

Changing the system:

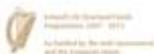
Overcoming barriers to well-being in Ireland



Proudly hosted by the Health and Well-being priority research theme at the Institute for Business, Social Sciences and Public Policy, NUI Galway



NUI Galway
OÉ Gaillimh



An Roinn Post, Fiontar agus Nuálaíochta
Department of Jobs, Enterprise and Innovation



Welcome

Internationally, there is increasing interest in, and analysis of, human well-being and the economic, social, environmental and psychological factors that contribute to it. Current thinking suggests that to measure social progress and national well-being we need something more than GDP. Facilitating the transfer and exchange of knowledge to bring about more well-being for everyone is a major goal of science. However, the relationship between science and public policy is complex and there is a need to create new spaces where dialogue is fostered and where knowledge is translated into action.

Over the past decade, the National Health Strategy of Ireland (e.g. Quality and Fairness: A Health System for you) has emphasised the importance of an interdisciplinary integrated approach in achieving its vision of equity, person-centeredness, quality and accountability in health care provision. A lifespan approach to health is also widely accepted, for example, in the context of recent government reports on well being in Ireland (NESC, 2009). *The Health and Well-Being* priority theme at the Institute for Business, Social Science and Public Policy at NUI, Galway, brings together colleagues from Medicine, Nursing, Health Sciences, Social Science, Business, Public Policy and Law, and is organized around key themes, including: Lifespan Health and Well-Being: biological, psychological, and social system perspectives and interdependencies ; Behaviour Change Interventions and Lifespan Health; Chronic Illness, Pain, and Disability; Lifespan Engagement and Policy Change; and Health Care and Health Services across the Lifespan.

The core objectives of our priority theme include:

1. Promotion and maintenance of health and well-being across the lifespan
2. Understanding plasticity, resilience and capacity to change across the lifespan
3. To promote the development of integrated health and well-being support systems that can take account of biological, medical, psychological, sociological, and economic interdependencies.

We are currently working on a diverse range of projects in the areas of: Chronic Pain; Developmental Delay and Dementia; The stigmatization of psychological difficulties in children; The Galway Wisdom Project; Driving Attitudes, Risk, and Behaviour; Coronary Heart Disease and Diabetes; Interventions to reduce pain and preventative health behaviours; The economics of well being; Psycho-Oncology.

We are delighted to welcome you today and we very much welcome opportunities to collaborate with conference participants in future research projects. Notably, this conference brings together scientists, community organizations and policy-makers to discuss the latest advances in well-being research and policy. The Interactive Management (IM) workshop and interactive poster sessions will provide us with a good opportunity to discuss important issues and network and learn from one another.

Interactive Management is a key piece of design infrastructure that the new Institute for Business, Social Science and Public Policy is promoting and using in collaboration with members of the Health, Ageing and Lifespan Development research cluster. Interactive

Management (IM) is a software supported collaborative design process that allows a group of individuals with a vested interest in solving a problem to design problematques (i.e., graphical influence structures) that describe causal relationships between a large set of problems in a problem field. IM taps into and enhances our largely underdeveloped cognitive capacity for graphical, systems thinking. It enhances the collaborative power and action potential of groups who seek to work together toward the resolution of problems and the realization of possibilities. IM draws upon a long history of development in the fields of mathematics and systems science and is neutral as regards its scientific and social applications (<http://warfield.gmu.edu/im>)

We would like to thank the Institute for Business, Social Science and Public Policy and the National University of Ireland, Galway for their generous support in funding and hosting this event.

We hope that you find the programme interesting and that the meeting provides a valuable opportunity to share ideas with fellow researchers.

Michael Hogan, Chris Noone, Ruth Ni Bheolain, Owen Harney

**Overcoming Barriers to Well-Being in Ireland,
Friday 8 June:**

8.30 – 9am: Registration

9am: Welcome

9.10 – 9.50: Helen Johnston (National Economic and Social Council): *Why Well-being Matters*.

10 – 10.40: Alex Zautra (Foundation Professor of Clinical Psychology, Arizona State University): *Social Intelligence and Community Well-being: Charting Paths to Resilience*.

10.50 – 11.20: Coffee break

11.30 – 1pm: Interactive Management workshop – Structuring Barriers

1.00 – 2.00: Lunch

2.00 – 3.15: Interactive Management – Options for dealing with Barriers

3.20 – 3.40: Coffee break

3.40 – 5.30: *Poster Session*

10.00 – late: Drinks in the King's Head

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Why Well-being Matters

Helen Johnston

National Economic and Social Council

Something more than GDP is required to measure social progress. GDP can measure economic output but does not take adequate account of the value of education, health or the natural environment. There is now growing international interest in measures beyond GDP. Social progress is linked to the capabilities of people and that is where well-being matters. The 2009 NESC report, *Well-being Matters*, is one of the first attempts to chart well-being in Ireland. The report tracks trends across six aspects of people's lives: their economic resources, their work and participation; their relationships and care; their community and environment; their health; and societal values. Growing international evidence suggests that all these aspects of a person's life are important for their well-being and that they are inter-connected. The emphasis given to each depends on an individual's particular circumstances, how they compare themselves to others, and by the values set in wider society. The report also addresses the relevance of well-being in a recession, suggesting that a focus on well-being helps us to understand some of the imbalances that gave rise to the crisis. There is also the suggestion that most people have the capacity and resilience to deal with adversity but often need some support. Applying key aspects of a well-being approach would mean taking into account: capability, agency, purpose, social interaction, the common good, and sustainability.

A critical aspect of applying a well-being framework is to monitor social progress. There is a saying that 'what gets measured gets done' and this requires the development and application of appropriate data sets, indicators, monitoring systems and performance dialogue.

Social Intelligence and Community Well-being: Charting Paths to Resilience.

