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**Institute of Mental  
Health Sciences**



***Institute of Mental  
Health Sciences  
Conference Handbook***

***Mental Health across the  
Life-course***

***Wednesday 2nd June 2021  
9.30 - 12.30***

**[www.ulster.ac.uk/mentalhealth](http://www.ulster.ac.uk/mentalhealth)**

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## Welcome

The Institute of Mental Health Sciences at Ulster University is pleased to host our annual scientific conference in 2021. The past year has been remarkable. We have faced significant societal challenges and many people have risen to the occasion. Perhaps now more than ever, we need to take an integrated approach to addressing poor mental health and wellbeing.

The theme of this year's conference is "Mental Health Across the Life-course". We are therefore delighted to welcome Professor Siobhan O'Neill to discuss the pending Mental Health Strategy for Northern Ireland. In addition, we will have the opportunity to hear from emerging research in our parallel sessions.

The Institute of Mental Health Sciences is a dynamic group of researchers seeking to take innovative approaches to meet societal challenges in mental health sciences through participation and collaboration with those committed to change. I am therefore very pleased you have chosen to join us for our annual conference this year and am looking forward to learning from each other.

Best wishes,



Professor Mark Tully

Director, Institute of Mental Health Sciences

Follow updates on Twitter at: [@UlsterUniIMHS](https://twitter.com/UlsterUniIMHS)

The hashtag for the conference is [#IMHS2021](https://twitter.com/hashtag/IMHS2021)

## Joining Instructions

We will run this year's conference using Zoom. For the best conference experience, please download Zoom Client for Meetings onto your laptop or desktop via <https://zoom.us/download>

Please log into the conference using the link below and password no later than 9.25. You will be placed in a lobby when you log in. Your video and audio will be turned off when you enter the conference. If you wish to ask questions, please use the chat function to ask questions of the speaker or panel.

Weblink:

<https://zoom.us/j/98326925564?pwd=QVB0aFVhczRTZCtTb09YL1ljRnduUT09>

Password: 105457

For the parallel sessions, you will have the opportunity to choose which breakout room you would like to attend. Talks will adhere strictly to the timetable, making it possible to move between rooms and hear different talks if you wish.

## Programme

<b>9.30am</b>	<b>Welcome</b>	Mark Tully, Ulster University		
<b>9.45am</b>	Keynote	Siobhan O'Neill, Interim Mental Health Champion NI		
<b>10.15am</b>	Panel Discussion	<ul style="list-style-type: none"> <li>• Siobhan O'Neill, Interim Mental Health Champion NI</li> <li>• Ciaran Shannon, IMPACT Research Centre, Northern Health and Social Care Trust</li> <li>• Karen Bester, Recovery College</li> <li>• Sean Holland, Chief Social Worker, HSC NI</li> <li>• Magda Soares-Pinto, Youth Representative</li> </ul>		
<b>11am</b>	<i>Comfort Break</i>			
<b>11.15</b>	Parallel Sessions			
	<b>Young People's Mental Health</b>	<b>Adults' Mental Health</b>	<b>Stress &amp; Resilience</b>	
	<b>Chair: Dominic McSherry</b>	<b>Chair: Rachelle Irwin</b>	<b>Chair: Susan Lagdon</b>	
<b>11.15am</b>	Mental Health and Wellbeing of College Students on the Island of Ireland: Pre-COVID and During the Pandemic <i>Elaine Murray</i>	A longitudinal survey of psychological wellbeing amongst health and social care staff in Northern Ireland during the 2nd wave of the COVID-19 pandemic <i>Julie-Ann Jordan</i>	Use of real-world data analytics to gain insight into suicidal behaviour in public place <i>Courtney Potts</i>	
<b>11.30am</b>	Impacts of adolescent mental health, social identity, and university attendance on mental health during emerging adulthood: Intersectional multilevel analyses of a national cohort study <i>Kieran Balloo</i>	Evaluating outcomes and acceptability of the Pregnancy in Mind programme during the COVID pandemic <i>Aisling McElearney</i>	An analysis of call data from crisis helplines following media reports of suicide related deaths <i>Robin Turkington</i>	
<b>11.45am</b>	Reconfiguring Education – An embodied perspective for improved mental health <i>Mary O'Rawe</i>	Mental health outcomes in individuals participating in Diabetes Prevention Programmes: A systematic review and narrative synthesis <i>Ashling McCallion</i>	The Mediating Role of Distress Tolerance in the Relationship Between Childhood Maltreatment and Mental Health Outcomes Among University Students <i>Martin Robinson</i>	
<b>12.00</b>	Our Generation <i>Tara O'Neill</i>	Changes in physical activity, sitting and mental health in a UK public sample during the COVID-19 pandemic <i>Jason Wilson</i>	Enhancing resilience through mental health blogging <i>Dennis Relajo-Howell</i>	
<b>12.15</b>	Wrap Up	Mark Tully, Ulster University		

