Mental Health Research Conference (MHRC 2022) and Network of education and training in mental health (2 nd nET-MH 2022)

Mental Health in Post-COVID-19 Era

1st Mental Health Research Conference (MHRC 2022) and 2nd Network of Education and Training in Mental Health (nET-MH 2022)

March 18th, 2022

8.30-18.00 Bangkok time (GMT+7) Virtual Conference on Zoom

THEME: Mental Health in Post-COVID-19 Era







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Welcome to the conference!

From Prof. Nahathai Wongpakaran, MD, FRCPsychT Chair of organization committee.

I am very pleased to welcome all of you today. It is a pleasure of mine to be able to host such a momentous event today.

The purposes of today s conference are;

- 1. Bring together researchers and the mental health workforce from around the world to exchange perspectives, new knowledge and research in mental health
- 2. To create an opportunity for iMMH students and colleagues to participate in an international scientific forum, present their research findings, and learn from the international audience.
- 3. To update and continue cooperating with key scientists in every region in the world and move forward through a higher-level international collaboration with collaborating with iMMH members

Today s Conference will give you one of the priceless opportunities to listen to a priceless talk in the keynote session. We have 2 plenary sessions, One in the morning and the other in the afternoon. All speakers are scientists, friends, and are related to iMMH and nET-MH. The symposiums will be under the themes of *COVID-19 and survival after COVID-19, action and promoting mental health*. You are able to be a first group audience to gain valuable experience and Learned research findings from the presenters.

I would like to express my sincere thanks to MHRC organizing committee, iMMH and nET-MH colleagues, students and staff and all helping hands with generously. We couldn t have done this without them.

From Associate Prof. Rome Jiranukrom, PhD

I would like to express my excitement to be a part of the first Mental Health Research Conference 2022 which aimed to raise awareness of the impact of COVID-19 on our mental health and share ways to promote and provide mental health with more coverage and efficiency that are greatly needed for this current situation and hopefully increase the level of preparedness and readiness for the post-COVID-19 era.

Since 2020, the world has been facing significant challenges of COVID-19 that we have never experienced at this scale before. Not only do we struggle with physical health, but mental health has also become more prominent and alarmingly affects people of every age, gender, and occupation, even healthcare workers. We all have fear, worry, and stress in the context of the

COVID-19 pandemic. We faced with new realities of working from home, some losing jobs, children studying at home, and limited physical contact with our family, friends, and colleagues. It is important that we look after mental health as well as physical health.

What might be happening in the post-COVID-19 era? Looking back on research studies during COVID-19, we learned that the incidence of anxiety and depressive disorders increased by 30-40%. Less we know about the psychological consequences of covid-19 infections, called Long COVID. We know about the incidence, but we do not yet have much evidence for effective responses and interventions to these mental health impacts.

I am glad that CMU, the Graduate Program, and the iMMH program with our partners organize the 1st MHRC Conference and the 2nd nET-MH meeting. I would like to give my full support to the conference organizing committee. I am excited that iMMH colleagues at CMU and our eminent colleagues from Germany, Taiwan, Indonesia, Cambodia, and the Department of Mental Health established the nET-MH network that dedicates to support mental health education and training with global perspectives and a multidisciplinary approach. I hope that this conference and the network meeting will produce knowledge and further actions as a part of health systems to support preparedness and readiness of mental health services for health workers, managers of health facilities, people who are looking after children, older adults, people in isolation and members of the public to look after their mental health under this situation and for the post-COVID-19 era. I wish you great success in learning and sharing among each other at the conference and a successful network meeting among members from different countries and hopefully expansion of the network to other countries as well.

The People

Conference organizing committee

Prof. NahathaiWongpakaran- Professor of Psychiatry Geriatric at the Psychiatry Unit, Department of Psychiatry, Faculty of Medicine, Chiang Mai University - is the chair of the Conference Organizing Committee with Prof. Tinakon Wongpakaran - Professor of Psychiatry, Psychotherapy/Personality disorder Clinic and Education Center, Psychotherapy Unit & Geriatric Psychiatry Unit, Department of Psychiatry, Faculty of Medicine, Chiang Mai University - supporting her in this role. The other members of the committee are;