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Our work focuses on identifying personality and social-community resources that confer resilience and developing interventions that strengthen the capacity for resilience. In all this work we examine three fundamental aspects of resilient responding to adversity: we ask whether the person can recover fully, is able to sustain key interests that give life meaning in spite of the adverse events, and the extent to which the person can grow and learn from the stressful experiences. When building interventions our work harnesses the natural resilience capacities of people and their communities. Most psychological interventions have attended primarily to difficulties in self-regulation, focusing primarily on an individual's relationship with him (or her) self. Most community interventions have attempted to corral the self-interested minds of individuals through methods that better organize those talents to serve community goals. Here, I advocate for another approach to building resilience, one that fills a void in the current focus to the "self" by attention to our capacities as social beings to connect and relate to one another in ways that are more than "zero-sum". An embrace of the "social self" through programs designed to aid in the development of social intelligence is needed across all stages of life: For parents raising their children to be more empathetic, for youth transitioning into adult life, for veterans returning to civilian life, for organizations to develop their company's collective intelligence, for older adults as they contemplate retirement and an empty nest, and for communities working to re-define themselves as a democratic force in support of a better social ecology. This talk identifies the fundamental principles that guide the development of social intelligence programs and how they are may be applied to further individual and community resilience.

Investigating the effectiveness of a fear appeals intervention in increasing intentions to test for radon gas: The moderating role of need for cognition

Amy M. O'Dea*, & AnnMarie Groarke*

*National University Ireland, Galway, University Road, Galway, Ireland

This study aims to examine the effectiveness of an efficacy/fear appeal intervention on increasing intentions to engage in home radon testing. It also examines the effects of this intervention on risk perception and efficacy perception. Finally, it will investigate need for cognition as a moderator of these relationships. A sample of 130 homeowners will be recruited through schools by distributing information sheets inviting them to partake in the study. Baseline measures will be taken of demographic variables, need for cognition, risk perception, efficacy perception, and intention to engage in radon testing. Participants will be divided into two groups. Group 1 will receive an intervention which promotes efficacy and incorporates fear-inducing information and images. Group 2 (control) will read a neutral document and receive no intervention. Three 2x2x2 ANOVAs will be used to examine the effect of time (pre or post intervention), group (intervention or control), and need for cognition (high or low) on risk perception, efficacy perception and intention to engage in radon testing. The results will indicate the effectiveness of the intervention in increasing intentions. By including need for cognition as a moderator it can be discerned if this intervention should be targeted at a particular group.

Does the transtheoretical model predict attendance and outcomes following an online intervention for chronic headache?

Angeline Traynor

National University Ireland, Galway

Objectives: This study will investigate the utility of the Transtheoretical Model (Prochaska & DiClemente, 1982) in predicting session attendance and treatment outcomes in response to an online mindfulness-based stress reduction intervention for individuals with chronic headache, an understudied population in the pain research literature generally and particularly in an Irish context.

Design: Prospective study of 200 participants. Stage progression evaluated via compliance and completion of pre and post intervention questionnaires on Survey Monkey™: Pain Stages of Change Questionnaire (Kerns et al., 1997); HADS (Zigmond & Snaith, 1983) and the Headache Impact Test (Kosinski et al., 2002).

Expected results: Stage of change will predict interest in and level of participation as well as treatment effect size.

Current stage of work: Website went live 22nd of February, 2012. Invites sent to Migraine Association of Ireland, Chronic Pain Ireland and pending Press Release. To date the number of participants enrolled is 66, preliminary findings will be presented.

Benefits: This study will increase understanding of how stage of change, stress and pain covary over time and affect treatment intention and adherence. It will further highlight how incompatibility between stage of readiness to change and treatment approach acts as a barrier to eventual well-being.

What makes a successful romantic relationship in older adulthood? An Interactive Management Approach.

Kate Burke & Dr. Michael Hogan,

School of Psychology NUIG.

According to research, marital satisfaction is higher amongst older adults when compared with younger adults. Marriage amongst older adults is characterised by greater satisfaction, less negativity and greater frequency of positive marital interactions (Carstensen, Graff, Levenson, & Gottman, 1996). When interviewed, older adults describe their relationships as having higher levels of positive effect, and less conflict in comparison with their younger counterparts (Levenson, Carstensen, & Gottman, 1994). Positive romantic relationships have important benefits for psychological wellbeing and physical health (Acitelli, Kenny, & Weiner, 2001; Meunier, Baker, & Roffey, 2011). This study aimed to identify the core components of relationship satisfaction in older adults utilizing an Interactive Management (IM) methodology with a group of older adults over sixty years. IM is a process of problem solving whereby a group collaboratively develop, generate and interpret ideas about complex topics (Warfield & Cardenas, 1994). During the IM session participants were asked ‘What makes a successful romantic relationship?’ Participants identified Honesty, Communication, Companionship, Respect, Positive Attitude, Religion, Caring, Intimacy, Socialising, Comfort and Patience as key components for successful relationships in older adulthood. A model of relationship satisfaction was generated to illustrate the interdependent components. Further research will be conducted to validate the model using quantitative methods and structural equation modelling.

Geographical dimensions of wellbeing among Irish adolescents: fast food locations near schools.

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Health Promotion Research Centre, National University of Ireland Galway, Ireland.

Objectives: The food environment around schools can influence young people's health and well being. The aim of this study was to investigate the distribution of well known fast food restaurant chains surrounding the post-primary schools which participated in the 2010 Health Behaviours in School-aged Children study in Ireland in relation to area level deprivation and school type.

Methods: Geocoded post-primary schools ($n=119$) and fast food restaurant chains were mapped using Geographic Information Systems (GIS). Chi Square analyses were conducted to assess the differences in number of fast food restaurant chains, within 1 and 2km of the schools by type of school (urban/rural, DEIS/non-DEIS). Spearman's rho was used to assess the correlation between deprivation and number of fast food restaurants.

Results: Overall, 46.2% and 56.3% of post-primary schools had one or more fast food restaurants located within 1km and 2kms of the school. Access to fast food restaurant chains was found to be greater for urban schools. There was no difference between DEIS and non-DEIS schools. A positive correlation between deprivation and fast food chain restaurants was observed.

Conclusion: Further research is needed to assess the relationship between the food environment around schools, student dietary habits and obesity risk.

The value of the dutch eating behaviour questionnaire in predicting weight loss success in an obese population

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Weight Management Service, St. Columcille's Hospital,
Dublin.

Aims: The goal of the present study is to analyze the value of the Dutch Eating Behaviour Questionnaire (DEBQ) in predicting weight loss in obese patients, after a 9-session treatment period at the Weight Management Service in St. Columcille's Hospital. The DEBQ was designed to inform treatment processes in order to improve weight management success. Scores in the questionnaire, therefore, play an important role in weight-loss programme design. This study aims to examine the relevance of patients' scores in predicting weight loss.