## Profile of Speakers

### **Professor Mark Tully**

Mark Tully is Director of the Institute of Mental Health Sciences and a Professor of Public Health at Ulster University. His research focuses on addressing population levels of physical inactivity and sedentary behaviour, which are major causes of poor physical and mental wellbeing. His research includes interventions targeting older adults and socio-economically disadvantaged communities. In addition, he is interested in the effects of changes in the built environment on behaviours.



### **Siobhan O'Neill, Interim Mental Health Champion NI**

Siobhan O'Neill is a Professor of Mental Health Sciences at Ulster University, and Interim Mental Health Champion for Northern Ireland. Her research programmes focus on trauma mental illness and suicidal behaviour in Northern Ireland, and the transgenerational transmission of trauma.

She is now on a mission as the Mental Health Champion to improve the mental health of the people of NI by promoting evidence-based services and care for those who suffer from mental illness and suicidal thoughts.

As Interim Mental Health Champion for Northern Ireland, she will advise and assist in the promotion of mental health and wellbeing through all policies and services throughout the province. Her role is as a public advocate for mental health, and to be a voice for those otherwise voiceless. Her goal is to communicate the collective voices of people with lived experience and their families and carers, and to advocate for communities impacted by mental health inequalities.

**Ciaran Shannon, Impact Research Centre, Northern Health and Social Care Trust**

Dr Ciaran Shannon is a Consultant Clinical Psychologist in The Northern Health and Social Care Trust in Northern Ireland. He is the Director of IMPACT, the Trust's Mental Health Research Centre. He also manages specialist mental health psychology services, including the only psychosis prevention team in the island of Ireland. His area of specialism is in psychological intervention and service provision to those diagnosed with severe mental health problems. His particular research interest over the past 20 years has been on the effect that trauma (including "Troubles-related" trauma) has on the presentation of these disorders.

**Karen Bester, Recovery College**

Karen Bester is currently the Lead Peer Educator for the Innovation Recovery Project's Belfast hub at Belfast Recovery College. The project is funded through the European Union's Interreg VA Programme and run via the Co-operation and Working Together (CAWT) partnership. Karen is also in the final phase of a research MSc in Development and Co-Production of Social Care Research at Ulster University, where she has researched the application of co-production within the Recovery College setting. She is due to take up a policy position at the Department of Health later in June.

**Seán Holland, Chief Social Worker, HSC NI**

Seán qualified as a Social Worker from Ulster University in 1986 and is a qualified Social Work practice teacher and has a LLM in medical law. He worked in a variety of residential and childcare posts post qualification, before becoming a Senior Social Worker in the Down & Lisburn Trust. In 2001 Seán was seconded to the Department of Health, Social Services and Public Safety to work on the development of a 20 year public health strategy A Healthier Future which set out the vision for health and wellbeing in Northern Ireland.

In 2008 Seán moved to the Department of Health's Social Services Inspectorate as the Assistant Chief Social Services Officer, before being promoted to Chief Social Services Officer in 2010. Seán is currently the Chief Social Work Officer/Deputy Secretary over Social Services Policy Group in the Department of Health, a post he has held since 2012. In this role he is the lead official for adult and children's social care and mental health services.

