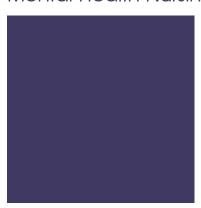
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Poster Presentations

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People with mental disorders-victims of violence

Beata Karakiewicz¹, Barbara Masna², Paulina Zabielska², Marta Giezek², Katarzyna Karakiewicz-Krawczyk³ and Anna Jurczak²

¹Department of Social Medicine and Public Health, Pomeranian Medical University in Szczecin, Poland

Introduction: Violence is a common phenomenon in everyday life. It can affect anyone, regardless of gender, age, health or economic status. Increasingly, attention is being paid to violence against women, children, the elderly and people with disabilities, but there is still little talk about violence experienced either by people with mental disorders. The aim of the study was to analyze the phenomenon of violence among people treated psychiatrically in the municipality of Szczecin, Poland.

Material and methods: The research was carried out in Poland, in 2017, by means of a diagnostic survey. Our own questionnaire was used for the study. It was used to carry out research on the phenomenon of violence among 95 people who were psychiatrically treated, using help in day care centers for people with mental disorders. Respondents answered questions about various aspects of the phenomenon of violence. They filled the questionnaire in the presence of a therapist, psychologist or social worker.

Results: Men treated psychiatrically more often experienced violence than women. The average age of the respondents was about 45 years. Almost all respondents were single people (87 people). Physical violence was the most common among people treated psychiatrically and experiencing violence (Fig. 1).

Conclusions: Violence in the psychiatric community is a long-term phenomenon. The dominant duration of victim violence is 5 years and more. It is essential to introduce tools to verify the occurrence of violence among psychiatric patients by therapists performing tasks for psychiatric patients.

Biography

Professor Beata Karakiewicz - Dean of the Faculty of Health Sciences at Pomeranian Medical University in Szczecin for the 2012-2020 term. Since 2005, the Head of the Department of Social Medicine and Public Health, Chair of Social Medicine. Her main point of interest in research are the issues concerning public health and environmental medicine. Author of many publications touching on the problems of disabled people - both physically and mentally, the chronically ill, people addicted to psychoactive drugs and HIV-positive people.

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The influence of the attitude to life of long-living people on their functioning

Paulina Zabielska¹, Mariola Głowacka², Anna Jurczak², Marta Giezek², Katarzyna Karakiewicz³ and Beata Karakiewicz²

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Introduction: The EUROSTAT data shows that Poles occupy one of the last places among the residents of the EU who feel psychologically well. Meanwhile, subject literature treats optimism as a resource that makes life easier for everyone. The purpose of the research was to analyse the influence of a positive attitude towards life on the functioning of long-living persons.

Material and methods: The research was conducted in Poland in 2017. Among the participants of the survey, there were 98 long-living women and men between 90 and 103 years of age, out of which 64,9% declared a positive attitude towards life, 27,8% - an indifferent attitude and 7,2% - a negative. The study was conducted with the use of a direct surveying method. The questionnaire consisted of instrumental activities of daily living (IADL) evaluation scale, basic activities of daily living (ADL) evaluation scale, Geriatric Depression Scale (GDS), pressure sore risk assessment scale (Norton) and a proprietary questionnaire.

Results: The surveyed long-living persons mostly demonstrated good functionality, 74,5% among all the seniors proved themselves to be self-reliant in performing basic activities and 46,9% in instrumental activities. In both measurements of functionality in daily living, the seniors declaring a positive attitude towards life achieved higher scores than those with an indifferent and negative attitude. Attitude towards life very clearly differentiated the surveyed seniors with regard to aggravation of symptoms of depression. A moderate aggravation of depression was demonstrated by 34,4% seniors with a positive attitude and 47% with a negative attitude, whereas a serious aggravation of the problem was characteristic of only 7,8% of the respondents from the first group and as much as 41% of the seniors from the second group.

Conclusions: A positive attitude towards life has a beneficial influence on self-reliance; it reduces manifestations of depressive disorders and diminishes the risk of the development of pressure sores.

Biography

Paulina Zabielska, PhD - Employee of Department of Social Medicine and Public Health, Chair of Social Medicine of the Pomeranian Medical University in Szczecin. Her main point of interest in research are the issues concerning public health and environmental medicine

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Building a village among Oromo East African women struggling with sadness in a large urban setting

Fatuma Kotile

Inver Hills Community College, Inver Groves Heights, USA

Older Oromo women who immigrated to the United States in the early 1990s have undergone several stressful life events including war, famine, acculturation, harsh cold climates, a new language barrier with English, and a variety of lifespan experiences alien from those in their native country, Ethiopia. Coping with these new stress triggers correlates with a high level of depressive symptoms that Oromo people call "sadness." The purpose of this project is to create and disseminate a transcultural model of nursing practices in a community that aims to alleviate sadness among older Oromo women by promoting and fostering community building through means of healthy life choices in the midst of change. A praxis approach guided by Madeleine Leininger's theory of culture care diversity and universality was used in reviewing the literature in creating and sustaining the community culture care model.

Biography

Fatuma Kotile is a Nursing College Professor in Minnesota USA and also work at Bethesda Health East Hospital in St Paul MN. Fatuma Kotile has experience and passion in cultural competency in nursing education and health site practices. Her practice model and teaching in cultural competency are based on Lininger 's Transcultural Nursing Model. Her goal is to increase diversity within nursing programs and help the program to learn, understand, and accommodate nursing students' with mental health issues. She also assists her Oromo community from East Africa to confront the reality of mental health through workshops and outreach activities. The workshop aim is to increase understanding of the meaning and expression of culture care for older Oromo women living in the United States. This information is a valuable tool for community nurses to understand the background of Oromo cultural health practices and their views about health and illness. In addition, she is also an advocate for healthcare cultural competency when assisting patients who undergo a mental health crisis. Lastly, Fatuma is an enthusiastic learner who strives to understand how members of the community cope and move past their difficulties through healthy dialogue and methodologies.

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The effect of cognitive behavior group therapy for rumination on psychiatric nurses

Eguchi Miki¹, Kobe Tokiwa¹ and Hiroko Kunikata²

¹Kobe Tokiwa University, Japan

²Kagawa Prefectural University of Health Sciences, Japan

Purpose: The purpose of this study was to explain the effect of developed "Cognitive Behavior Group Therapy for Rumination (CBGT-R)".

Method: The subjects were ten psychiatry nurses. The program was conducted once every week for eight weeks. It took 30 minutes per session. The program consisted of "Psychological education" and "exercise of mindfulness mainly on breathing methods" there were five people per group. The homework was to perform the breathing method (for more than five minutes) as much as possible in daily life and record the results. The outcome measures were recorded according to the Rosenberg Self-Esteem Scale (RSES), Profile of Mood States (POMS), Cognitive Bias Scale (CBS) and Negative Rumination Scale (NRS). A pre and post design was conducted with a single group of ten nurses. The measurement times were taken- before (T0), at four weeks (T1), at the end of the program (T2), after one months (T3), and three months (T4). The results were analyzed using Bonferroni's multiple comparison tests.

Result: Rumination, self-esteem, cognitive bias and mood were all significantly improved after the program. Although the effects are shown from the early stage (four week) by programming, it was suggested that at eight weeks program was desirable to obtain better results.

Conclusion: Rumination may affect the mood and cognition has been suggested. Decreases in rumination cause improvement in mood, cognitive bias, and self-esteem.

Biography

Eguchi Miki has Nursing Master, expertise in cognitive behavior therapy and psychiatry nursing passion in improving the health and wellbeing. In particular, she is studying programs against ruminants by using mindfulness.

