



5th International Conference on

Mental Health and Human Resilience

March 07-08, 2019 | Barcelona, Spain

Workshop Day 1

Mental Health 2019

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Patrizio Paoletti, Tal Dotan Ben Soussan & Tania Di Giuseppe

Patrizio Paoletti Foundation for Development and Communication, Italy

OMM (One Minute Meditation) path for increasing resilience and well-being

Psychosocial factors, such as increased levels of social engagement, positive emotion, and dispositional optimism have all been shown to promote resilience. In addition, our brains are continuously shaped both functionally and structurally by experience on which explicit training can capitalize to promote more adaptive brain functioning. These factors, as well as additional characteristics of resilience, such as positive self-concept/esteem, self-awareness, hopefulness, emotional expression, emotional management in stressful situations, and interpersonal problem-solving skills can increase by training, such as meditation. The current workshop will first present qualitative and quantitative research findings that illustrate how people can benefit from training, and especially from meditation, in terms of neuroplasticity and psychological well-being. We will, then, have a practical experience of OMM – One Minute Meditation methods - and will learn the procedure of how to: (1) become more relaxed and increase concentration, (2) prefigure more effectively, while acquiring more Detachment from needs, Distance from negative emotions and Determination; (3) improve the ease in relating to others thanks to the focus on personal values, thus achieving more self-awareness. By these experiences and by the neuroscientific results demonstrating the physiological effects which can be obtained following a minute of training (e.g. decreased cortisol, improved neuronal function), we will further learn not to underestimate the power contained in just one minute. An infinite number of things happen in a very short time. Together with the fact that these state changes are also achievable with open-eyes makes it appealing for potential applications in daily life.

Biography

Patrizio Paoletti is the President of the "Patrizio Paoletti Foundation for Development and Communication". As President of the homonymous Foundation, Paoletti is leading international social projects and educational programmes with the aim of promoting human resilience, personal and community well-being. He is member of several scientific boards and committees and has numerous publications concerning lifelong learning processes for personal and social development and growth. Moreover, he is one of the leading teachers of meditation in Italy and the creator of several scientifically studied meditation techniques, including: One Minute Meditation (OMM); Quadrato Motor Training and OVO Whole-Body perceptual deprivation Tank.

Tal Dotan Ben Soussan is the director of Neuroscientific Research Unit, of the Patrizio Paoletti Foundation. Leading studies examining the effects of different training paradigms on neuroplasticity, resilience and well-being, Ben-Soussan's multidisciplinary approach utilises electrophysiological, neuroanatomical and molecular tools to examine the underlying mechanisms promoting cognitive and emotional well-being. Ben-Soussan's pioneering work on the Quadrato Motor Training has demonstrated that specifically-structured sensorimotor activity can improve neurobiological, emotional and cognitive functions. She is also applying her neuroscientific model to examine the interconnectedness of motion, emotion and cognition for increasing resilience and performance in the workplace, as well as in schools and neurodegenerative states.

Tania Di Giuseppe is psychologist, supervisor and international trainer of the Patrizio Paoletti Foundation, working in both Italy and abroad. She has collaborated with the Sapienza University of Rome, Padua University and Scientific University of Perugia (Iquitos), promoting training and research on the constructs of awareness, hope, resilience and planning. Since 2008 she has been involved in the design and implementation of projects and training courses in favor of professionals, teachers and the community, especially in the context of emergency and social exclusion.

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Scientific Tracks & Abstracts Day 1

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SESSIONS

Psychiatric Emergencies | Mental Health and Wellness | Human Resilience | Mental Disorders | Women's Mental Health

Chair: Luis Allen, Advent Health, USA

Co-Chair: Moira Laura Eva Dechef, Jewish General Hospital, Canada

SESSION INTRODUCTION

Title: A novel approach to behavioral health care services in a hospital setting

Luis Allen, Jessica Koontz & LaDonna Sampson, Advent Health, USA

Title: The influence of environmental aesthetic in the belongingness of psychiatric patient

Ivete Contieri Ferraz, Veritas Clinic, Brazil

Title: A study to assess resilience of adult family caregivers of patients having schizophrenia and its related disorders, in a selected hospital, New Delhi