**Magda Soares-Pinto, Youth Representative**

Magda is Portuguese and is currently completing a MSc in Applied Psychology at Ulster University. She is part of Pure Mental NI which is an entirely youth led mental health organisation and does some work with Common Youth also. Magda is passionate about ensuring the inclusion of young people in decisions made about young people and about ensuring access to mental health education and peer-to-peer relationships and sex education.

## Abstracts

### Parallel Session 1: Young Peoples' Mental Health

#### **1. Mental Health and Wellbeing of College Students on the Island of Ireland: Pre-COVID and During the Pandemic**

*Presenter - Elaine Murray, Ulster University*

*Co-Authors - Margaret McLafferty; Caoimhe Ward; Jonathon McLaughlin; Rachel McHugh; Louise McBride; Tony Bjourson; Colum Walsh; Professor Siobhan O'Neill*

High levels of mental health problems, self-harm and suicidal behaviour are common among college students. Many students commence college with pre-existing conditions, which may be exacerbated, while others develop problems during this period. It is important therefore to monitor rates of psychological problems and suicidality throughout their time at university. The Student Psychological Intervention Trial (SPIT) commenced in September 2019. This cross-border, EU funded project, was conducted as part of the WHO World Mental Health International College Student Initiative (WMH-ICS). Over 1,900 first year undergraduate students were recruited at Ulster University, Northern Ireland, and Letterkenny Institute of Technology, Republic of Ireland. Overall, 1,828 students fully completed the year 1 survey, and 939 students completed the year 2 follow up survey in Autumn 2020, during the COVID pandemic, (885 students completed both year 1 and year 2 surveys). Elevated levels of mental health problems, self-harm, and suicidal behaviour, including suicidal thoughts, plans and attempts, were revealed in year 1, (pre-pandemic). Overall, 9% of participants triggered a suicide high-risk alert and were contacted by counselling/student wellbeing services and offered support. In year 2, the rates were even higher. Depression, as measured by the PHQ-9, was particularly high. Students identified COVID related issues that were impacting on them, including motivation and social isolation. The study highlights the importance of identifying students who may be struggling with their mental health and wellbeing, particularly during this challenging time, with many restrictions in place as a result of the pandemic.

## **2. Reconfiguring Education – An embodied perspective for improved mental health**

*Presenter - Mary O’Rawe, Ulster University*

This paper considers whether a focus of education, on what it is important to ‘know,’ from an employability point of view, may be distracting, at a very fundamental level, from how we, as humans, can be well, and bring our truest and best selves to life on this planet. Linking Dan Siegel’s theory of mind with Steve Porges’ polyvagal theory and ancient healing practices aimed at bodymind connectedness, the paper considers how embodied learning might help address unhelpful stress and anxiety often associated with studying. The paper suggests how educational practitioners might be better facilitated to embed more of what it takes to feel safe for learning. A case study using meditation and other mindful practices with undergraduate law students will be presented to assist exploration - though many of the principles work from kindergarten through every level of the education.

### **3. Impacts of adolescent mental health, social identity, and university attendance on mental health during emerging adulthood: Intersectional multilevel analyses of a national cohort study**

*Presenter - Kieran Balloo, University of Surrey*

*Co-Authors –Anesa Hosein; Nicola Byrom; Cecilia Essau*

It is unclear whether recent increases in mental health issues reported by students are comparable between young people in and out of higher education. Furthermore, university (non)attendance may combine with individuals' other social identities to lead to mental health inequalities. Using quantitative longitudinal data from the national cohort study, Next Steps, we conducted multilevel analyses within an intersectional framework. We examined predictors of mental health during emerging adulthood with combinations of the following characteristics: adolescent mental health (measured at age 16), university attendance, sex, socioeconomic class, sexuality, and ethnicity. The findings indicated that respondents who had symptoms of mental ill health during adolescence were more likely to attend university. At age 19, respondents who had symptoms of adolescent mental ill health were more likely to report having no close friends and lower life satisfaction. Individuals attending university were more likely to report having one or more close friends, and greater life satisfaction, independently of their mental health during adolescence. Those who had symptoms of mental ill health during adolescence were more likely to have poorer mental health outcomes at age 25. The opposite pattern was found for those who had been to university, independently of their adolescent mental health. Mixed patterns of predictions were found for respondents' other social identities. We found that intersectional effects were additive, suggesting that characteristics are layered and independent in predicting mental health outcomes (i.e. they do not amplify each other). This has potential implications for how interventions should be targeted towards particular intersectional subgroups.