NahathaiWongpakaran Board member of the MHRC (Chair) - Department of

Psychiatry, Faculty of Medicine, Chiang Mai University

Tinakon Wongpakaran Board member of the MHRC (Chair) - Department of

Psychiatry, Faculty of Medicine, Chiang Mai University

Patraporn Bhatarasakoon Board member of the MHRC - Faculty of Nursing,

Chiang Mai University

Peerasak Lerttrakarnnon Board member of the MHRC - Department of Family

Medicine, Faculty of Medicine Chiangmai University

Charuk Singhapreecha Board member of the MHRC - Faculty of Economics,

Chiangmai University

Awirut Oonarom Board member of the MHRC- Department of Psychiatry

Faculty of Medicine Chiangmai University

Rewadee Jenraumjit Board member of the MHRC - Department of

Pharmaceutical Care, Faculty of Pharmacy,

Chiang Mai University

Chaiyun Sakulsriprasert Board member of the MHRC- Department of

Psychology, Faculty of Humanities,

Chiangmai University

Jiranan Griffiths Board member of the MHRC- Department of

Occupational Therapy, Faculty of Associated Medical

Sciences, Chiangmai University

Chidchanok Ruengorn Board member of the MHRC - Department of

Pharmaceutical Care, Faculty of pharmacy,

Chiangmai university

Qiuyi Yang Board member of the MHRC - immh program

Graduated School, Chiang Mai University

Chengjie Xu Board member of the MHRC - immh program

Graduated School, Chiang Mai University

Surangrat Sang-a-roon Board member of the MHRC - immh program

Coordinator, Graduated School, Chiang Mai University

Penkarn Kanjanarat Board member of the MHRC and secretariat of the

MHRC; Coordinator - Department of Pharmaceutical Care,

Faculty of Pharmacy, Chiang Mai University

The Organizations

Partner organizations

The International Master of Mental Health (iMMH)

This meeting is organized by the International Master of Mental Health (iMMH) Program at Chiang Mai University. Which is a collaborative program from the Faculty of Medicine, Nursing, Medical Technology, Dentistry, Pharmacy, Social Sciences, Humanities, Economics, and Health Sciences Research Institute.



The Network on Education and Training in Mental Health (nET-MH)

The Network on Education and Training in Mental Health (nET-MH) is the network consisting of experts from Germany, Taiwan, Indonesia, Myanmar, Cambodia, and Thailand, which has the Department of Mental Health and Curriculum.



About the Conference

Purposes

The broad aim of this conference is to raise awareness of the impact of COVID-19 on our mental health and share ways to promote and provide mental health with more coverage and efficiency that are greatly needed for this current situation and hopefully increase the level of preparedness and readiness for the post-COVID-19 era.

The purposes of the meeting are:

- Organize an international academic conference on mental health research
- Organize the 2nd nET-MH Network Meeting
- To encourage students in the Master of Science program Mental Health (International Program) at Chiang Mai University The research results were presented at an international conference.
- Academic exchanges and research in mental health emerged. and cooperation between academics Researchers and mental health personnel both domestically and internationally

The theme of the meeting

Since 2020, the world has been facing significant challenges of COVID-19 that we have never experienced at this scale before. Not only do we struggle with physical health, but mental health has also become more prominent and alarmingly affects people of every age, gender, and occupation, even healthcare workers.

What might be happening in the post-COVID-19 era?

Looking back on research studies during COVID-19, we learned that the incidence of anxiety and depressive disorders increased by 30-40%. Less we know about the psychological consequences of covid-19 infections, called Long COVID. We know about the incidence, but we do not yet have much evidence for effective responses and interventions to these mental health impacts.

This conference and the network meeting should produce knowledge and further actions as a part of health systems to support preparedness and readiness of mental health services for health workers, managers of health facilities, people who are looking after children, older adults, people in isolation and members of the public to look after their mental health under this situation and for the post-COVID-19 era.

Program overview

Friday 18th March 2022

Conference Program

8.30-9.00 (Live on Fb) 9.00-9.30 (Live on Fb)	MHRC 2022 Opening remarks and recognitions Chair of MHRC 2020: Prof.Nahathai Wongpakaran, MD, FRCPsychT CMU Vice President: Associate Professor Rome Chiranukrom, PhD Opening plenary address: Director General of Department of Mental Health, MOPH, Thailand Keynote session: Applying Sufficiency Economy in Mental Health in Post COVID-19 Phra Ajahn Amaro Bhikkhu (Phra Raj Buddhivaraguna) Buddhist monk, teacher, and abbot at Amaravati Buddhist Monastery,
	England Moderator: Prof.Nahathai Wongpakaran, MD, FRCPsychT, and Assist.Prof.Penkarn Kanjanarat, PhD.
9.30-10.45	Plenary session 1: Mental Health in Post COVID-19 Speakers: Supporting mental health of doctors in the pandemic and beyond: moral, marital and mental distress Prof.Carmelle Peisah, MD, FRANZCP, Australia An Integrated Behavioral Health Workforce Training Curriculum: Improving Outcomes for Noncommunicable Disease, Lifestyle, Psychiatric and Substance Use Disorder in the Context of COVID-19. Prof. (Clin) Ronald O Donnell, PhD, USA The Mental Health Perspective of Smart Hospital Bridging Human Relations Together: A Decentralization Perfection over the COVID-19 Randomic
	Together: A Decentralization Reflection over the COVID-19 Pandemic Threats Prof. Duujian Tsai, MD, PhD, Taiwan Post COVID-19: A Self-challenge for Better Mental Well-being Prof. Tinakon Wongpakaran, MD, FRCPsychT, Thailand Moderator: Assist.Prof.Penkarn Kanjanarat, PhD
10.45-11.00	Morning break

11.00-12.00 Contributed paper session 1: Research presentations (15 minutes each presentation) Relationship between engagement in meaningful activities and satisfaction with life: A study on undergraduate occupational therapy students Sheba Sam, India Are perceived family support and autistic severity associated with couple satisfaction among parents of children with autism? Bijing He, Thailand Association between older adults functional performance and their scores on Mini Mental State Examination (MMSE) and Montreal Cognitive Assessment (MoCA) Sharon Mary George, India The mediating role of precepts and meditation on attachment and depressive symptoms in adolescents Justin DeMaranville, Thailand Discussant and co-discussant: Assoc.Prof.Patraporn Bhatarasakoon, PhD, MSN, APPMH, RN, FAAN and Assist.Prof.Rewadee Jenraumjit, BPharm, BCP 12.00-13.00 Lunch 13.00-14.30 **Contributed paper session 2: Research presentations** (15 minutes each presentation)

