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# Poster Presentations

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## Higher levels of agreeableness are associated with higher ratings of therapeutic alliance

**Amanda Mendez**

Loma Linda University School of Behavioral Health, USA

The relationship between the therapeutic alliance and psychotherapy outcome has been well documented in the literature. The therapeutic alliance is considered a “main curative component” in the interpersonal process of therapy and is the foundation necessary for successful therapy outcomes across various orientations of psychotherapy. Still, far less research has examined the relationship between specific therapist personality characteristics and the quality of the therapeutic alliance. The current study was aimed at examining the relationship between several therapist personality traits and the therapeutic alliance. The study utilized the Working Alliance Inventory Short-Form (WAI-S) to measure the client-reported therapeutic alliance and the NEO-FFI to measure therapist personality. A one-way ANOVA was conducted to compare the relationship of agreeableness to the therapeutic alliance in groups of highly rated, average rated and low rated working alliance. Therapists were grouped by the quality of their working alliance score and the scoring profile associated with each factor. On the NEO-FFI, agreeableness is divided into levels of low ( $T=35-44$ ), average ( $T=45-55$ ), high ( $T=56-65$ ) and very high ( $T>65$ ). Those who scored in the high range ( $T>56$ ) of agreeableness demonstrate the highest levels of warmth, empathy, honesty and trustworthiness. Results indicated that agreeableness was found to be significantly related to the quality of the therapeutic alliance ( $F[2, 39]=7.09, p<0.00$ ). Overall, higher levels of agreeableness were associated with higher ratings of therapeutic alliance, as well as the highest level of participation in the study. These findings suggest that therapist agreeableness is one important ingredient in strengthening the therapeutic alliance and reducing premature dropout. These findings also suggest the importance of therapists better understanding their degree of agreeableness and, if necessary, working to develop greater agreeableness for the purpose of strengthening their therapeutic alliances with patients.

### Biography

Amanda Mendez is a fourth year PsyD student at Loma Linda University, School of Behavioral Health. She has a growing interest in the mechanisms producing therapeutic outcomes. Her experience includes 10 years working with persons in crisis and histories of traumatic experiences, assisting them make changes in their lives. With the most recent three years as a clinician providing outpatient therapy, this clinical experience has revealed the importance of a therapeutic alliance and understanding what helps others who are in need of change. Recognizing various strengths of therapists and growing in the knowledge of the many aspects and processes of therapy, has provided her strong motivation to conduct this research. Her ultimate goal is to expand research on the therapeutic alliance and therapist personality, inform the training of therapists in order to improve patient outcomes and serve as a consultant to educate and inform other training programs.

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## Differences in remission from nicotine use disorder by tobacco treatment services among people with severe mental illness

Hamzah Alghzawi, Carla Storr, Shijun Zhu, Alison Trinkoff, Fernando Wagner and Debra Scrandis  
University of Maryland, USA

**Objective:** People living with mental illnesses are two to four times more likely to be dependent on nicotine and have more difficulty remitting from nicotine use disorder (NUD). A growing body of evidence supports pharmacological interventions to assist smoking cessation in people with severe mental illness (SMI; i.e. lifetime major depressive disorder, bipolar disorders, or schizophrenia). Little is known about whether non-pharmacological treatment services are also associated with high probability of remission from NUD and whether the time from NUD onset until full remission from NUD differs by tobacco treatment services (pharmacological services, non-pharmacological services, or both services).

**Methods:** A population sample of 726 American lifetime adult smokers with SMI and a history of NUD who had a history of seeking tobacco treatment services were identified in a limited public use dataset of the 2012-2013 National Epidemiologic Survey on Alcohol and Related Conditions (NESARC-III). Individuals who did not meet any DSM 5 criteria other than craving in the past year were classified as having remitted. Participants self-reported ages of NUD onset and remission (individuals not in remission were censored at their current age). Survival analysis was used to compare the probability of remission from NUD and the time needed for full remission from NUD by tobacco treatment services. The analysis took into account the complex sampling design and controlled for possible confounders (i.e. sociodemographics) and covariates (i.e. comorbidity with another mental illness).

**Results:** The study sample was primarily female (61.2%), non-Hispanic White (84.4%), between 45 to 65 years of age (51.4%), from the south (32.0%) residing in urban areas (75.3%). Out of those who sought tobacco treatment services, only 32.3% had remitted (6% had used pharmacological treatment services, 41.7% had used non-pharmacological treatment services and 52.3% had used both). The proportion that remitted with a history of pharmacological treatment services was 17.6%. Remission was more frequent among those using non-pharmacological treatment services (28.5%) or when both types of tobacco treatment services were used (19.6%). In models controlling for confounders and covariates, the probability of remission from NUD was higher among those who had non-pharmacological services (HR=1.95, 95%CI: 1.93, 1.97) or those who had both treatment services (HR=1.52, 95%CI: 1.52, 1.55) compared to those who only had pharmacological services. The average time needed for full remission from NUD was 35 years (95%CI: 32.2, 37.6) among the smokers who had non-pharmacological treatment services, compared to 37 years (95%CI: 32.1, 42.3) among those who had pharmacological services and 47 years (95%CI: 43.9, 49.8) among those who had both treatment services.

**Conclusions:** The current study suggests a clinical need for non-pharmacological interventions to promote the probability of remission from NUD among smokers with SMI. Psychiatric nurses could play a role in educating and encouraging smokers with SMI to seek and utilize non-pharmacological treatment services that might improve the probability of remission from NUD and facilitate prolonged abstinence.

