



APPLIED PSYCHOLOGY AROUND THE WORLD

Special Issue: Early Career Marathon
October 2021

IAAP Bulletin

Volume 3, Issue 4

ISSN: 2639-6521

APAW | Special Issue

Table of Contents

Editorial	5
Early Career Marathon Schedule	7
Early Career Marathon Awards & Voting	9
Award Ranking Sheet	10
Assessing and Monitoring School Wellbeing through an Automated Scoring System:	12
<i>Xin Tang</i>	
Schoolday Wellbeing Model	12
<i>Mildred Ojiaku Chioma</i>	
Covid-19-Induced Anxiety and Covid-19 Precautionary Measures as Predictors of Mental Wellbeing of Nigerians	14
<i>Maria V. Zwicker</i>	
(Not) Doing the Right Things for the Wrong Reasons: An Investigation of Consumer Attitudes, Perceptions, and Willingness to Pay for Bio-Based Plastics	15
<i>Aleksa-Carina Putinas-Neugebauer</i>	
COVID-19: Psychological Consequences and changing Consumption Behavior	16
<i>Carolina Garraio</i>	
orking time arrangements and exhaustion: The role of recovery experiences and satisfaction with the schedule	17
<i>Christina Derksen</i>	
Psychological Intervention to Improve Communication and Patient Safety in Obstetrics: Application of the Health Action Process Approach	18
<i>Stéphanie Racine Maurice</i>	
Childhood Socioeconomic Status Does Not Predict Late-life Cognitive Decline in the 1936 Lothian Birth Cohort.....	20
<i>Marianne Couillard Larocque</i>	
An Overview of the Literature on Anxiety in Bipolar Disorders	21

<i>Tiara Ratz</i>	
Strengthening Self-Management and Adherence to Therapy Guidelines in Patients with Hypertension, Chronic Ischemic Heart Disease, or Heart Failure with a Theory-based Digital Health Application	22
<i>Monique Arantes Guimarães</i>	
Learning Strategies at Work, Psychological Flexibility and Work Design among Brazilian Junior Entrepreneurs	24
<i>Rodrigo Costa</i>	
Link Between Narcissism and Rape Myth Acceptance: Moral Disengagement as a Mediator.....	25
<i>Emma Wilson</i>	
To Eat or Not to Eat; A Mindfulness-Based Strategy to Manage Chocolate Cravings.....	26
<i>Dr. Jérémy E. Lemoine</i>	
Profiles of Identity Leader.....	27
<i>Azra Bukva¹</i>	
Opportunity to Foster Excellent Performance in Organisations by Combining Machiavellianism, Quixoteism, and Political Intelligence.....	28
<i>Masa Pupaher</i>	
The Psychotherapy Process with People with Disabilities: Therapists' Perception / Experiences and their View on Disability	29
<i>Guido Martinolli</i>	
Promoting Sustainable Long-Haul Travels: The Impact of Biospheric Values, Service Satisfaction, Distance, and Geographic Location	30
<i>Andrea Bravo Doddoli</i>	
Creation of Cognitive Dissonance from a Sociocultural Historical Premise of the Couple.....	32
<i>Paola Eunice Díaz Rivera</i>	
The Role of Remote Social Contact in Mental Health During the Pandemic	33
<i>Rosario S. Abendan</i>	
Self-Stigma and Quality of Life among Adult Individuals with Tourette Syndrome: A Basis for Psychological Intervention Program	34
<i>Andrian Liem</i>	
Factors Predicting Anxiety and Depression Among Migrant Workers in the Greater China Area During the Early COVID-19 Pandemic	35
<i>Ai Ito</i>	
Positive Effects of a Leader Self-disclosure of a Traumatic Experience	36

Rhalf Jayson F. Guanco

Mediating Effect of Mental Toughness Between COVID-19 Related Anxiety and Thriving Quotient of College Students during the COVID-19 Pandemic37

Rosario S. Abendan

Internet Addiction Behaviors as Predictors of Functional Impairment among College Students38