#### **4. Our Generation**

*Presenter - Tara O'Neill, Ulster University*

*Co-Authors - Colette Ramsey; Siobhan O'Neill; Tara O'Neill*

This novel programme aims to build peace through emotional resilience by engaging children, young people and their key contacts in activities which build emotional resilience, self-awareness and emotional regulation. By doing so we aim to build empathy and negotiation skills which will contribute to improving good relations in Northern Ireland and the border region of Ireland. The programme will be evaluated using a mixed method design, to assess the impact of the OUR Generation programmes on 31,100 children and young people and 4,900 key contacts in the 5 Urban Villages in NI and 5 ROI counties. Multiple levels of analysis will be conducted to help understand the macro, meso and micro factors that influence outcomes for children and young people and their key contacts, as well as the impact of the programmes. We will evaluate changes in attitude, knowledge, behaviour, and skills on 7 key indicators known to contribute to emotional resilience and peacebuilding including empathy, intergroup trust, mental health and well-being, perspective-taking, outgroup attitudes, intergroup contact and coping and problem-solving.

## Parallel Session 2: Adults' Mental Health

### **1. A longitudinal survey of psychological wellbeing amongst health and social care staff in Northern Ireland during the 2nd wave of the COVID-19 pandemic**

*Presenter - Julie-Ann Jordan, IMPACT Research Centre, Northern Health and Social Care Trust*

*Co-Authors –Ciaran Shannon, Kevin F. W. Dyer; Dymphna Browne; Emma Carroll; Jenny Maguire; Keith Kerrigan; Sinead Hannan, Thomas McCarthy; Mark Tully; Ciaran Mulholland*

**Background.** In Northern Ireland levels of COVID-19 hospitalisations and deaths were high throughout November 2020 - February 2021. These additional health service pressures are likely to have taken a significant toll on the wellbeing of health and social care (HSC) staff.

**Aims:** To measure caseness of psychological wellbeing difficulties amongst HSC staff throughout the COVID-19 pandemic, and to identify risk and protective factors.

**Method:** The COVID-19 Staff Wellbeing Survey is an online survey spanning different phases of the COVID-19 pandemic: Time 1 (November 2020; n=3,834); Time 2 (February 2021; n=2,898); Time 3 (May 2021); and Time 4 (August 2021). The survey contained a range of demographic, organisational, and psychological wellbeing-related content, amongst which were 4 validated questionnaires measuring anxiety, depression, post-traumatic stress and insomnia.

**Results:** Throughout the 2nd wave of COVID-19 (Time 1 & 2), a high proportion of HSC staff reported moderate-to-severe levels of depression (30-36%), anxiety (26-27%), post-traumatic stress (30-32%), and insomnia (27-28%). Longitudinal analyses on participants who took part at Time 1 (pre-vaccine) & 2 (post-vaccine) (n=632) suggested distress levels were stable overtime, providing no evidence of post-vaccine recovery bounce. Regression models identified numerous demographic and organisational predictors of wellbeing; amongst these the perception that

communication was effective within an individual's organisation emerged as the strongest protective factor.

Conclusion: There is a clear need to continue to offer a range of psychological wellbeing supports to all HSC staff. Further, HSC organisations can also protect their staff by communicating with staff regularly, frequently and clearly on COVID-19 matters.