Method: A regression analysis will be used to analyze the relative contributions of the three dimensions of the DEBQ (emotional eating, external eating, and restrained eating) in predicting BMI change in obese patients over the course of a 9-session weight loss programme. The data of 100 participants who took part in the programme between the years of 2009 and 2010 will be used. It is hypothesized that scores on the three dimensions of the DEBQ will differentially predict participants' weight loss.

Conclusions: This study will increase knowledge relating to eating behaviours and weight management, and additionally will assess the relevance of the DEBQ as an assessment tool for an obese clinical population in Ireland.

Testing prospect theory: The effects of gain versus loss frame healthy snack messages on children

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**Department of Psychology, National University of
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Galway, Ireland

The study aims to establish whether gain-framed messages represent as a superior frame of intervention in comparison to loss-framed messages for enhancing attitude, preference and behaviour towards eating healthy snacks (in a population of children ages 10-12), as would be predicted in the context of Prospect theory. There is a deficiency in empirical evidence providing information on the role of message framing in children's health promotion strategies. The study intends to examine the efficacy of Prospect theory, through the development of an intervention examining the most effective way to frame health nutrition messages for children. A 3 (within factor: time) x 3 (between factor: group) mixed factorial design will be employed. A video based intervention will be utilised, in which participants will be randomly assigned to either (a) a gain-framed health message video, (b) a loss-framed health message video, or (c) a control video. The intervention will incorporate repeated exposure to the video over a period of 2 weeks to assess the impact of the intervention over time (post-intervention and at a 4 week follow up period). The main hypothesis predicts that there will be a significant increase in attitude, preference and behaviour from pre-intervention to post-intervention within the gain-framed condition compared to the loss-framed and control conditions.

Examining the use of loss-frames and gain-frames in communication with parents about the use of non-prescription cough and cold medicines in young children, in light of recent recommendations given by the IMB.

T. Corbett and Dr. J. Walsh

School of Psychology, NUI Galway.

Aims: The goal of this study is to prevent the use of ineffective OTC cough & cold medications in children in the future. It aims to assess the relative success of loss or gain framing when discussing parental use of OTC medications and to develop an intervention that will educate Irish parents about the recent recommendations given by the IMB, while also highlighting other methods of treating coughs and colds

Method: The study will use a 3 x 3 mixed ANOVA RCT design. Intentions to use these medicines and actual medication behaviour will be measured across three time points. 120 parents of children aged between 3-6 years, will be assessed at baseline, immediately after an educational intervention and again, two weeks later. The between groups measure will be the presentation frame of the information given with 3 levels; loss, gain or control frame. This online intervention will be developed using Lifeguide software (Webb et al. 2005). It is hypothesized that parents will report higher or lower intentions to engage in the advised behaviours depending on the framing of the message given to them.

Conclusions: The implications of this study would be increased awareness relating to the current stance of the IMB regarding medication use in children, and thus it may prevent the occurrence of adverse effects of their use in children of parents who have participated. It would also enhance knowledge within the Health Psychology literature regarding communication of health messages to parents.

Jigsaw Galway: A dynamic response to young people's Mental Health and Well Being through a unique service provision approach.

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*Jigsaw Galway (Headstrong, HSE, Mental Health Ireland) Fairgreen Road, Galway

Jigsaw Galway is an innovative approach to addressing the mental health and well-being of young people between 15-25 in Galway city and county. It operates as a primary care initiative and has evolved in partnership with Headstrong, the HSE and Mental Health Ireland.

Jigsaw Galway aims to set a world class standard for engaging and supporting young people around their mental health needs. This vision is underpinned by the core conviction that every young person has the capacity to get through tough times, make a difference and be an asset to their community.

A key aspect of the service involves easy access points to a free and confidential primary care service, who respond to a young person's needs immediately and flexibly. A multidisciplinary team is available to assess a young person's needs and provide a range of supports including emotional support, guided self help and supported access to other services.

Building the capacity of the local community to respond to the mental health needs of young people is sought through working with other professionals throughout the county.

Continuous engagement with young people regarding programme design ensures Jigsaw remains relevant, youth focused, non-stigmatising and accessible.

Saving and Empowering Young Lives in Europe: A Cost-Utility Analysis of School-Based Mental Health Interventions, Results from Ireland.

Lee-Ann Burke

University College Cork

The aim of this study is to highlight the cost-utility of mental health interventions in schools in Ireland as part of the *Saving and Empowering of Young Lives in Europe* (SEYLE) project funded by the EU 7th Framework for Health. A recent UNICEF report highlights that one in two young people have reported experiencing depression and over a quarter of young people have felt suicidal (UNICEF, 2011). There are four school-based mental health interventions under consideration; pupil screening by a psychiatrist or psychologist, a ‘question persuade and refer’ programme, awareness workshops and a poster intervention. The costs associated with each intervention are collected. The main outcome measure of the study is the Becks Depression Inventory (BDI), data on which is collected before and after the interventions take place. A cost-utility analysis is carried out on the interventions with the poster intervention being used as the control. The scores on the Becks Depression Inventory are converted into quality adjusted life years (QALYs) and compared to the overall costs of the intervention by calculating an incremental cost-effectiveness ratio (ICER). The results show that each of the four interventions was associated with an improvement in mental health with the professional screening being the most successful.

What places Irish youth at risk of suicide attempts? Data from a national study of mental health in young adults

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Fitzgerald*

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** Headstrong, National Centre for Youth Mental Health
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Background: This research aimed to explore risk factors for self-harm, suicide attempts and suicidal ideation in young Irish adults.

Method: A cross-sectional survey-based study called the My World Survey (MWS) was conducted with 9133 young adults in Ireland aged between 17-25 years (M=20.42, SD=1.938). Of the sample, 64.8% were female. The MWS assessed risk and protective factors of mental health and contained a number of psychometrically sound instruments.

Findings: 21.2% (N=1720) of participants reported engaging in self-harm, 42.4% (N=3443) reported suicidal ideation and 7.3% (597) had attempted suicide. A risk index was developed which identified factors among young people that increase their likelihood of attempting suicide e.g. gay or bisexual sexual orientation, having seen a mental health professional, financial stress, having experienced bullying, and parental marital status.

