

# Mental Health Research Conference (MHRC2024) and Network of education and training in mental health (nET-MH2024)

## Mental Health: A Universal Necessity

3<sup>rd</sup> Mental Health Research Conference (MHRC2024) and  
4<sup>th</sup> Network of Education and Training in Mental Health (nET-MH2024)

March 28<sup>th</sup>, 2024

8:30 – 18:00 Bangkok time (GMT+7)

Virtual Conference on Zoom

THEME: Mental Health: A Universal Necessity



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# Welcome to the conference

## From the Dean of the Multidisciplinary and Interdisciplinary School

Greetings.

I'm really honored to give the welcoming address for the Third Mental Health Resource Conference and the Fourth Network of Education and Training in Mental Health meeting.

I believe that this conference is one that can be a significant milestone for advancing the awareness, understanding, and work in the field of mental health.

The IMMh program is a great example of people who work towards advancing this field, with graduate students publishing papers in high-index journals. The program is now extended to provide an opportunity for continuing their studies and receiving PhD degrees and we hope to welcome new students in that program next study year.

This conference we are attending today is a wonderful opportunity for us to learn from each other, share our experiences, and understand the challenges we face in our respective cultures. I am looking forward to hearing from all the speakers and presenters here today. I wish everyone a productive and informative conference and I hope to see you all next year, perhaps joined by the new mental health PhD students as well!

Finally, I would like to say thank you to all the speakers, and presenters, Professor Danny for being the keynote speaker, and the MHRC organizing committee for being here today and working hard to make this happen.



## From the International Master of Science program in Mental Health (iMMH)

Greetings!

Good morning, good afternoon, and good evening, everyone. I am so honored to extend a warm welcome to everyone, including the Dean of the Multidisciplinary and International Interdisciplinary School of CMU, the Speakers, the Researchers, the Organizing Committee, and the Delegates. On behalf of the Mental Health Research Conference Organizing Committee and the International Master of Science Program in Mental Health, iMMH at CMU, I'm thrilled to have all of you here for the third MHRC 2024, and the fourth nET-MH meeting.

As the world recovers from the COVID-19 pandemic, people are resuming their Pre-COVID-19 activities and responsibilities and we need to prepare ourselves to adapt to forthcoming challenges and changes. The pandemic has highlighted the importance of mental health knowledge and experience. We have realized that mental health is a concern for everyone. We believe that every individual can contribute to the development of mental health knowledge. We cannot solve mental health problems alone, and it is essential to expand knowledge to all groups of people and of all professions. We must understand mental health and the meaning of mental health for people with different backgrounds and earnestly attempt to restore and prevent mental health problems regardless of our professions, generations, or cultures. We must develop our own and others' mental health sufficiently to cope with the inevitable changes in the world.

It is inspiring to see speakers, researchers, and presenters from various countries, including the United States, Austria, Hungary, the Philippines, Indonesia, and Thailand, participating in this conference. Let's seize this opportunity to work together and positively impact the world. I thank everyone for joining us today.

Thank you and have a good day!



# The people

## Conference organizing committee

### Committee Chairperson

- |                                   |   |
|-----------------------------------|---|
| 1. Professor Nahathai Wongpakaran | Chairperson of Master of Science<br>Program in Mental Health<br>(International Program) |
|-----------------------------------|---|

### Academic Administration

- |  |  |
|--|--|
| 1. Professor Tinakon Wongpakaran               | Committee Vice-Chairperson<br>and Academic Committee |
| 2. Associate Professor Peerasak Lertrakarnnon  | Academic Committee                                   |
| 3. Professor Dr. Patraporn Bhatarasakoon       | Academic Committee                                   |
| 4. Assistant Professor Rewadee Jenruamjit      | Academic Committee                                   |
| 5. Assistant Professor Chaiyun Sakulsriprasert | Academic Committee                                   |
| 6. Mr. Justin DeMaranville                     | Academic Committee                                   |

### Coordination and public relations

- |   |  |
|---|--|
| 1. Assistant Professor Charuk Singhapreecha | Director of Coordination and<br>Public Relations |
| 2. Assistant Professor Jiranan Griffiths    | Director of Coordination and<br>Public Relations |
| 3. Dr. Chidchanok Ruengorn                  | Director of Coordination and<br>Public Relations |
| 4. Ms. Alla Glushich                        | Director of Coordination and<br>Public Relations |

- |   |   |
|---|---|
| 5. Ms. Khin Moe Myint                     | Director of Coordination and<br>Public Relations                          |
| 6. Assistant Professor Penkarn Kanjanarat | Secretary and Coordination<br>Committee and Public Relations              |
| 7. Ms. Natthinee Sawat                    | Assistant Secretary and<br>Coordination Committee and<br>Public Relations |
| 8. Ms. Rapassa Thewabhuditr               | Assistant Secretary and<br>Coordination Committee and<br>Public Relations |

# The organizations

## Partner organizations

### The International Master of Mental Health (iMMH)

This meeting is being 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

### Purpose and objectives

- Organize an international academic conference on mental health research
- Organize the 4<sup>th</sup> 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 themes of the meeting

For this year, we continued the concept from last year conference (Mental health in post-covid-19 era) focus on positive mental health. In order to improve mental health after covid-19 era and prepare for natural and unnatural threat in the future.



## Program overview

Time (GMT+7)	Conference Program
8.30-9.00	<p><b>MHRC 2024 Opening remarks and recognitions</b></p> <p>Chair of MHRC 2023: Prof. Nahathai Wongpakaran, M.D., FRCPsychT</p> <p>Opening address: Assoc. Prof. Apichat Sopadang, Ph.D., Dean of Multidisciplinary and Interdisciplinary, CMU</p> <p>Moderator: Asst. Prof. Penkarn Kanjanarat, PhD</p>
9.00-9.30	<p><b>Keynote session: My International Life: Confessions of a Peripatetic Psychologist</b></p> <p>Prof. Danny Wedding, Ph.D., MPH, USA</p> <p>Moderator: Prof. Tinakon Wongpakaran, MD, FRCPsychT</p>
9.30-10.45	<p><b>Symposium session I: Mental Health: A Universal Necessity</b></p> <p>Moderator: Chidchanok Ruengorn, PhD</p> <p><b>Mindfulness, Habits and Mental health: Keys to Happiness in a Chaotic World</b></p> <p>Clin. Prof. Ronald O'Donnell, PhD, USA</p> <p><b>Boosting Positive Mental Well-being as a Defense Against Negativity in Mental Health</b></p> <p>Prof. Tinakon Wongpakaran, MD, FRCPsychT, Thailand</p> <p><b>Placing Psychologist in Indonesian Primary Health Care: A Significant Effort for Providing Universal Access for Mental Health Service</b></p> <p>Dr. Diana Setiyawati, PhD, MHSc Psy, Indonesia</p> <p><b>Note: 20 minutes and 5 minutes Q&amp;A /speaker</b></p>
10.45-11.00	Morning break
11.00-12.00	<p><b>Research Presentation Session 1:</b></p> <p>Discussant: Prof. Patraporn Bhatarasakoon, PhD., MSN, DIPP, APPMHN, RN, FAAN</p> <p>Co-discussant: Asst. Prof. Rewadee Jenraumjit, BPharm, BCP</p> <p><b>The role of meditation in the relationship between attachment and loneliness among the long-term care population in Thailand</b></p> <p>Khin Moe Myint, Thailand</p>

	<p>Effectiveness of mindfulness-based relaxation techniques on mental well-being during political crisis</p> <p>Khine Myint Oo, Myanmar</p> <p>Buddhist death recollection moderates the influence of stress on depression</p> <p>Justin DeMaranville, Thailand</p> <p>Buddhist insights: monastic perspectives on enhancing senior mental health in Thai communities</p> <p>Saowalak Langgapin, Thailand</p> <p><b>Note: 10 minutes presentation and 3 minutes Q&amp;A / presenter</b></p>
<b>Time (GMT+7)</b>	<b>Conference Program</b>
<b>12.00-13.00</b>	Lunch break
<b>13.00-14.30</b>	<p><b>Research Presentation Session 2:</b></p> <p>Discussant: Assoc.Prof.Peerasak Lerttrakarnnon, MD</p> <p>Co-discussant: Asst.Prof.Rewadee Jenraumjit, BPharm, BCP</p> <p>Social inhibition and depression among couples who are parents of children with autism spectrum disorder: the mediating role of family support</p> <p>Ting Pan, Thailand</p> <p>Impact of oophorectomy on the occurrence of depressive symptoms following hysterectomy in premenopausal women</p> <p>Preeyaporn Jirakittidul, Thailand</p> <p>Psychometric property of the Chinese version of the Core Symptom Index: A study in Chinese parents of children with autistic spectrum disorders</p> <p>Yu Chang, Thailand</p> <p>PEERS - Psychosocial care services for students at the Bertha von Suttner University (BSU) Outpatient Clinic</p> <p>Raphaela Kaisler, Austria</p> <p>A Study of social anxiety symptoms among middle-aged teachers in secondary education schools in Chiang Mai Province, Thailand</p> <p>Lihan Guo, Thailand</p>