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A randomized trial of motivational interviewing and facilitated contraceptive access to prevent rapid repeat pregnancy among adolescent mothers

Robyn Lutz, Jack Stevens and **Ngozi Osuagwu** Ohio Health Community and Wellness, USA

BACK GROUND: Most interventions designed to reduce teen pregnancy rates have not focused on pregnant and/or parenting adolescents. In this manner, an expansive randomized controlled preliminary was directed with respect to a motivational talking program qualified High schooler Choices for Anticipate Pregnancy in a low-salary test of juvenile moms. This program suggested month to month sessions between a member and an enrolled nurture more than year and a half. This program additionally highlighted encouraged anti-conception medication access through transportation help and low maintenance preventative center.

OBJECTIVE: The effect of this program on quick rehash pregnancies at year and a half after enlistment was assessed.

STUDY DESIGN: Five hundred ninety-eight pre-adult females were enlisted from 7 obstetrics-gynecology facilities and 5 baby blues units of an expansive doctor's facility framework in a Midwestern city. Every member was enlisted no less than 28 weeks pregnant or under 9 weeks baby blues. Every member was randomized to either the Youngster Choices to Avert Pregnancy intercession or a standard thing care control condition. Blinded research staff contacted participants at 6 and 18 months to complete self-report surveys. Differences in outcomes between the intervention and control groups were assessed using ordinary least- squares regression

RESULTS: There was a 18.1% outright diminishment in self-revealed rehash pregnancy in the intercession bunch with respect to the control gathering (20.5% versus 38.6%; P < .001). There was a 13.7% total increment in self-announced long-acting reversible contraception use in the mediation aggregate with respect to the control gathering (40.2% versus 26.5%, P 1/4 .002). There was no evidence of harmful effects of the intervention on sexual risk behaviors, such as having sexual intercourse without a condom or greater number of partners.

CONCLUSION: The adolescent Choices to Avoid Pregnancy program speaks to one of only a handful couple of proof based mediations to diminish quick rehash teenager pregnancy. This moderately concise mediation might be a reasonable other option to additional time-concentrated projects for pre-adult moms.

KEY WORDS: adolescent, motivational interviewing, pregnancy prevention, rapid repeat pregnancy.

Biography

Robyn Lutz has been a nurse for 33 years. Her passion is in working with adolescents to unleash their positive potential and to provide them with holistic guidance in their health care journey. Her presentation is based on a randomized controlled trial which was conducted from 2010-2016 using Motivational Interviewing and facilitated contraceptive access to prevent rapid repeat pregnancy in adolescents. "Motivational Interviewing Is a collaborative conversation style for strengthening a person's own motivation and commitment to change" (Miller & Rollnick, 2013). This study was funded by The Family and Youth Services Bureau of the United States Health and Human Services Dept. The highly rated RCT study showed strong and sustained effects on reducing rapid repeat pregnancy and thus promoting healthy birth spacing.

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Depression and its associated factors among antenatal and postnatal mother's

Avinash Kaur Rana, Karobi, V Venkadalakshmi Minakshi Charanjeet, Meenakshi, Parminder, Sarita National Institute of Nursing Education PGIMER, India

Introduction: Pregnancy in most women involves biomedical and psychological changes in the body, emotions and life of mother and fetus. The majority of pregnant women have uncomplicated and healthy outcome but sometimes complications arise due to medical conditions. Although only 10-30% of the mothers seen in antenatal period can be classified as high risk they account for 70-80% of perinatal mortality and morbidity. Depression during pregnancy has been associated with increased incidence of psychological and obstetrical complications. Current descriptive study was undertaken with the objective to assess prevalence of depression and its associated factors among antenatal and postnatal mothers, Nehru Hospital, PGIMER, Chandigarh. Using total enumeration technique 200 mothers (100 antenatal and postnatal mothers) were enrolled in the study. Tools used in this study were- Socio-demographic profile of participants.2) Standardized Edinburgh postnatal depression scale, 3) Antenatal and Postnatal depression risk factors questionnaire. The Edinburgh postnatal depression scale had 10 items with 4 options. A score of \geq 10 indicated possible depression. Mothers who scored <10 do not have depression. The antenatal and post natal risk questionnaire has13 items, if subject score <24 then it indicates no associated risk factors for depression whereas score \geq 24 indicates possible risk factors of depression.

Result: The result of the present study revealed that majority of the antenatal 81% and postnatal mothers 89% were not having any depression. It was also observed that 95% antenatal and 89% postnatal mothers did not have any associated risk factors of depression.

Biography

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Preliminary analysis of self-efficacy, coping styles, competitive greatness & nursing students

Dale Hilty

Mount Carmel College of Nursing, USA

The purpose of this educational intervention study was to explore the relationship among Wooden's Competitive Greatness (Hilty, 2018) construct (i.e., being the best you can be when your best is needed, continuous self-improvement, appreciating difficult challenges), Self-Efficacy (Schwarzer & Jerusaslem, 1995), and Greenglass' et al. (1999) Proactive Coping, Reflective Coping, Strategic Planning, Emotional Support Seeking scales. Since 43% of new RNs leave their first job within three years (Goodman, 2016), exploring these variables may provide insight into turnover rates. BSN (N=68) traditional nursing students were divided into two groups using competitive greatness. Hypothesis: There would be a difference between competitive greatness high and low scoring groups when the two groups were compared using an Independent t-test on Self-Efficacy, Proactive Coping, Reflective Coping, Strategic Planning, Emotional Support Seeking scales ESS scales. Using SPSS 25, the coefficient alpha were Self-Efficacy (.957), Proactive Coping (.816), Reflective Coping (.909), Strategic Planning (.866), and Emotional Support Seeking (.854). Independent t-test (N=68) analysis found significant differences between the two participant groups for the Self-Efficacy (p=.002), Proactive Coping (p=.001), Reflective Coping (p=.008), Strategic Planning (p=.004), and Emotional Support Seeking (p=.028) scales.

Biography

Dale M. Hilty, Associate Professor, received his PhD in counseling psychology from Department of Psychology at the Ohio State University. He has published studies in the areas of psychology, sociology, and religion. Between April 2017 and April 2018, his ten research teams published 55 posters at local, state, regional, national, and international nursing conferences.

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Comparison of diets and conflict management style influencing diet selection

Dale Hilty

Mount Carmel College of Nursing, USA

t our undergraduate nursing institution, faculty are encouraged to develop interprofessional curricula. As psychology Aand nutrition faculty, we designed a program to integrate nutrition, statistics, and psychological decision-making. First, undergraduate students demonstrated a limited understanding of how dietary manipulation impacts overall nutrient consumption. A 30-minute presentation highlighted how variability in meal selection impacted the daily recommendations for calories, fiber, sodium, protein, saturated fat, and added sugar. Second, student healthy and unhealthy food decision-making appeared to be associated with conflict management styles. We were interested in exploring intrapersonal and interpersonal conflict styles in relation to dietary choices. Participants were traditional nursing students (56 freshman, 78 sophomore), and 58 nursing students in the accelerated program. They completed the intrapersonal food choices questionnaire (IFCQ) and the interpersonal conflict handling styles questionnaire (ICHS); (Leung & Kim, 2007). The IFCQ is an adaption of the ICHS reflecting conflict between healthy and unhealthy food choices. The second year students (N=76) and the accelerated (SDAP, N=53) students completed the IFCQ and ICHS as comparison groups designed to replicate the intrapersonal and interpersonal findings from the first year students. Cox (2003) reports the importance of intrapersonal and interpersonal comparisons. Quantitative & Qualitative Results: (1) the analysis of the cognitive knowledge pre-post questions found the 30-minute intervention was significant (dependent t-test, p=.001); (2) qualitative theme analysis (based on open-ended questions) revealed meaning, relevancy to nursing practice; and (3) the interdisciplinary team reported experiential learning. Correlational significance (p<.01) was found for four interpersonal/intrapersonal conflict types (i.e., compromising, integrating, obliging, avoiding/smoothing).