Bobby Syiemlieh, AIIMS, India

Title: Significant association between brain derived neurotrophic factor gene polymorphism C270T and cognitive symptoms in veterans with PTSD

Nela Pivac, Rudjer Boskovic Institute, Croatia

Title: Promoting human resilience through the pedagogy for the third millennium

Tania Di Giuseppe & Grazia Serantoni, Patrizio Paoletti Foundation, Italy

Title: Agency and resilience behind the we-ness, a case study of a couple therapy for mental disorders

Jonna Karasmaa, University of Jyväskylä, Finland

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A novel approach to behavioral health care services in a hospital setting

Luis Allen, Jessica Koontz and LaDonna Sampson

Advent Health, USA

The growing need for Behavior Health Care Services along with the shortage of providers makes for a significant challenge. The continued rise of healthcare costs has left us with the challenge of how we can deliver behavioral health care services in the medical setting while decreasing the cost, improving efficiency, having a more patient centered approach, and elevating the standard of care. This pilot consists of a joint effort of a multi-disciplinary team: nurses, hospitalist, psychiatrist and social worker. The target population was patients admitted to the Florida Hospital Orlando System under an involuntary commitment, had significant medical conditions that warrants admission to the medical floors, i.e. uncontrolled diabetes, uncontrolled hypertension and chest pains. While these patients were receiving active medical treatment waiting to be stabilized, a multidiscipline psychiatric team provided active treatment for these patients *via* telemedicine the outcome was 78% of the patients admitted to this new pilot model did not require acute psychiatric hospitalization and they were able to be discharge back into the community with outpatient follow. Both the medical and psychiatric treatments were able to be provided in parallel manner. This Virtual Inpatient Psychiatric unit is an example of future models of care that with the incorporation of telemedicine will improve our response time, increase the access and a more patient centered approach to care.

Biography

L G Allen has been associated with Florida Hospital's Center for Behavioral Health since 1997 serving as its Medical Director since 1998. He currently holds the positions of Section Chairman of the Department of Psychiatry for Florida Hospital, Orlando Division, Medical Director of the Psychiatric Medical Unit, and Medical Director of Florida Hospital's Outlook Clinic, a community based mental health initiative, as well as being coordinator of the Consultation Liaison for Psychiatric Services Department.

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The influence of environmental aesthetic in the belongingness of psychiatric patient

Ivete Contieri Ferraz
Veritas Clinic, Brazil

Spatial aesthetics in health settings remain a challenge due to the difficulty in balancing disease prevention, such as the aseptic and ergonomic protective needs of clinical hospital design, with health promotion through exposure to beauty. The objective of this work is to identify the importance of the aesthetics of the environment in the treatment of Mental Health, through bibliographic research of qualitative character using Pubmed and SciELO databases, between the years 1996 to 2018, with the keywords: Design, Architecture, Art, Mental Health, Humanization, Psychiatry and Aesthetics. The indications of this work being that the aspects making up the design were extremely important as attributes of humanization, because they produce belongingness, respect and special dignity in the patient. The main variables influencing the aesthetic environment highlighted in this article are light, sound, colour, aroma, texture, and shape. The design belongs to the aesthetic-artistic perspective, reinforces the protagonism of the sick human being in detriment of the disease, reinforces the expansion of the concept of care and enhances the patient's response to treatment. The conclusion reiterates that the multiaxial aspects brought about by the design of environments within hospitals, is in line with the holistic model of health, producing health promotion and positive responses to patients.

Biography

Ivete Contieri Ferraz is a Medical Psychiatrist, with expertise in clinical practice, with passion to improve the health and well-being of her patients. Her model of care, with an important technical foundation but open and contextual basis, it is quite divergent from the biomedical model. Based on the absolute protagonism of the human being, her model of care is a source of encouragement to understand the influence of multidisciplinary factors in the response to the patient's treatment, converging to a model like the Holistic of Health. She sediment this model in her clinical practice after 15 years of experience in hospital institutions, being currently in research, builds its theoretical foundation, seeking increasingly to understand pluralism in Health and the purification of the physician-patient relationship and its therapeutic function.