**Acknowledgments:** NESARC-III is funded by the National Institute on Alcohol Abuse and Alcoholism (NIAAA) with support from the intramural program and National Institutes of Health.

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## The effectiveness of long distance smoking cessation programs

**Thiago Amaro Machado, Alfredo Maluf Neto, Elton Yoji Kanomata, Andre Pires dos Santos and Ana Merzel Kernkraut**  
Hospital Israelitas Albert Einstein, Brazil

Smoking cessation programs are faced with unsatisfactory results due to high dropout rates, low effectiveness and high average costs. In this scenario, the mental health team of a large Brazilian private hospital developed and conducted a research on the effectiveness of long distance smoking cessation programs. The main objective is to demonstrate the effectiveness of this service model in smoking cessation. The program's duration is twelve weeks, with both psychological and psychiatric evaluations for the diagnosis and a treatment proposal. The assistance to the patient is conducted through electronic media. Eleven weekly basis appointments are scheduled it. Motivation interview and preparation techniques such consideration of barriers and benefits to change, counseling regarding about the advantages of decreasing the number of cigarettes until and the definition of the smoking cessation day is used during the initial smoking cessation until the patient reaches the maintenance stage. In psychiatric care, two electronic appointments are performed for a reassessment of the initially prescribed medication (bupropion and nicotine patch). Sixty patients were treated during the research. In a preliminary analysis, there was an 18% dropout rate with an overall rate of success in smoking cessation of 70%. For patients who completed treatment, this percentage reaches 85.71%. In a preliminary analysis, researchers observed that the use of an electronic technology improves adherence to the program since patients are able to maintain their normal daily routines, eliminating the loss of time to get to the appointment, thus decreasing absenteeism and improving the effectiveness of smoking cessation. .

### Biography

Thiago Amaro Machado is a specialist in Psychologists in hospital practice by Santa Casa de Misericórdia. Psychologist reference of the in-patient areas in medical and surgical and area of smoking cessation of the Hospital Israelites Albert Einstein. Graduated in Psychology from Pontifícia Universidade Católica-Campinas.

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## A new integrative and preventive intervention program for patients undergoing hematopoietic stem cell transplant: First results of a pilot study with students

**Maya Corman**

University Clermont Auvergne, France

**Statement of the problem:** People undergoing bone marrow transplantation may have some psychological symptoms such as depression and anxiety and physical symptoms as pains all along the process, especially during hospitalization. An investigation about a new preventive intervention to help people to cope with this event has been led. This program is divided into three subtasks: the first one is a new attentional bias modification task, the second one is an optimizing emotional regulation task and the third one is a mindfulness intervention. Each task aims to facilitate the realization of the next one. The program would be implementable at home and during hospitalization with a digital platform. Before implementation in hospital, a pilot study was conducted in the laboratory with the first subprogram.

**Methodology and Theoretical Orientation:** 38 students were recruited ( $Mage=22.6$ ,  $SD=7.2$ ,  $N_{experimental\ condition}=19$ ). This attentional bias modification task consisted in detecting a positive picture amongst three others (negatives and neutrals), moving it toward the screen's center and savoring the associated emotion. Before and after training they realized an eye tracker procedure in order to detect the presence of an attentional bias modification.

**Findings:** The increase of positivity bias (i.e. a longer fixation time on positive stimuli) was significantly greater in the experimental condition than in the control one. There is no significant decrease in negativity bias in the experimental condition as a control. The effects of the task on positivity bias tend to be greater for subjects with depressive symptoms.

**Conclusion and significance:** the First result of this pilot study provides interesting elements to pursue our investigations. Next step is to test the effectiveness of the second intervention (a positive psychology one) with the completion of the first task. Finally, we will test the whole program before proposing it to patients before and during their hospitalization.

### Biography

Maya Corman (University Clermont Auvergne, LAPSCO CNRS UMR 6024) is a second-year PhD student in psychooncology under the supervision of Pr Michael Dambrun, Pr Regis Peffault Delatour and Jacques-Olivier Bay. Her thesis work focuses on a psychological approach of people with hemopathy and undergoing stem hematopoietic cell transplantation process. This topic has two issues: the first issue aims to identify deleterious (e.g anxiety) or protective (e.g optimism) psychological factors involved in the different steps of bone marrow transplantation process. The second aims to put in place preventive intervention focused on emotion and attention regulation in order to reduce psychological distress before hospitalization and provide to patients some emotional and attentional resources to cope with this event in an adaptive way. By proposing such an intervention via a digital platform this program aims to overcome hospitalization constraints like isolation and treatment side effects getting patients physically and psychologically vulnerable.

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## Cognitive improvement by food substitutes using PhytoMeal, Pitfalls for Neuropsychological testing

Han Sung Ju and Manho Kim  
Seoul National University, South Korea

Increasing aging population accelerate the prevalence of patients with dementia. They were initially complaining or unaware their cognitive declining, thus proper neuropsychological evaluations are sometimes missed. Recently, in addition to the developing medicine that targeting the amyloid plaque in case of Alzheimer's disease, there are several important attention for the exploring the functional food that improve or at least delayed the progression of cognitive decline. Among the candidate for the *Salicornia Europaea*, a plant in the ocean, -the plant cannot grow in the salted environment- had been selected and explored the possibilities for its anti-choline esterase inhibitory effect, that lead to the improve the neuropsychological performance. In vitro and in vivo test had been shown effective and clinical trial with several series of psychological tests have been on going. To be able to use in human, efficacy and safety of this *Salicornia Europaea* should be of importance in order to review from KFDA (Food and Drug administration). Currently, improvement of K-MMSE and ADAS-cog are main primary endpoints in Korea. However, determining process selecting proper psychological test were not organized. Therefore, there can be possible limitation that mask the real efficacy of functional food improvement. If the result was not significant, different psychological tests should be remained for further evaluation of endpoint. International standard for applying psychological evaluation would be of benefit. More efficient detailed or reliable evaluation of psychological analysis that can be applied to the development of cognitive-enhancing medicinal food.