Biography

Dale M. Hilty, Associate Professor, received his PhD in counseling psychology from Department of Psychology at the Ohio State University. He has published studies in the areas of psychology, sociology, and religion. Between April 2017 and April 2018, his ten research teams published 55 posters at local, state, regional, national, and international nursing conferences. His colleague sharing the author line of this poster is Aimee Shea, MPH, RDN, CSO, LD.

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Competencies of professionals in multidisciplinary teams in mental health centres in the Czech Republic

Monika Dudová

Charles University, Czech Republic

Statement of problem: Since 2013 there has been an ongoing transformation of psychiatric care in the Czech Republic. Psychiatry care should stand on 4 pillars: psychiatry hospitals, where the number of beds is being reduced, psychiatry departments in general hospitals, outpatient departments and new loew-trashold pillar – Mental Health Care Centres (MHC). The core of MHC is a multidisciplinary team consisted of psychiatrist, psychologists, peer worker(s), psychiatric nurses and social workers.

Findings: The research was taking place during the launching of the pilot MHC projects. The multidisciplinarity brings new views on providing care to people with SMI. The results showed that the overlapping of competencies in MHC is no an issue. However sharing, looking into the health or social databases, giving medication, inssufficient salaries for professionals or nonexisting network of the other community mental health services were marked as the problematic areas. The obstacles, risky for the optimal function of the team, are caused by the legislative definition of psychiatric nurses and social workers competencies.

Conclusion & Significance: The existing definition of competencies of professionals, mainly psychiatric nurses and social workers, is not corresponding with the needs of community oriented mental health services in MHC. The transition from institutionalized care to a community environment needs different education of psychiatric nurses, who should learn the methods of the social work, community work or case management. Social workers should be educated in areas of psychopathology, psychopharmacology or crisis intervention. The new form of care of SMI in community conditions brings a new formo f cooperation between the professionals, contributes to the destignatization of the people with mental disorders and psychiatry in general. The deinstitucionalization and transformation of psychiatric care is aimed at improving quality of psychiatry services and increasing the full-fledged inclusion of people with mental disorders into society.

Biography

Monika Dudová is a PhD. student at Charles University in Prague, the Czech Republic. In her postgraduate study she is focused on mental health and work with people with mental disorders, and in her dissertation she examines the evaluation of the psychiatric reform from the view of the community services users. Moreover she is a systematic psychotherapist and in her own praxis the focuses on adult population, mainly adults with experiences with anxiety disorder and other psychiatric difficulties. Currently, she works as a researcher in a project called KREAS – A creativity and adaptability as a prerequisite for Europe's success in an interconnected world.

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The importance of therapeutic activities for a better recovery during psychiatric hospitalization

Karin J D Bulik¹ and Joao Machado²
¹University Center Facex, Brazil
²Psychiatric Hospital, Brazil

Statement of the problem: Mental health services in Brazil are usually neglected by the government and the economic crisis in the country has made this problem more evident. There is a shortage of professionals, medicines and other hospital supplies in the public hospitals. In the psychiatric hospital where the author works as a psychologist this has made the number of invasive practices increase, as chemical and mechanical restraint, which should be used in very specific cases; and the number of therapeutic practices such as expressive groups, occupational therapy, and art therapy, decrease. The purpose of this study is to highlight what literature has presented as benefits of therapeutic practices in mental health and to relate them with the experiences lived in the hospital.

Methodology and Theoretical Orientation: A literature review of articles containing the keywords mental health and therapeutic practices (and synonyms) was conducted. Results were linked with examples collected from everyday experience in the hospital.

Findings: Literature has shown the use of therapeutic activities as beneficial in the work with people with mental disorders: positive changes in worry, depression, sense of loneliness and negative thinking, improvements in self-esteem, empowerment, confidence, concentration, sense of time, use of imagination, sense of satisfaction and social functioning are reported. The lack of these activities results in a greater number of episodes of aggression decreased autonomy and greater delay in recovery. The daily practice in the hospital endorses these findings.

Conclusion and Significance: Although health treatment in Brazil is mostly based on the medical paradigm, this study stresses the importance of expressive therapeutic practices, decreasing the length of stay and improving recovery of inpatients. It contributes to the call for more public health attention regarding the benefits of multi-professional interventions in mental health care.

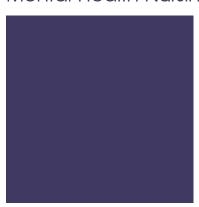
Biography

Karin J D Bulik is a graduate psychologist from UFRN, Brazil. She holds an MSc degree in Mental Health and Transcultural Mental Healthcare from the Queen Mary University of London, the UK, and an MSc degree in Psychology, Society, and Quality of Life from UFRN, Brazil. She is also postgraduate in Public Health from Castelo Branco University, Brazil. She studies and works on the following topics: mental health, global mental health, psychoanalysis, and psychopathology. She is a Psychology professor at University Center Uniface, leading the disciplines of Mental Health and Psychoanalysis and supervising graduate students in their placements. She also works as a psychologist at the Psychiatric Hospital Dr. João Machado, where she is the Psychology team coordinator, and in private practice as a psychoanalyst.

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Importance of the use of cartography for residents of psychology in Quilombola communities

Carla Izabel Morais Madeira

Federal University of Amapa, Brazil

Cartography is an instrument used in health in order to understand the process of the state of health of a given territory, indicating a procedure of analysis for the constant transformations and movements of a community. The importance of the use of this instrument for Residents of Psychology would be to know in a comprehensive way the health population served, especially when this community is quilombola, presenting different characteristics and difficulties. In this sense, the objective was to present an experience report about the importance of the use of cartography in the practice of Residents of Psychology in a quilombola community, Curiau, located in the city of Macapa-AP / Brazil. Thus, a bibliographic review was carried out using the keywords "Cartography", "Primary attention" and "Quilombola community" in a database site of Scielo and Bireme; after that, an interview with the Community Health Agents about the community and on-site visits was carried out. The construction of the cartography resulted in an understanding of the health-disease situation of the population enrolled in the Basic Health Unit, and it is possible to reflect more about the reasons for the low demand for the Psychology services, allowing to think about new strategies to combat the low demand in the services. In this way, cartography facilitated the comprehension of the behaviors and beliefs that the community possessed, offering a complete and dynamic understanding, since, in each territory crossed by the residents of psychology, the behaviors and beliefs of the community change in the same health demand.

Biography

Carla Madeira completed her graduation at age 22 at Faculdade Estacio de Macapa and is currently specializing in Collective Health, in the area of Adult and Elderly Health, through the Post-Graduation Program in Multiprofessional Residency of the Universidade Federal do Amapa (UNIFAP). In addition to being a Resident Psychologist at UNIFAP, Carla is a Researcher at the Amapaense Institute for Research in Cognitive-Behavioral Therapy, since 2016.

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Amazonian women: Psychosocial prevention to depression in primary attention to women scalpelated by the axle of a boat motor

Carla Izabel Morais Madeira Federal University of Amapa, Brazil

Scalping accidents among riverine women are due to the total or partial removal of the scalp through the axis of unprotected boat engines, causing not only physical but also psychological damages, since hair loss may affect women's perception of self-image, resulting in a possible depression. Primary care, through the Basic Health Units (BHU), is responsible for the integral care of the enrolled population and must be prepared to receive cases of scalping. The study aimed to point out the importance of the prevention performed in the BHU about Depression in the women victims of scalping by the axis of the motors of unprotected vessels. The methodology adopted was a bibliographical review, with a qualitative approach, using scientific articles found through the following keywords: "depression", "scalping" and "primary care", is obtained from a database site such as SCIELO and LILACS. As a result it can be observed that the multi-professional work on Depression prevention in scalped women in BHU is of paramount importance, since psychosocial prevention can offer the user adequate support to achieve a cognitive restructuring about herself, the world and others, influencing self-esteem, self-concept, and self-efficacy, which are variables that influence the affective-emotional state; besides giving social guidance to the family about necessary care. The BHU should be attentive to local health problems and the reality of the population ascribed, offering quality health services and a comprehensive view of its users because scalping accidents are not uncommon in the Amazon.