Mental health and public service motivation of teachers and police in Thailand during COVID-19

Ora-orn Poocharoen, Thailand

Factors Associated with Perceived Stress During the Early Stage of COVID-19 Pandemic in Thailand: A Nationwide Cross-sectional Survey Study

Qiuyi Yang, Thailand

The prevalence of the symptoms of borderline personality disorder among Chinese university students and its associated factors

Jia Nan, Thailand

Discussant and co-discussant: Assoc.Prof.Peerasak Lerttrakarnnon, MD and Assist.Prof.Charuk Singhapreecha, PhD

14.30-16.00	Plenary session 2: Survival after COVID-19, actions in promoting mental health
	Actions in Promoting Mental Health for COVID-19 in Thailand Samai Sirithongthavorn, MD, FRCPsychT, Thailand
	Mental Health in Post-COVID-19 Era in Cambodia Mao Heng, MD, LLM, Cambodia
	Long COVID-Psychosocial Support Prof. Manfred Cramer, PhD, Germany
	Revival After Pandemic: Promoting Mental Health in Post-COVID-19 in Indonesia Rahmat Hidayat, SPsi, MSc, PhD, Indonesia
	Moderator: Assist.Prof.Jiranan Griffith, PhD and Justin DeMaranville
16.00-16.15	Research Presentation Award Ceremony - Excellent presentation award - Best presentation awards Moderator: Assist.Prof.Penkarn Kanjanarat, PhD
16.15–16.30	Closing Remark Prof. Nahathai Wongpakaran, MD, FRCPsychT
16.30-17.00	Break
17.00-18.00	nET-MH meeting (Network in Education and Training in Mental Health) invitation only

Keynote session:

Applying Sufficiency Economy in Mental Health in Post COVID-19

Phra Ajahn Amaro Bhikkhu (Phra Raj Buddhivaraguna)
Buddhist monk, teacher, and abbot at Amaravati Buddhist Monastery, England

Moderator: Prof.Nahathai Wongpakaran, MD, FRCPsychT, and Assist.Prof.Penkarn Kanjanarat, PhD.

The King RAMA IX of Thailand s philosophy of sufficiency economy highlights a balanced way of living.

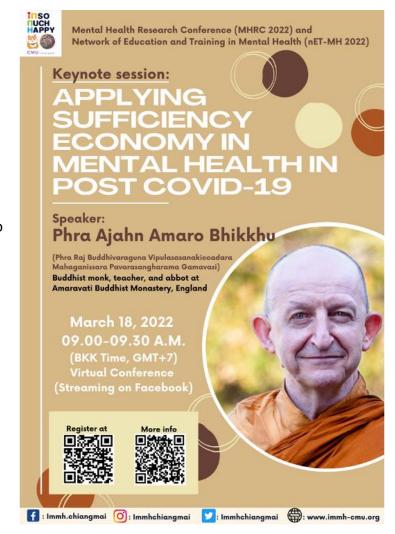
Three principles (pillars)
(along with the conditions of morality
and knowledge can be applied to any
level of the society, from an individual
to a country)

- 1. Moderation: Not maximum consumption leads to happiness, but moderate consumption leads to maximum well-being
- 2. Reasonableness: Seeing things in terms of nature rather than our thought. See how nature work.

 Mindfulness and wisdom, Dhamma help us to be realistic in nature.
- **3. Self-immunity:** Learn to live with uncertainty, be able to adapt to the situation/circumstances, More ADAPTABLE

Conclusion

- Close to good people that you need and support the well-being
- Learn Dhamma teaching by reading or listen
- To be in tune with nature and live with uncertainty
- To be PATIENT, not waiting for the pain to be over but to be present.



Plenary session 1:

Mental Health in Post COVID-19

Moderator: Assist.Prof.Penkarn Kanjanarat, PhD

Supporting mental health of doctors in the pandemic and beyond: moral, marital and mental distress

Prof.Carmelle Peisah, MD, FRANZCP, Australia

 There are high-risk factors for mental health problems in Doctors, including, money problem, a lot of work, long hours work and conflict in the workplace.

Mental health problems

- Burnout is not a mental illness, but it is important to identify and manage.
 - It is associated with psychological distress, reduce job performance and commitment, and less career satisfaction.
- Imposter syndrome in doctor.
- Suicidal ideation in doctors; below 30 years old, most is female, more in a hospital setting, mostly trainee and intern doctor
- Anxiety in doctors; Younger doctors,
- Depression in doctors; 40-50 vears old
- Marital distress; divorce & domestic violence; highest in psychiatrists, fertility issue



COVID-PANDEMIC; Women doctors report increased anxiety more than man doctors

An Integrated Behavioral Health Workforce Training Curriculum: Improving Outcomes for Noncommunicable

Disease, Lifestyle, Psychiatric and Substance Use Disorder in the Context of COVID-19.