### Biography

Dr. Han SJ has her expertise in evaluation and passion in improving the health and wellbeing. Her main area of research field is horticulture therapy, especially demented patients. Psychological evaluation tool and application of this method is of importance and, currently she is joining the clinical research developing functional food, shown above abstract. The necessary psychological evaluation would be of importance for the future outcome. Her visiting this congress is to explore the international activity of psychological evaluation, creates new pathways for improving healthcare. Both in hospital and education institutions, she would like to broaden the knowledge of medical, especially neuropsychological field. Her background or thesis is positive psychological analysis combined with horticulture therapy, which is the first attempt in the world.

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e-Poster Presentation

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## Improving heart health in behavioral health patients with a history of trauma through an integrated care program

**Serena Bonomo**

New York University, USA

There is an established association between trauma and high blood pressure. The Sunset Terrace Integration and Recovery (STIR) Program is a SAMSHA grant-funded initiative that addresses the physical health of those with serious mental illness, providing medical and mental health screenings 3 times over 12 months and free health classes to those interested. To date, 504 patients have enrolled and/or completed the 12 month program. The sample is 80% Hispanic, 70% female and over 18 years old ( $n=457$ ). 55% out of the patient sample reported a history of trauma or violence in their baseline interview when asked, "Have you ever experienced violence or trauma in any setting (including community/school violence; domestic violence; physical, psychological, or sexual maltreatment/assault within or outside of the family; natural disaster; terrorism; neglect; traumatic grief)?" We also made an 'overall trauma score' to quantify the severity of traumatic stress symptoms such as feeling numb and detached from others, having nightmares and avoiding situations that remind them of the trauma. There was a significant, positive correlation between patients' BP and their overall trauma score ( $r=0.068$ ,  $p=0.02$ ). Those who reported trauma also reported significantly lower social functioning ( $M=3.36$ ,  $SD=0.876$ ) at baseline than those without a history ( $M=3.7$ ,  $SD=0.878$ ); [ $t(245)=-3.057$ ,  $p=0.002$ ]. By 12 months, a paired samples t-test showed that those with a history of trauma had improvement in systolic blood pressure ( $t(67)=2.264$ ,  $p=0.02$ ) and diastolic blood pressure ( $t(68)=2.025$ ,  $p=0.047$ ). An improvement in LDL ( $t(68)=2.51$ ,  $p=0.014$ ) was also observed from BL ( $M=86.42$ ,  $SD=51.3$ ) to 12 months ( $M=62.28$ ,  $SD=60.1$ ). These findings provide preliminary support that integrated care services may serve as a beneficial care model to treat comorbid psychiatric and medical conditions for patients, especially those with a history of trauma or violence.

### Biography

Serena Bonomo completed her Bachelor of Arts in Psychology from New York University College of Arts and Science in 2017, where she graduated Summa Cum Laude with honors in Psychology Research. She is currently works at NYU Langone Sunset Terrace Family Health Center in Sunset Park, Brooklyn, where she assists in operating a 4-year, SAMSHA grant funded program to improve cardio metabolic health in behavioral health and psychiatric patients. She has a passion for helping patients who have experienced trauma and will continue to pursue this interest in her graduate psychology program at NYU beginning in the fall of 2018.

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Accepted Abstracts

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## The effects of hysteria and melancholia in the tragic falldown of promising psychologist Dick Diver

**Abdullah Kodal**

Istanbul Aydin University, Turkey

The work of F. Scott Fitzgerald-*The Tender is Night* shows us how a character like a psychologist Dick Diver having strong qualities such as education and career may collapse upon entering into a new social status which results in hamartia while it causes him to suffer from some mental illnesses such as hysteria and melancholia in his tragic fall down. It is the irony in the novel that Diver was once a successful psychiatrist and one of the most important representative of ambiguous personality in the modern western world who also wrote a small tome *A Psychology for Psychiatrists* while he deals with the reasons and cure of the psychological illness of his wife Zelda then Diver himself gets caught to a psychological illness with the outcome effects such as entering in a new luxury social life. So the decline of the successful psychiatrist Dick Diver's to a character of "nobody" can be considered as one of the most ultimate breakdowns among the characters in Fitzgerald novel and also as a good example for many psychiatrists who are in search of the causes for mental illnesses. In this perspective, be able to understand the tragic fall down of the protagonist Dick Diver who was once known well and respected for his psychology treatments for his mental patients then Fitzgerald's getting lost in his sexual drives with his interaction with women this study aims to analyze the novel's structure and the gaps between the parts of the novel with Freud's theory of hysteria and melancholia on the protagonist Fitzgerald.