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A study to assess resilience of adult family caregivers of patients having schizophrenia and its related disorders, in a selected hospital, New Delhi

Bobby Syiemlieh¹, Y Surbala Devi², Sandhya Gupta² and Mamta Sood²¹AIIMS, Raipur, India²AIIMS, New Delhi, India

Background: Resilience is the process of harnessing biological, psychosocial, structural and cultural resources to sustain wellbeing. If family members are resilient, they can overcome stress associated with providing care for a person having mental illness and preserve their own health and the health of their family.

Material & Methods: A descriptive cross-sectional study was undertaken on 100 adult family caregivers of patient having schizophrenia and its related disorders who were selected consecutively from out-patient clinics of department of psychiatry, in a selected hospital, New Delhi. The data were collected using subject information sheet for caregiver and patient, Connor-Davidson resilience scale (CD-RISC) for assessing the resilience of caregivers and Brief psychiatric rating scale (BPRS) to assess the psychopathology of patient. The collected data was analyzed using STATA 14.0 software. Ethical clearance was obtained from ethics committee of the selected hospital, New Delhi.

Result: The mean age of caregivers and patients were 47.7(±11.5) and 29.8(±9.3) respectively. Sixty five percent of the family caregivers were male. Most of the caregivers were having high score on resilience scale, with mean scores of 72.14(±16.1). Caregivers who were spouse were found to be more resilient as compared to other caregivers who were giving care to patient having schizophrenia and related disorders (p=0.0006). The caregivers who had only one child are more resilient than those who had more than two children (p=0.04). A significant association was found between the resilience levels of caregivers with the age of the patients (p=0.003), marital status of the patients (p=0.002), occupation of patients (p=0.0002) and with monthly income of the patients (p=0.008).

Conclusion: A family caregiver caring for mentally ill patient constantly experience various challenges, be it in caring issues or in meeting their own needs. Most of the study subjects have shown good levels of resilience which is a protective factor for their own mental health. However the mental health care workers need to counsel and guide the family caregivers to enhance their resilience level whenever they visit the clinics for follow ups.

Biography

Bobby Syiemlieh has completed his graduation from College of Nursing, NEIGRIHMS, Meghalaya, India, as well as Post-Graduation in Psychiatric Nursing from AIIMS, New Delhi, India. He is currently working as Nursing Officer at AIIMS, Raipur, India. His area of interest includes Preventive Psychiatry, Addiction Psychiatry, and Severe Mental Illness. He has attended and presented scientific papers in national and international conferences.

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Significant association between brain derived neurotrophic factor gene polymorphism C270T and cognitive symptoms in veterans with PTSD

Nela Pivac, Suzana Uzun, Marcela Konjevod, Lucija Tudor, Matea Nikolac Perkovic, Gordana Nedic Erjavec, Oliver Kozumplik and Dubravka Svob Strac
Rudjer Boskovic Institute, Croatia

Statement of the Problem: Posttraumatic stress disorder (PTSD) is a trauma and stressor related disorder characterized with specific clusters of symptoms including cognitive disturbances. Brain derived neurotrophic factor (BDNF) is a neurotrophin with important role in modulation of neuronal growth, plasticity, neurotransmission, stress response and cognition (learning, memory), all processes are altered in PTSD.

Methodology: The study included 333 male Caucasians with combat-related current and chronic PTSD. They were evaluated using SCID, PANSS, CAPS, and two PANSS cognitive subscales: PANSS Cognition subscale 1 and PANSS Cognition subscale 2. Genotyping of the BDNF Val66Met (rs6265) and BDNF C270T (rs56164415) was done using the primers and probes from the TaqMan® Drug Metabolism Genotyping Assays on ABI Prism 7300 Real time PCR System apparatus (Applied Biosystems, Foster City, CA, USA) in DNA samples. Results were evaluated using Kruskal-Wallis ANOVA and Dunn post-hoc test, or Mann Whitney U test, or χ^2 -test.

Findings: When veterans with PTSD were subdivided into TT, TC and CC genotype carriers of the BDNF C270T, TT carriers had significantly higher scores on both cognition subscales, i.e. the most severe symptoms vs. carriers of the CT and CT genotypes. These results were confirmed when veterans with PTSD were subdivided into T carriers (the combined TT and TC genotypes) vs. CC genotype carriers. When veterans with PTSD were subdivided according to the BDNF Val66Met genotypes, their cognitive symptom scores were not significantly different.