Discussion: Results are discussed in relation to the risk index which would be a valuable screening tool for identifying young people at risk of attempting suicide.

What children want to know about health, happiness and emotional wellbeing?

Clarke, N., Doyle, P., Kelly, C., Cummins, G., Sixsmith, J., O'Higgins, S., Molcho, M., and Nic Gabhainn, S.

Health Promotion Research Centre, School of Health Sciences, NUI Galway*

Using a three-stage participatory research approach, the views of young people on the Health Behaviour in School Aged Study questionnaires were collected. Young people identified the HBSC topics they found most interesting and commented on what they would like to know about those topics. Students aged 10 to 18 years in nine mixed-gender primary and post-primary schools in Ireland participated. Alcohol was identified by the students as the most interesting topic, followed in order by puberty, drugs, drunkenness, smoking, fighting, general health, body image, physical health, emotional health, happiness and friendship. Participating students indicated a broad interest in these topics and volunteered many specific questions that they would like to see addressed. Three topics central to youth wellbeing appeared in the top ten most interesting topics to participants: general health, emotional health and happiness. This presentation will present children's documented information needs in relation to these aspects of wellbeing. This study demonstrates the value of including young people in setting the agenda for wellbeing. The findings will be useful in guiding the development of curricular resources and other materials related to promoting youth wellbeing.

Look Who's Talking: The Relationship Between Help-Seeking in Young People and Mental Health Outcomes

Ms. Rachel Kenny, Dr. Barbara Dooley & Dr. Amanda Fitzgerald

University College Dublin

The aim of this study was to explore help-seeking behaviour and psychological functioning in young people. Participants were 14,857 Irish adolescents (59% female), ranging in age from 12-25 years ($M=18.18$, $SD=3.26$). They completed the My World Survey which assessed help-seeking behaviour and positive and negative domains of psychological functioning using psychometrically sound instruments. Friends, parents and the internet were the most commonly used sources of support for mental health problems. Younger adolescents (12-18 years) were more likely to seek help from parents and relatives, whereas, older adolescents (18-25 years) were more likely to use the internet and professional sources. Adolescents who reported having serious problems were categorised based on a three stage model of formal help-seeking. 34% of adolescents felt they had problems but did not need professional help (Stage 1). 16% felt they needed professional help but did not seek it (Stage 2). 11% had actively sought professional help (Stage 3). A series of one-way ANOVAs revealed Stage 2 adolescents displayed higher levels of psychological distress, alcohol misuse and avoidant coping and lower levels of self-esteem and optimism. Stage 3 adolescents displayed similarly negative profiles. Implications for the promotion of help-seeking will be discussed.

A Positive Youth Development Perspective of Irish Adolescents

Ronan Conway

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Galway.

Recent research has shown that 50% of children in Ireland have experienced depression, yet 82% of these young people reported receiving no help for their difficulties (UNICEF Ireland, 2011). The positive youth development (PYD) perspective has emerged at the fore of developmental research and offers a strengths-based approach to providing support and assessing the well-being of young people. In order to assess the well-being of Irish adolescents in Post-Primary schools, the current study assessed the validity of a PYD measure of well-being, and created a model to examine the associations between the individual's well-being, and assets in their school and community. Using cross-sectional data ($N = 750$) from a 12-month longitudinal study, the current data will illustrate the utility of the PYD measure of well-being in an Irish sample of adolescents. Developmental changes in PYD over the adolescent period will also be highlighted. Using SEM modelling, relationships between self-regulation, psychosocial capacities (resistance to peer influence, emotion regulation, and future orientation) and ecological assets at school and in the community will also be explored. This model will further our understanding of the developmental processes underlining adolescent well-being, and the role of individual, school and community influences.

A Participatory Research Approach to Understanding University Students' Well-being.

Siobhán Kavanagh

Under the Supervision of Dr. Padraig MacNeela

National University Ireland, Galway

The World Health Organisation (WHO, 1948, p.12) defines achieved mental health as “a state of well-being.” Among the most familiar constructs in economic, occupational, health, and social science research, the term is used inter-changeably with subjective well-being, flourishing, happiness, and positive mental health. While this demonstrates the utility of the concept it has also led to considerable divergence in how well-being is theorised, assessed, and studied. Some authors have tried to introduce conceptual clarity, for instance by distinguishing hedonic (happiness) from eudemonic (personal meaning) well-being. However, a further point relevant to finding clarity on the concept of well-being is the issue of contextualising its meaning to the needs and understanding of a specific population (Kiefer, 2008). This paper will describe a novel methodology to better understand the contextual nature of well-being among a university student population, using a participatory research approach. The present research proposes the use of two participatory techniques (photovoice and flexible brainstorming) to engage with university students in developing a consensual understanding of well-being and to suggest priorities for improving well-being.

Promoting child wellbeing through school participation-views of children

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Research objectives: School participation has been shown to have a role in promoting positive health and wellbeing amongst school-aged children (de Róiste et al. 2012). Encouraging genuine participation can promote students' engagement with their schools and foster their well-being (de Róiste et al. 2012). The aim of this research was explore the views of children regarding school participation and the influence it has on their wellbeing.

Methods: Participatory Research Process (PRP) (Nic Gabhainn and Sixsmith, 2006) workshops were facilitated following a three phase design. This enabled students to actively participate in the research process, with the creation, collation and presentation of their own data. A total of 248 primary school students, aged 9-13 years, involving ten class groups across three schools, participated in this study.

Findings: Students developed schemas to present their perspectives of what school participation meant to them and their suggestions on how participation could work better in their school. The students considered participation to be inclusive of everybody in the school. There was a general perception that participation ideally involves everybody getting along, doing things together and not leaving anybody out. Their multidimensional ideas identified that the school social environment can influence the wellbeing of students.