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## **Tipping the scales towards restorability: Integrating cognitive remediation therapy within a competency restoration group curriculum**

**Amanda Giordano**

Nova Southeastern University School of Clinical Psychology, USA

Competency restoration can be a difficult and seemingly unachievable, legal mandate for many with severe and persistent mental illness. As a result, a large portion of incompetent defendants remain suspended within the psychiatric hospital system for years and are never able to return to the legal processes which rendered them there in the first place. At face value, instilling the knowledge and understanding necessary to establish a patient's "competence" appears to be a relatively straightforward task. Standard competency restoration methods aim to teach information related to an individual's specific case and the overarching legal and criminal justice systems. The capacity to learn and comprehend such information relies on frequently used cognitive processes related to attention, memory, reasoning, processing speed and executive functioning. However, studies on the neuropsychological deficits associated with major psychiatric illnesses, such as schizophrenia, bipolar disorders and depression, indicate global dysfunction of these vital mental abilities. Thus, legally incompetent individuals with severe mental illnesses often lack the very cognitive resources that they need for competency restoration, subsequent hospital discharge and the resumption of their court case. Simply stated, typical competency restoration methods, which include individual and group therapy, remain largely inadequate due to discrepancies between many patients' cognitive abilities and the mental requirements necessary to understand, conceptualize, recall and integrate legally required knowledge. Therefore, treatments used with the severely mentally ill should not rely on intact cognition, and, instead, should seek to mitigate its deficits. Cognitive remediation therapy (CRT) has emerged as a promising treatment approach for this population to improve cognitive skills, social and vocational functioning and motivation. Despite overwhelming promise, CRT therapies have not yet been used to address barriers related to competency restoration. Thus, this proposed poster will outline the underlying theory and overall design of a group-based treatment manual that adapts competency restoration strategies and incorporates cognitive remediation therapy (CRT) as an adjunctive form of treatment to promote better outcomes for legally incompetent defendants who have been court ordered to receive competency restoration treatment at an inpatient psychiatric facility.

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## Lessening maternal depression with a three-week emotional wellness visit

**Christine D Kowaleski**

Doctoral Candidate Crouse Healthcare, Syracuse, USA

Postpartum depression is the number one complication of pregnancy and can cause long-term morbidity to the mother, infant, family and society. Increasing identification of cases of maternal depression detected at the six-week postpartum visit led to a quality improvement project to test if a three-week postpartum emotional wellness visit would identify depressed mothers earlier than the traditional six-week visit, leading to earlier treatment and less morbidity for mother and baby. A twenty-minute psycho-educational session on managing depression and a postpartum depression resource toolkit including resources were given to a group of women at the three-week emotional wellness visit. The Edinburgh Postnatal Depression Scale (EPDS) tool was used to determine if depression was present at three weeks and administered to 31 participants. The depression screening was repeated at six weeks postpartum. A random sample (n=31) who did not participate in the QI project was used as a comparison to determine success. Results indicated that those who participated in the project had significantly decreased depression scores ( $p < 0.01$ ) at six-weeks postpartum (Mdn=5, SD=3.6) than those from the control group (Mdn=8, SD=5.1). This pilot project suggests that a three-week postpartum emotional wellness intervention may increase early identification and intervention for depression in postnatal women. Limitations of the project included a woman's honesty answering the EPDS and the lack of three-week EPDS scores for the control group. Maternal depression's profound impact on the entire family, including the development of the infant, demands proactive attention such as earlier assessment beginning a trajectory toward the prevention of PPD. This presentation explains the theory behind the success of this program and the implementation process for all practices..

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## Night shift nursing education and effects on job satisfaction

**Diane Ehrig**

California Rehabilitation Institute, USA

**Statement of the Problem:** Continuing nursing education, professional development and employer-required annual competencies is expected and often mandated to retain employment and/or licensure. These classes are rarely offered during the normal working hours of nearly half the direct care nurses. Attendance at these classes off their normal sleep cycle causes a disruption in their sleep pattern, anxiety, nervousness and a disruption in their circadian rhythm. Lack of availability of these classes during one's normal work hours can lead to decreased job satisfaction.

**Methodology and Theoretical Orientation:** This inductive cross-sectional critical action design used mixed methods to examine the effect of offering required education during night-time hours on job satisfaction. Voluntary involvement consisted of completing a pre-intervention Likert-scale job satisfaction survey, attendance at two facility-required courses conducted on the night shift and a post-intervention survey. Purposive sampling was utilized to gather nurses whose normal work hours were either evening or night shift. The intervention was attendance at a Basic Life Support Renewal course and a Surviving Sepsis competency review, which are commonly-required courses.

**Conclusion and Significance:** The post-intervention Likert-scale job satisfaction survey revealed that attendance at these courses offered during night-time hours did have a positive impact on job satisfaction of the night shift nurses with a confidence level of  $p < 0.01$ . It is recommended that the facility continue to offer required education during the normal work hours of the night shift. It is also strongly recommended to expand this education to other specialties and facilities.

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## Immediate healing for personality development

**Hadi Eltonsi**

Cairo University, Egypt

**Statement of the problem:** Clients receiving psychotherapy require several sessions even if with drugs and use of willpower over time.

**Purpose of the treatment:** Achieving immediate nonmedicinal effortless painless healing without complications For personality development, relief of neurotic disease, psychosomatic symptoms and diseases, treating emotional obesity and smoking.