Biography

Carla Madeira completed her graduation at age 22 at Faculdade Estacio de Macapa and is currently specializing in Collective Health, in the area of Adult and Elderly Health, through the Post-Graduation Program in Multiprofessional Residency of the Universidade Federal do Amapa (UNIFAP). In addition to being a Resident Psychologist at UNIFAP, Carla is a Researcher at the Amapaense Institute for Research in Cognitive-Behavioral Therapy since 2016.

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Parental influence in the process of emotional regulation of children: A cognitive-behavioral view

Carla Izabel Morais Madeira

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Emotion is an effective process that occurs in a parallel and integrative way with cognition and both regulate individual and social behavior, and can influence positively or not, so regulating emotions is essential for the development of human beings. This article aims to present parental influence in the process of developing children's emotional regulation in the cognitive-behavioral perspective. The methodology used was a bibliographical review whose materials were books, articles available in Scielo database, Bysaúde; and Pepsic. As results, it was noticed that the interaction between parents and children is essential for the healthy formation of the child. Parents should pay attention to their own emotions and their interpretations of their children's emotional manifestations in order to listen to their children's experiences and assist in solving problems. It is pointed out that the development of empathy is stimulated by parental practices aimed at communication and the encouragement of problem-solving, expression and emotional regulation. In this way, it is in the contact with the caregivers that the child develops most of the cognitive and behavioral repertoire. In this sense, Cognitive Behavioral Therapy aids in the modification of dysfunctional thoughts and behaviors, making possible the use of coping strategies more appropriate to parents and, therefore, in the child. Cognitive behavioral techniques such as cognitive restructuring and social skills training are essential. Therefore, the management of emotional responses in an appropriate way is related to good social adjustment, while the difficulties of the management are related to a social maladjustment by the children.

Biography

Carla Madeira completed her graduation at age 22 at Faculdade Estacio de Macapa and is currently specializing in Collective Health, in the area of Adult and Elderly Health, through the Post-Graduation Program in Multiprofessional Residency of the Universidade Federal do Amapa (UNIFAP). In addition to being a Resident Psychologist at UNIFAP, Carla is a Researcher at the Amapaense Institute for Research in Cognitive-Behavioral Therapy since 2016.

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Restraints alternatives in the management of challenging behaviors in inpatients with autism and intellectual disability

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Introduction: In intensive and emergency psychiatry units, caregivers are often faced with severe behavioral disturbances, including self-injury, aggression and extreme psychomotor agitation. The associated risk of harm is highly problematic. While the use of restrictive measures is common, it optimally should be limited.

Objectives: To review the myriad forms of personal protective equipment in current use, including helmets, gloves, sleeves, jackets, bodysuits, mats, splints, padded shields, papoose boards, etc. and describe their usage through caregiver experiences.

Methods: A focused ethnography based on the observation, justification and formalization of personal protective equipment and procedures used as an alternative to restraint, focusing on caregivers' representations of violent patient encounters. The research was a multi-centered study in three psychiatric inpatient units in Canada, the USA and France dedicated to the assessment and treatment of challenging behaviors in individuals with autism and intellectual disability.

Results: Numerous forms of personal protective equipment (PPE) exist, and their usage can confer a safe alternative to the containment of behavioral crises. Appropriate handling of challenging, recurring behaviors is imperative to the preservation of physical and moral integrity in both patient and caregiver.

Conclusion: Personal protective equipment (PPE) decreases harm associated with the management of challenging behaviors, and can promote respect for individual integrity and fundamental rights. The usage of PPE can be extremely helpful in challenging and dangerous behaviors, and subsequent provision of personalized and efficacious therapy.

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Oncological patients' well-being

Olga N Sharova

South Ural State Medical University, Russia

The purpose of this study was to compare personality traits, values and coping strategies of the behavior of people with oncological diseases and healthy people. Two groups of people took part in our study and were examined using a clinical interview and an experimental psychological method, which included three techniques: The Minnesota multidimensional personality questionnaire (MMPI) (S Hatway, and D McKinley, 1949); The questionnaire "Values in Action" (K Peterson, and M Seligman, 2001); The "Way of Coping Questionnaire" (R Lazarus, and S Folkman, 1988). The main group consisted of people with oncological diseases, 78 white race people (N=78), of which 61.54% were female. The average age of the examined persons with oncological diseases is 54.08±4.54 years. The control group consisted of healthy individuals who did not have cancer, including 30 people (N=30), among whom 63% were female. The mean age of the control group was 54.78±4.55 years. All the personality indicators of oncological patients are higher than of healthy people, excepting the scores of impulsiveness and optimism, which are lower. The overcontrol, asthenia, pessimism, emotional lability (demonstrativeness), anxiety and individuality scales are significantly differenced among the groups surveyed. Humanism and love, Moderation, and Spirituality are three kinds of positive values that reliably distinguish oncological patients from healthy people. For healthy people, the strategy of confrontation is more preferable than for oncological patients. All studying psychological features of oncological patients are more adaptive and socially mature in comparison with healthy people that requires further investigation in the future.

Biography

Olga N Sharova has completed her Master of Science at the age of 27 years from South Ural State Medical University, Chelyabinsk, Russia. She is the associate professor of the Psychiatry Department of South Ural State Medical University, Chelyabinsk. At the same time, she is the teacher of the Department of General Psychology, Psychodiagnostics and Psychological Counseling of South Ural State University (NRU), Chelyabinsk, Russia, and the doctor-psychotherapist of the Chelyabinsk Regional Clinical Center of Oncology and Nuclear Medicine, Chelyabinsk Russia. She has published more than 10 papers in reputed journals..

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Mental health as a choice

Tatjana Bucaj

Wirral University Teaching Hospital, United Kingdom

Mental health can be understood as a condition in which an individual exercises his/her abilities, how to deal with the stress of everyday life, to be productive and contribute to the community. The aim of this is to awaken the individual's awareness of the need for personal engagement in the protection and improvement of their mental health. There are some options to work on self-building but ultimately everything is a matter of personal choice. International Labor Organization (ILO) 2016.g. has published a report on trends in workplace illness and activities aimed at improving the health of workers through improved working conditions including various educational programs. Following the report's instructions, the Ministry of Health of Croatia and the Croatian Institute of Public Health in 2017 launch a project called "Company Friend of Health" with the aim of preserving and promoting health at work. The project covers various areas of activity: nutrition, promotion of physical activity, protection of health professionals at the workplace, smoking ban, ban on alcohol consumption, environmental protection, consumer and customer health protection. Therefore, education modules are being organized to raise awareness of the risk behavior that causes the deterioration of the quality of health as a whole. Health professionals have acquired knowledge about these areas during the course of training and applied the same in their workplaces. However, if you look at health as an individual's condition, the question is how much an individual contributes to the preservation of one's own health.

Conclusion & Significance: It is necessary to evaluate the personal involvement in preventing the onset of the disease and preserving the existing condition. There is a need for self-criticism in uncovering unhealthy behavior that is damaging the quality of life. There is a choice. The first step is always the hardest i.e. to get out of the comfort zone and actively participate in creating better living both in the workplace and beyond. It takes the will, the knowledge, the energy to achieve the desired goal. As far as it is not possible to reach the goal by yourself, do not hesitate to look for help.