References:

de Roiste A., Kelly C., Molcho M., Gavin. A. & Nic Gabhainn S. (2012). Is school participation good for children? Associations with health and wellbeing. *Health Education, Vol. 112, 2:88-104.*
Nic Gabhainn, S. & Sixsmith, J. (2006). Children photographing well-being: facilitating participation in research. *Children & Society, 20, 249-259.*

Family Well-being in the Shadow of Poverty: Comparing ‘at risk’ families with and without household deprivation

Mr. Brian Merriman*, Ms. Michelle O’Donnell** & Dr.
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In recent years Ireland has suffered its most serious economic contraction in generations and statistics show us that the numbers of families with children living at risk of poverty or in consistent poverty have risen (Central Statistics Office, 2010). The present study proposes to mine data collected as part of *Growing Up in Ireland* (GUI), the National Longitudinal Study of Children in Ireland, to investigate how families of 9-year-old children identified as living on incomes that are 60 per cent below the national median are faring across a range of indicators of family wellbeing. Specifically, it will identify differences between families at risk of poverty and families in consistent poverty and discuss findings in terms of practice- and policy relevant suggestions to best support families in financial need. Using data collected as part of GUI can give us a sense of how families with limited incomes are faring and how this is so on a truly national scale.

Suicide Prevention Policies in Ireland; Helping or Hindering?

Chiara Seery

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On average, there are five hundred lives lost to suicide every year in Ireland (www.nosp.ie). However, media coverage remains limited. Previous research, namely that of Phillips (1974) suggested that suicide is subject to social contagion, and reporting on suicide may lead to further suicides. This claim has been refuted, and Stack (2003) and Joiner (1999) suggest that copycat suicides are not attributable to media coverage for a myriad of reasons. In response to increasing suicide rates in Ireland, the Health Service Executive and the Department of Health and Children compiled and published a strategy. *Reach Out: National Strategy for Action on Suicide Prevention 2005-2014* was implemented in a bid to alleviate the growing trends of suicide in Ireland. This strategy afforded an entire section to media and suicide prevention. Through this strategy the *Media Guidelines for reporting self-harm and suicide* (2007) were revised in conjunction with the Irish Association of Suicidology and the Samaritans. According to Hawton and Williams (2001) guidelines such as these needs to be written with emphasis on the positive role the media can take in alleviating suicide and not focus on prescribing what role it should take in reporting suicides that have already occurred. Mann et. al. (2005) maintains that while implementing suicide prevention techniques is necessary so too is subsequent evaluation of their efficacy. The current study aimed to review current Irish policy in light of the literature through a documentary analysis and qualitative interviews with current policy makers. The study sought to determine the efficacy of current suicide prevention efforts in the media through a qualitative research design involving focus groups and follow up interviews with young people and parents. Based on the current findings, no evidence of contagion was apparent and suicide prevention efforts warrant further review if suicide rates are to be alleviated.

From Meals on Wheels to a Community Meals Service: A collaborative community study with COPE Galway.

Christine Fitzgerald

National University Ireland, Galway

In Ireland, the number of older people living in their own homes is predicted to double in coming years (Connell & Pringle, 2005). Such demographic change emphasises the need to strengthen the evidence base surrounding community supports for older people, including community meals services (Morgan et al, 2007). Reflecting fundamental social policy change, community meals services are evolving from traditional charitable models towards approaches based on public-private partnerships. This study seeks to understand this transition by exploring community meals services' readiness to change, thereby facilitating the service's future development in supporting older people to continue living independently at home. A benefits and barriers behavioural analysis of a current service will be conducted utilising the Community Readiness Model, which assesses and builds communities' capacity to take action on issues (Kelly et al, 2003). The research adopts a mixed method design. First, a quantitative study will use structured questionnaires to provide baseline information on the community meals service. These data will be supplemented by secondary analysis of HSE Meals-on-Wheels data. Second, a qualitative study will collect data from key informants involved in the community meals service. These data will be supplemented by data drawn from focus groups with current and potential service users.

The effect of a Community Resilience psycho-education programme on ecological thinking, global citizenship, and sustainability

Claire Byrne

The current study examined the effect of a Community Resilience psycho-education programme on ecological thinking, global citizenship, and sustainability focused activity at a community level in a sample of 78 students aged between 15 and 19 years. The programme comprised eight two-hour sessions delivered over a 10 week period and focused on raising environmental awareness, generating and enhancing awe and wonder in response to the natural world, and exploring how participants can actively contribute to changing their community. Exercises consisted of the use of microscopes to explore the natural, mind-maps to stimulate dialogue and critical thinking, and creative drawing activities. Results are discussed in light of research and theory of well-being in adolescents.

A public ‘well-being’ agenda: Friend or foe?

Ms Joanne Wilson, MPhil, BSc * †, Professor Lindsay Prior, PhD, MA, BSc (Soc), BSc (Maths) * † **, Dr Michael Donnelly, PhD, BSc **

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This poster reflects on the ways in which the well-being concept may influence public health discourse. Focused on the positive aspects of life, well-being strives to emphasise all that is good and ought to be pursued. In this respect, the concept could prove a useful and worthy substitute to the discourse on public health. However, there are markedly different *understandings of* ‘wellbeing’ and these influence the goal of policy initiatives. For example, understanding’s that prioritise individual well-being focuses attention on the individual’s lived experience and directs efforts towards improving the individual’s quality of life. However, such individualistic approaches tend to ignore the *general good*; disregarding important social processes and structures, which influence how people live and the quality of this life. What is more, emphasising positive aspects of personal good (e.g. the pursuit of happiness) might actually exacerbate social injustice and poverty. Therefore, researchers and practitioners ought to critically reflect on their interpretation and understanding of the well-being concept (positive and negative), when applying it to public health discourse.

Predictors of Well-being in Families Living on Limited Incomes

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More and more families across Ireland are dealing with financial uncertainty and struggling to juggle the competing demands of household expenses. Such economic pressures have many social and economic costs for children, parents, and communities and can impact negatively upon family well-being. Guided by family systems theory and ecological perspectives about families, the present study subject's data collected as part of *Growing Up in Ireland* to structural equation modelling in order to test the relative contributions of factors relating to the individual, family process and context in promoting or hindering well-being among families identified as living on limited incomes. Understanding the relative roles of key factors in contributing to adaptive functioning among such families is of critical importance to developing future policy to safeguard the well-being of the family and its members.