Conclusion & Significance: This is a first study of the significant association between BDNF C270T (rs56164415) and cognitive disturbances in PTSD. Carriers of one or two of the minor T allele of the BDNF C270T were more likely to have worse cognitive symptoms compared to CC genotype carriers.

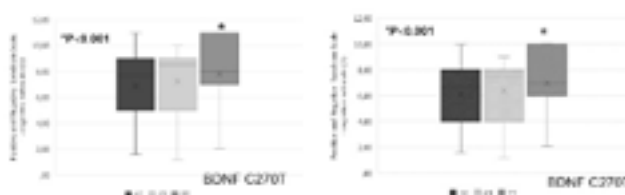


Figure 1: PANSS Cognition subscale (1 & 2) scores in veterans with PTSD subdivided into TT, TC and CC genotype carriers of the BDNF C270T.

Biography

Nela Pivac has her expertise in evaluation of molecular basis of neuropsychiatric disorders including PTSD, and in the search of biomarkers of these disorders. She is a leader of the national and international projects, and a winner of the scientific awards.

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Promoting human resilience through the pedagogy for the third millennium

Tania Di Giuseppe and Grazia Serantoni

Patrizio Paoletti Foundation for Development and Communication, Italy

In the current socio-economic and political moment, which increasingly fragmented and challenging, human resilience is a necessary ability which has to be continuously nourished through educational programs. In the last 18 years, Paoletti Foundation (FPP) has created interdisciplinary theoretical frameworks and educational methods for 12 resilience-induced prevention and intervention programs, conducted in 9 countries. FPP has taught over 1800 educators the Pedagogy for the Third Millennium (PTM). PTM is a neuro-psycho-pedagogical method aimed at increasing self-awareness, mental health and resilience by enabling: (1) an utile narrative of the self, (2) self-observation and (3) divided attention. Training these key elements, in turn, allow positive cognitive, emotional and bodily regenerative development. In the current talk, we will present the Schools of the World (SOW) project. The results of the SOW will be discussed in the light of promoting effective self-programming for strengthening self-awareness and resilience in those who work in emergency services and contexts of social marginalization.

Biography

Tania Di Giuseppe is a Psychologist, Supervisor and International Trainer of the Patrizio Paoletti Foundation, working in both Italy and abroad. She has collaborated with the Sapienza University of Rome, Padua University and Scientific University Cienfuegos of Perú (Iquitos), promoting training and research on the constructs of awareness, hope, resilience and planning. Since 2008 she has been involved in the design and implementation of projects and training courses in favor of professionals, teachers and the community, especially in the context of emergency and social exclusion.

Grazia Serantoni: Psychologist, Individual, Group and Organizational Psychoanalyst, Group-Analyst. She specialized in quantitative and qualitative research methods and she works as methodology consultant for both public and private institutions, carrying out research activities in healthcare, educational and clinical systems. She published several books and scientific works in national and international journals. Her scientific interests focus on: evaluation and program planning frameworks for healthcare, educational and clinical services; evaluation of efficacy/effectiveness of: educational interventions, psychodynamic multifamily groups and therapeutic communities' interventions for psychiatric patients; grief, bereavement and trauma assessment and intervention strategies; psycho-oncology; parenting stress index and health education.

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Agency and resilience behind the we-ness: A case study of a couple therapy for mental disorders

Jonna Karasmaa¹, Virpi-Liisa Kykyri^{1,2} and Aarno Laitila¹¹University of Jyväskylä, Finland²University of Tampere, Finland

Our presentation addresses the resilience phenomenon in the context of couple therapy and mental disorders. The presentation is based on our article, which is the first article of her ongoing dissertation research. We consider resilience as an ability to learn new through adversities, in distinction to generally known resource oriented approach in psychotherapy field. We introduce one therapy case, in which both spouses had severe mental disorders, and difficulties in managing their daily life with these disorders. They did not seek help for relationship problems, instead the relationship was their resource. One can say, that they had a strong sense of we-ness. In couple therapy research we-ness and we-stories have commonly been regarded as resilience. Still, we claim that the concept of we-ness does not reach the multidimensional nature of resilience. To capture this multidimensionality we have used Froma Walsh's family resilience framework as a theory. The data was derived from the Relational Mind research project (2013-2016) funded by the Academy of Finland. The project was conducted by the University of Jyväskylä in collaboration with four other universities in Europe. The data was gathered in a natural setting within couple therapy sessions conducted in the Psychotherapy Training and Research Centre in the University of Jyväskylä. In the presentation she will describe, how the strong we-ness prevented spouses to develop their more agentic and autonomic forms of resilience, and how quarrels in therapy led them to learn new ways to interact with each other and other people.