Prof. (Clin) Ronald O Donnell, PhD, USA

- COVID-19 and NCD Epidemic
- Lifestyle and Behavioral conditions must be treated.
- Global increase in depression, anxiety, substance use
- Physicians and nurses no time no training
- Social workers ideally suited to role
- Training, education and supervision needed for success
- The solution: Integrated Behavioral Health for social workers
 - Medical / Behavioural / Lifestyle
 - Integrated Behavioural Health Curriculum for Social Workers (ASU-ULSA school of social work, Hanoi Vietnam)



The Mental Health Perspective of Smart Hospital Bridging Human Relations Together: A Decentralization Reflection over the COVID-19 Pandemic Threats

Prof. Duujian Tsai, MD, PhD, Taiwan

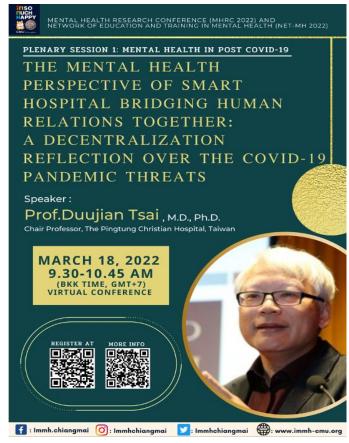
- Psychological Telecounseling has been an effective method of supporting the physical and psychosocial needs of all patients regardless of their geographical locations
- Most telehealth provisions were by telephone for short consultations of less than 15 to 30 minutes.
- The fear of being infected or dying from the disease is one of the most significant causes of mental health disorders. Loss of employment or the fear of losing employment is another major concern leading to mental illness.
- 80% of the COVID-19 patients are either asymptomatic or exhibit mind symptoms
- Digital mental health services provide a complementary way of existing community members with stress and transitioning to new ways of living and working

Critical issues for hospitals during COVID-19

- 1. Take urgent critical care for mass cases in need
- 2. Provide sufficient quarantine space for infected cases without significant symptoms and signs
- 3. Take actions to support the medical staff involved
- 4. Other non-COVID-19 cases still need urgent care
- 5. Still, others need to have care continuity
- 6. Restore the function of the healthcare system

Conclusion

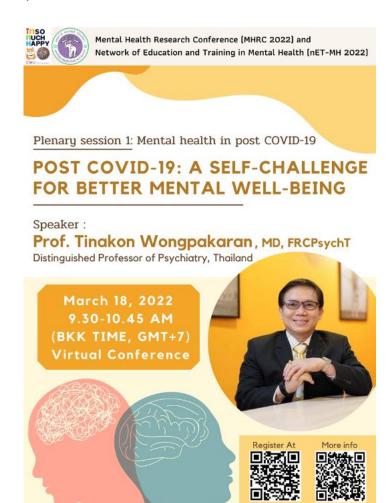
Based upon shared economy with empowering people in need, such design is expected to reshape hospital as a hub for ecological regionalization system with visions of just health as well as society toward reliable and sustainable intimate human relations in post COVID-19 era



Post COVID-19: A Self-challenge for Better Mental Wellbeing

Prof. Tinakon Wongpakaran, MD, FRCPsychT, Thailand

- Useful practices to maintain mental well-being
 - Meditation
 - Lots of proof
 - Five-Precepts
 - Death contemplation
 - Wisdom
 - We re all finally die
 - think of death with every breathe – in and out
 - Become very peaceful



f : Immh.chiangmai : Immhchiangmai : www.immh-cmu.org

Contributed paper session 1 Research presentations

Discussant and co-discussant: Assoc.Prof. Patraporn Bhatarasakoon, PhD, MSN, APPMH, RN, FAAN and Assist.Prof. Rewadee Jenraumjit, BPharm, BCP

Abstracts

1. Relationship between engagement in meaningful activities and satisfaction with life: A study on undergraduate occupational therapy students

Sheba Mary Sam¹, Sujata Missal¹

¹ KMCH College Of Occupational Therapy, Tamil Nadu, India

Objectives: To find the relationship between engagement in meaningful activities and satisfaction with life among undergraduate occupational therapy students.

Design: Cross-sectional correlational survey

Method: The study included 160 undergraduate occupational therapy students from first year to internship from College of Occupational Therapy, Tamil Nadu, India. The study was conducted in Tamil Nadu, India from October 2018 to June 2019. The engagement in meaningful activities was assessed using Engagement in Meaningful Activities Survey (EMAS) scale to which subjects responded on a 4 point likert scale and life satisfaction was assessed using Satisfaction with Life Scale (SWLS) to which the subjects responded on a 7 point likert scale. The information collected was statistically analysed.

Result: The scores of EMAS scale showed that 76.9% of the BOT students had a moderate engagement in meaningful activities while only 9.4% had a low engagement in meaningful activities. The scores on SWLS showed that 33.8% of the Bachelor of Occupational Therapy (BOT) students were slightly satisfied in life whereas only 10% proved to be extremely satisfied. The relationship between the scores of EMAS and SWLS indicates a strong positive correlation (r=0.718, p=0.000).

Conclusion: The study concludes that there is a strong relationship between engagement in meaningful activities and life satisfaction in occupational therapy undergraduate students. Therefore, it offers support to the theory of Occupational Science, Occupational Therapy that implies meaningful activity as an important factor contributing to personal well-being.