The relationship between maternal depression and children's school readiness in a low socio-economic area, in Ireland

O' Farrell, P., Greene, S., & Doyle, O. (2011)

Submitted in fulfilment of the requirements of Masters of Science in Applied Psychology, Trinity College Dublin, 2011.

Aim:

The data was derived from a larger study, as part of an overall evaluation of the Preparing for Life early childhood intervention programme.

Method:

This research examined whether there was a relationship between both mother and teacher ratings on the school readiness of junior infant children, across the five domains of school readiness, as measured by the short form of the Early Development Instrument (EDI; Janus & Offord, 2000). In this study, 20% of the mothers were at risk of depression as measured by the Center for Epidemiologic Studies Depression scale (CES-D; Radloff, 1977). Consistent with the literature, ratings of school readiness differed between teachers and mothers who were at risk of depression.

Results:

The results are based on teacher reported school readiness. There was a small-to-moderate correlation found between maternal depression and children scoring low on emotional maturity, language and cognitive development, and social competence. When controlling for multiple factors, the only significant difference identified, at trend level, was in emotional maturity. However the multiple variables that were controlled for did not explain a large degree of the variance.

Conclusion:

The limitations of this study are discussed and avenues for future research are highlighted, including important implications for health care providers.

An examination of gender differences in the impact of individual and organisational factors on work hours, work-life conflict, and psychological well-being in academics.

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Research suggests that long working hours and high levels of work-life conflict are sources of stress for academics. However, little is known about gender differences in causes and consequences of longer working hours and higher levels of work-life conflict. The current study used multi-group structural equation modelling (SEM) to examine the relationship between job involvement, workaholism, having children, work intensity, organizational expectations, and organizational support on work hours, work-life conflict and psychological strain in male and female academics.

Results indicated some commonalities and differences in the factors that influence work hours, work-life conflict and levels of psychological strain in men and women. Specifically, in both men and women, higher levels of job involvement and lower organization expectations predicted longer working hours; additional unique predictors of longer working hours in men were higher work intensity and having children. Longer work hours, higher work drive, higher work intensity, and lower organization support predicted higher work-life conflict in men and women, with lower work enjoyment and higher job involvement predicting work-life conflict in men only. Work-life conflict, work drive and high work intensity predicted psychological strain in both men and women, and high work enjoyment predicted lower psychological strain in men, but not women. Findings are discussed in light of research and theory on work-life balance and integration, and the challenge of designing work environments that facilitate agility and resilience of individuals and organizations in response to internal and external pressures.

Enhancing Well-Being in Women with Breast Cancer

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Objectives:

A range of physical and psychological stressors are associated with breast cancer diagnosis and treatment which can pose significant adjustment challenges. This longitudinal RCT examines (i) if a stress management intervention can enhance adjustment in women with breast cancer (ii) identifies predictors of both positive and negative adjustment and (iii) tracks how post traumatic growth relates to adjustment across an 18 month time period.

Method:

Women recently diagnosed with breast cancer (N = 355) who were awaiting surgery completed baseline questionnaires which assessed global and cancer specific stress, general and cancer specific coping , optimism, depression, anxiety, positive and negative affect. Benefit finding was included post surgery. Women were randomly assigned to either an intervention (5 week stress management programme) or to a control condition.

Results:

Hierarchical regression analyses (all $p < .01$) showed that global stress appraisal was the strongest and most consistent predictor of adjustment pre and post surgery. ANOVA results (N=160) demonstrated the effectiveness of the intervention in reducing stress and distress and increasing benefit finding. Differences, however, were not maintained at 12 months. SEM analyses showed that optimism and low distress co-occur with benefit finding at different time points.

Conclusion:

Global stress contributes to adjustment and so women could be screened to identify those at risk for poor adaptation to the illness. This stress can be effectively managed in a CBT intervention. Finding benefit was also enhanced and time since diagnosis may influence its relationships with distress.

Sleep, health and well being: Acute restriction of sleep duration and type D personality

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Often thought of in terms of medical parameters, sleep loss (especially chronic sleep loss) is very much a psychological and psychosocial problem: its precursors relating to behaviour, personality, and environment and impact felt in terms of psychosocial outcomes. In addition, while epidemiological evidence suggests that chronic sleep deficit may be associated with negative cardiac health, the underlying mechanisms linking sleep loss to cardiovascular-related disease progression are poorly understood. As such, the chronic restriction of sleep is becoming recognized as a public health concern and a pertinent issue relating to occupational and public health policy debate in the sustainable communities’ domain. To examine the effects of sleep restriction and Type D (distressed) personality on reactivity to social stress, 70 normotensive female university students completed a laboratory based social stressor, following acute sleep restriction, receiving just 40% of their usual sleep or following a full night’s rest. Findings suggest that the acute restriction of sleep duration can result in significantly increased (all $ps < .006$) multifocal fatigue, as well as increased baseline stress-related sympathetic activity ($p = .006$). Furthermore, reactivity to social stress, when rested but not sleep restricted, may be moderated by individual trait differences in Type D personality, resulting in attenuated ($p = .028$) blood pressure reactivity.

Componential Exploration of Anxiety Constructs related to Children's Pain Experience

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School of Psychology, National University of Ireland,
Galway.

Research Objectives:

Pain has been linked to various negative emotional states, including those which occur more generally (e.g. trait anxiety) and those which are specific to pain (e.g. pain catastrophizing). Research investigating similarities and unique qualities of such constructs in adults has identified significant overlap between variables (Mounce et al., 2010; Vancleef et al., 2009). To date, the relationship between pain-related negative emotional constructs in children has remained largely uninvestigated. The current research aims to investigate the relationship between negative emotional constructs in a healthy paediatric sample. It is hoped that this investigation will provide a first step towards understanding how these constructs are related and how such measurements may be best utilized in Irish paediatric pain settings.

Methods:

This cross-sectional study includes 500 Irish children between 9-12 years. Measures include the Pain Catastrophizing Scale for Children (PCS-C; Crombez et al., 2008), the Children's Anxiety Sensitivity Index (CASI, Sliverman, Fleisig, Rabian & Peterson, 1991) and the Negative Affect Scale for Children (PANAS-C; Laurent, Potter & Catanzaro, 1999). Data will be analysed using Principal Components Analysis and Confirmatory Factor Analysis.

Findings:

Commonality between constructs measured is expected.