## **2. Evaluating outcomes and acceptability of the Pregnancy in Mind programme during the COVID pandemic**

*Presenter - Aisling McElearney, National Society for the Prevention of Cruelty to Children*

*Co-Authors - Louise Harrington; Georgia Hyde-Dryden; Hannah Walters; Lauren Palmer; Caroline Cunningham; Gary Adamson*

The draft Mental Health Strategy for Northern Ireland affirms that prevention of mental health problems, and early intervention, is possible and cost-effective. Taking a life-course approach, the Strategy asserts the importance of incorporating initiatives from the perinatal period. Poor perinatal mental health is relatively common. COVID-19 has increased anxiety and loneliness amongst pregnant women. The wellbeing of parents; mums, dads and partners during pregnancy and postnatally is critically important to children's development outcomes. Stable and responsive relationships and reciprocal interactions with parents/carers support early brain development and protect against adversity. Pregnancy in Mind (PiM) is a preventative group-work programme for parents at risk of mild to moderate anxiety and depression during the perinatal period. PiM is based on six core themes and a toolbox of activities, enabling the programme to be tailored to the specific needs of groups or individual parents. Virtual PiM is a digital version of the PiM programme, developed during the COVID pandemic to respond to need. A mixed-methods evaluation was carried out in 6 UK locations to explore programme acceptability and outcomes. This involved interviews with 23 practitioners and a latent growth modelling analysis of routine outcome data (GAD-7 and PHQ-9). The research contributes new learning on perinatal mental health, and on adapting service delivery models in response to COVID-19. It is relevant to the outworking of the Mental Health Strategy, given the explicit recognition in the draft document on the need to shape research on the use of technology in light of the pandemic.

### **3. Mental health outcomes in individuals participating in Diabetes Prevention Programmes: A systematic review and narrative synthesis**

*Presenter - Ashling McCallion, Ulster University*

*Co-Authors - Noel Brick; Orla McDevitt Petrovic; Karen Kirby; John Mallett*

**Purpose:** Common mental health disorders have been evidenced to be of relevance in the development of Type 2 Diabetes. Therefore, it is imperative that an understanding is developed on how mental health is assessed in Diabetes Prevention Programmes (DPPs). This review summarised the relevant literature (n=25) pertinent to the assessment of mental health in DPPs as well as the potential relationship between mental and physical health outcomes.

**Methodology:** Available literature from 1990 until the end of March 2020 was searched within MEDLINE, CINAHL, ProQuest, Scopus and Web of Science. A protocol following PRISMA guidelines was submitted and accepted by PROSPERO (Registration No: CRD42020167792). Searches were limited to randomised controlled, peer reviewed studies published in English, with a clear DPP design, and that used a valid psychometric measurement.

**Findings:** The majority of included studies utilised well established mental health assessment measures such as the PHQ-9 and the CES-D. Mental health was often included as a secondary outcome. Overall results for mental health were found to be non-significant (despite several studies reporting improved mental health) and un-related to physical health outcomes. Only two studies reported significant improvements in both physical and mental health outcomes.

**Conclusions:** Whilst common mental health issues are routinely screened for in DPPs; there is no framework within these programmes to addresses them. As depression is related to future risk of T2DM development as well as poor disease and health outcomes, it is recommended that these issues are suitably addressed and attended to within future DPPs.

#### **4. Changes in physical activity, sitting and mental health in a UK public sample during the COVID-19 pandemic**

*Presenter - Jason J Wilson, Ulster University*

*Co-Authors – Lee Smith; Nicola C Armstrong; Mark A Tully*

Background: Public health restrictions, in response to the COVID-19 pandemic, have had potentially wide-ranging, unintended effects on lifestyle behaviours such as physical activity and sitting as well as impacting mental health. This study explored how physical activity, sitting and mental health had been longitudinally affected in a sample of the UK public during the COVID-19 pandemic.

Methods: Two UK COVID-19 online surveys were administered, one within the first three months of initial COVID-19 restrictions and another three months later. Moderate-vigorous physical activity (MVPA) and sitting times were self-reported by participants. Mental health was measured using the short-form Warwick-Edinburgh Mental Well-being Scale and Becks' Anxiety and Depression Inventories. Loneliness was assessed using the 3-item UCLA loneliness scale. Differences between timepoints were explored using relevant non-parametric tests.