2. Are perceived family support and autistic severity associated with couple satisfaction among parents of children with autism?

Bijing He¹, Tinakon Wongpakaran², Nahathai Wongpakaran², Danny Wedding³

Objective: To investigate the effect of Family Support on Couple Satisfaction and of Autistic symptoms on Couple Satisfaction.

Method: Seven hundred ninty-four (397 pairs) parents of children aged 7-14 years old with ASD participated in the study. Data collection from online questionnaires include Couple satisfaction index (CSI), Multidimensional Scale of perceived Social Support, and ABC autism checklists. The Actor Partner Interdependence Model, Estimated by Structural Equation Modeling was used.

Results: When considering the perceived family support, the actor effect is statistically significant, with 1.416 for Wives (p < .001) and 1.075 for Husbands (p < .001). The overall standardized effect is 0.474 for the Wives and 0.360 for the Husbands. The partner effect is not statistically significant, either from Husbands to Wives or Wives to Husbands, -0.027(p = .841) and -0.100(p = .478), respectively. The overall standardized effect and partner effect are -0.009 and -0.034, respectively.

Keywords: Family support, autism, couple satisfaction, parents, Actor Partner Interdependence Model

 Association Between Older Adults' Functional Performance And Their Scores On Mini Mental State Examination {MMSE} and Montreal Cognitive Assessment {MoCA}

Sharon Mary George¹, Sujata Missal¹

Objective: The study is aimed to investigate if the performance of older adults on the Mini-Mental State Examination (MMSE) and the Montreal Cognitive Assessment (MoCA) were associated or predictive of their functional performance in a geriatric evaluation.

Design: Quantitative correlation exploratory research design is adopted for the study. Convenient sampling was used for the study.

Method: Study participants were 100 elderly individuals above the age of 65 (49 males and 51 females). Participants' cognitive capabilities were assessed using the scales MMSE and MoCA, and their functional ability was assessed by the Functional Independence Measure (FIM). Data obtained were statistically analysed using the statistical product and Social Science 20 (SPSS 20). Two tailed Pearson correlation coefficient was done to determine the association between MMSE,MoCA and FIM. Independent t-test was done to compare the gender difference on MMSE, MoCA,and FIM .Linear regression was done was done to determine if MMSE and MoCA are predictive of functional performance using FIM.

Results: The findings of the Pearsons correlation indicated a strong positive significant linear relationships between the scores of MMSE and MoCA (r=0.746,p=0.001), moderate positive correlation between the total scores of the MMSE and FIM (r=0.320,p=0.001) and between the total scores of the MoCA and FIM (r=0.325,p=0.001). Hence, the MMSE and the MoCA are

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³ Saybrook University, Department of Clinical and Humanistic Psychology, Pasadena, CA, United States of America

¹ KMCH College Of Occupational Therapy, Tamil Nadu, India

moderately correlated to or predictive of older adults functional performance (as measured by FIM). The regression analyses concluded that higher MoCA and MMSE scores are associated with higher FIM scores.

Conclusion: MMSE and MoCA had moderate positive correlations with predicting patients' functional abilities, as measured by the FIM. MMSE, MoCA, and FIM were also likely to predict patients' functional abilities. Therefore, mental health professionals do not have to rely solely on patients' MMSE, MoCA, and FIM results for goal setting and intervention planning. Future research can be done using randomized sampling method.

Keywords: Cognition, Assessment, Older Adults, Occupational Therapy, Occupational Performance

4. THE MEDIATING ROLE OF PRECEPTS AND MEDITATION ON ATTACHMENT AND DEPRESSIVE SYMPTOMS IN ADOLESCENTS

Justin DeMaranville¹, Tinakon Wongpakaran^{1,2}, Nahathai Wongpakaran^{1,2}, Danny Wedding^{1,3,4}

- ¹ Graduate School, Chiang Mai University, Chiang Mai 50200, Thailand
- ² Department of Psychiatry, Faculty of Medicine, Chiang Mai University, Chiang Mai 50200, Thailand
- ³ Department of Clinical and Humanistic Psychology, Saybrook University, Pasadena, CA 91103, USA
- ⁴ Department of Psychology, University of Missouri-Saint Louis, St. Louis, MO 63121, USA

Objectives: Insecure attachment can cause depressive symptoms. This research examined if Buddhist precept adherence (i.e. abstaining from killing, stealing, sexual misconduct, lying, and intoxicant use) and meditation practice influence the relationship between attachment anxiety and attachment avoidance on depressive symptoms in Thai boarding school students.

Design: This cross-sectional study is the first research analyzing precept adherence in relation to attachment, depression, and as a mediator of attachment and depression.

Methods: 453 Thai boarding school students from 10th-12th-grade were competitively recruited from five boarding schools (two purposively selected Buddhist boarding schools and three conveniently selected secular boarding schools) to parti

Outcome-Inventory-21: Depression subscale, Precept Practice Questionnaire, and **Inner Strength-Based Inventory:** Meditation, to assess attach

Keywords: Attachment, Buddhism, Precept, Meditation, Depression

Contributed paper session 2 Research presentations

Discussant and co-discussant: Assoc.Prof. Peerasak Lerttrakarnnon, MD and Assist.Prof. Charuk Singhapreecha, PhD

Abstracts

Mental health and public service motivation of teachers and police in Thailand during COVID

Ora-orn Poocharoen¹, Sombat Tapanya², Phanuphat Chattragul³, Aphisara Saeli⁴

- ¹ School of Public Policy, Chiang Mai University,
- ² Peace Culture Foundation. Chiang Mai University
- ³ Phanuphat Chattragul. School of Public Policy, Chiang Mai University
- ⁴ School of Public Policy, Chiang Mai University.