Development of a complex intervention to improve clinic attendance and clinical and psychological outcomes among young adults with Type 1 Diabetes – A qualitative study.

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School of Psychology, National University of Ireland, &
Young Adult Diabetes Service, UHG

Aims:

To explore barriers and facilitators of clinic attendance and engagement with health care professionals from the perspectives of young adults and staff.

Methods:

One-to-one, semi-structured interviews are underway with young adults aged between 18 and 25 with Type 1 Diabetes. Staff attached both to the Young Adult Diabetes Service and the paediatric diabetes service will also be interviewed. The interviews are being conducted and will be analysed based on the methodological approach of Interpretative Phenomenological Analysis

Results:

Results are pending. Themes which appear prevalent at this stage include purposes of the diabetes clinic from the perspective of the young adult versus the doctor, perception of being ‘told what to do’, and having an identity separate from diabetes.

Conclusions:

This study constitutes the modelling phase of the development of a complex intervention based on the Medical Research Council framework. The interview schedule was based on previous research in the area and relevant theoretical frameworks. Based on the conclusions of previous research and this qualitative study will result in a conceptual model of clinic attendance and engagement which is specific to the Galway setting.

Impact of CSII and MDII on Life Pattern Satisfaction Among Patients and Significant Others

Marlene Rosenkoetter

Georgia Health Sciences University

Estimates are 191,380 people with diabetes in Ireland (prevalence 6.1%) and by 2030, 278,850. In the US it is the 7th leading cause of death and disability with a cost of over \$170B US.

Management and prevention of associated chronic illnesses is critical. Intensive therapy includes continuous subcutaneous insulin infusion (CSII) and multiple daily insulin injections (MDII). This study was undertaken to determine the impact of both methods on changes in life patterns, satisfaction with management, and impact on life style. This was a non-experimental design using four parallel instruments (63 items) for CSII patients/significant others and MDII patients/significant others (n=354 pairs). Cronbach α CSIIpt α = .902; CSIIso α =.940; MDIIpt α = .900; and MDIIso α = .935. Validity and reliability established.

Factor analyses yielded themes for overall satisfaction, changes in relationships and roles, and impact on the use of support groups. Significant others lacked knowledge of how to suspend “pump” function, which could serious impact use of emergency services. Significant treatment method differences were found between CSII and MDII with CSII Mdn higher than MDII. Age was not a significant factor. Overall CSII users reported being more satisfied with the impact of treatment on their lives and implied well-being.

Self-rated Health of the Young

Yoshiaki Takahashi

Japan International Cooperation Agency

Many of previous studies revealed that self-rated health can predicts future mortality. So, what factors affect current self-reported health, in particular, of the Young? The author examined this question by using a recent large sample data of the young in Japan (n=11,888). After controlling socio-economic factors such as age, sex, income, and school attainment and health-related individual characteristics such as experience of hospitalization and mental disorder score, the result of ordered probit analysis showed that loneliness, suicide ideation and non-involvement in any volunteer works were important elements to determine their self-rated health. The result leads that programmes in the health policy should be combined with elements to enhance family and social relationship.

A qualitative study of physical post traumatic growth in men with prostate cancer.

Deirdre Walsh

National University Ireland, Galway

Post-traumatic growth (PTG) is the concept of positive change following trauma (O'Leary & Ickovics, 1995). Linley & Joseph (2004) suggest that 'it is through this process of struggling with adversity' that a higher level of functioning can be achieved. Currently, there are five dimensions of post traumatic growth relating to psychological well-being. Hefferon, Grealy & Mutrie (2009) have argued that there may be a 6th dimension unique to individuals who have experienced physical trauma. The aim of this study is to explore PTG following a physical illness/trauma, namely, prostate cancer. Thematic analysis will be used throughout this study. Thirty prostate cancer survivors will be recruited from two treatment groups- surgery and radiotherapy. The researcher will ask the participant to elaborate on their experience of prostate cancer and how they feel it has affected their body. Following qualitative analysis, the themes from across the groups will be examined for similarities, differences and patterns. This is an important area of research as over 2,500 new cases of prostate cancer are diagnosed in Ireland each year (Irish Cancer Society, 2010). Prostate cancer is becoming a long term chronic illness for many men and therefore cancer survivorship issues must be addressed.

**Mindfulness-based stress reduction and flotation-
REST: A randomised trial examining the
combination of both and the role of bodily awareness.**

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Mindfulness-Based Stress Reduction (MBSR) has been utilised since the 1980s as a group-based, meditative training method to help alleviate a range of problems in living which include chronic pain, fatigue, stress, depression, anxiety, ruminative thoughts, etc. The aim of MBSR is to assist practitioners in achieving a deliberate, sustained, and non-judgmental experiencing of the present moment. A substantial evidence base supports this intervention and its use of specific exercises such as mindful breathing, body scan, and gentle yoga practices. Flotation-REST (Restricted Environmental Stimulation Technique) involves subjects floating for 1-hour periods in a body-temperature, Epsom salt-saturated tank of water – this experience restricts external sensory stimuli. Like MBSR, evidence indicates that F-REST can assist relaxation, lower stress, and positively influence mood and other measures of psychological functioning in studies which include physiological, self-report, and performance measures. The proposed study seeks to examine the combination of these interventions to investigate their combined effectiveness along with possible mechanisms of change. The potential role of bodily awareness will be investigated. Research examining both interventions is presented along with the proposed design, participants, and procedure to be utilised in the planned research.

Overcoming the barrier of distance: A computerised mindfulness-based cognitive therapy intervention for a chronic pain population

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Background: The study aims to develop a computerised version of an existing mindfulnessbased cognitive therapy (MBCT) programme and to test its feasibility and effectiveness.

Methods: In a 2x3 mixed-design using an intention to treat protocol, 124 participants were randomly assigned to computerised MBCT (MIA) and psychoeducation (PM) programmes.

Data were collected before and after the intervention and at six-month follow-up.

Findings: Participation levels showed that provision of such a programme is feasible. Changes on a number of measures showed unique benefits for the MIA programme – pain experience ‘Pain right-now’; patient general impression of change (PGIC) ability to manage emotions, manage stress and to enjoy pleasant events - on completion of the intervention. Differences in PGIC ability to manage emotions and stressful events were maintained at follow-up. Other measures showed benefits for participants in both conditions - pain interference both groups showed decreases in pain interference depression and anxiety - on completion of the intervention. At follow up, reductions in depression were maintained and pain interference was still significantly lower than initial pain interference.