**Method:** After joint analysis with client and definition of psychological and physical goals of treatment, the healer as a trained behavioral, cognitive and logo psychotherapist arrives with client to a new corrected understanding of the case and roots of conflicts in childhood, taking around 2 hours, then in less than an hour performs nonverbal interpersonal hypnosis with transfer of energy and telepathy to client till deep sleep when he implants the required personality, ideas, emotions, motives and attitudes into the subconscious embodying the required state. The subconscious and conscious mind will have same agreed upon analysis and targets for immediate results in that session of 3 hours.

**Results:** The healer got patent in Egypt 2016 for his discovery of The Immediate Healing for Personality Development and for mentioned purposes. Up till now treating more than 700 cases aging between 12 and 80 years with relief of more than 80% of cases either totally or mostly.

**Conclusion:** Immediate nonmedicinal revolutionary life transforming healing for a wide spectrum of cases achieving higher grades of maturity, insight, harmony and efficiency saving client time, effort, interests and complications. Also used to maturate community leaders to be a troubleshooter model efficient leaders with team spirit.

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November 26-27, 2018 | Los Angeles, USA

## Introduction to autism spectrum disorders

**Janani Venugopalakrishnan**

Stanford University School of Medicine, USA

The objective of the talk is to discuss epidemiology, the varied presentation of Autism spectrum disorders (ASD), criteria for diagnosis, treatment, recent research and discuss resources available to families. Autism spectrum disorders is a common neurodevelopmental disorder with social deficits including difficulties in verbal and nonverbal communication and restricted repetitive interests, or behaviors. Hyper or hyposensitivity to sensory stimuli is also commonly seen. It is a heterogeneous disorder, causation of which can be idiopathic or attributed to genetic mutations, deletions, prematurity, pregnancy or birth complications and in utero infections. The most recent prevalence of ASD according to the Center for Disease Control is 1 in 59 children as opposed to 1 in 68 children two years ago which presents increasing medical and social implications. Autism is associated with several comorbid disorders including mood and behavioral challenges like anxiety, depression, aggression, disruptive behaviors, Attention deficit hyperactivity disorder and insomnia which often require detailed evaluation and treatment. Intellectual disability, delayed milestones, speech and language deficits, gross motor and fine motor difficulties are other challenges. Detailed clinical evaluation and neuropsychiatric testing may be required to establish the diagnosis. There is no single treatment for ASD, however, an array of interventions inclusive of early behavioral therapy, speech, occupational therapies, exercises and parent training are found to be helpful. Medications including SSRIs, second-generation antipsychotics, alpha agonists, mood stabilizers and stimulants are used to help with the associated conditions. Recent medication trials with N-Acetyl-Cysteine, Vasopressin, Oxytocin, have been promising. School-based interventions inclusive of 504 plans and Individualized education plans (IEP) are beneficial to the student with ASD.

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## Development and validation of predictive models for depression using patient health questionnaire-9 data

**Jonathan C Huang**

The Episcopal Academy, USA

Depression, the leading cause of suicide worldwide, is a serious, widespread and growing mental health disorder that has now been labeled a global health epidemic. The patient health questionnaire-9 (PHQ-9), a depression-screener questionnaire, has emerged as an effective diagnostic tool globally. Using US PHQ-9 patient response data and corresponding demographic data from 2013-2014 and 2015-2016, this study conducts a comprehensive big data analysis of the response data to develop and validate predictive models for depression probability. Age at screening, gender, race/ethnicity, education level and body weight were proposed as factors correlated with depression. Two models were constructed using RStudio to explore these correlations: a logistic regression model and an artificial neural network. The logistic regression predictive model performed better than the artificial neural network in an unfamiliar dataset, whereas the opposite was true in a familiar dataset. Both models supported that the proposed factors are indeed significantly correlated with depression. The logistic regression model indicated that females and those with weight problems are more likely to have depression and that the likelihood of depression increases with age, decreases with higher education levels and varies by race. The artificial neural network indicated that age, the Asian race, some college education and weight problems are the most significant factors affecting depression probability, in that order. Based on these results, populations most at-risk for depression are identified and appropriate measures should be taken to combat depression.

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## Multiple case analysis using storytelling and child-directed play in addressing the self-esteem, moral reasoning and prosocial behavior of selected filipino children with history of marijuana use

**Julla Katrina Jose Ma**

Cristina Gacate Christianne Joyce Dayda Denise Angelica Panis Miriam College, Philippines

The study explored the influence of storytelling and child-directed play as modalities of expressive arts in addressing the self-esteem, moral reasoning and prosocial behavior of children with histories of marijuana use. Five male preadolescent and adolescents were purposively sampled from the two areas in Barangay UP Campus, Quezon City based on the measures assessing the three constructs. Data were gathered through the implementation of a program consisting of storytelling and child-directed play that lasted for seven to ten sessions conducted bi-weekly for a month. Results show that there were no trends seen on the scores of the participants. All of the participants obtained a low to normal range of self-esteem while majority of them had a decrease of scores on their moral reasoning and an increase of scores on their prosocial behavior. It is to be noted that while majority of the participants had a decrease on moral reasoning, all of them had an increase in their internalized type of moral reasoning indicating that the participants may have internalized the healthy norms and values while in the program. Thus, this allowed them to distinguish the right from wrong and reason the possible consequences of their actions and the responsibility that it entails. Storytelling and child-directed play had varying elements that influenced the improvement of the self-esteem, moral reasoning and prosocial behavior of the participants. However, the most common element observed was the free and accepting environment of the program that enabled the building of a healthy relationship and experiences between the facilitators, participants, and their peers. From the thematic analysis of the results, themes such as the role and influence of the facilitator, evoking component of the program and the individuality of the participants enriching the experiences in the program were used to create considerations for program development to further improve interventions intended to study similar modalities and constructs.