Results: Three hundred adults (75% <65 years old; 66% female) provided data across all timepoints (pre-pandemic = T1; start of first wave = T2; end of first wave = T3). Between T1 and T2, time in MVPA decreased ( $Z=-7.657$ ,  $p<0.001$ ) while time sitting increased ( $Z=-9.897$ ,  $p<0.001$ ). Between T2 and T3, time in MVPA ( $Z=-3.222$ ,  $p=0.001$ ) and mental wellbeing ( $Z=-2.429$ ,  $p=0.015$ ) increased while time sitting ( $Z=-5.337$ ,  $p<0.001$ ) and anxiety symptoms decreased ( $Z=-3.193$ ,  $p=0.001$ ).

Conclusion: This study found that mental health had rallied by the end of the first wave compared with the start of this wave, whereas MVPA and sitting had not recovered to pre-pandemic levels. As countries emerge from restrictions, it will be prudent to direct necessary resources to addressing these important public health issues.

## Parallel Session 3: Stress & Resilience

### 1. Use of real-world data analytics to gain insight into suicidal behaviour in public place

*Presenter - Courtney Potts, Ulster University*

*Co-Authors – Siobhan O’Neill; Maurice Mulvenna; Raymond Bond; Edel Ennis; Robin Turkington*

Recently in Northern Ireland, there has been a rise in incidents of actual and attempted suicide along a stretch of river and three nearby bridges. The aim of this research is to integrate and analyse data to better understand crisis behaviour in public places. Data from 2017-2019 were analysed including CCTV logs describing incidents of suicidal behaviour, incident reports from a local search and rescue charity, and footfall data from one of the bridges. Exploratory data analysis was carried out to look for trends in incidents. The relationship between footfall and incidents was determined by analysis over months and days with no incidents versus days with one or more incidents. During the 3-year period, 2,466 CCTV incidents and 1,285 search and rescue incidents were recorded. The majority of search and rescue incidents were males (60%), most commonly aged 16-25, and 33% were under the influence of alcohol. Year-on-year, there were no identifiable patterns in incidents across seasons or months. Altogether, incidents were highest in the summer months, peaking at the weekend, mostly in the early hours of Sunday morning. Over half (56%) occurred around the three bridges along the river, while the rest of incidents occurred at other riverine locations. There was no discernible relationship between incidents of suicidal behaviour and footfall on one particular bridge. The present study highlights analyses that can be used to gain insights into crisis behaviour trends in public places, which could play a critical role in preventing suicides by jumping or drowning.

## **2. An analysis of call data from crisis helplines following media reports of suicide related deaths**

*Presenter - Robin Turkington, Ulster University*

*Co-Authors – Maurice Mulvenna; Raymond Bond, Edel Ennis, Siobhan O'Neill, Courtney Potts; Robin Turkington*

There is evidence stating that explicit media reporting of suicide deaths, such as high profile celebrity suicides, can illicit “copy-cat” suicides, within the immediate time period afterwards. In parallel, there is also evidence to suggest that this could also lead to a rise in help-seeking behaviour. People who are already feeling suicidal or in need of emotional support may be prompted to take constructive action and engage in help-seeking behaviour by calling a crisis helpline. This work presents an investigation into the impact of the media reporting of high profile celebrity suicides and the impact of media reporting of localised suicide events (i.e. murder-suicides) on a crisis helpline service. Anonymised call data records provided by Samaritans Ireland (a national crisis helpline) are subjected to data analytic and statistical methods to explore the impact of the media reporting of suicides on caller behaviour. Intervention analysis, outlier analysis and change-point detection analysis will be used to evaluate changes in caller behaviour in the days after the suicide death(s), which would coincide with press/media releases on the suicide deaths. Three cases will be analysed which includes two celebrity suicides and a localised murder-suicide; findings of which will be compared and contrasted. This work will discuss the relationship between the media reporting of suicides by discussing the potential explanations for changes in caller behaviour and its impact on crisis helplines, and how this can inform the policy and practice of responsible media reporting.