	<p>Anxiety and associated factors among Chinese preschool teachers: A cross-sectional study</p> <p>Xiaohan Wang, Thailand</p> <p>Satisfaction of housing and community environment questionnaire development: A pilot study in older people living independently in the rural areas of Chiang Mai Province</p> <p>Baoqi Liu, Thailand</p> <p>Text-based Online Mental Health Counselling</p> <p>Simon Gabriella, Hungary</p> <p><b>Note: 10 minutes presentation and 3 minutes Q&amp;A /presenter</b></p>
14.30-14.45	Afternoon break
14.45-15.45	<p><b>Symposium session II:</b></p> <p>Moderator: Asst.Prof.Jiranan Griffiths, PhD, and Mr.Justin DeMaranville, MSc</p> <p><b>The Role of Cognition and Emotions in Mental Health</b></p> <p>Asst. Prof. Jonathan C. De La Cerna, Philippines</p> <p><b>Mental Health and Inclusion</b></p> <p>Prof. Kurt Fellöcker, DSA, MA, MSc, Austria</p> <p><b>Measuring resilient personality with ffICD-11 (Five-Factor Personality Inventory for ICD-11: A facet-level assessment of the ICD-11 trait model)</b></p> <p>Assoc. Prof. Zsuzsanna Kövi, Hungary</p>
15.45-16.00	<p><b>MHRC2024 Research presentation award ceremony and closing</b></p> <p>Moderator: Chidchanok Ruengorn, PhD</p>
16.00-18.00	<p><b>4<sup>th</sup> Network in Education and Training in Mental Health meeting (nET-MH)</b></p> <p><i>Members only</i></p>

# MENTAL HEALTH RESEARCH CONFERENCE 2024

**THEME:**  
**MENTAL HEALTH: A UNIVERSAL NECESSITY**

**Keynote session:**  
**My International Life:**  
**Confessions of a Peripatetic**  
**Psychologist**

**Prof. Danny Wedding, Ph.D., MPH**

Saybrook University  
USA

## CALL FOR ABSTRACT

**Abstract Submission: Now - March 22, 2024**

**Submit via: <https://www.immh-cmu.org/abstract-submission>**

**Conference Registration: Now - March 22, 2024**

**DEADLINE  
CHANGED!**



## OUR SPEAKERS



**Asst. Prof. Jonathan C. De La Cerna**  
University of the Philippines Cebu  
Philippines



**Dr. Diana Setiyawati, Ph.D., M.HSc.Psy**  
Gadjah Mada University  
Indonesia



**Clin.Prof. Ronald O'Donnell, Ph.D.**  
Arizona State University  
USA



**Prof. Tinakon Wongpakaran, M.D., FRCPsychT**  
Chiang Mai University  
Thailand



**Prof. Kurt Fellöcker, DSA, MA, MSc**  
St. Pölten University of Applied Sciences  
Austria



**Assoc. Prof. Zsuzsanna Kövi, Ph.D.**  
Károli Gáspár University  
Hungary



QR Code  
MHRC2024 Website  
and Registration



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**[www.immh-cmu.org](http://www.immh-cmu.org)**



**[mhrc-grad@cmu.ac.th](mailto:mhrc-grad@cmu.ac.th)**

**28 March,  
2024**

**Starts at  
8:30 am**

## Keynote Session

: My International Life: Confessions of a Peripatetic Psychologist

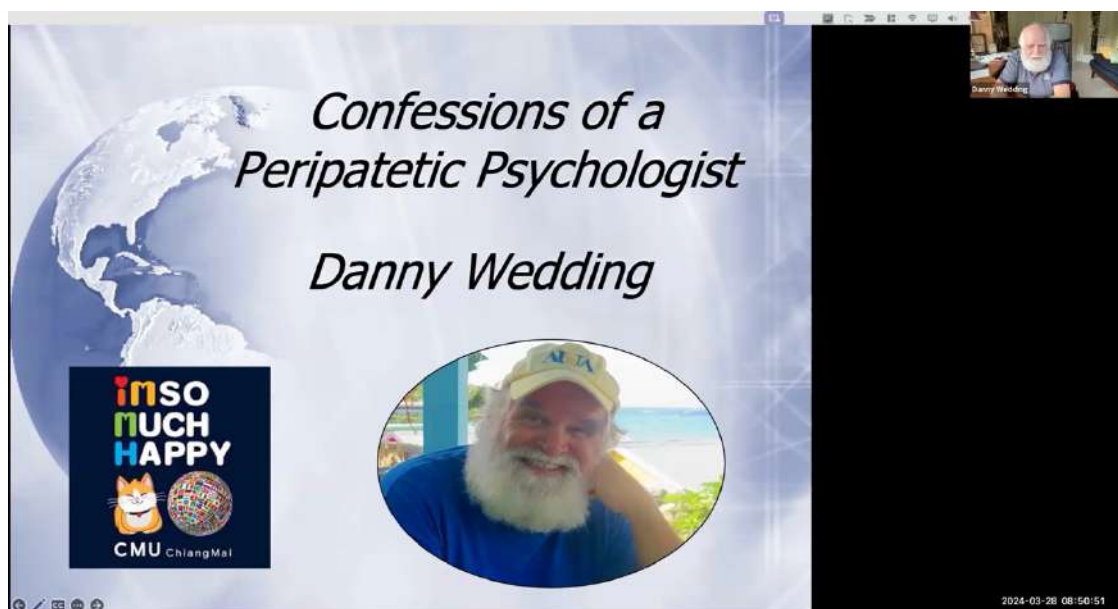
Prof. Danny Wedding, Ph.D., MPH

Saybrook University USA

Moderator: Prof. Tinakon Wongpakaran, M.D., FRCPsychT

### Contents:

Professor Danny Wedding shared his wonderful experiences as a psychologist working with a number of universities throughout the world. He started with his genuine interest in Asian culture, then expanded it into a big world of movies mental health, and international psychology. He uses a different color of eggs with the same look after frying as a great example, addressing that people share things in common even if the skin color/ appearance looks distinct. In the end, He talked about the emerging issues of advances in Artificial intelligence and health, and he also brought the controversial but interesting subject of robots into the discussion. As an outstanding psychologist, he also shares his concerns about war, peace, inequity, and many other issues that are related to the mental health domain.



## Symposium Session 1

: Mindfulness, Habits and Mental health: Keys to Happiness in a Chaotic World

**Clinic. Prof. Ronald O'Donnell, PhD, USA**

Moderator: Chidchanok Ruengorn, PhD

### Contents:

Increased prevalence of non-communicable diseases and the challenges in adapting behavioral interventions to low- to middle-income countries (LMIC), the importance of evidence-based and brief training among mental health practitioners in LMIC is highlighted. As one of the examples of such attempts, the combination of mindfulness-based practices, habit science, and the psychology of happiness is proposed.

The habit change starts with 1) picking a small routine and 2) setting reminders. 3) be persistent or repetitive for weeks/months. Habit is “a behavior pattern or routine acquired by frequent repetition, that has become nearly or completely involuntary, that repeats with regularity.” Here, identifying the specific habit loop is the initial step for promoting new habits. Cue, routine/response, and reward are the key elements of the habit loop. However, replacing the bad habit is challenging. It requires the analysis of habit loops and consistent steps in breaking the habit. To help this process, mindfulness, an awareness that focuses on the present moment and surroundings, could be applied as the reward in the habit loop.

In addition, happiness is argued to be largely shaped by "how we spend time." From the approach of habit science, time tracking analysis and promotion of objective sense in time can help promote happiness. The deliberate use of time to focus on activities that increase confidence and well-being is the key to better change.





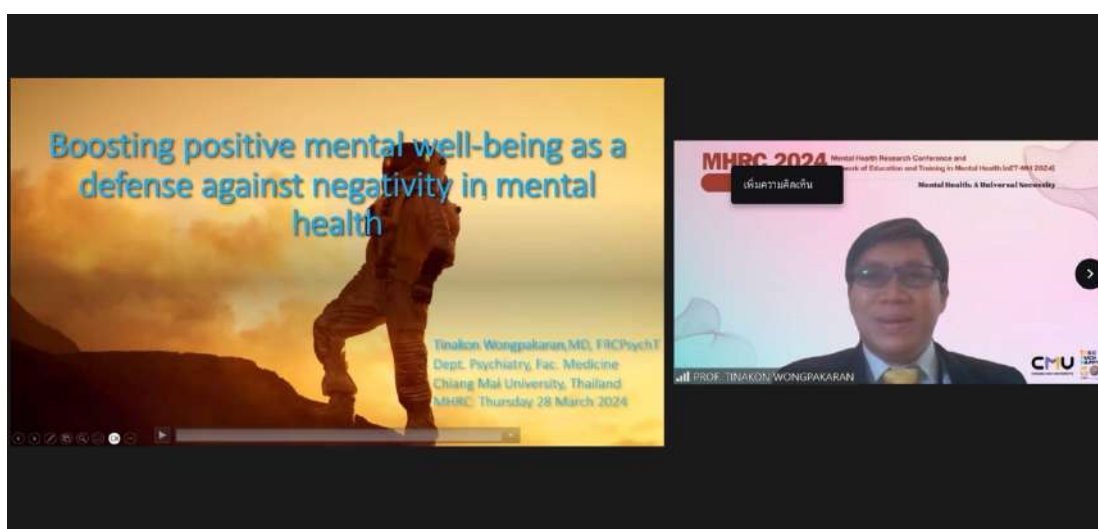
## : Boosting Positive Mental Well-being as a Defense Against Negativity in Mental Health

**Prof. Tinakon Wongpakaran, M.D., FRCPsychT.**

### **Contents:**

Positive mental health includes but is not limited to kindness, gratitude, resilience, and optimism. Along with the psychosocial protective factors, it is argued that positive mental health could mitigate mental illness, where it is posited to start with predisposing and biological factors. Thus, positive health-related interventions are thought to impact epigenetics through the shapes of inner strength. For instance, meditations, five precepts, equanimity, and death contemplation are documented (although scientific evidence is still short for several interventions) to buffer the depressive symptoms arising from neuroticism and perceived stress.