Discussion: The results suggest that computerised interventions for chronic pain is feasible and may be effective in bringing about improvements in variables that reflect the functioning of people with chronic pain.

The use of a gratitude intervention to enhance well-being during pregnancy: A randomised controlled trial

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Background: Positive psychology interventions, and in particular gratitude, have increasingly been shown to enhance health and wellbeing. This study examined the effectiveness of a gratitude intervention on psychological wellbeing during pregnancy.

Design: Randomised Controlled Trial

Participants: 72 women between 14 and 32 weeks pregnant from Cork University Maternity Hospital were randomised to the intervention (N=37) and control group (N=35).

Intervention: A daily diary kept over one month, in which participants were asked to list up to 5 things they felt grateful for.

Outcome measures: Outcome measures included the Prenatal Distress Questionnaire (PDQ), the Multidimensional Scale of Perceived Social Support (MSPSS), the Gratitude Scale (GQ-6), and exercise levels. These measures were conducted at baseline, at 2 weeks and 1 month.

Results: A total of 14 participants concluded the study. The results of mixed between-within analyses of variance demonstrated moderate to large effect sizes for the effect of the intervention on gratitude, social support, prenatal distress and exercise. Due to the small sample size at completion, the study may have lacked sufficient power to detect a significant effect.

Conclusions: Potential explanations for the study findings include recruitment and adherence issues, sample characteristics and constraints of the measures used. We discuss the applied implications and directions for future research that arise from these findings.

Is Friendship Associated with Happiness in Children with Autism?

Mangan, L., & Swords, L.

Trinity College Dublin

The study aimed to investigate whether or not there was a relationship between friendship and happiness amongst Autistic Spectrum Disorder (ASD) children. Subanalysis of the Growing Up in Ireland 9-year-old Child Cohort data was conducted. Specifically, ASD ($n=39$) and comparison ($n=8,153$) children's scores on the Happiness/Satisfaction and Popularity subscales of the Piers-Harris Children's Self Concept Scale (2nd Edition) were analysed. There was a highly statistically significant positive correlation between reported happiness and popularity in the ASD sample. However, there was no difference between the reported happiness of ASD and comparison children despite the ASD children reporting a lower mean popularity score. Subsequently, semi-structured interviews were conducted with another sample of ASD children. These ASD children ($n = 10$) all of whom were male, with a mean age of 9 years were recruited through Mainstream schools and special Autistic Units. The interviews were analysed using a Thematic Analysis approach which yielded four overarching themes; 'Friends as Positive People', 'Reciprocity', 'Friends as a Solution to Loneliness' and 'Friends Make me Happy'. Both sets of findings highlight that friends do make ASD children happy regardless of friend number or type. Thus the results indicate that friendship is associated with happiness in ASD children.

Experienced Irish therapists and counsellors perceptions of mindfulness for clients with depression or anxiety: A qualitative IPA study

Sean O'Connell

University College Cork

The increasing popularity of mindfulness as a therapeutic process has been evident. Very little has been researched on how therapists and counsellors use mindfulness in general. What has been researched is the specific techniques and effects of mindfulness practice in student practitioners. There is no research on how the process of using mindfulness in a session occurs over time and how the experienced practitioner views this. The research is also novel in the sense that there is no Irish sample. This research carried out semi structured interviews on 4 participants. The data was analysed using Interpretive Phenomenological Analysis (IPA). Results show a clear process in how mindfulness is used by the practitioner and the perceptions they have of it for themselves and for clients. Themes found on mindfulness help identify how the practitioner perceives how mindfulness helps themselves, the client, and how the process occurs. Some themes support existing literature and future research is highlighted.

Conference Delegates

<u>Name</u>	<u>Affiliation</u>
Agata Vitale	UL
Aine Scully	Abbot
Alison Herbert	NUI, Galway
Alma Clavin	NUI, Galway
Amy O'Dea	NUI, Galway
Angeline Traynor	NUI, Galway
Ann Marie Groarke	NUI, Galway
Ann O'Mahony	AHR Services Ltd
Ann Roddy	NUI, Galway
Anna King	NUI, Galway
Anne Pigott	Youth Work Galway
Aoife Gavin	NUI, Galway
Barbara Dooley	UCD
Brian McGuire	NUI, Galway
Brian Merriman	NUI, Galway
Catherine Duffy	
Catherine Sherlock	Jigsaw
Chiara Seery	TCD
Christine Fitzgerald	NUI, Galway
Cian Aherne	Imagine Health
Claire Byrne	NUI, Galway
Claire O'Driscoll	ACT Galway
Clare Kambamettu	NUI, Galway
Darragh McCashin	TCD

Deirdre Walsh	NUI, Galway
Denise Byrne	NUI, Galway
Éanna O' Leary	NUI, Galway
Edel Walsh	UCC
Emer Conneely	NUI, Galway
Emma Nutley	
Emma Farrell	
Eoin O' Shea	City Colleges
Frank Byrne	Leadership Solutions
Haulie Dowd	NUI, Galway
Iain Leary	National Suicide Research Foundation
Ivan Cooper	The Wheel
Jackie Butler	Common Purpose
Jackie Ryan	Westport Family & Community Resource Centre
Jason Noone	UL
Jenifer Gomoll	Kaiser Permanente
Jennifer Infanti	NUI, Galway
Jennifer Keane	NUI, Galway
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Lisa Wilson	QUB
Lisa Hynes	NUI, Galway
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Louise Maria Cleary	IADT
Luisa Timothy	NUI, Galway
Maebh O'Connor	UCD
Maragaret Fenton	Respond
Margaret Barry	NUI, Galway
Margaret Tallott	NUI, Galway
Maria Coyne	Jigsaw
Marie English	GMIT
Marlene Rosenkoetter	Georgia Health Sciences University
Mary Callaghan	NUI, Galway
Mary Geoghegan	
Mary Jo Duffy	
Mary Jo Lavelle	NUI, Galway
Molly Byrne	NUI, Galway
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