Objective: This is the first study of its kind to investigate Thailand s public sector employees, namely teachers and police, on their psychological wellbeing and levels of public service motivation. The research questions are 1. What is the level of psychological well-being of public sector employees? 2. Do public sector employees have training on mental health, and do they have access to mental care? 3. What is the level of public service motivation of public sector employees? The major hypotheses are: 1) public service motivation is related to the sense of psychological well-being, and 2) mental health training and access to care correlate with psychological well-being; 3) there is a lack of comprehensive training on mental health for the public sector employees.

Design: This is a quantitative study of 3,166 respondents. The survey comprises standard screening questions (translated from English to Thai) on anxiety, depression, post-traumatic stress disorder, loneliness, and public service motivation. It includes background information, COVID related questions, and questions on training programs and mental care access. Data collection occurred between November 2021 to February 2022.

Method: The online survey link was sent to willing participants who self-reported all the questions. The Police Bureau asked for the corporation from police officers. The research team has access to verify the names of all respondents for authenticity check. For privacy, all names are delinked from the actual database. Sample population is males (2,015), females (1,146), teachers (1,454), police (1,712).

Results: More females experience symptoms of anxiety and depression (15%) and PTSD (5.15%) than males (12.20%, 3.03%). Police experience slightly higher anxiety, depression, and PTSD than teachers. Of all respondents, 15.3% have an ACE score of at least 1, and 4% have ACEs equal to or higher than 5. Police (4%) have a higher ACEs percentage than teachers (3.8%). Loneliness is a separate concept from other symptoms. Public service motivation is slightly correlated with mental wellbeing. Between 57% to 61% of police and teachers have training in mental health. About 20% of both have no or little access to mental care.

Conclusion: It is recommended to develop comprehensive mental care for police and teachers countrywide. This includes training programs on primary mental care and well-being and better access to inclusive and affordable care. Public sector employees are frontline workers for citizens;

their mental health and capability is crucial for a well-functioning public service system.

2. Factors Associated with Perceived Stress During the Early Stage of COVID-19 Pandemic in Thailand: A Nationwide Cross-sectional Survey Study

Qiuyi Yang¹, Nahathai Wongpakaran², Tinakon Wongpakaran², Surapon Nochaiwong^{3, 5}, Chidchanok Ruengorn^{3, 5}, Ratanaporn Awiphan^{3, 5}, Danny Wedding⁴, Penkarn Kanjanarat^{3, 5}

Objective: To identify factors affecting perceived stress of Thai people during the early stage of COVID-19 pandemic.

Design: A secondary data analysis of a cross-sectional survey was conducted.

Method: Data extracted from the HOME-COVID-19 survey study during Wave I (April 21–May 4, 2020) were used for the analysis. Participants were general populations, non-health professional, age ≥18 years, and living in Thailand. Perceived stress was assessed using the Perceived Stress Scale-10 (PSS-10). Factors included participant s demographic characteristics, fear of COVID-19 using the Fear of COVID-19 and Impact on QoL Scale (FC), neuroticism using the Neuroticism inventory (NI), and perceived social support using the Multidimensional Scale of Perceived Social Support-12 (MSPSS-12). Stepwise multivariable linear regression analysis was performed at p <.05.

Results: After data cleaning, we included 3,299 participants in this study. The mean age of participants was 28.52 9.9 years, and 2,274 (68.9%) were female. The average PSS-10 score was 17.61 5.76, FC score 20.84 7.07, NI score 36.27 9.57, and MSPSS-12 score 59.01 13.48. This study found that fear of COVID-19 (b = .103, p < .001), neuroticism (b = .348, p < .001), perceived social support (b = -.074, p < .001), age (b = -.093, p < .001), sex (b = .630, p < .001), education (b = -.562, p = .014), religion (b = -.462, p = .026), not being college student (b = -1.378, p < .001), history of chronic noncommunicable disease (b = .616, p = .004), and quarantine status (b = .272, p = .008) were significantly associated with perceived stress score, R^2 was .533, F(16, 3282) = 234.42, p<.001. Marital status, region of residence, living status, income, health insurance, and work from home were not significantly associated with perceived stress, p > .05.

Conclusions: The perceived stress level of Thai people was considered low during the early stage of COVID-19 pandemic. Higher fear of COVID-19, higher neuroticism, being female, having history of chronic noncommunicable disease, and was or during quarantine led to higher perceived stress. Having perceived social support, being older, having bachelor s degree or higher education, being Buddhist, and not being a college student were predictors of lower perceived stress. The results of this study can be used to develop interventions to regulate perceived stress in high-risk groups of perceived stress in Thai populations.