Following these findings, it is worth asking the question: to what extent can inner strength prevent psychiatric disorders, particularly the ones that involve trauma? Several studies showed that meditation could reduce stress by increasing autonomic balance. With the gaps in research finding firm evidence, further study of the roles of positive mental health is encouraged.



# Placing Psychologist in Indonesian Primary Health Care: A Significant Effort for Providing Universal Access for Mental Health Service

**Dr. Diana Setiyawati, PhD, MHSc Psy, Indonesia**

## Contents:

Mental health (MH) has been overlooked mainly in low- to middle-income countries, including Indonesia. Corresponding to this context, primary care is proposed to be the affordable MH service to communities to close the MH treatment gap. WHO's suggestion is underpinned by the importance of the integration of mental health in the community for reducing stigma and barriers to care.

Particularly in Indonesia, as of 2020, 10,139 primary healthcare clinics are available, and approximately 30,000 residents visit the primary care clinic. Nevertheless, the challenge lies in the health system and MH budgeting, where less than 1% of the total health budget consists of spending on the mental health budget, and 97% of them are allocated to mental hospitals. Indonesia's health expenditure per capita is also lower than that of other Southeast Asian countries such as Malaysia, Thailand, and Vietnam.

Currently, the barriers to primary care and integration of psychology in Indonesia are mainly due to the lack of shared knowledge and objectives among health professionals. Particularly, psychologists are treated as generalists but as specialists. The initiatives emerged in 2004 in Sleman District with the collaboration of the Faculty of Psychology, Universitas Gadjah Mada. Improvements are still needed among psychologists in primary care in Indonesia, ranging from diagnosis skills, evidence-based intervention, and curriculum integration to promoting knowledge on the biological aspects of MH, risk management, and policy advocacy.





## Research Presentation Session 1

: The Role of Meditation in The Relationship Between Attachment and Loneliness among The Long-term Care Population in Thailand

**Knin Moe Myint, Thailand**

**Discussant:** Prof.Patraporn Bhatarasakoon, PhD., MSN, DIPP.APPMHN, RN, FAAN

**Co-discussant:** Asst.Prof.Rewadee Jenraumjit, BPharm, BCP

### Contents:

The number of persons aged 60 years old and older have been increased. This has prompted a global mission to promote the mental health of older persons. Amongst a range of risk factors which influence mental health, early life experience and attachment, often compounded by loneliness in later life, are key. Research suggests that meditation may serve as a buffer against mental health problems. Objectives: The aim of the study was to appraise the effect of meditation on the association between attachment and loneliness among residents of long-term care facilities in Thailand. Methods: A cross-sectional study of xxx older people in long-term care facilities in Thailand have been investigated. The Revised Experience of Close Relationship questionnaire, Inner-Strength Based Inventory, and the Revised version of the University of California Los Angeles Loneliness Scale were used to investigate attachment, meditation, and loneliness, respectively. Moderation analyses were conducted to inv

Keywords (no more than 5): Attachment, Loneliness, Meditation, LTC



# : Effectiveness of Mindfulness-based Relaxation Techniques on Mental Well-being during Political Crisis

**Khine Myint Oo, Myanmar**

## **Contents:**

**Objective:** Since the 2021 military coup civilians in Myanmar have been exposed to extreme forms of political violence and other life-threatening situations. Ordinary civilians are impacted not only by political upheaval but by the disruptions in their livelihoods and socioeconomic realities as a result of the coup. Socioeconomic difficulties include displacement, job loss, homelessness, and other forms of economic uncertainty, all of which can lead to depression, anxiety, and many other psychological problems. Mindfulness-based relaxation techniques have been effective in managing psychological disturbances during uncertain times. The study wants to measure the effectiveness of mindfulness-based relaxation techniques on reducing anxiety, managing stress, and promoting the mental well-being of the participants who join the weekly Emotional Support Session.

**Design:** Descriptive research design was used with 35 participants between age 18 to 45 across Myanmar who joined the Emotional Support Session. This is a preliminary survey to understand the mental well-being affected by political violence and to create effective interventions for the target population in the future.

**Method:** This paper is a self-report survey by random sampling from weekly Emotional Support Sessions. 35 adults between 18 to 45 years of age have joined the mindfulness-based emotional support session over the past three years. Questionnaires survey collected binary data which explore to understand the mental well-being of the people living inside the country.

**Result:** Findings of the self-reported survey indicate that the participants benefit from the relaxation techniques used in the emotional support session and found useful to reduce stress and anxiety and improve mental well-being. Among the respondents (22%) joined weekly, (28%) joined often and (28%) joined occasionally. The participants answered the effectiveness of the relaxation exercises to reduce stress and anxiety.

Conclusion: This paper is a preliminary survey, finding the effectiveness of practicing mindfulness-based relaxation techniques on managing psychological responses during uncertain time. The result showed that the sessions help them to cope with their daily stress, however, the level of life satisfaction is still affected by the current instability. Future research will be recommended to explore the factors which affect the overall life satisfaction so that effective intervention can be provided based on the result to promote mental well-being of the civilians in Myanmar.



Mental Health Research Conference 2024

## Effectiveness of Mindfulness-based Relaxation Techniques on Mental Well-being during Political Crisis

Khine Myint Oo  
PhD student Faculty of Social Science, Chiang Mai University,  
Chiang Mai, Thailand

The slide includes a central illustration of a purple head profile containing a brain, a lightbulb, a clock, and a calendar. A small video feed of the presenter is visible in the top right corner.

# : Buddhist Death Recollection Moderates the Influence of Stress on Depression

Justin DeMaranville, Thailand

## Contents:

**BACKGROUND:** Death recollections is a meditation practice with little previous research. It is an advanced meditation that orients a practitioner's calm attention toward death. This meditation is practiced by adolescents and adults in Thailand and it is discussed in Theravada Buddhist scriptures as a method to reorient oneself toward the spiritual life. As the teenage years are marked by stress and depressive symptoms, our objective was to determine death recollection meditation influenced adolescent mental health outcomes.

**DESIGN:** This is a cross-sectional study investigating the role of stress and death recollection practice as moderators of depression.

**METHODS:** Teenage boarding school students aged 15 to 18 years old from five Buddhist and secular schools in northern Thailand provided responses about demographic and meditation information as well as completed the questionnaires Perceived Stress Scale (PSS), Outcome Inventory: Depression Subscale (OI: Depression), and Inner Strength Based Inventory: Meditation (ISBI: Meditation). Moderation analysis was conducted with SPSS ver. 27 and PROCESS, ver. 4.0.

**RESULTS:** The sample comprised 453 students (88% female) mean score aged 16.35 (SD 0.96). This population had moderate stress 24 (4.5), low depression 3.97 (SD 3.6), and an 'often but not every day' meditation frequency 2.97 (1.38). There were 46 students (10.2%) who practiced death meditation in the past month. As anticipated, death recollection practice moderated the relationship between stress and depression, indicating those who practiced had fewer symptoms of depression due to stress. The moderation effect was significant:  $B = 0.129$ , standard error = 0.060, 95% CI = .246 to .012 after controlling for the meditation frequency of the population.

**CONCLUSIONS:** The significant moderation effect suggests that death recollections may influence how stress can contribute to the development of depression symptoms in boarding school students. A longitudinal study is recommended to confirm the causal nature

of this meditation type. Further research may be used to inform interventions that explore this advanced meditation practice.

# BUDDHIST DEATH RECOLLECTION AS A MODERATOR OF STRESS AND DEPRESSION

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Justin DeMaranville MSc

Presented at


3<sup>rd</sup> Mental Health Research Conference

28 March 2024

MHRC: DeMaranville, Justin



MHRC 2024



Justin DeMaranville

# : Buddhist Insights: Monastic Perspectives on Enhancing Senior Mental Health in Thai Communities

Saowalak Langgapin, Thailand

## Contents:

Buddhism significantly influences the well-being of the elderly, especially in regions like Thailand, positively impacting overall health. Despite this, there is a knowledge gap regarding the specific impact of Buddhist practices on the mental health of seniors, particularly from monks' perspectives. This qualitative study addresses this gap by exploring the contributions and practical approaches of monastic practitioners in enhancing the mental health of Thailand's senior population. Twenty health volunteer monk initiatives across ten provinces in Northern Thailand were interviewed, aiming to understand the underlying principles of the Buddhist approach to senior mental health. Thematic analysis identified two core themes: "Existing Buddhist Approaches" and "Enhancing Monastic Engagement." The first theme includes sub-themes emphasizing the assimilation of Buddhist principles into daily life, active engagement in Buddhist activities, and integration within communal contexts. The second theme comprises sub-themes focusing on the pivotal role of monastics, the embodiment of monastic images for accessibility, the utilization of monastic techniques for mental well-being, and challenges obstructing monastic involvement. These findings highlight the nuanced ways Buddhism contributes to seniors' mental well-being in Thai communities. In conclusion, the research emphasizes the crucial role of Buddhist practices and monks in community settings, actively promoting the mental well-being of seniors in Thailand. This study holds relevance for interdisciplinary domains such as spirituality, religious studies, mental health, and senior care policy, providing a detailed understanding of how Buddhist principles and monastic engagement enhance the mental well-being of the senior population.