**Keywords:** Children on the street, self-esteem, moral reasoning, prosocial behavior, child directed play, storytelling and program intervention

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## Identification and assessment of victims of human trafficking

**Kalyani Gopal**

Mid America psychological and counseling services, USA

**H**uman trafficking has grown from a 9.5 billion dollar international crime to 150 billion dollars in a short span of 13 years. Research has shown that the main reason victims are not identified in therapists' offices is due to the lack of awareness of the severity of the problem and lack of training in identification of victims by therapists and clinicians. Often they are diagnosed as ODD, Bipolar Disorder and described as being out of control, defiant, or dysregulated. As a result, the core problem and issues are not identified. This keynote presentation will focus on the above and train therapists in tools to identify and assess victims effectively.

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## Think Positive! Examining the transition to academia from clinical nursing

**Laurel Anderson-Miner**

University of Pittsburgh, USA

All aspects of the nursing profession have been affected by the international nursing shortage. Many vacant nursing faculty positions have been filled with clinical nurses lacking formal preparation to teach. The stress of transitioning to the nursing faculty role has been emphasized in the scientific literature. A basic qualitative study was designed to discover the positive aspects of the transition period, which may enable retention strategies in the academic nurse educator role. A sample of eight nursing faculty members who successfully transitioned to the baccalaureate nurse educator role was interviewed using semi-structured techniques. Findings revealed four common themes: mentoring and support, collaboration, camaraderie and the positive aspects of the nursing faculty role. Mentoring and support contributed to the professionalization to the academic role. When experienced nursing faculty members encouraged collaboration with novice nurse educators, the novice could focus on course management, rather than course development, in this early transition phase. Socialization to the professional academic role was facilitated through camaraderie among faculty members and nursing students. Finally, flexibility in scheduling, having independence and giving back to nursing through teaching were the positive aspects of the role. The findings of this research have implications for clinical nurses moving into the academic role, for nursing faculty departments seeking positive environments and for those novice nurse educators who have successfully transitioned to the professional role and are seeking retention in the position. Recommendations for future research include using a mixed methodology to include the perceptions of the transitioning faculty members. As well, seeking a more diverse sample of nurse educators is warranted. Future studies should also address whether any associated factors contributed to the described positive experience, such as the nurse had previously been a student nurse preceptor and the type of clinical experience of the nurse before moving into the academic role.

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## Psychological assessment: Brief, comprehensive and cultural competent skills for today's professional

Lavonda Mickens

The Chicago School of Professional School, USA

**Statement of the Problem:** One in six individuals lives with a mental illness in the United States (NIMH, 2016). Effective, comprehensive and culturally competent treatment of mental illnesses (i.e., psychiatric disorders) is vital in a fast-paced, changing, 21st century America. Treatment should reflect the needs of a culturally diverse United States population (US Census, 2018) given that ethnic minority groups are projected to be 51% percent of the population by 2050. Additionally, comprehensive and brief skills will be advantageous in a world influenced by fast-paced technology (e.g., smartphones, internet). Licensed and pre-licensed medical and mental health professionals (e.g. Psychologists; Psychiatrists; RNs; Interns) will continue to require quick, handy tools for assessment of psychopathology and substance abuse at an increasing pace. The purpose of this symposium is to introduce a brief, 3-step model for assessing substance abuse, psychiatric and personality (character) disorders from a culturally-informed lens.

**Methodology & Theoretical Orientation:** The present model is entitled the BSPE (Background-Substance-Psychiatric-Energy) Model. It is an assessment tool informed by a psychosocial lens and is designed to be completed within 15 minutes. In Step 1: the clinician asks the patient how the individual would describe his/her/zir ethnic and gender background. Additionally, the patient is asked to perceived challenges more inclusive norms. In Step 2: the clinician uses both a brief substance use and psychiatric screener. In Step 3: the clinician rates his/her/zir own subjective exhaustion with the patient on a scale of 1-10. The clinician also asks the patient how the person closest to him/her (zir) would describe personality or essence.

**Conclusion & Significance:** Professionals working in psychiatric inpatient and outpatient settings may utilize this culturally-informed, psychosocial model as a way to provide effective treatment for diverse populations.

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## **The domino effect of trauma: Connections between adverse childhood experiences and complex/cumulative posttraumatic stress disorder**

**Liz Lazzara**

Writer and Mental Health Activist, USA

**Statement of the problem:** "Children are resilient," or so people say but Adverse Childhood Experiences (ACEs) brought on by a parent or caregiver begin earlier than many know, take many overlooked forms and strongly correlate to impaired quality of life from infancy into old age. There is no escape for these children; short of running away or seeking emancipation, they must endure chronic trauma until they have the means to separate themselves from their toxic families. All the while, they are conditioned by society and their family unit to love their families and blame themselves for not being "good kids." This, in turn, leads to complex/cumulative PTSD, an under-researched condition, which I intend to explore in this discussion.

**Methodology and Theoretical Orientation:** This is an interpretivist discussion combining scientific and sociological literature with my experiences and that of others, aiming to illustrate the gravity of how childhood trauma affects adult life by pairing pre-existing research findings with personal histories in order to humanize and confirm a largely theoretical mental disorder.