Biography

Jonna Karasmaa is a PhD student from the University of Jyväskylä. She works as a Psychologist with psychosis patients in the outpatient care of adult psychiatry.

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Video Presentation Day 1

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The patient in room 1B: Confronting our fears to overcome reservation and build trust

Nonye Aghanya

Pace University, USA

Poor communication skills greatly contribute to the mistrust that is often experienced between patients and clinicians. It's important to note that patients often experience high levels of apprehension during their clinical/hospital visits. Sometimes, such high anxiety levels manifest as various patient attitudes that could become a deterrent to the development of productive clinician-patient relationship. It is vital for nurses/clinicians to refrain from using a one-size-fits-all communication approach for all patient encounters because people have different personalities and backgrounds and thus perceive and react differently to the same information presented to them. The key for trust development is in the delivery method of information. To attain trust development through effective communication, the clinician's communication style must be tailored to each patient's personality, attitude and back ground. Naturally, many, if not all nurses and clinicians put their best foot forward during each patient's consultation with the expectation to make a connection with the patient and have a productive conversation. It's important to note that realistically, however hard a clinician may try to make a great impression, due to various reasons, there are still many patients who would not achieve a decent level of comfort with the clinician. As a result, an honest and productive conversation is not achieved which hinders the development of a successful clinician-patient relationship. Often, effective communication between two individuals does not happen naturally at first, it must take a conscious effort on the clinician's part to be realized. Do you know that there is a strategic approach to experience a stress-free, successful consultation with each patient for improved trust development and productivity? The book, Simple Tips to Developing a Productive Clinician-Patient Relationship gives simple tips to achieve this for 16 different patient attitudes/behaviors. Author has also had a 23-minutes video presentation with concise learning/teaching tools available upon request for school programs, conferences/seminars etc.

Biography

Nonye Aghanya is working at Retail/ Hospital Pace University-New York, Alexandria, Virginia, USA.

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Scientific Tracks & Abstracts Day 2

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SESSIONS

Women's Mental Health | Mental Health and Wellness | Human Resilience

Chair: Tal Dotan Ben Soussan, Patrizio Paoletti Foundation, Italy

Co-Chair: Khurram Sadiq, Mental Health NHS Foundation Trust, UK

SESSION INTRODUCTION

Title: Can too much resilience be a bad thing?

Alan Dovey, University of Birmingham, UK

Title: Resting heart rate variability and the effects of biofeedback intervention in women with lowrisk pregnancy and prenatal childbirth fear

Hideya Kodama, Akita University, Japan

Title: Strategic approaches to sexual violence prevention in adolescents

James Bush, Bush Counseling Services, USA

Title: A study to assess personality, psychological distress and adjustment difficulties among nursing students at AIIMS

Anita P, AIIMS, India

Title: If orange really was the new black: Examining trends seen across the incarcerated women population

Breanna Lynn & Brittney Montgomery, The Chicago School of Professional Psychology, USA

Title: Peeling the onion: Interventions to stimulate, support, and sustain reading progress in a child psychiatry unit

Moirá Laura Eva Dechef, Jewish General Hospital, Canada

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Can too much resilience be a bad thing?