**Keywords:** Buddhist Communities; Senior citizens; Psychological Support; Spiritual Resilience; Thematic Analysis

## Research Presentation Session 2

### : Social Inhibition and Depression among Couples who are Parents of Children with Autism Spectrum Disorder: The Mediating Role of Family Support

**Ting Pan, Thailand**

**Discussant:** Assoc.Prof.Peerasak Lerttrakarnnon, MD., FRCFPT

**Co-discussant:** Asst.Prof.Rewadee Jenraumjit, BPharm, BCP

#### Contents:

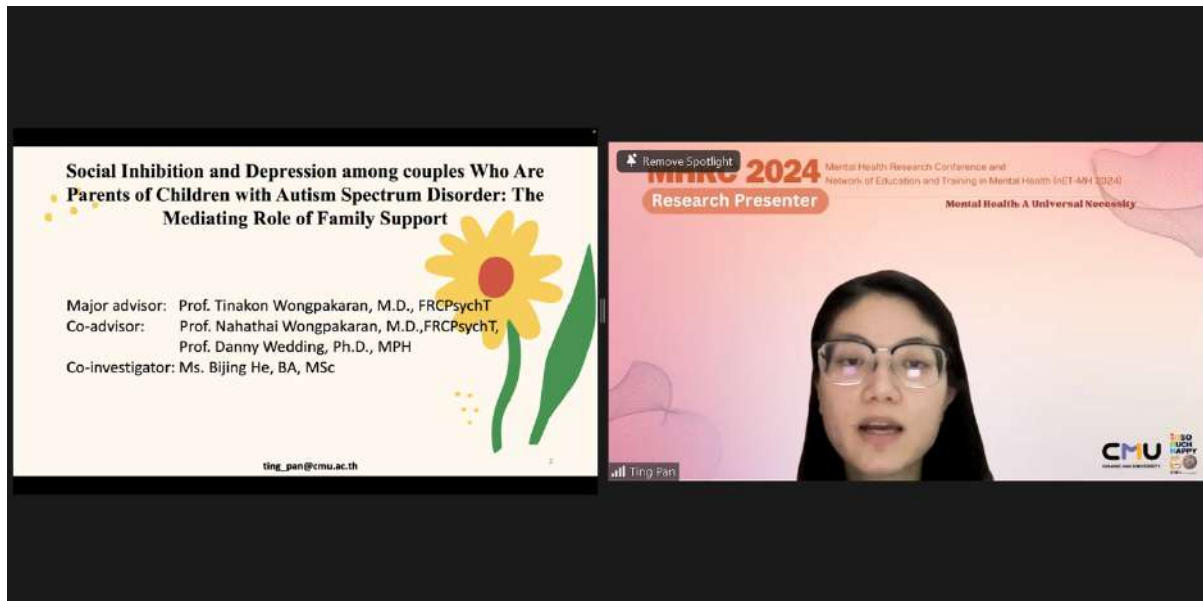
**Background:** The parents of children with autism spectrum disorder (ASD) experience more depression than those of children without ASD, which may further aggravate the condition of these children. Social inhibition is one of the risk factors for depression and a common problem these parents meet. Family support can be productive against depressive symptoms and a mediator on depression.

**Objective:** The aim of the present study was to investigate how the social inhibition of couples might impact either their own or their partner's experience of depression, with 'perceived family support' serving as a mediating factor among parents of children with ASD within the dyadic framework.

**Method:** The study conducted a cross-sectional analysis with secondary data. The actor-partner interdependence mediation model analysis was applied among 397 pairs of parents from China. Inventory for Interpersonal Problems, Multidimensional Scale for Perceived Social Support, and Core Symptom Index were assessed.

**Results:** The mean age of participants was 35.85 (SD 3.26). There were direct and indirect actor effects. Both wives' and husbands' depression was predicted by their own levels of social inhibition ( $\beta = 0.290-0.362$ ,  $p \leq 0.001$ ). Regarding indirect effect, both wives' and husbands' social inhibition were associated with their own depression through their perceived family support ( $\beta = 0.010$ ,  $p < 0.001$ ). For the partner effect, there was an indirect partner effect: wives' social inhibition significantly impacted husbands' depression through the wives' perceived family support ( $\beta = 0.003$ ,  $p = 0.018$ ).

Conclusions: In line with related studies, social inhibition was associated with depressive symptoms. At the same time, perceived family support could be the mediator on depression. Apart from targeted intervention to parents' depression through social inhibition reduce and family support access, they may need to tailor special parental education and support based on their difficulties to help them better take care of their children.



The screenshot shows a video conference interface. On the left, a presentation slide titled "Social Inhibition and Depression among couples Who Are Parents of Children with Autism Spectrum Disorder: The Mediating Role of Family Support" is displayed. The slide lists the major advisor as Prof. Tinakon Wongpakaran, M.D., FRCPsychT, and co-advisors as Prof. Nahathai Wongpakaran, M.D., FRCPsychT, and Prof. Danny Wedding, Ph.D., MPH. The co-investigator is Ms. Bijing He, BA, MSc. The email address ting\_pan@cmu.ac.th is at the bottom. On the right, a woman with glasses is speaking. The background of the video feed includes a banner for "MHRC 2024" (Mental Health Research Conference and Network of Education and Training in Mental Health) and the CMU logo.

**Social Inhibition and Depression among couples Who Are Parents of Children with Autism Spectrum Disorder: The Mediating Role of Family Support**

Major advisor: Prof. Tinakon Wongpakaran, M.D., FRCPsychT  
Co-advisor: Prof. Nahathai Wongpakaran, M.D., FRCPsychT, Prof. Danny Wedding, Ph.D., MPH  
Co-investigator: Ms. Bijing He, BA, MSc

ting\_pan@cmu.ac.th

**MHRC 2024** Mental Health Research Conference and Network of Education and Training in Mental Health (NET-MH 2024)  
Research Presenter  
Mental Health: A Universal Necessity

CMU



# : Impact of Oophorectomy on the Occurrence of Depressive Symptoms Following Hysterectomy in Premenopausal Women

**Preeyaporn Jitrakittidul, Thailand**

## **Contents:**

**Objective:** Depression is considered a common psychological morbidity after a hysterectomy. In addition, the potential influence of a concurrence oophorectomy is inconclusive. This study aims to investigate the risk of oophorectomy at the time of hysterectomy on the occurrence of depression after surgery.

**Design:** Observational study

**Method:** A prospective cohort of women who underwent a hysterectomy for benign conditions during April to September 2023 were interviewed for 2 occasions, prior to surgery and 3 months after surgery. At each time point, the participant completed the Patient Health Questionnaire (PHQ-9). The PHQ-9 score and the proportion of depression after surgery were then compared between the group of women who had a hysterectomy with and without bilateral salpingo-oophorectomy (BSO). PHQ-9 scores of 5, 10, 15, and 20 represented mild, moderate, moderately severe, and severe depression, respectively

**Results:** Among 184 women initially enrolled, 159 women completed the questionnaires, including 102 women with only a hysterectomy and 57 women with a concurrence BSO. The baseline PHQ-9 score was similar between the two groups. A total of 34 women (21.4%) met at least mild depression criteria in the 3 months after surgery, which included 18 and 16 women in hysterectomy with and without BSO group, respectively (17.7% vs. 28.1%,  $P=0.123$ ). The PHQ-9 score after surgery was significantly higher in the concurrence BSO group ( $3.7\pm2.6$  vs.  $2.5\pm2.7$ ,  $P=0.009$ ), with a mean difference of 1.17 (95% CI 0.29 to 2.04).

**Conclusions:** Risk of depression following a hysterectomy seems to be higher in a concurrence oophorectomy procedure. It may be of value to consider these findings in the decision about prophylactic BSO at the time of hysterectomy for benign conditions. A long-term follow-up will be necessary for this psychological outcome.

**Keywords:** hysterectomy, depression, concurrent oophorectomy

# : Psychometric Property of the Chinese Version of the Core Symptom Index: A study in Chinese couples

Yu Chang, Thailand

## Contents:

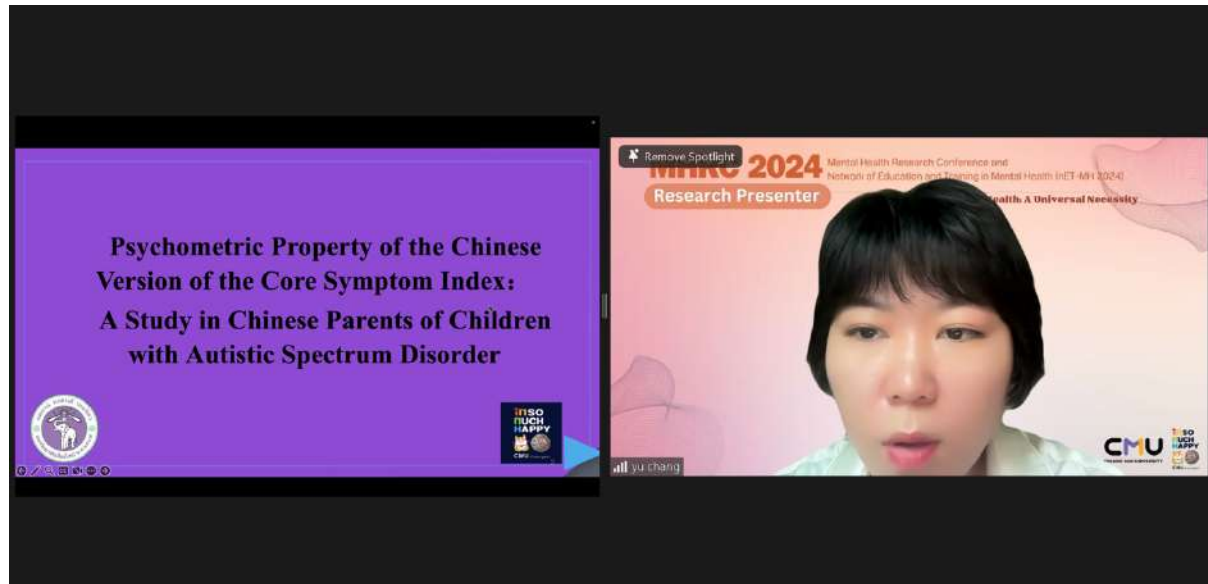
**Objectives:** The purpose of this study was to examine the psychometric properties of the Chinese version of the Core Symptom Index (CSI) using confirmatory factor analysis (CFA) in a sample of Chinese parents raising children with autism.