Biography

Tatjana Bucaj has, after 25 years of work at the psychiatric department, passion for improving the health and wellbeing. She considers the preservation of mental health essential to the preservation of health in general and she focuses her activities on the prevention of disease and the preservation of existing health. She is being trained as a wellness manager and a life coach because education is very important for personal development and better work with clients. After 33 years of work as a nurse in Croatia, she goes to the UK where she continues her nursing practice and further professional development.

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Expressive Arts: Enriching clinical supervision, reflective practice, and social science pedagogy

Angela Herd

University of the Fraser Valley, USA

This presentation will introduce participants to the value and use of expressive arts to deepen knowledge within clinical practice and curriculum design. Creative learning outcomes woven into social science pedagogy supports the synthesis of theoretical understanding evidenced in meaningful, personal application. Symbols, images, and associations are all seeds of creativity that can be enjoyed by all; although, many people may not know how to identify or make space for this natural, inner resource. Practitioners may say, "Oh, I'm not creative!" or "I am not an artist that's just not something I do" Such perceptions serve to isolate people from the power source of creativity to enrich their life, learning, and vocation. The inclusion of expressive arts into ones work naturally promotes the growth of the reflective practice and helps deepen personal insights and practice. The inclusion of expressive art within clinical supervision similarly increases engagement and communication between supervisor and supervisee. The invitation of arts-based supervision supports supervisees of all levels of experience to be witnessed in their work, validated and understood, particularly in relation to challenging, multi-layered variables contributing to situations/issues that require support, recommendation or resources. One's connection to creativity is nourishing; therefore, acts as an important buffer to burnout, compassion fatigue, and impairment. The inclusion of expressive art into clinical supervision and curriculum design offers a strengths-based modality to foster clinician/ student self-esteem, supervisee/supervisor communication and awareness; as well as, student integration of theoretical knowledge.

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Implementing telepsychiatry in New York State prisons: The nursing perspectives

Berthide Dufrene

Hudson River Healthcare, USA

A growing body of evidence demonstrates telepsychiatry to be an effective treatment modality in various psychiatric conditions with high patient satisfaction and acceptability; however, there is little research to guide the implementation and integration of telepsychiatry into routine care delivery. This presentation instructs on the strides made in the delivery of telepsychiatric services in the New York State prisons and the experiences of nurses working in these prisons. Nurses have been called to lead healthcare transformation and while still finding their way, psychiatric mental health nurses are making an impact in the delivery of telepsychiatric care in terms of patient advocacy, medication treatment, assessment of risks and quality of service, evaluating user satisfaction and possible negative experience with the use of video conferencing. The presentation will focus on the practical experiences of providers of prison-based telepsychiatry care.

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Challenges in nursing: The psychological needs of rural area nurses in Mpumalanga, South Africa

Bongekile C Dlamini and Maretha Visser Weskoppies Psychiatric Hospital, South Africa University of Pretoria, South Africa

Primary health care nurses play an important role as the first and often the only contact providing primary health care services in rural disadvantaged communities. However, in spite of high levels of stress, physical exhaustion and traumatic experiences, there is a lack of support services for nurses. This is especially true in rural areas where, in comparison with their counterparts in urban areas, little attention has been given to the working conditions of these nurses. The purpose of the research was to explore the challenges and psychological needs of nurses working in a rural community hospital in South Africa and to identify support services available to them. Three focus group discussions were held with a sample of 30 nurses who work with patients in a rural hospital that provides tertiary care as well as primary health care at clinics located at the hospital. Thematic analysis revealed five themes that negatively influence their psychological wellbeing: lack of workplace resources, high workload, traumatic experiences, limited support from management and no access to psychological support services. The results of the study can contribute to the development of psychological support services for alleviating emotional distress in the rural nursing community. It is recommended that psychological services such as trauma counseling, individual therapy and group support be provided in rural hospitals to enhance the psychological wellbeing of nurses and the quality of services they provide to patients.

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Transpersonal psychology adds a new dimension to psychological studies and counseling

Donna Golding

Golding Transpersonal Psychology and Education, Australia

Iranspersonal psychology emerged from earlier branches of psychology and incorporates both Eastern and Western philosophies. Applying both quantitative and qualitative research methods, it is a progressive branch of psychology that incorporates spiritual dimensions of existence in the scientific study of human beings. Mind, spirituality and higher states of consciousness are the main focus within transpersonal psychology. Within this context, spirituality refers to a universal dimension that is both transcendent and imminent. When I did my PhD research I found that many people had difficulty conceptualizing spirituality while also finding that those who were open to spirituality usually had better well-being. There are various spiritual questionnaires, inventories and charts that can be used to assess the client's perceived relevance of spirituality in their life. These can help reveal the client's self-identity and understanding of reality and be a tool toward healing. Counselling for transpersonal development has application for the individual psychologically, emotionally, physically; for their relationships and also for society at large. The transpersonal orientation in therapy is particularly suited for clients that present with a spiritual crisis, including fear associated with spiritual experiences, shock associated with coming to a new or different understanding of reality, and the impact it can have on their self-concept and their relationships. It can also be helpful for bereavement and coming to terms with the death of a loved one. Moreover, it may help clients be more at peace regarding their own mortality. Transpersonal approaches to counselling and therapy can be beneficial for many typical psychological issues including anxiety, stress, depression, low self-esteem, lack of confidence, relationship and family conflict, blocked emotions and recurring negative thinking, to name a few. Embracing a holistic approach to wellbeing, this presentation provides support for including Transpersonal Psychology as therapeutically functional and valuable.

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The social aspect of mental illness among orthodox christians of the tigrinya ethnic group in Eritrea

Erimias Biniam

Shirley Worland, Mukdawan Sakboon

This study is situated within the sociocultural and religious context of Orthodox Christians of the Tigrinya ethnic group who inhabit 🗘 in the central and southern plateau of Eritrea. With this ethnic group being ethno-linguistically and socio-culturally dominant and religiously conservative in comparison with the remaining eight ethno-linguistic groups and other Christian denominations in the country, this research project takes a closer look at how members of the traditionally and religiously bound Orthodox Christians of the Tigrinya ethnic group conceptualize or construct the notion of mental illness from socio-cultural and religious worldview. More importantly, attempts will be made to explore the impacts of the tightly held kinship systems, socio-cultural makeup and religious beliefs and practices of this ethnic group upon the treatment seeking behavior and treatment preference of Orthodox Christians towards mental illness and the bearers of the illness. Therefore, contrary to the dominant etiological conceptualization and diagnostic formulation of the biomedical model towards mental illness and the sufferers, this study argues that socio-cultural and religious beliefs or traditionally bound illness ideologies immensely determine the perception, treatment seeking behavior and treatment preference of Orthodox Christians of the Tigrinya ethnic group in Eritrea. Thus, this research inquires how such sociocultural practices and religious beliefs specifically interrelate with the way Orthodox Christians of the Tigrinya ethnic perceive and treat mental illness? what are the various ways that socio-cultural practices and religious beliefs impact mentally ill persons and their families. And, what remedial and integration strategies could be devised to ameliorate the challenges posed by religion and culture on the bearers of the illness? As key themes and objectives therefore, this study attempts to; investigate the interconnection between mental illness and socio-cultural practices and religious beliefs and treatment preferences, explore the various ways where socio-cultural practices and religious beliefs impact mentally ill persons and their families, and to determine possible ways which can ameliorate the challenges posed by religion and culture upon persons with mental illness and that can ultimately result in selfsufficiency and empowering integration of persons with mental illness into the mainstream society. Ultimately, through the utilization of comparative and inductive approaches, this research project is expected to address cross-cutting themes and establish significant links between socio-cultural and religious factors on one hand and perception, treatment seeking behavior and treatment preference of Orthodox Christians of the aforementioned ethnic group on the other.