Alan Dovey

University of Birmingham, UK

At first this title might easily produce the answer “No”, but this presentation will hopefully open up reflective thought amongst practitioners in the field of positive psychology, clinical psychology and psychotherapy. I have worked as a Consultant Cognitive Behavioural Psychotherapist in the field of occupational health for 20 years and over the last 5 years I have seen more individuals with symptoms of acute and chronic “burn-out” than ever before. Burnout is a prolonged response to long-term emotional and interpersonal stressors on the job. The key dimensions of this response are overwhelming exhaustion, feelings of cynicism and detachment from the job, a sense of ineffectiveness and a lack of accomplishment. It is this “prolonged response” to pressure that maintains high appraisals of threat thus maintaining high arousal/anxiety on a biological level. Eventually symptoms of “burn out” develop and lead to clinical depression. Understanding how burnout can be prevented and treated in workplaces is of great importance both from a public health perspective and for businesses aiming to reduce absenteeism and increase productivity. At the moment the focus is on 2 areas- The environment- ensuring the workplace environment is conducive to employees’ health and well-being. The individual- ensuring the individual builds effective protective factors that act as emotional buffers to the environmental pressures. The latter requires practitioners to have an understanding of the concept of “over-resilience” as to how this can contribute to burn-out rather than a lack of protective factors. In their recent article Chamorro-Premuzic and Lusk (2017) allude to this by suggesting that even adaptive competencies become maladaptive if taken to the extreme. This presentation will provide a cognitive behavioural formulation of some of these maladaptive strategies he has experienced in clinical practice as well as the theory that underpins the role, they have in precipitating burn out.

Biography

Alan Dovey has work as lead consultant psychotherapist to major private manufacturing businesses (over 22,000 workforce) and West Midlands Fire Service, UK for over 18 years and has extensive clinical experience in treatment individuals with anxiety and depressive disorders. He has spoken at the World Congress in CBT, Japan 2005 and many other conferences regarding mental health and work. His specialist interest in burn-out has developed over the last 5 years due to the increased pressures from a biopsychosocial perspective. He developed the first UK training programme in conjunction with the At Work Partnership, UK and Brunel University training occupational health professionals in the use of CBT in their clinical area. He is Clinical Director, Working Minds UK.

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Notes:

Resting heart rate variability and the effects of biofeedback intervention in women with low-risk pregnancy and prenatal childbirth fear

Hideya Kodama, Yoshimi Narita and Hitomi Shinohara
Akita University, Japan

Most pregnant women are excited at the prospect of seeing their newborn children as the due date approaches, but many women become increasingly anxious about the delivery. Anxiety levels vary among women. Some women experience negligible anxiety, whereas some experience severe anxiety that can affect daily life. The women who have excessive childbirth fear will spend uneasy days with severe anxiety. Such anxiety not only lowers their quality of life but also increases birth-related risks, such as emergency cesarean section, prolonged labor, and postnatal depression. Consequently, in some cases, active counseling is provided to women with childbirth fear. However, there are some issues regarding whether actual intervention is performed or not. First, anxiety is usually a beneficial reaction and an inherent part of our fundamental self-preservation instinct. Therefore, the need for clinical intervention depends on whether the childbirth fear is causing severe anxiety in real life. Second, most women who experience significant childbirth fear are considered “low risk,” as they lack any specific risk factors, such as a traumatic past delivery, a psychiatric history, and medical/obstetric complications. Provably, childbirth fear in such women is rarely related to birth-related risks, and rarely manifests into severe anxiety. Therefore, immediate counseling may be an excessive intervention in many cases. The heart rate variability (HRV) biofeedback is a technique in which the subject observes both respiratory and heart rates on a monitor, in order to try to synchronize the two curves until a sinusoidal pattern is obtained. When the pattern is obtained, the subject can maximize respiratory sinus arrhythmia, and become more resilient physically and emotionally. HRV biofeedback has been used as a complementary therapy in the treatment of various psychiatric diseases that are linked closely to psychological stress. As HRV biofeedback is simple and safe and involves almost no physical stress, several recent studies have considered its application for the treatment of daily anxiety in healthy individuals. Therefore, HRV biofeedback can be used for women with childbirth fear. In my contribution to this conference, he would like to talk about our clinical research regarding one of the mental health problems of pregnant women, prenatal childbirth fear. HRV biofeedback appeared to be effective intervention for lowering childbirth fear and perhaps improving their well-being. Considering the ease, safety, and high compliance associated with HRV biofeedback, it is recommended as a primary intervention for women with prenatal childbirth fear.