**Methods:** The sample was between the ages of 25-48 years. They completed the CSI, Interpersonal Problems Inventory (IIP), and Couple Satisfaction Index. A series of CFA methods was conducted and compared. We used Pearson's correlation analysis, ANOVA, and calculated model-based reliability omega. The model fits of CSI were compared for the unidimensional model, first-order model, higher-order factor model, and bifactor model. The Interpersonal Problems Inventory (IIP) and Coupled Satisfaction Index were compared with the Core Symptom Index (CSI), respectively, to verify the performance of the CSI in terms of convergent and discriminant validity. Lastly, the invariance test due to sex, age, and education was performed.

**Results :** The bifactor model provided the best fit to the data. The Chinese version of the CSI had a high degree of consistency. In terms of internal consistency, the Omega values for each factor were Anxiety=0.90, Depression=0.87, and Somatization=0.91. The AVE and CR reaching the set ranges (Ave = 0.54, CR = 0.91). There was a positive correlation between the Core Symptom Index (CSI) and the Interpersonal Problems Inventory (IIP), and a significant difference with the Couple Satisfaction Index, suggesting that convergent and discriminant validity was established. The invariance test demonstrated that no item biases were detected due to sex, age, and education

**Conclusion:** The Chinese version of the CSI has demonstrated good reliability and validity. The results support a three-factor solution model. However, these findings indicate that the Chinese version of the CSI remains adequately unidimensional, ensuring consistency in total score interpretation. Given its brevity and inclusion of common psychiatric symptoms

such as anxiety, depression, and somatization, it is suitable for use as a screening tool or outcome measure.



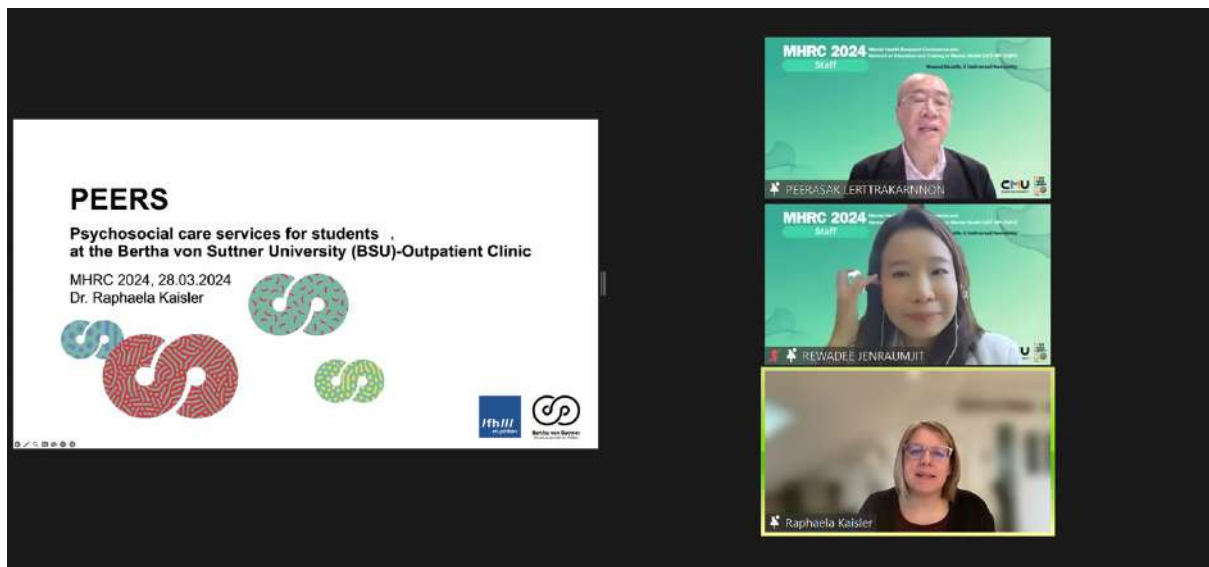
## : PEERS - Psychosocial Care Services for Students at the Bertha von Sußner University (BSU) Outpatient Clinic

Raphaela E. Kaisler, Austria

### Contents:

The demands on mental health care have increased in recent years due to the Covid-19 pandemic that is associated with mental and social problems, particularly, among children, adolescents, and students. However, access to psychosocial care is limited due to the lack of services and limited affordability. Furthermore, people with psychosocial problems are often confronted with stigmatization, discrimination, and discouragement, and feel misunderstood or mistreated by the uninformed public and institutions that are supposed to help them. Similarly, professional treatment services are sometimes seen as inappropriate or even a hindrance to recovery. Peer support can be helpful in breaking down barriers and skepticism and is used as a supplement in psychosocial care. Therefore, in this participatory research project aimed at developing a peer support system for university students and recommendations of such system for the implementation at the BSU outpatient clinic to provide adequate and student-centered care. The BSU outpatient clinic offers psychosocial care in a model region in Austria, providing practical training for students, and offering various services for socially disadvantaged people, such as psychotherapy, psychological diagnostics, and case management. In four co-creative workshops, we explored psychosocial support services for students (undergoing a training program for peer consultation) that are delivered by their peers. The project was co-led by five experienced peer counselors designing the workshop. We co-created services for students with students and a peer-training program for future peer counselors at the BSU outpatient clinics. Further, we conducted four interviews with peer trainees exploring their motivation, prior experiences with peer support, and stress and coping strategies. In a group discussion, three senior peers reflected on their work and consultation sessions to gain in-depth knowledge of their peer work. For data analysis, we interpreted the co-created services together with the senior peers and formulated recommendations for implementation at the BSU outpatient clinics. These included face-to-face consultations for students, access to other BSU outpatient clinics' services, informal and thematic group sessions led by trained peers. Interfaces with existing university's services need

to be established for referrals. We further applied Grounded Theory methodology for analyses of interviews and the group discussion. Findings underline the stance of peers that emerged as an overarching prerequisite in one's own motivation and development to become a peer counselor, which they draw on in their consultations with students. Future research should evaluate the implementation of the peer support system at BSU outpatient clinics.



# : A Study of Social Anxiety Symptoms among Middle-aged Teachers in Secondary Education Schools in Chiang Mai Province, Thailand

Lihan Guo, Thailand

## Contents:

Background: Social anxiety is a prevalent mental health concern among teachers, yet limited research exists on its prevalence and associated factors specifically among middle-aged teachers in secondary education in Thailand.

Objectives: To investigate the prevalence of social anxiety symptoms and associated sociodemographic data among middle-aged teachers in secondary education in Chiang Mai.

Methods: A cross-sectional survey design was employed, involving an online survey of teachers aged 45-59 years old from secondary schools in Chiang Mai from December 2023 to February 2024. Data on sociodemographic data, i.e., age, gender, education level, marital status, and income. Social anxiety symptoms (SAS) were surveyed using the Social Interaction Anxiety Scale and Social Phobia Scale (SIAS-6 and SPS-6).

Results: This preliminary analysis involved a total of 125 teachers from 34 public schools in Chiang Mai participating in this study. The average age of the teachers was 50.64 years old ( $SD = 4.60$ ) and this study found most of the respondents ( $n = 68$ , 54.4%) were between 45 and 50 years old, 79 female (63.2%) and 68 (54.4%) respondents were educated to a bachelor's degree. A total of 88 (70.4%) respondents indicated being in a relationship. 106 respondents (84.8%) reported having an income more than 20,000 Baht (= 551.12 USD). The mean and standard deviation for the SIAS, SPS, SIAS and SPS scores were  $4.82 \pm 4.74$ ,  $5.03 \pm 5.35$ ,  $9.86 \pm 9.78$ , respectively. A higher proportion of social anxiety symptoms was found in secondary school teachers who were female and education level ( $p < 0.05$ ). And teachers who experienced social anxiety symptoms (SIAS score  $\geq 7$ , SPS score  $\geq 2$ ) were 44 (35.2%). Age and gender were significant predictors of SIAS, SIAS and SPS total scores, and gender was a significant predictor of SPS, but age had no significant effect on SPS. In addition, we did not find any association between education, income, and marital status with social anxiety symptoms.

Conclusion: Social anxiety symptoms had high prevalence among secondary education school teachers, and age and gender were significant factors of social interaction anxiety and social anxiety symptoms.

Keywords: Social anxiety, middle-aged teachers, secondary education schools, prevalence, associated factors

The screenshot displays a video conference interface. On the left, a presentation slide titled "A Study of Social Anxiety Symptoms Among Middle-aged Teachers in Secondary Education Schools in Chiang Mai Province, Thailand" is shown. The slide includes the names of the major, co-thesis, and foreign thesis advisors, along with the presenter's name, Lihan Guo (Jasmine), and the date, 28, March 2024. On the right, three video feeds of participants are visible, each with a name tag indicating they are part of the MHRC 2024 staff. The participants are PEEASAK LERTTRAKARNNON, REWADEE JENRAUMIT, and Lihan Guo (Jasmine).