3. The prevalence of the symptoms of borderline personality disorder among Chinese university students and its associated factors

Nan jia¹, Chaiyun Sakulsriprasert², Chawisa Suradom³, Ronald O\' Donnell⁴, Nahathai Wongpakaran⁵

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Background: Borderline Personality Disorder (BPD) is the most common personality disorder among other personality disorders. College students are in a high-risk group for BPD symptoms and mental disorders; In college students, previous studies show a large range, which is from 0.5% to 32.1%, and it also varies from time to time. But in China, as far as we can find, few studies show the prevalence of BPD and its correlations with different variables.

Methods: A cross-sectional study was conducted on a sample of university students (N=767) in China between November 2021 and January 2022. An online survey collected sociodemographic data and results from the Perceived stress scale (PSS-10), the Patient Health Questionnaire (PHQ-9). Data was analyzed using IBM SPSS statistic 24 PROCESS program.

Results: the prevalence of symptoms of BPD in the sample was 6.6% according to the cut off score >9. The mean age of the students was 20.33 years (SD=1.50) 407(53.5%) were male, 354(46.5%) were female

Keywords: Borderline Personality, depression, perceived stress, mediation, China

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Plenary session 2:

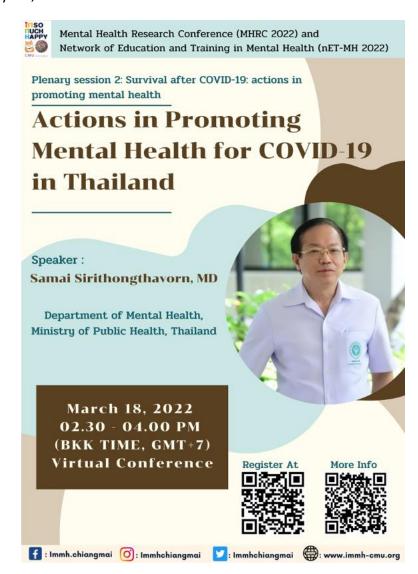
Survival after COVID-19, actions in promoting mental health

Moderator: Assist.Prof.Jiranan Griffith, PhD and Justin DeMaranville

Actions in Promoting Mental Health for COVID-19 in Thailand

Samai Sirithongthavorn, MD, FRCPsychT, Thailand

- Pandemic situation and management in Thailand
- Promote new normal lifestyle protection
- Mental health effect from COVID-19
- Stress and social panic situation and response
 - · GOAL
 - To reduce consequences on mental health from Stress – Burn out – Suicide – Depression
 - To strengthen resilience in individuals, families, communities and organizations



Mental Health in Post-COVID-19 Era in Cambodia

Mao Heng, MD, LLM, Cambodia

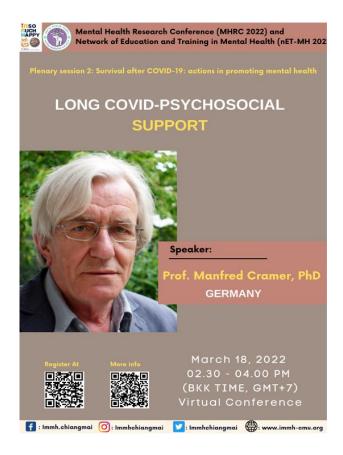
- Hoping to get out from COVID-19 disease
- Continuing to practice 3 do s and 3 don t correctly and regularly
- Doing carefully exercising and preventive measures
- Fighting mental health problems by
- Carefully opening all business
- Training health providers about mental health post-Covid 19 area
- Good personal hygiene (exercise, food, communication by phone...)
- Returning to weeding, religious events, and funeral events with 3 do s and 3 don't, boosting vaccination, and limited people participation.



Long COVID-Psychosocial Support

Prof. Manfred Cramer, PhD, Germany

- The rapid test for COVID-19 is not reliable
- The only reliable test we have in Germany is PCR test. It's not easy to use, because it takes 24 hours for the results.
- Now, about 3 million people from Ukraine immigrate to Germany. Most of them are not vaccinated. So, this is the new wave of COVID situation in Germany.
- It might have about 10 million people trying to immigrate to European countries. So, we have to protect ourselves by wearing masks and cleaning our hands.
- The European Psychologists have published the special issue about "Psychology, Global threats, Social challenge, and the COVID-10 Pandemic"
- In Germany, 80% of people are vaccinated, but the vaccines don't help to protect you from infection, but they help the symptom milder and lower the opportunity to go to the hospital, and also lower the death rate.



- After you have infected and got the medicine, after a couple of weeks the infection has gone.
 but people in Germany are suffering from isolation because of loneliness and mental health problems.
- We have enormous studies about COVID-19, but we have a lack of studies on the long-term effect of COVID infection.
- There is 1 study from Italy, which study about 300 people who are COVID survivors after 6 months in terms of neurological and psychological health.
- In Germany, Long COVID defines as an illness that lasts for 6 months.
- Long COVID has more than 200 symptoms, for example, anxiety, and depression.
- 15% who have been infected with COVID, are expected to have long covid symptoms
- We want to train people who suffer from COVID to support people who are suffering from COVID.