Biography

Hideya Kodama is a Gynecologist and promoted to a Professor of the Department of Maternity Child Nursing at Akita University Graduate School of Medicine and Faculty of Medicine in 1997. At the Doctorial course of the university, he studied about Nursing Science about a circadian rhyme, including a sleep-wake cycle, a melatonin rhythm, heart rate variability (HRV) and a body thermal rhythm. His research subjects include infants, pregnant women, adolescent girls and visiting nurses. Recently, he published two articles regarding an HRV biofeedback intervention for mental health problems of the pregnant women, regarding severe prenatal childbirth fear and psychological stress during the early postpartum period.

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Strategic approaches to sexual violence prevention in adolescents

James Bush

Bush Counseling Services, USA

It is reported that 1 in 4 women report having experienced some sexual violence as oppose to their male counterparts who experience 1 in 6. Needless to say, sexual violence is a huge problem within our society. The after effects of this trauma have been linked to depression, post-traumatic stress disorder, anxiety, hypersexuality, low self-esteem and low self-worth. Unfortunately, research suggest that trauma that is not treated can become chronic. To further this idea, an experience such as sexual violence that is not buffered by key social supports may create toxic stress within the brain. This falls in line with the research of adverse childhood experiences and building strong brains. Which demonstrates that experiences, actions, and thoughts are recorded in the neurons of the brain during developement. It also suggest that experiences that are most prevalent are most lasting within the brain even after it begins to prune the neurons around the age of 14. This presentation aims to offer strategic approaches in working with adolescents from a primary and secondary prevention model. This keeps in line with the research of ACEs and resilience. The presentation offers to give clinicians and others in the audience practical knowledge on how to arm and empower adults and adolescents with pertinent knowledge to serve as a possible buffer to aid in the event of this atrocity. All in all, it is easier to build strong children then to repair broken individuals.

Biography

James Bush, a Licensed Professional Counselor in the State of Tennessee. He completed his MA in Clinical Mental Health Counseling from Argosy University. He is the Program Director of Youth Overcoming Drug Abuse. For years, his efforts have concentrated on the growing adolescent population within the Middle Tennessee area and surrounding counties, which has led to service through community events, and partnerships with various organizations. He has also provided trainings for many audiences, on the topics of sexual violence prevention, alcohol and drug abuse trends, anxiety relief, deep-breathing techniques, and adverse childhood experiences.

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A study to assess personality, psychological distress and adjustment difficulties among nursing students at AIIMS

Anita P, Deepika C Khakha and Rachna Bhargava

All India Institute of Medical Sciences, India

Background: Stress is linked to psychological distress and other adverse consequences on student's health and wellbeing. Being in a profession closely related to life and death makes nursing students more prone to stress.

Aim: To assess personality, psychological distress and adjustment difficulties among nursing students at AIIMS.

Materials & Methods: This cross sectional descriptive study included 292 subjects enrolled in BSc (Hons) Nursing course at College of Nursing AIIMS, New Delhi. Data was collected by using Big Five Inventory, General Health Questionnaire and Adjustment Inventory for college students.

Results: Extrovert and neuroticism was found to be the most dominant type of personality trait among the nursing students. A high level of distress was experienced by 56.2% of the subjects, while low levels of psychological distress was experienced by 43.8%. No subjects belonged to excellent adjustment category while 2.1% of the subjects belonged to good overall adjustment category. Average overall adjustment was seen in 10.3% of the subjects and unsatisfactory and very unsatisfactory overall adjustment was seen in 40.7% and 46.9% of the subjects respectively. There was significant association found between neuroticism personality trait and psychological distress at $p < 0.05$. A significant association also found between neurotic and conscientiousness personality trait with father's education. Home, health and educational adjustment were found to be positively correlated with mother's education. Neuroticism and openness to experience personality trait and also educational adjustment was found to have statistically significant relationship with duration of sleep. A significant relationship was also seen between psychological distress and health adjustment with the number of close friends.

Conclusion: Extrovert and neuroticism personality is dominant among the nursing students. Psychological distress is faced by majority of the subjects and majority of the subjects belonged to very unsatisfactory adjustment category. Therefore, student friendly environment is needed in the colleges to decrease to the level of distress faced by the students and to help them in easy adjustment.

Biography

Anita P is a graduate of College of Nursing, All India Institute of Medical Sciences, New Delhi and has also pursued her MSc in Psychiatric Nursing from the same institute. She has been awarded with second prize for scientific oral paper presentation in the 15th Annual Conference of the Indian Academy of Geriatrics.