**A Study of Social Anxiety Symptoms  
Among Middle-aged Teachers in Secondary Education Schools  
in Chiang Mai Province, Thailand**

**Lihan Guo (Jasmine)**  
28, March 2024  
Multidisciplinary and Interdisciplinary School (MIdS),  
Chiang Mai University, Thailand

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- **Co- thesis advisor**  
Prof. Tinakon Wongpakaran, M.D., FRCPsychT  
Assistant Prof. Penkam Kanjanarat, B.Pharm, Ph.D.
- **Foreign thesis advisor**  
Prof. Danny Wedding, Ph.D. MPH

**MHRC 2024**  
Staff  
PEERASAK LERTTRAKARNNON

**MHRC 2024**  
Staff  
REWADEE JENRAUMIT

**MHRC 2024**  
Research Presenter  
Lihan Guo (Jasmine)

# : Anxiety and associated factors among Chinese preschool teachers: A cross-sectional study

**Xiaohan Wang, Thailand**

## **Contents:**

**Background:** Given the significant influence preschool teachers have on young children, it's imperative to assess their mental health and the factors that affect it. In China's rapidly evolving preschool education landscape, some teachers experience varying levels of anxiety. This anxiety not only impacts the teachers' mental well-being and job performance but also indirectly affects the physical and psychological development of the children they teach. Thus, this study delves into the factors contributing to anxiety among preschool teachers, examining social factors, personality traits such as Extraversion and Neuroticism, perceived stress, interpersonal challenges, resilience, and inner strength.

**Methods:** This preliminary analysis involved 122 preschool teachers, comprising 102 females and 20 males, aged between 21 and 50, with an average age of 28 years. All completed anxiety subscales of the Self-developed Questionnaire, Outcome inventory, Zuckerman-Kuhlman-Aluja, Resilience Inventory Perceived stress scale, and inner Strength-Based inventory to measure some demographic factors, anxiety symptoms, interpersonal difficulties, extraversion and neuroticism personality trait, resilience, perceived stress and inner strength. Pearson correlation and multiple regression analysis were performed to find potentially significant predictors for anxiety symptoms.

**Results:** It revealed that social factors like perceived stress ( $p < .001$ ), interpersonal difficulties ( $p < .001$ ), average daily working hours ( $p = .003$ ), and the teacher-student ratio ( $p = .002$ ) significantly influenced anxiety levels among preschool teachers and were positively correlated. Additionally, the impact of resilience ( $p < .001$ ) and neuroticism ( $p < .001$ ) on psychological factors was found to be significant and positively correlated. Extraversion ( $p < .001$ ) was found to be significant and negatively correlated.

**Conclusion:** Anxiety symptoms among preschool teachers are shaped by various social and psychological factors. Effective interventions to reduce anxiety levels should encompass measures to mitigate perceived stress, establish reasonable working hour norms, and optimize



teacher-student ratios in classrooms. In addition, resilience building should be cultivated as it is related to the decreased symptoms.

The screenshot displays a video conference interface. On the left, a presentation slide titled "RESEARCH DESIGN" is visible. It contains the following text:

**RESEARCH DESIGN**

**Gap in research:**

- Current research on anxiety in preschool teachers is limited.
- Current research has focused more on anxiety in children but not on preschool teachers.
- Many studies on the anxiety of preschool teachers in China were conducted about ten to twenty years ago. And there are very few studies that only focus on anxiety and the influencing factors of anxiety.

**Objectives of the study:**

1. To study the prevalence of anxiety symptoms among preschool teachers in China.
2. To explore the relationship between anxiety symptoms and associated factors as well as the positive and negative mental health factors including personality traits, perceived stress, interpersonal difficulties, resilience, inner strength, and anxiety among preschool teachers in China.

At the bottom of the slide, it says "Xiaonan Wang" and "Multidisciplinary and Interdisciplinary School".

On the right, a video feed shows a woman with glasses, identified as "Xiaonan Wang", speaking. The background of the video feed includes text: "Remove Spotlight 024 Mental Health Research Conference and Network of Education and Training in Mental Health (AET-MH-2024)", "Research Presenter", "Mental Health: A Universal Necessity", and "CMU 150 200+".

# : Satisfaction of Housing and Community Environment Questionnaire Development: A Pilot Study in Older People Living Independently in the Rural Areas of Chiang Mai Province

**Baoqi Liu, Thailand**

## **Contents:**

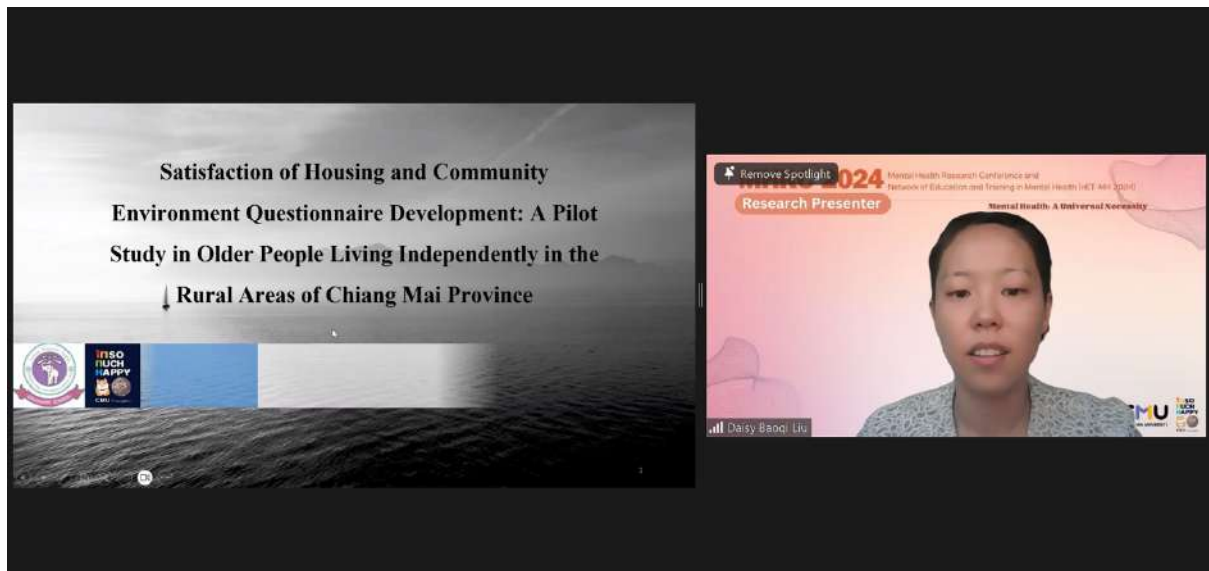
Background: Environments, including homes, and communities play a significant role in shaping what older individuals can do and achieve. The environment that people live in affects the mental health status of the elderly, through influencing opportunities, choices, and behavior. However, the limited article was found to discover the correlation between home design and mental health outcomes among Thai people, and no measurement was developed to measure how satisfied Thai people feel towards their house and community, especially in rural Thailand.

Objectives: To develop a questionnaire to measure the satisfaction level of house design and community environment among Thai elderly.

Methods: A 23-item questionnaire was developed from “Managing an environment suitable for the elderly” by the WHO, and other previous research. Comments from four experts (a geriatrist, a family doctor, an occupational therapist, and an architect) were collected and the measurement was revised accordingly. 3 experts volunteered to confirm the content validity. A cross-sectional on-site survey was conducted to test the reliability of “Satisfaction of housing and community environment” measurement, involving interviews of 20 elderly over 60 years old in Nong Kwai, Hang Dong District, Chiang Mai province from 5<sup>th</sup> March to 15<sup>th</sup> March. Internal Consistency Analysis was employed to calculate the reliability.

Result: Content validity was confirmed by three experts. The mean of “Satisfaction of community environment” subscale is 24.26 out of a total of 36 points, standard deviation is 3.56; the mean of “Satisfaction of housing environment” subscale is 21.85 out of a total of 33 points, standard deviation is 3.67. Cronbach's  $\alpha$  of community environment is 0.701 and that of house environment is 0.741,

Conclusion: The scale has a good reliability, and the content validity has been confirmed by experts. The score of this assessment is valid and statistically significant, so this scale can be used to assess the satisfaction of older Thai people with their community and house environment.



## Symposium session 2

### : The Role of Cognition and Emotions in Mental Health

Asst. Prof. Jonathan C. De La Cerna, Philippines

Moderator: Asst. Prof. Jiranan Griffiths, PhD. and Mr. Justin DeMaranville, MSc

#### Contents:

Dr. Jonathan de la Cerna is a professor at University of Cebu researched on the mental health of hospitality workers in the Philippines during the Covid 19 pandemic. The Covid 19 Pandemic caused job displacement which affected victims and survivors. While much research has been done on the victims, Dr. Jonathan de la Cerna focused on the survivors – those who retained their jobs during the widespread layoff. The research focused on survivors' cognition, emotions, and strains. For cognitions, a growth mindset and buffers unfavorable job attitudes and counterproductive behaviors; it predicts employee morale, work intrinsic value satisfaction, supervision satisfaction, etc. Also, before and during layoff workplace comparison as cognitive response predicted employee morale, co-worker satisfaction, promotion satisfaction, etc. Emotions such as anger, anxiety, and survivor guilt were related to outcomes such as supervision dissatisfaction, absenteeism, rewards dissatisfaction, benefits dissatisfaction, etc. For strains, time stress and job-related anxiety predicted pay satisfaction, lower employee morale, and procedure dissatisfaction. Overall, the holistic study by Dr. Jonathan expanded the knowledge for mental health of workers, especially in a worldwide crisis.