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Comparison of the effect of community re-entry program (CRP) and conventional psychotherapy programs on symptoms severity and communication and interaction skills of persons with severe mental disorders

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Deficits in social and living skills of chronic mental patients and the unsatisfactoriness of current drug, provide a strong rationale for developing new interventions. Community Re-Entry Program is one of the programs related to social and independent living skills that provides patients with chronic mental disorders with some information and skills. The aim of the present study was to compared symptoms severity and communication and interaction skills of outpatients with severe mental disorders after the Community Re-entry and conventional Psychotherapy programs. Methodology & Theoretical Orientation: This study was a quasi-experimental design with pre-test, post-test. To this end, 40 patients with severe mental disorders (schizophrenia and mood disorder) referring to daily rehabilitation centers of Hamadan and using simple randomization divided into an Community Reentry Program (N=20) and a Conventional Psychotherapy Programs (N=20) group. The community rehabilitation program group received in 16 60-90-minute educational sessions held

Twice a week for two months: The conventional Psychotherapy group were used from psychotherapy and occupational therapy. Both groups were evaluated using Assessment of Communication and Interaction Skills (ACIS) questionnaire and positive and negative symptom scales (PANSS) before and after the intervention. To analyze of Mean difference in the two groups, were used from U Mann-Witny test. Findings: The results showed that the two groups were the same in terms of age, marital status and employment levels. Patients who received Community Re-entry Program showed a significant change in information exchange (P = 0.001), relations (P = 0.0001) and total score of ACIS questionnaire (P = 0.0001) and in the positive symptoms (P = 0.01) of PANSS questionnaire compared to the conventional psychotherapy group. Conclusion & Significance: The results showed that Community Re-Entry Program in compared with conventional psychotherapy daily centers played an important role in improving communication and interaction skills among patients with severe mental disorders in the study population. Yet, future studies are required to assess the long-term clinical effects of this program.

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Weight loss and associated factors among head and neck cancer patients undergoing particle therapy

Hongwei Wan Shanghai, China

Weight loss occurs frequently among patients with head and neck cancer during conventional radiotherapy. However, the impact of particle therapy on weight loss has not been examined among this population. The aim of this study is to evaluate the weight lost among patients with head and neck cancer during particle therapy, and investigate its associated factors. 126 adult patients who received particle therapy were included. Multiple linear regressions were used to analyze the related factors for percentage of weight loss during particle therapy. Related factors included gender, age, Karnofsky performance status (KPS), tumor location, stage, recurrence, treatment modality, total dose on the primary tumor, concurrent chemotherapy, prior treatment, pre-treatment BMI and nutrition risk, and total score of toxicity during particle therapy. Overall, critical weight loss occurred in 20% of the patients, and the mean weight loss was 1.4kg (2%) during particle therapy. None of acute toxicities were greater than Grade 2, except for Grade 3 oral mucositis in 7.1% of the patients. Results of multiple linear regression indicated that only radiotherapy modality (95% CI:-7.934--2.917, P<0.001) and total toxicity score (95% CI: -1.348--0.449, P<0.001) were significantly related to percentages of weight loss during particle therapy among head and neck cancer patients. Thought weight loss and toxicities were less severe during particle therapy, it is crucial that early nutrition intervention should be implemented for patients with combined particle and photon therapy, or severe toxicities, who were in the high risk of weight loss.

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Incorporating lived experience and trauma-informed care in organizational structures

Jason Nelson

Public Speaker, Australia

Emergency services regularly face severe and traumatic experiences, which can have a long-lasting impact on a person's mental and physical well-being, and social and economic participation. Post-Traumatic Stress Disorder (PTSD) can develop in people who have experienced or witnessed a traumatic event. It is estimated that approximately 6 percent of Australians aged 16 to 85 live with PTSD in any one year. Defense forces, emergency services, prison officers and veterans experience higher rates of PTSD and Complex Trauma which is as an alternative to the narrower definition of PTSD which encompasses 'changes in victims' attitudes about self, the perpetrator, relationships and belief'. There is an emerging recognition of Complex Trauma and PTSD across Emergency Services, and their responsibilities to ensure staff safety and mental wellbeing. Organisations and corporations have a responsibility both legally and ethically to ensure the safety and mental well-being of their employees. In emergency service, there is an emerging recognition of complex trauma and post-traumatic stress disorder. However, the system is failing our heroes. Trauma-informed care is an organizational structure and treatment framework that involves understanding, recognizing and responding to the effects of all types of trauma. For the best recovery outcomes, the causes of a person's 'symptoms' or responses must be understood. How can these symptom's and responses be understood? A Peer Support model of emergency service personnel that incorporates the teaching of Trauma-Informed Care is the mechanism designed to understand a person's 'symptoms' or responses. There is a clear need to provide ongoing education to members – especially all levels of management – to encourage a culture of openness about mental health issues, encompassing lived experience and the Principles of Recovery.

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Neuro-development, mental illness and drug involvement: Intersections on the adolescent highway

Ken C Winters

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New scientific discoveries based on neuroimaging data have refined our understanding of adolescent behavior. Research now suggests that the human brain is still maturing in significant ways during the adolescent years; it is the last major organ in the body to reach full maturity (Giedd, 2004). Experts believe this neuro-development may influence the way teenagers make decisions and have implications for health. On a general level, the way the teen brain develops may contribute to drug involvement and the effects that lead to addiction. Brain maturation during adolescence can give rise to take risks, under-appreciate negative consequences when risks are taken, seek novelty, and to be easily influenced by peer pressures. Also, there are indications that the developing brain's dopamine system may be particularly vulnerable to the effects of drugs. Moreover, adolescence is a vulnerable period for the onset of mental illness. There is growing scientific evidence that the developing brain may be particularly vulnerable to toxic environmental factors, including exposure to drug involvement, and such negative experiences may increase the likelihood of behavioral or mental illnesses. The proposed presentation will summarize this emerging science and discuss implications for programs and practices. Participants will gain an understanding of adolescent normal brain development, how youth are particularly vulnerable to the effects of drugs (including marijuana) and the onset of mental illness and gain insights regarding how to capitalize on this new science for drug prevention and treatment.

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Psychiatric manifestations and the role of functional integrative medicine

Kristina Janicas

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Statement of the Problem: Treatment of psychiatric manifestations often have a symptom-based approach to treatment with psychotropic medications without addressing or determining the root cause of the issue or exacerbating factors. Patient assessment with mental health complaints by clinicians should take a multifactorial approach investigating possible systemic medical factors, vitamin deficiencies, or hormonal imbalances and maladaptive lifestyle before or in conjunction with consideration of psychotropic medications depending on the severity or degree of psychiatric symptoms. Although there is an essential need for more research into determining the impact of systemic issues related to hormonal and vitamin deficiencies as well as the inclusion of antioxidant and gut microbiomes in treatment related to mental health complaints, there is still enough information to give consideration to these factors and their significance upon assessment. Assessing hormonal status of the thyroid, cortisol, sex hormones, as well as vitamin deficiencies will be explored and their impact on mood-related issues. There is evidence that the hypothalo-pituitary axis and the disorders associated with its dysfunction is relevant to the pathophysiology of bipolar affective disorder and depression (Chakrabarti, 2011). Certain vitamin deficiencies have a direct impact on mood disorders, psychotic states as well as slow cerebration (Kamrowska, 2010). The emphasis on identifying these factors that impact mental health would be increased awareness of treating the whole person, and not focusing purely on symptom management. The detrimental effects on the health of individuals with the use of psychotropics (antipsychotics, mood stabilizers, antidepressants) have a strong association to multiple physical diseases including obesity, dyslipidemia, diabetes mellitus, thyroid disorders, hyponatremia; cardiovascular, gastrointestinal, hematological, musculoskeletal and renal diseases (Correll, 2015). These disease states that are associated with the use of psychiatric medications directly impact the quality of life of the individual as well as increases the risk of mortality (Diez, 2016). The emphasis on the importance of a functional assessment and treatment based on objective clinical information from diagnostic testing will be reviewed to be considered upon receiving an individual suffering mental health complaints. This can be used as an adjunct to psychotropics depending on the severity of the symptoms presented, or initially in mild to moderate symptomatology with close monitoring.

