or above (20.2%). The mean year experience in the health field as ASHAs was 4.27±2.36 years. The ASHAs had lower score on MAKS. Our results show relatively lesser knowledge about mental health among ASHAs. Thus, indicating the need to develop training module to train the ASHAs for early identification of mental illness from the community and refer to available mental health service.

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Multi-level family factors and affective and behavioral symptoms of oppositional defiant disorder in Chinese children

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Previous studies have well-documented the significant linkage between family context and child psychological development, particularly in families with children having potential affective and behavioral problems, like ODD symptoms. A wealth of literature has identified numerous family factors that placed children at increased risk of developing ODD, including poor family function, low marital quality etc. The majority of these studies, however, focused almost exclusively on family factors at either one level or mixed levels. Different associations of multi-level family factors and child ODD symptoms remained unclear. Therefore, the objective of this study was to examine the linkages between family factors at the whole, dyadic, and individual levels and two dimensions (affective and behavioral) of Oppositional Defiant Disorder (ODD) symptoms in Chinese children. Participants comprised of 80 father-child dyads and 169 mother-child dyads from families with ODD children. Results indicated that multilevel family factors at the dyadic and individual levels were significantly associated with child emotion regulation, which were directly related to child) were significantly related to child behavioral ODD symptoms. The present study extends the current knowledge regarding the relationships between family factors and two dimensions of child ODD symptoms by testing the comprehensive multilevel family factors to enhance intervention efficacy.

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Promoting resilience in families with children with congenital heart disease

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ongenital heart disease (CHD) is the most common birth defect, affecting approximately 40,000 infants annually in the US. CHD involves a variety of heart defects, with a wide spectrum from simple to moderate to complex. Due to advances in pediatric cardiology and cardiac surgery, life expectancy in these children has increased drastically over the past decades. Now 90% of infants diagnosed with CHD live well into adulthood. Due to the increase in survival rates, attention has shifted towards the impact of CHD on psychological and cognitive functioning. Children with CHD are at risk for neurodevelopmental and psychosocial problems related to operative factors. Children with CHD display lower cognitive functioning, and higher rates in behavioral, attentional and emotional problems. Increased parental stress also adds to the psychosocial issues experienced by these children. For this reason, psychological care is needed to promote resiliency in this population. Incorporating psychological services into treatment protocols with children with CHD is beneficial and will improve behavioral and emotional functioning across their lifespan. This paper will review the definitions of resiliency and Congenital Heart Disease, as well as the professional roles of people treating infants with CHD, the risk factors deterring resiliency, and the developmental outcomes in children with CHD. It will then examine some of the most common psychological interventions for children with CHD and chronic illness, including CBT and psychoeducational interventions, and family-based interventions that also include a psychoeducational component. Author will conclude by discussing the value of this multidimensional approach and why it is the most effective intervention strategy to promote resiliency in children with CHD.

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