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If orange really was the new black: Examining trends seen across the incarcerated women population

Breanna Lynn and Brittney Montgomery

The Chicago School of Professional Psychology, USA

Research indicates that the population of women who are incarcerated is increasing exponentially. Over-crowding in the prison system becoming a more common occurrence, access to appropriate mental health services continue to be scarce. Due to society typically envisioning the male population when discussing individuals who are incarcerated there is far less consideration for the needs of women who are incarcerated. The mental health needs and resources for this special population often go underestimated and underserved. Incarcerated women bring about special challenges such as attachment as it relates to motherhood, increased prevalence of specific mental health diagnosis, and different needs to reduce recidivism. By examining the data, needs, and current resources for incarcerated women clinicians will be able to develop a diverse perspective on how to more effectively treat and serve this specialized population. Research supports the Risk-Need-Responsivity model as an effective approach to treatment when working with criminal behavior. By illuminating the unique and specific needs of women in prison the ability to improve quality of care during and incarceration and success after release.

Biography

Breanna Lynn is completing her Doctorate in Clinical Forensic Psychology at The Chicago School of Professional Psychology. She currently holds a MA in Forensic Psychology from The Chicago School of Professional Psychology, and a BA in Psychology with a minor in Family Studies from the University of Nevada, Las Vegas. She began her career working at the state psychiatric hospital in Nevada. Her time in Nevada was also spent doing program development for Nevada Senior Center; a non-profit organization specializing in geriatric care. Currently she is certified by the California Sex Offender Management Board as an Apprentice Treatment Provider. She also works as a forensic report writer, completing reports in both the civil and criminal field of forensic psychology. She hopes to continue her work with the sex offender population.

Brittney Montgomery is going into her second year of the Clinical Forensic Psychology Doctoral Program at The Chicago School of Professional Psychology – Los Angeles. She holds a Bachelor of Arts degree in Psychology from California State University, Northridge. She is a member of the Psi Chi Honor Society and a member of the Chicago School Student Association. She is currently focusing on her education and will be working at the Lost Angeles Mission this fall. She hopes to work for the court system, correctional system, and/or law enforcement in the roles of assessment and recidivism reduction.

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5th International Conference on

Mental Health and Human Resilience

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Peeling the onion: Interventions to stimulate, support, and sustain reading progress in a child psychiatry unit

Moir Laura Eva Dechef

Jewish General Hospital, Canada

Purpose: The aim of this workshop is to focus on how teachers can peel the educational onion to convey essential tools to students who exhibit complex scholastic experiences. Our educational canvas is painted with student diversity and varied learning styles. In addition, mental health vulnerabilities and their impact on the learning process only add intricacy to the teaching domain. As a special need's educator working with students presenting enmeshed educational/emotional portraits and have observed general instructive strategies often fall short in "success for all" for student reading proficiency.

Method: The instructional tools utilized within a psychiatric unit's therapeutic classroom, consists of merging research findings and interventions for students with reading disabilities and psychiatric vulnerabilities. Strategies designed to engage, motivate, and challenge students who demonstrate anxiety, depression, helplessness, or negative behavioral manifestations when faced with the realities of their reading/learning difficulties, will be shared.

Conclusion: Although results consist of observations in the field, they demonstrated that presented interventions are helpful and make a difference in reading proficiency for students with enmeshed educational and emotional profiles.

Biography

Moir Laura Eva Dechef is working within a large multi-disciplinary team, composed of psychiatrists, psychologists, psychiatric nurses, social workers, occupational therapists, and teachers, on a variety of different cases regarding evaluation, creation of treatment plans, carrying out of treatment plans, in addition to treatment plan modification. She is serving as a liaison between various elementary schools, school boards, and parents to ensure students/clients are attending an educational environment best suited to their needs, as well as suggesting/facilitating changes on a case-by-case basis. She is providing individualized instruction for students with diagnosed psychiatric disorders, behaviour disorders, and severe learning disabilities; application of behavioural and cognitive behaviour therapy techniques to modify student behaviours within the classroom setting; teaching and application of social skills, to strengthen student social interactions and; production of progress reports, discharge summaries, and IEPs included in hospital psychiatric chart.

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