## : Mental Health and Inclusion

Prof. Kurt Fellöcker, DSA, MA, MSc, Austria

### Contents:

Professor Kurt Fellöcker is a social worker, psychotherapist, teaching therapist, supervisor, and certified case management trainer. He teaches psychotherapy at the Bertha von Suttner University in St. Pölten in Austria. During the MHRC, Professor Kurt delivered a speech on mental health and inclusion. He highlighted the importance of social support and the dangers of loneliness for us, humans, as largely social creatures. Starting from the epidemiology of mental health issues, influenced by socioeconomic factors, the professor then explored the concept of the ‘sociocultural atom’ and how the weakening of social cohesions leads to social death and brings about numerous negative outcomes. Describing the dangers of individualization, including fragmentation of society, Professor Kurt outlined how it is not solely a political issue – that of the ever-more-complicated integration –, but an important issue for mental health, affecting individual and group development. Social death always precedes existential, he notes. Professor finishes his presentation with a brief overview of how our socializations start from early childhood, how we are very much genetically wired for socialization, and how social isolation is one of the strongest predictors of mortality. As such, Professor signs off with recommendations for promoting community care, with the main aim being the inclusion of all and finding a place for every person within the communities, meaning people with mental health issues also.

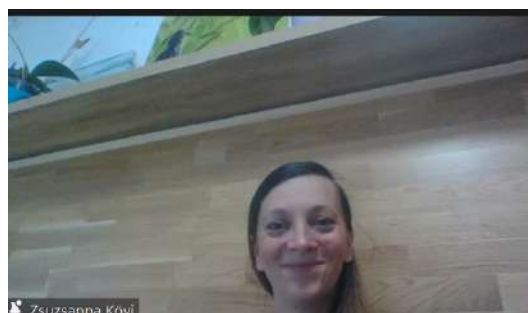


: Measuring resilient personality with fflCD-11 (Five-Factor Personality Inventory for ICD-11: A facet-level assessment of the ICD-11 trait model)

**Assoc. Prof. Zsuzsanna Kövi, Hungary**

### **Contents:**

Professor Zsuzsanna Kövi teaches psychology at the Karoli Gaspar University of the Reformed Church in Hungary. For the MHRC, she chose to talk about measuring resilient personality with a five-factor personality inventory for ICD-11 (International Classification of Diseases). She began by addressing many issues with measuring and identifying different personalities, both clinical and normal. She outlines how previous personality disorder classifications have certain shortcomings, such as being unnecessarily complex, inconsistent with data on normal personality traits, having minimal consideration for severity, and several overlaps between different personality disorder categories. The five five-factor personality inventory for ICD-11 (fflCD-11) has five dimensions, including detachment, negative affect, dissocial, disinhibition, and anankastic, which are related to maladaptive schemas (e.g., detachment – disconnection). This new tool also has subdimensions, e.g., different types of detachment, and is more detailed than previous measures. Five clusters were identified, including resilient, uncontrolled, ordinary, controlled, and overcontrolled. The tool was tested with a sample of Hungarians in Hungary and Hungarians in Ukraine. There were less resilient participants in the latter group, which can likely be attributed to the context of the ongoing war in Ukraine. The session concluded with Professor Zsuzsanna taking questions from the audience and other presenting researchers, highlighting some particularities of personality measurements, exploring how different phrasings can attempt to minimize situational bias.



## 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.

## Outstanding presentation Award

**Ms.Raphaela Kaisler**

“PEERS - Psychosocial care services for students at the Bertha von Suttner University (BSU)  
Outpatient Clinic”



## Best Presentation Award

Ms. Khine Myint Oo

“Effectiveness of mindfulness-based relaxation techniques on mental well-being during political crisis”



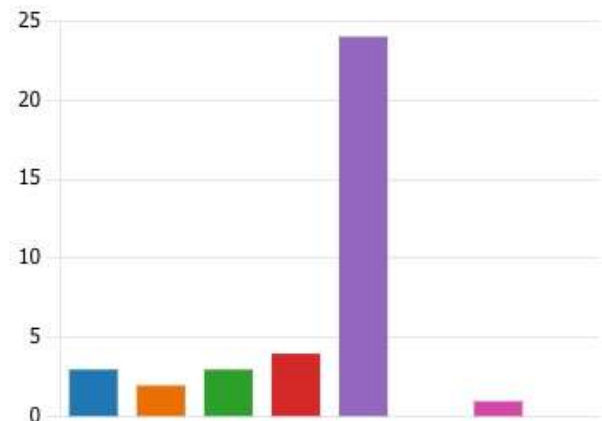


# Feedback from participants

Online survey (36 responses)

## 1. Your participation status

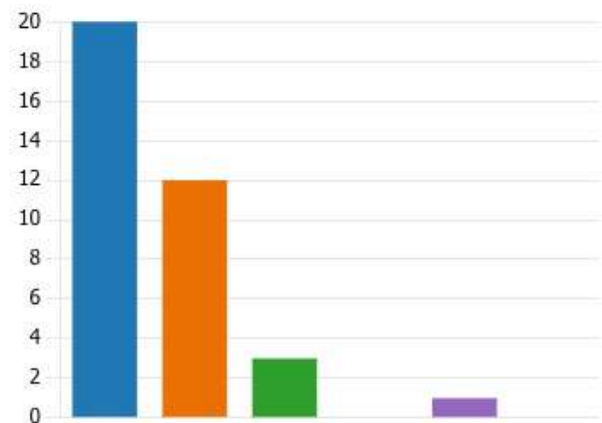
[More Details](#)



## 2. How satisfied are you with the whole schedule?

[More Details](#)

[Insights](#)

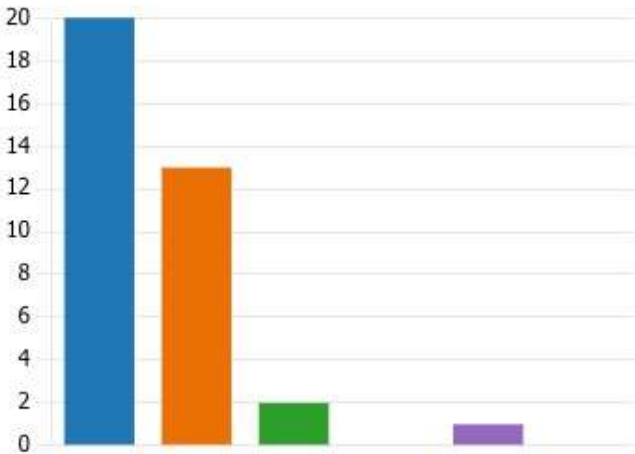


3. How satisfied are you with the public relation?

[More Details](#)

 Insights

Very satisfied (5)	20
Somewhat satisfied (4)	13
Neither satisfied nor dissatisfied...	2
Somewhat dissatisfied (2)	0
Very dissatisfied (1)	1
N/A (0)	0

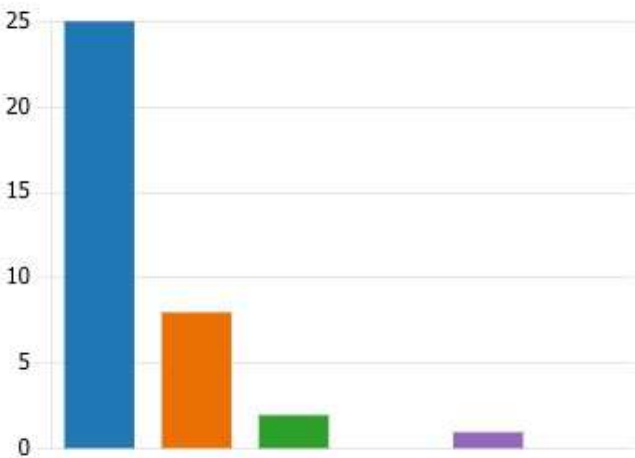


4. How satisfied are you with the conference information?

[More Details](#)

 Insights

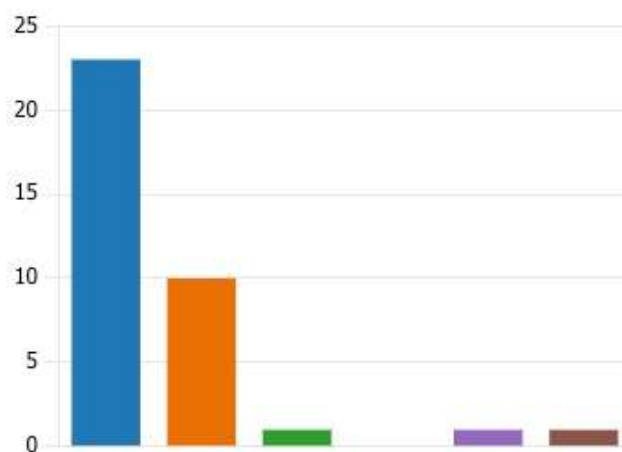
Very satisfied (5)	25
Somewhat satisfied (4)	8
Neither satisfied nor dissatisfied...	2
Somewhat dissatisfied (2)	0
Very dissatisfied (1)	1
N/A (0)	0



## 5. How satisfied are you with the registration process?

[More Details](#)

Very satisfied (5)	23
Somewhat satisfied (4)	10
Neither satisfied nor dissatisfied...	1
Somewhat dissatisfied (2)	0
Very dissatisfied (1)	1
N/A (0)	1

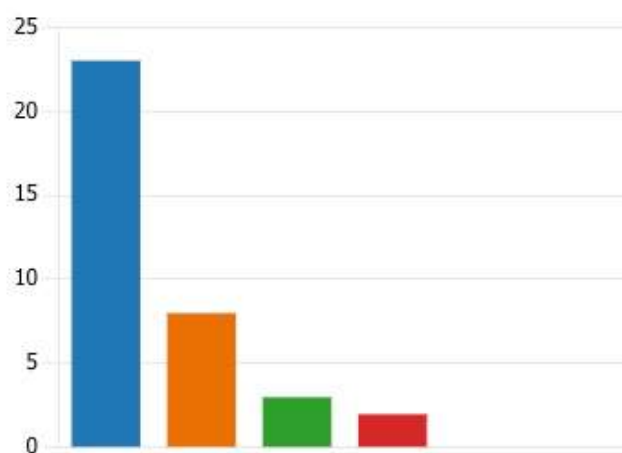


## 6. How satisfied are you with the virtual conference arrangement via Zoom Meeting?

[More Details](#)