### **3. The Mediating Role of Distress Tolerance in the Relationship Between Childhood Maltreatment and Mental Health Outcomes Among University Students**

*Presenter - Martin Robinson, Queen's University Belfast*

*Co-Authors –Jana Ross; Shelley Fletcher; Carol Rhonda Burns; Susan Lagdon, Cherie Armour*

A wealth of empirical literature has documented that the experience of childhood maltreatment is related to an increased risk for the development of psychopathologies in adulthood. Empirical studies examining the factors that could possibly explain this relationship, however, remain sparse. The emerging literature on distress tolerance (DT) suggests that it could possibly act as an explanatory or mediating factor within this relationship. The current study, therefore, examined the mediating role of DT in the relationship between childhood maltreatment and psychopathology (posttraumatic stress disorder, depression, anxiety, and alcohol use) in adulthood in a university student population sample (N = 642). Results showed that childhood maltreatment was positively associated with caseness for all mental health outcomes under investigation. It was also found that individuals with higher levels of DT were less likely to experience adverse mental health outcomes. The results of the mediation analysis indicated that the exposure to childhood maltreatment remained associated with elevated risk for being in the symptomatic group across mental health outcomes, and that DT significantly mediated this relationship. These results provide insight into the relationship between childhood maltreatment and mental ill-health later in life, highlighting the importance of considering DT as a potential risk and resilience factor in this relationship.

#### **4. Enhancing resilience through mental health blogging: Basis for a digital mental health intervention among adolescents in developing countries**

Presenter - Dennis Relajo-Howell, Psychreg

Resilience has been known to be predictive of anxiety and depressive symptoms, while anxiety and depressive symptoms are associated with suicidal behaviour. There have been a number of studies which explored the dimensions of blogging as a means to marshal mental health support. Therefore, this study aims to provide a framework to be considered in developing future blog-based mental health intervention for adolescents. This aim will be met using two qualitative studies and a pilot experimental study of the adapted blog-based psychoeducation intervention, which will be evaluated through a field experiment. Participants will be recruited from a university in the Philippines. Outcome measures will include scales of anxiety and depressive symptoms (Centre for Epidemiologic Studies Depression scale, CED-S), scales of resilience (Resilience Scale for Adolescents, READ), a social activities checklist, and textual analyses of participants' blogposts. With suicidal behaviour being a global public health dilemma, the implications of this study are threefold: First, this will be the first empirical study which will investigate the efficacy of a blog-based psychoeducation intervention for suicide prevention among adolescents. Second, it will build upon previous works on ways to promote resilience among adolescents. Finally, it will form a comparative framework for future research on blog-based intervention.

**Associate Fellowship of the  
Institute of Mental Health Sciences  
Ulster University**

We are seeking to create a network of people interested in mental health research. A key function of this network will be to act as a catalyst to the development of interdisciplinary teams prepare bids for research funding. We are offering the opportunity to become Associate Fellows of the Institute and utilise the supportive infrastructure of the IMHS.

**What it means to be an IMHS Associate Fellow**

Associate Fellowship of the IMHS will be open to interested individuals from who are engaged in mental health research or are interested in doing so in the near future. Associate Fellows will be asked to align themselves to one of our research centres and commit to the core values of the IMHS. They will be expected to make a meaningful contribution to the development of research proposals in interdisciplinary funding bids, with groups of researchers from across the Faculty of Life and Health Sciences. Being an Associate Fellow of the IMHS will open a door to research excellence through support, reciprocation, and collegiality. It will enable ease of access, communication and collaboration with colleagues furthering your common research interests and helping achieve research goals.

**IMHS Core Values**

- I. Public and Professional Engagement and User Involvement
- II. Interdisciplinary research collaboration
- III. Mental health research with an impact regionally, nationally, and internationally
- IV. Capacity building and training for mental health research excellence

To apply to be an Associate Member, please click [HERE](#)



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