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Depression, lifestyle and life satisfaction in patients in hemodialysis

Luljeta Musliu and **Fatmire Ahmeti** Heimerer College, Kosovo

Hemodialysis is a procedure of removing or eliminating the remaining metabolic products or toxic substances from the blood. This method/procedure is used when someone's kidney is about to fail partly or entirely. This study was done to evaluate the life style of patients on hemodialysis, their depression and satisfaction with life. Altogether 90 patients were selected randomly to be part of this research. Data collection was conducted through three predetermined and standardized questionnaires. First questionnaire that is known as "Depression Rating Questionnaire" (Beck Depression Inventory - BDI II), was designed to measure the level of depressive symptoms. Second questionnaire referred to as "Quality of Life Questionnaire" (KDQOL SF^{**}), was used to describe patient's health in general, compared with its health a year ago. Third questionnaire, called "Life Satisfaction Questionnaire 9" (LISAT), was designed to ask patients how satisfied they are in different life aspects. Results show that patients on hemodialysis have limited daily activities. Among them, 55.8% of men have minimal depression, while 34.2% of women have moderated depression. However, it was found that pretty good part of them is satisfied with their life. While doing correlational analyses, it was found a significant relation between depression and gender (r=.366, p<01). So, depression influences negatively on performing of many daily activities. There is a need for a greater treatment to overcome depressive symptoms and training about daily life activities, in order to have an easier restriction of daily activities and easier coping with the disease.

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Recovery monitoring and goal development using I.ROC and the HOPE toolkit

Mary Jo Kelly Rutgers University, USA

Statement of the Problem: Recovery-oriented treatment approaches are becoming increasingly common in many countries. Since recovery is a very individualized process, there is a gap in the knowledge about the most effective methods for assessing progress toward recovery, and developing recovery-oriented treatment goals and goal interventions. I.ROC is a validated, recovery-oriented tool that assists patients with setting individualized treatment goals and measuring their progress. The HOPE Toolkit provides strategies to help patients achieve goals. The primary aim of this study is to assess whether use of I.ROC, when combined with HOPE Toolkit interventions, results in patients making greater self-perceived gains toward personal recovery. Methodology: Use of I.ROC and the HOPE Toolkit will be piloted in a partial care day program. This study will recruit at least 40 adults with mental illness or dual diagnosis mental illness/substance use disorders who are currently patients at the partial care program. Study participants will be randomized to Arm A or Arm B. Participants in Arm A will take I.ROC twice, at study baseline and endpoint. They will review their results with the psychiatric nurse practitioner. They will review their results with the psychiatric nurse practitioner, and based on the results, be invited to develop up to three new treatment goals. They will then meet with the psychiatric nurse practitioner every three weeks for 12 weeks to work toward their goals using HOPE Toolkit interventions. At study endpoint, they will be administered I.ROC again. Participants in both arms will also be administered a questionnaire at baseline and endpoint to assess their perceptions of I.ROC and the goal setting process.

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Evaluation of master of science in integrated clinical and community mental health program in Ethiopia

Matiwos Soboka, Markos Tesfaye, Kristina Adorjan, Sandra Dehning, Tsedeke Asaminew, Mubarek Abera, Andrea Jobst, Matthias Siebeck Medical Research International Health, Ethiopia

Introduction: The shortage of trained man power in the field of mental health remained an important barrier to the treatment of persons affected by mental illnesses in low and middle income countries. A new graduate program for non-physician clinicians was established at Jimma University to address the scarcity for mental health human resource in Ethiopia. Therefore, this study aimed to assess the competency, satisfaction and involvement level of graduates of the program.

Methods: A cross-sectional study was conducted among all the 28 of 32 graduates from the program. Data was collected using a semi-structured self-administered questionnaire that was developed for the study. Strengths and weaknesses of the program, courses to be added or removed from the program, and suggestions of graduate on the general program were assessed qualitatively using open ended questions. The quantitative data were summarized using descriptive statistics, including mean, standard deviation and frequencies. Qualitative data were transcribed and analysed thematically.

Result: Almost all of graduates (96.4%, n=27) were working in public institutions. The majority (75%, n=21) of the graduates were directly engaged in clinical care of patients. Also, two-third of the graduates (67.9%, n=19) were involved in mental health research. All of the graduates were confident to conduct psychiatric assessment of adults and to identify and manage common mental disorders (100%, n=28).

Conclusion: Brain drain does not appear to be a challenge among non-physician mental health specialists.

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Patients' and health care providers' perception of and attitudes towards the use of music as therapy in psychiatric hospitals.

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Introduction: Music is a widely utilized form of complementary therapy. Despite the available literature supporting its role in improving concentration and attention span, increase relaxation, social interactions, communication, relationships, learning, mobilization and expression, yet its use in psychiatric clinical settings is still limited. Positive perception and greater understanding of music as therapy may lead to increase use of music, and more opportunities for direct patient care. In this respect, research indicates that if healthcare providers are interested in, and tended to have positive attitudes and perception about Music as Therapy, this will help in the provision of sound medical advice to their patients seeking this option. Little literature explored the patients' and health care providers' perception and attitudes towards the use of music as therapy in psychiatric hospitals as an adjunct medical treatment option. Aim: This study aimed to explore patients' and health care providers' perception and attitudes towards the use of music as therapy in psychiatric hospitals.

Design: The study followed a descriptive research design. Setting: It was conducted at El-Maamoura Hospital for Psychiatric Medicine. Subjects: The study Subjects comprised 130 in-patients with psychiatric disorders and 181 health care providers which included 96 nurses, 63 psychiatrists, 8 psychologist and 14 social workers. Methods: Four tools were used for data collection. The Attitude towards the Use of Music as Therapy Survey, the Psychiatric Health Care Provider's Perception of Music as Therapy Structured Interview Schedule, patient's Perception of Music As Therapy Structured Interview Schedule, and a Socio-Demographic and Clinical Data Sheet were used.

Results: The main results of this study found that 75.1% of the studied health care providers had high knowledge about music as therapy and 81.8% of them had positive perception of music as therapy and of its effectiveness and 70.7% of the studied health care providers had positive attitude towards music as therapy. Additionally, 70.8 % of the studied patients perceived that they could use music as therapy and 66.2% of the studied patients had positive attitude toward music as therapy.

Conclusion: The present study concluded that patients have positive perception and attitude toward music as therapy, in spite of their low knowledge about it. Health care providers have knowledge about music as therapy, they perceive it as helpful in improving patients' condition and they possess positive attitudes towards music as therapy. So the researcher recommended that nurses should assume a more positive role in the implementation of music as therapy. They have to be able to choose the most appropriate time for their patients to listen to music, attend workshops on the use of music as therapy and they should be implemented as part of inservice programs for staff, integrating music as therapy into the nursing and medical curriculum is necessary and psycho-educational programs to develop patients' awareness about music as therapy are needed.