 Insights







Very satisfied (5)	23
Somewhat satisfied (4)	8
Neither satisfied nor dissatisfied...	3
Somewhat dissatisfied (2)	2
Very dissatisfied (1)	0
N/A (0)	0

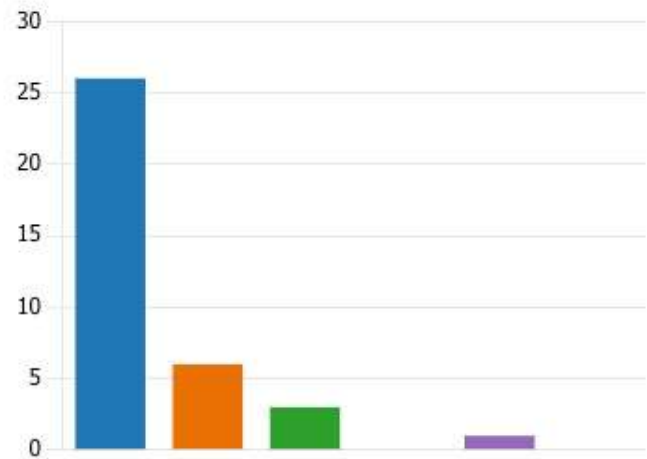


## 7. How satisfied are you with the knowledge of speakers?

[More Details](#)

 Insights







 Very satisfied (5)	26
 Somewhat satisfied (4)	6
 Neither satisfied nor dissatisfied...	3
 Somewhat dissatisfied (2)	0
 Very dissatisfied (1)	1
 N/A (0)	0

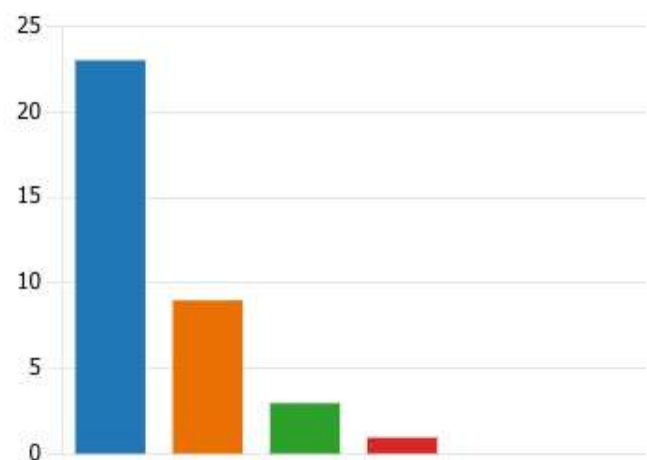


## 8. How satisfied are you with the research presentations?

[More Details](#)

 Insights

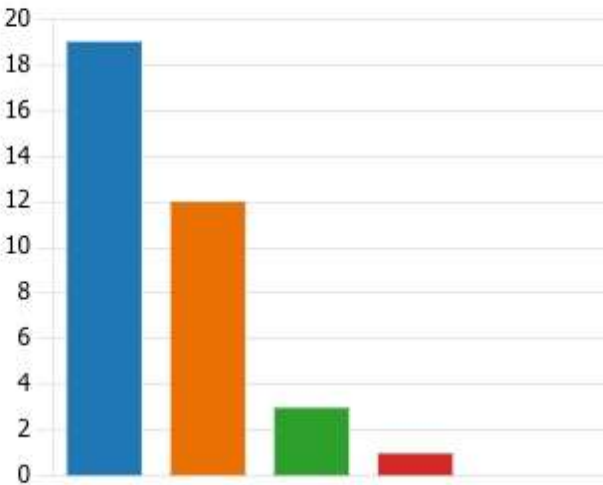
 Very satisfied (5)	23
 Somewhat satisfied (4)	9
 Neither satisfied nor dissatisfied...	3
 Somewhat dissatisfied (2)	1
 Very dissatisfied (1)	0
 N/A (0)	0



9. How satisfied are you with the type and the number of research presentation awards?

[More Details](#) [Insights](#)

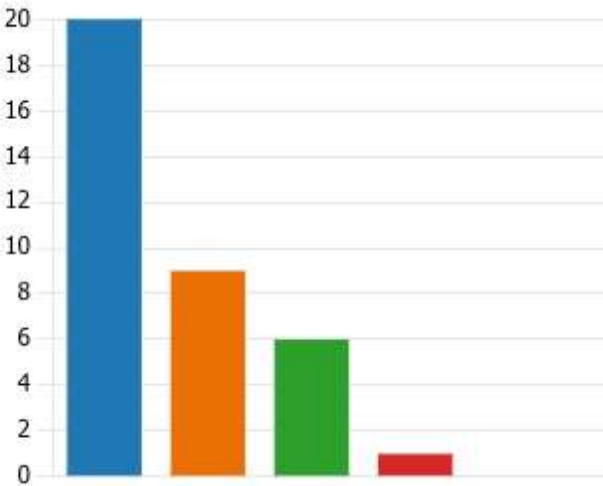
Very satisfied (5)	19
Somewhat satisfied (4)	12
Neither satisfied nor dissatisfied...	3
Somewhat dissatisfied (2)	1
Very dissatisfied (1)	0
N/A (0)	0



10. How satisfied are you with the opportunity to express your opinion?

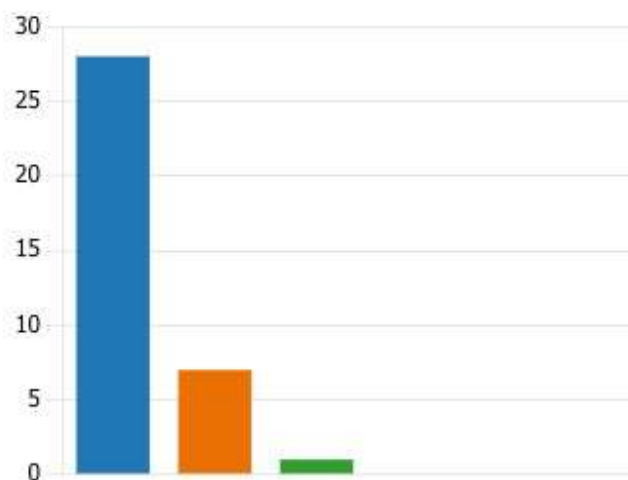
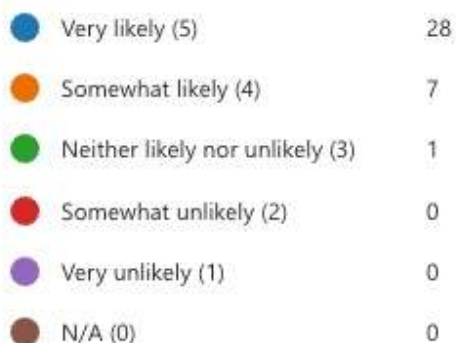
[More Details](#) [Insights](#)

Very satisfied (5)	20
Somewhat satisfied (4)	9
Neither satisfied nor dissatisfied...	6
Somewhat dissatisfied (2)	1
Very dissatisfied (1)	0
N/A (0)	0



### 11. How likely are you to attend another MHRC Conference in the future?

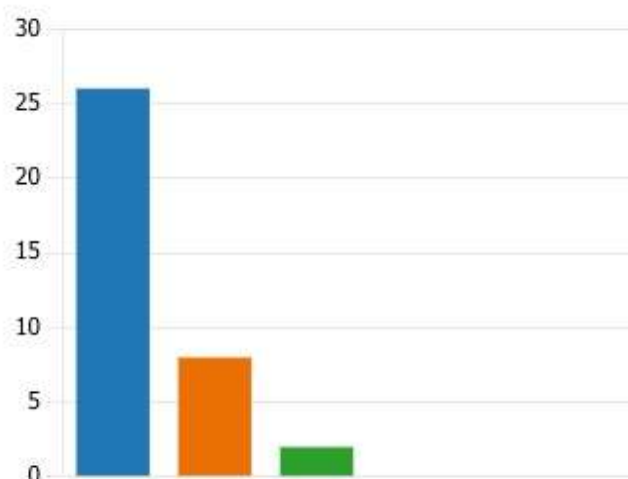
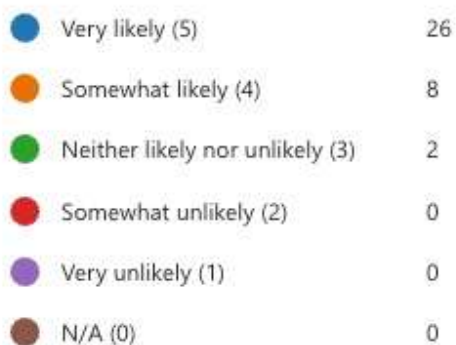
[More Details](#)



### 12. How likely are you to recommend future meetings like this to your friends or colleagues?

[More Details](#)

Insights



### 13. Comments and suggestions

- Congratulations to the organizers.
- Thank you for having the opportunity to learn knowledge from others and share our opinions, it's a good platform. Thank you everyone!
- Special thanks to organizing committee and speakers for their effort to make it happen.
- Excellent conference.

## Lists of participants

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