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## Association between major depressive disorder and Alzheimer's disease

Lycia Siqueira Vilela

Pernambuco Health College, Brazil

**Statement of the Problem:** Major Depressive Disorder (MDD) causes significant negative consequences in daily activities and behavior and it is one of the most frequent behavioral symptoms in Alzheimer's disease (AD). The association between MDD and AD is corroborated by several studies and these authors state that depressed patients, when compared to a control population that didn't have a diagnosis of depression, were double the risk associated with dementia. The purpose of this study is to evaluate the relationship between MDD and AD through an analysis of the scientific literature.

**Methodology & Theoretical Orientation:** A literature review was undertaken in the PubMed and Ebsco databases. Some publications were selected between 2004 and 2018.

**Findings:** Some authors suggest that this is due to neurological impairment resulting from brain changes that occur during depressive episodes. Others associate this greater vulnerability to neurodegenerative symptoms with the individual's genetic predisposition to depression. However, the main pathogenesis of this association remains uncertain, suggesting the existence of several causal factors for the impairment of executive functions in these diseases. Studies point out that there is also a relationship with other neurological disorders such as Parkinson's Disease and Epilepsy. A mouse study conducted in China corroborates findings from previous studies in Denmark and Spain. In these, the patient with MDD has a greater susceptibility to the development of Alzheimer's. A case study from the literature has further demonstrated that this risk is increased according to the number of depressive episodes.

**Conclusion & Significance:** There is a high comorbidity between MDD and AD. This association is multifactorial, including genetic factors and brain changes, but the main cause remains unknown. TDM is related to neurological degeneration in the AD and also in other disorders. Susceptibility to the development of AD is proportional to the number of depressive episodes.

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## **Building a resilient workforce: Identifying stress factors in newly qualified mental health practitioners and supporting through facilitated reflective practice groups**

**Maureen Smojkis**

University of Birmingham UK

How can mental health staff be supported to work in increasingly challenging and changing environments? Working in health care can be rewarding, however, it can also lead to burn out, compassion fatigue and vicarious trauma (Wicks 2006). Professional resilience is necessary to ensure that the workforce is able to deliver a safe and effective service in a competent and confident way. Building personal resilience in the current climate is a challenge, however, it is acknowledged that to enable the workforce to maintain their own wellbeing and resilience organizations have a responsibility to create healthy working environments (RCN 2006). A solution-focused reflective model has been developed over a number of years to support staff in a variety of health and social care settings. This paper talks to the findings of an evaluation with newly qualified mental health practitioners and identify the strategies introduced as a consequence of these findings. The solution-focused approach is supportive, collaborative and non-threatening enabling all group members to participate and identify their own goals. Emerging themes from the groups identified the need for further exploration of stressors on staff and as a consequence, a number of workshops were developed. In the wellbeing and resilience workshops, the participants were introduced to strategies in self-care; including taking regular breaks, keeping hydrated, eating for energy, stretching. Alongside participating in regular clinical supervision, continuing professional development and mindfulness.

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## Operationalize Erik Erikson's theory of development to empower your life for current and future success

**Paula Rainer**

Argosy University Virginia, USA

**Statement of the problem:** People are not aware of the impact of their social development of the personality on their ability to achieve healthy relationships and personal success. This workshop will utilize Erik Erikson's stages of development to empower the life of your clients. Erikson's theory of development has eight stages that span across someone's life time. The family of origin, school, intimate relationships and extended peer groups impact the development of people. The purpose of the Erik Erikson Stages of Development is to assist clients in their understanding of past and current developmental stages in their life and gain insight into where they might be stuck in certain areas in their life (Vogel-Scibilia, Cohan McNulty, Baxter, Miller, Dine, Frese III, 2009). Erikson's theory of development identifies socialized developmental experiences throughout the life that mold the personality, social development and perspective of identity juxtaposition to others. This is a powerful theory that helps lead clients to the discovery of their development from birth to their elderly years. This theory provides a look at people's past and a guidebook for their future. Erikson's theory will help the client to discover areas of life that need to be unlocked to actualize satisfaction, peace and fulfillment. The tools of this workshop will help the client to transcend psychological roadblocks that have been unconsciously in their pathway to success. This workshop demonstrates a life journey inventory to identify previous experiences that have developed resiliency or stagnation in a person's life. The discovery of this information will be utilized as a weapon of knowledge, power and transformative change. Upon completing this workshop, you will have an innovative tool powered by Erikson to assist clients with the knowledge that they always had the power to move their life forward regardless of internal or external barriers. Finally, this workshop will provide counselors with a guide to give clients for future planning for an internally empowered life.

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## **A descriptive study to assess the common mental health problems (depression and anxiety) encountered by the elderly and facilities provided by the family members in selected urban areas of Delhi, India**

**Rekha Anil Kumar**  
CCS University, India

**Introduction:** Depression was noticed more in the age group (71-75) years, women were more prone to sufferer than men. Education wise graduates and above showed a higher score in depression. Findings showed that elderly, still working, having sources of income, living with a life partner, having good health were having less depression. While assessing the level of anxiety it was noticed that same age group (71-75) years, females, illiterate and highly qualified, non-working, low-income groups, having children more than two, widow/widowers and having poor health, were more sufferer with anxiety. When assessing the relationship between mental health with the facilities (physical, psychological social and economical) provided by the family members at different levels, it was found that psychological support was highly lacking. The purpose of this study was to interact with the elderly and explore their feelings at their home settings by using an interview questionnaire and assess their mental health problems. It has been assumed that those living with families were free from depression and anxiety. Researchers also want to assess the relationship between mental health and facilities provided by the family members

**Methodology & Theoretical Orientation:** The research approach for the study was Descriptive Survey Approach; the study design was Descriptive Co-relational Design. The conceptual framework developed for the study was based on the "Dorthea E Orem's Self Care Deficit Model". Purposive sampling technique was used for 100 elderly people residing with their family members in the urban areas of Delhi, India. It was intended to identify, describe and interpret the existing real-life situation after establishing IPR, with the detailed interview.