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July 25-26, 2018 | Vancouver, Canada

Tennessee crisis services continuum

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Prisis Services are a continuum of services that are provided to individuals experiencing a psychiatric emergency. National statistics attest to the significant need for crisis services. Published studies report that about 25% of all US adults have a mental illness and that nearly 50% of US mental illness during their lifetime (CDC, 2011). The provision of crisis services is multifaceted and differs state by state or regionally in the public sector, and among individual hospitals and health care systems in the private sector. Major factors driving that variability are sources of funding including patients' insurance, geographical challenges, and local preferences. Research has shown that mobile outreach can help people address psychiatric symptoms and reduce the number and cost of psychiatric hospitalizations, the need for law enforcement intervention, and the number of emergency department visits (HHS/ SAMHSA, 2014). Few communities provide a full continuum designed to provide the right care at the right time and support an individual's ability to cope when in a crisis. Core crisis services include 23-hour crisis stabilization/ observation beds, short-term crisis residential services and crisis stabilization, mobile crisis services, 24/7 crisis hotlines, warm lines, directive statements, crisis services. The primary goals of these services are to stabilize and improve psychological symptoms of distress and to engage individuals in the most appropriate course of treatment. The Tennessee Department of Mental Health and Substance Abuse Services (TDMHSAS) Crisis Response System was developed in 1991 four main programs: Mobile Crisis (Adult and Children & Youth), Walk-in Centers (WIC), Crisis Stabilization Units (CSU), and Crisis Respite Services. This presentation will focus on Tennessee's development of a comprehensive crisis system, including prioritizing partnerships, innovative uses of technology for crisis response, and funding considerations.

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Visions and voices versus hallucinations and voices: The effects of grey areas in mental health diagnoses

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Was Against Schizophrenia Project, USA

Statement of the Problem: The intricately religious adherence of Africans engenders the disregard for mental health symptoms thereby wounding the emotional wellbeing of blind adherents. The African continent is noted for its intense spiritual adherence in all spheres. This reliable adherence has led to some manipulations, deceit, and unquestioned belief systems. The proliferation and flourishing of new Christian churches confirm the trustworthiness of this belief system. However, some of the leaders claim to be in direct contact with God through visions and direct instructions from God's voice. While respecting the belief systems of these faith leaders, this paper is based on the examination of some of the unusual faith leaders, their voices and their visions, vis a vis symptoms of some mental Health Disorders. Spirituality and its practices are not empirical therefore some claims of voices and visions, though a clear symptom of mental health disorders, could pass for religious skills. This paper is based on research carried out on 10 unusual church leaders in Africa and the effects of their ministration on their followers. This paper describes the effects of intricate religious adherence to unusual faith leaders and its link to mental health disorders. A theoretical research was carried out on ten of the unusual faith leaders through interviews, questionnaires, and literature review. A sample of the adherents from five of the churches and were screened using DSM V and assessment tests for depression, post-traumatic stress disorder, and codependency. Conclusions on the research unearthed several mental health disorders including depression, post-traumatic stress disorder, and codependency on 78% of the sample chosen. The findings are to enlighten policymakers to reshape mental health policies to include a screening of societal and religious leaders as a pre-requisite for practice.

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How mental health affects learning in college students

Ren VanderLind

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This speech will address issues of learning as related to mental health in college students. Research has demonstrated that college students with poor mental health have issues with academic persistence, self-regulatory skills, and grades. In my speech, I will address the literature on college students with mental illness alongside learner characteristics that connect to issues facing said students, providing insights into how best to serve this unique population. Some of the topics covered will be maladaptive perfectionism in females and their likely learning orientations, the benefits of self-regulatory and metacognitive skills, and shifting epistemologies to benefit college students with mental illness. There will be some transfer to childhood learning as well because these learner characteristics are also present in children. The significance of the connection between mental health and learning will be addressed to give attendees a clear picture of what practical applications they can use to help increase learning in students with mental health concerns. Data about the current state of mental illness on college and university campuses will also be shared.

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Differences in the male response to children's toys and games in various groups

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The Autism Spectrum Disorders (ASD) are categorized as a neurodevelopmental disorder in which an individual demonstrates 🗘 abnormalities in social development, communication, and in restricted patterns of behaviours and interests from very early ages. This implies the consideration of different theoretical, methodological, and practical positions that contribute to advance our understanding of the phenomenon. According to one of them the autism implies a disorder of empathy, allied to an average capacity or even superior of systematization, which would bring, as consequence, a brain extremely masculine. This study aimed to verify whether the children with ASD present differences regarding the formation of gender identity compared in children with typical development, and in children with Mental Retardation. The empirical study was developed as a cross-sectional design, with a sample of 99 male children and aged four to six years and 6 months, from cities of the states of Sao Paulo and Bahia. This sample was divided into three groups, considering their clinical features: Control group - children in typical development (n=33); Clinical group children with Autistic Spectrum Disorders - ASD (n=33) and Clinical group - children with Mental Retardation - RM (n=33). The instruments used were the Assessment Scale of Autistic Traits - ATA, the Columbia Mental Maturity Scale and the Gender Apperception Test - GAT. Significant differences were identified in the results provided by the three groups regarding the gender acquisition, with the Control Group presenting a higher score in masculine items, followed by the group with TEA and then the MR group. The identified differences are directly related to the clinical features of the children that composed the groups. Furthermore, the ASD group besides not having obtained the best performance, in relation to control group, it also presented differences as to the process of the gender identity acquisition when compared to the MR group.

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Diagnosing and treating racial & ethnic minorities with anxiety disorders that present as anger & aggression

Teresa Combs

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Purpose: The purpose is twofold: first to present differences in symptom presentation for anxiety between various racial and ethnic groups. The second is to highlight the importance of employing Leininger's model of Culture Care when presented with a person that is from a different racial, ethnic or cultural background.

Summary of the Evidence: The existing literature suggests that racial and ethnic minorities are over diagnosed with psychotic like disorders and under diagnosed with anxiety disorders (1, 2). Caucasian/European providers are frequently unfamiliar with the symptom nuances of anxiety among racial and ethnic minorities. This lack of cultural familiarity places racial and ethnic minorities at a greater risk for misdiagnosis, inappropriate treatment patient mistrust, and premature treatment termination (1,3,4).

Description of the Protocol: Current diagnostic practice involves a clinical assessment, collateral information and evaluation of diagnostic tools. While these are vital as baseline measures Madeline Leininger's theory of Culture Care reaches for practices that include attending to the beliefs values and meanings from populations that a provider may be unfamiliar. This approach can be useful to bridge the cultural gap between providers and patients. Strategies for change consist of: self-reflection, acceptance of the population you are treating, use of the cultural formulation of the DSM5 reaching out to collaborate with racial or ethnic colleagues and whenever possible matching patients with like providers.

Evaluation Method: The evidence associated with this presentation was an extensive review of the literature (ROL) using search terms: African American, Hispanic, anxiety, anger and aggression. Inclusion criteria articles refer to diagnosis, symptoms, treatment, ages 5-65 years old. I addition my experience in my current practice.

Future Implications: There is a severe need for racial and ethnic diversity among mental health and primary care providers. However as these disciplines await the number to meet the need, the current providers will benefit by making a deliberate effort to address cultural specific symptoms of anxiety disorders when working with racial/ethnic minorities.

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The magic of your potential: How I transformed a disability into a triumphant life

Tim Piccirillo

Market Pitch Digital Marketing Consultants, USA

In this lively and entertaining presentation, Tim Piccirillo shows participants, through his personal story of growing up with Chronic Motor Tic Disorder, along with co-occurring conditions including a generalized anxiety disorder, dysthymia, and obsessive-compulsive tendencies that everyone has potential and a severe disability does not have to impede your success! Using some creative magic, a liberal dose of humor and storytelling, Tim proves to participants that it's not what happens to you in life that matters, it's what you do about it that makes the difference and that changing your attitude toward life and happiness can be as easy as changing your socks if you make the commitment. He also shows participants basic success principles that they can use to better themselves in their personal and professional lives. This program is not only motivational and inspiring but very entertaining as well. It is appropriate as a kick-off keynote to "fire up" attendees for a conference or as a closing keynote to send participants out with a smile.