

6.M. Workshop: Psychological resilience – concepts, data and challenges for further research

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Investigating psychological resilience in refugees may foster developing adequate interventions to better prevent psychopathologies. In this workshop we will highlight from an interdisciplinary perspective recent frameworks and data on psychological resilience. In the first presentation a conceptual framework of psychological resilience will be introduced (Oliver Tüscher, Germany). Moving from concepts and neurobiological research findings the following presentation provides evidence on heterogeneous results in studies on psychopathologies and resilience in refugees (Jutta Lindert, Germany). Accordingly, research on resilience and mental health promotion is needed. The third presentation will highlight findings on how to introduce mental health promotion into the health care sectors (Nina Tamminen, Finland).

Key message:

- Focusing on resilience represents a paradigm shift in Public Mental Health research

Neurobiological mechanisms of psychological resilience - a conceptual framework

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Background

Focusing on resilience rather than pathophysiology in many ways represents a paradigm shift in clinical-psychological and psychiatric research that has great potential for the development of new prevention and treatment strategies.

Methods

Drawing on concepts and findings from trans-diagnostic psychiatry, emotion research, and behavioral and cognitive neuroscience, we propose a unified theoretical framework for the neuroscientific study of general resilience mechanisms.

Results

The framework is applicable to both animal and human research and supports the design and interpretation of translational studies. The theory emphasizes the causal role of stimulus appraisal processes in the generation of emotional responses, including responses to potential stressors. On this basis, it posits that a positive appraisal style is the key mechanism that protects against the detrimental effects of stress and mediates the effects of other known resilience factors.

Conclusions

Appraisal style is shaped by three classes of cognitive processes – positive situation classification, reappraisal, and interference inhibition – that can be investigated at the neural level. Prospects for the future development of resilience research are discussed.

Psychological resilience in refugees – a systematic review

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Background

Traumatic experiences such as human rights violations, humiliation, losses of the habitat and of loved ones related to becoming a refugee call for studies on resilience trajectories.

Methods

We conducted a systematic review. We included 1) original articles since 2009 with the outcomes anxiety, depression, and PTSD, 2) randomized sample, 3) sample including refugees living at maximum 5 years in the host country, 4) sample with < 100 participants.

Results

We identified 1.877 studies of which n=15 studies were included. In those studies, n = 6,769 refugees participated. The number of participants varied from n = 117-n=1.422 (Median: n = 366 Refugees). PTBS-prevalence rates varied from 5-71%, for depression from 11-54% (mean prevalence rate: 35%). Sensitivity analyses suggest that refugees, which come from countries with intense human rights violations, have an increased rate of psychopathological symptoms.

Conclusions Heterogeneity of prevalence rates is related to 1) methodological and 2) to difference in the refugee populations according to the human rights violations in the countries of origin of refugees. There is an urgent need for representative studies on refugees' resilience.

Mental Health Promotion Competencies in the Health Sector

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Mental health promotion is a way to achieve better population mental health. However, there is a lack of systematic information on the competencies needed for mental health promotion in the health sector. In order to define the needed competencies, a study was carried out to seek the views of mental health professionals regarding mental health promotion-related competencies.

Methods

The research was conducted as a qualitative study. Data collection was carried out in 2014-2016; two focus group interviews and a questionnaire survey with health sector professionals. The focus groups included 13 professionals. The questionnaire survey was distributed to over 70 professionals, 20 of them responded. The data was analysed with inductive content analysis utilizing Atlas.ti data analysis software.

Results

The analysis yielded 23 subcategories for mental health promotion competence. These were clustered under four

main categories: theoretical knowledge, practical skills, and personal attitudes and values. The analysis showed that health sector professionals view mental health promotion as a multi-disciplinary area that requires various skills and abilities such as factual knowledge on mental health promotion theory and practice, interaction skills such as listening and empathy, and a customer-based approach and respect for human rights.

Conclusions

The study provides new information on what competencies are needed to plan, implement and evaluate mental health promotion in health sector practice, with the aim of contributing to a more effective workforce. The competencies inform capacity building for professional practice in mental health promotion. They provide aid in planning training programmes and qualifications, job descriptions and roles in health sector workplaces related to mental health promotion.

Associated factors with Post traumatic stress and anxiety disorders in first responders following terror attacks in Paris, January 2015

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Background

From 7 Jan. 2015 to 9 Jan. 2015, terror attacks occurred in Paris region, with 17 deaths and 20 injured. Hundreds of first responders were involved and mobilized for a long time. This study wants to assess the prevalence and factors associated with mental disorders (PTSD and anxiety disorders) among different occupational groups of first responders involved in these events.

Methods

A cohort study was conducted 6 months after the events. First responders (policemen, medical rescue workers, firemen, and volunteers) were included according to the 'Stress' criterion for the PTSD the DSM-5. The face to face questionnaire administered by trained psychologists included socio demographics, exposure level, previous traumatic experience, level of preparation for psycho-traumatic events, occupational impact, health care utilization and PCL-5 for probable PTSD and Mini international for current PTSD and anxiety disorders.

Results

A total of 232 first responders (19.4% medical rescue, 25.9% firemen, 23.7% policemen and 31.0% volunteers) were included. Police officers were the most occupational group to have been exposed to the events (directly threatened with large mobilization after the events). During the 48h following the attacks, 35% of all first responders had access to psycho medical care. Post-traumatic stress disorder was diagnosed by the MINI in 7 responders (3.0%) and 8 had a PCL score > 44. Among first responders, 32 (13.9%) had at least one anxiety disorder. We noted an increasing frequency according to exposure.

Conclusions

Police officers were the occupational group of workers the most exposed to these events. In order to minimize the psychological impact, future challenges will consist in adapting specific training for rescue and safety workers that would be related to cumulated stress and to its psychological consequences; in adjusting their time of intervention, and in proposing a systematic psychological support for all rescue workers.