Revival After Pandemic: Promoting Mental Health in Post COVID-19 In Indonesia

Rahmat Hidayat, SPsi, MSc, PhD, Indonesia

- Impact on psychological and mental health
 - Increase in psychological and mental health disorders
 - Increase in risk factor
 - Decrease in mental health resources due to budget reallocation and accessibility of mental health service
- The challenge to psychological service
 - Evidence-based online service
 - Online psychoeducation
 - Telecounseling



Awards

Criteria are used to make decisions including 6 domains; clarity

- 1. Namely Clarity
- 2. content
- 3. Style & Delivery
- 4. use of visual aid
- 5. integration of knowledge
- 6. ability to answer the question

Each domain has 5 levels of achievement, which are excellent, good, adequate, inadequate, and no effort.

*The committee is scoring simultaneously and individually.

Excellent presentation Award

Justin DeMaranville

"Relationship between engagement in meaningful activities and satisfaction with life: A study on undergraduate occupational therapy students"

Best Presentation Award

Ora-orn Poocharoen

"Relationship between engagement in meaningful activities and satisfaction with life: A study on undergraduate occupational therapy students"

Best Presentation Award

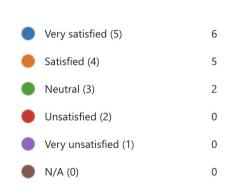
Sharon Mary George

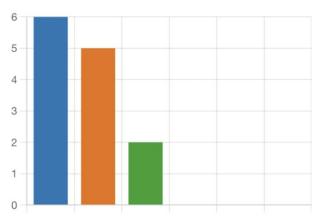
"Relationship between engagement in meaningful activities and satisfaction with life: A study on undergraduate occupational therapy students"

Feedback

Online survey (13 responses)

- 1. How satisfied are you regarding the announcement and advertisement of the conference?
 - : 46% very satisfied, 39% satisfied, 15%Neutral



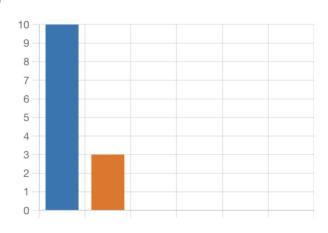


Comment:

"It was a short period of time to register before the event will take place"

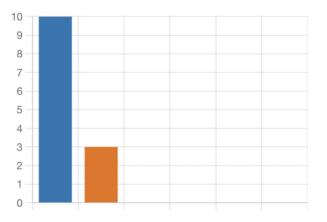
- 2. How satisfied are you regarding the information provided to conference attendees?
 - : 77% very satisfied, 23% satisfied





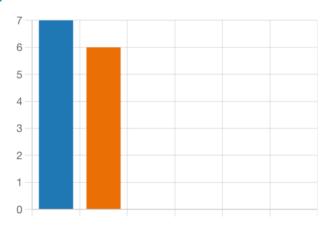
3. How satisfied are you regarding the registration process?

- : 77% very satisfied, 23% satisfied
 - Very satisfied (5)
 Satisfied (4)
 Neutral (3)
 Unsatisfied (2)
 Very unsatisfied (1)
 N/A (0)



4. How satisfied are you regarding the conducting of the conference via Zoom meeting program?

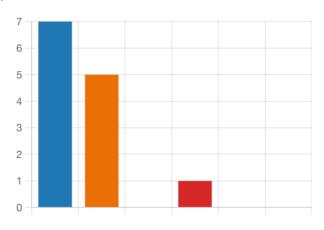
- : 54% very satisfied, 46% satisfied
- Very satisfied (5)
 Satisfied (4)
 Neutral (3)
 Unsatisfied (2)
 Very unsatisfied (1)
 N/A (0)



5. How satisfied are you regarding the conference's schedule?

: 54% very satisfied, 38% satisfied, 8% unsatisfied

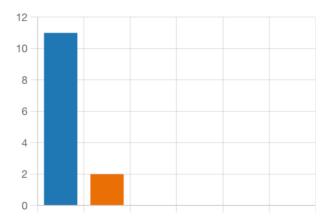




How satisfied are you regarding the speakers' knowledge and 6. relevant to the topics?

: 85% very satisfied, 15% satisfied

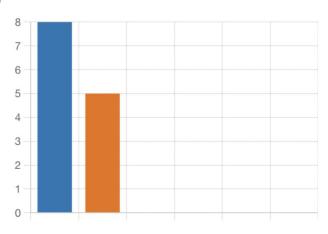
- Very satisfied (5) 11 Satisfied (4) 2
- Neutral (3)
- Unsatisfied (2) 0 Very unsatisfied (1) 0
- N/A (0)



7. How satisfied are you regarding the opportunities to participate in the discussion?

: 62% very satisfied, 38% satisfied

- Very satisfied (5) Satisfied (4) 5 Neutral (3) 0 0
- Unsatisfied (2)
- Very unsatisfied (1)
- N/A (0)

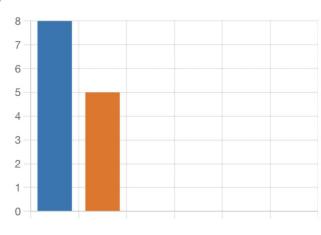


8. How satisfied are you regarding the services received throughout the conference?

: 62% very satisfied, 38% satisfied

0

- Very satisfied (5) 8 Satisfied (4) Neutral (3) 0 Unsatisfied (2) Very unsatisfied (1) 0
 - N/A(0)



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