**Findings:** The elderly in this study living with families were suffered from a common mental health problem (depression and anxiety). There was an association between mental health and facilities given to them by their family members.

**Conclusion & Significance:** Mental health problems (depression and anxiety) were less where facilities (physical, psychological, social and economic) were adequate.

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## **Mental health disparities in the lesbian, gay, bisexual or transgender community: The role of stigma**

**Shani Anderson**

Massachusetts College of Pharmacy and Health Sciences, USA

It is widely known that people who identify themselves as Lesbian, Gay, Bisexual or Transgender (LGBT) face systematic oppression and devaluation due to social stigmas. The purpose of this integrative review was to explore the impact of stigma on mental health outcomes in the LGBT community. A literature search was performed utilizing several electronic databases resulting in 15 primary and secondary sources for analysis. The sources provided data from several countries including England, Ireland and the United States, as well as, study participants aged adolescents through older adults. Current research indicates LGBT people experience higher rates of mental health problems, substance abuse, suicide and poor physical health compared to their heterosexual peers. Despite increased rates of stigma and victimization, studies indicate the older LGBT population has learned to cope with these negative experiences and many report their current mental health as “good.” Additionally, a shortage of health care providers properly trained to provide non-judgmental and compassionate is a common complaint by members of the LGBT community which may delay individuals from seeking treatment or from being forthcoming during examinations. Based on these findings, nurse practitioners should perform a culturally sensitive, biopsychosocial assessment including family and peers supports, recent stigmatization, discrimination and victimization within the past year, access to and participation in LGBT community resources and appropriate medical screenings. A thorough mental health evaluation should also be completed at each yearly screening including alcohol and substance use with referral to appropriate mental health services as needed. Future research on these trends is needed to develop specialized assessments and treatment guidelines to obtain the best patient outcomes for this vulnerable population.

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## **Ketamine infusion therapy: An innovative approach to rapid relief from depression and suicidality**

**Steven L Mandel**

Ketamine Clinics of Los Angeles, USA

Depression is the leading cause of disability worldwide. Suicide often follows depression when it goes unchecked. Depression is the 10th leading cause of death in the United States. "Recent data suggest that ketamine, given intravenously, might be the most important breakthrough in antidepressant treatment in decades," according to Dr Thomas Insel, the former Director of the National Institute of Mental Health. For the past two decades researchers at Yale University, the National Institute of Health, Harvard University, John Hopkins University, Mount Sinai Medical School, Stanford University, among others, have studied ketamine given intravenously for the treatment of major depressive disorder. Their findings have been consistently groundbreaking. In study after study, 70% of subjects suffering from treatment-resistant depression have been relieved of their depression. The typical protocol is to administer a subanesthetic dose of ketamine (usually 0.5mg/kg body weight) over a 40 minute infusion. Most clinics offer 6 infusions administered over 2 weeks for the initial series of treatments. Patients find relief from depressive symptoms within a few hours to a few days, as opposed to the 4-6 weeks that most conventional antidepressant medications take. Patients seek Ketamine Infusion Therapy for treatment-resistant depression, suicidality, PTSD, anxiety, OCD, bipolar disorder, PPD and addiction. Ketamine Infusion Therapy should be offered to patients suffering from these afflictions. It is an excellent option, particularly for those who have not benefited from other treatments. Educating medical professionals on the benefits, safety and efficacy of Ketamine Infusion Therapy and making it more available to patients will save lives.

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## Evidence supporting neurofeedback for substance use disorders

**Tanju Surmeli**

Living Mental Health Center for Research and Education, Turkey

Substance use disorders interfere with daily-life activities and treated with psychological and pharmacological treatments. Psychopharmacology and psychotherapy for their high rates of failure to meaningfully improve outcomes, saying it's time to figure out how to develop "the next generation of interventions." A new route map has been drawn for the diagnosis and treatment of psychiatric diseases. The National Institute of Mental Health (NIMH)'s call for a more rigorous and evidence-driven approach to mental health care. It is time that psychiatry moves away from its present focus on medications and takes a new direction that uses other modalities of care evidence-based psychotherapies. Psychiatry and psychology are the only specialties that don't actually look at the organ it treats. Patients deserve better. We need to devote our self to the efficient evidence-based diagnosis of disorders and personalized treatments. After more than 70 percent of alcohol and drug users have completed medical treatment, they are beginning to use alcohol and drugs again a few months later. The success rate of treatment with classical methods (drugs, psychotherapy and AMATEM) is 20-44%. Sixty percent of heroin addicts go back to heroin and eighty percent of cocaine addicts go back to cocaine after treatment. Eighty-seven percent of them use cannabis instead of using psychiatric medication used in treatment. New methods of treatment are necessary and neuro-feedback (NF) is one treatment that seems to be effective in psychiatric disorders. I am going to talk about the evidence supporting neuro-feedback for substance use disorders.

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