Section 2: Student Contributions39

Building Back After COVID-19 Through Addressing Health Equity, Mental Health, and Well-being40

Students at the United Nations Webinar49

Mental Health, the Environment, Climate Change and Sustainability: Engaging youth and psychologists for awareness and action, acknowledging the role of Portugal.....50

Self-Esteem Among BASW Students59

Attitude Towards Seeking Therapeutic Interventions for Mental Illness Among Teachers.....61

Section 3: Albert Bandura (1925-2021)71

APAW Mission Statement78

IAAP Board of Directors.....79

Editorial

Pr. Dr. Christine Roland-Lévy, IAAP President (2018-2022)

As we are about to hold our *Early Career Marathon*, which is taking place around the clock on the 16/17th of October 2021, this Special Issue of *Applied Psychology Around the World* (APAW: Volume 3, issue 4) is specifically dedicated to the younger generation of IAAP members, but indeed everyone should read it and attend the event!

The first Section of the issue focuses on the program of the online 24 hours *Early Career Marathon*, which is devoted to *Practice and Science in Applied Psychology*. Among the 23 presenters we have students, mainly PhD students, along with young practitioners and young researchers.

Besides the Opening and Closing remarks, given by the President of IAAP, we also have the following nine keynotes, presented below, in the order of appearance of their presentation, with the title of their talk:

Dr. Pedro Neves, our Secretary General, talks about "*Anticipating Change: On the Relevance of Examining Intentions to Resist Future Change.*"

Dr. José Maria Peiró, one of the former Presidents of IAAP (2011-2014), presents on the topic of "*Digitalization and Professional Practice: The Challenge of Mastering Digital and Digitalized Competences.*"

Dr. Judy Kuriansky, one of our most involved members at the United Nations, provides a stimulating perspective of "*IAAP at the UN: Building on the Past, Looking to the Future.*"

Dr. Janel Gauthier, our Past President (2014-2018), whose topic is about "*Developing and Practicing Ethics: Challenges and Recommendations for Early Career Psychologists.*"

Dr. Lori Foster, IAAP's President-Elect (2022-2026), shows how helpful Applied Psychology can be to the real world, with the theme of "*Applying Psychology to Public Policy Around the Globe.*"



Dr. Michael Frese, one of the former Presidents of IAAP (2002-2006), offers us a broad question: "*What if Applied Psychology Mattered to the World?*"

Dr. Fanny Cheung, a long-term member of IAAP's Board of Directors, who received many awards, and in particular the prestigious *IAAP Distinguished Scientific Contribution Award 2014*, introduces the topic of "*Mainstreaming Culture in Psychology.*"

Dr. Kristina Potočnik, Chair of the Special Project on *Gender Equality*, questions with two other speakers "*How Can International Psychology of Women Advance Gender Equality?*"

Pedro Altungy Labrador, President of our Student Division (2018-2022), is the final Keynote speaker of the event, talking about "*IAAP and the Young Generation of Applied Psychologists.*"

Here, I wish to thank all the participants, and to invite each one of you to join us for this very stimulating Marathon 'around the clock'. You just need to [register](#) to receive the link.

Pedro Neves (who initially gave the idea of offering such a *Marathon*), along with Luminița Pătraș, our Membership Officer, and Pedro Altungy Labrador are the ones who made this project emerge!

Each Early Career presentation is followed by a few minutes of discussion and I really want to thank all the Discussants who did a great job in order to open up some question for the live Q&A period. The 23 abstracts are provided in this issue as we understand that, besides a few of us, most of you will not attend the 24 hours in a row. Therefore, during the week following this very special event through October 31, all the presentations will be available and a competition is offered: each member of IAAP can vote for the top

Editorial cont.

seven presentations. The five presentations with the most votes will receive two years of free membership in IAAP and a Young Board Observer Seat for 2022. The results will be announced on November 2.

In addition, the IAAP Executive Committee (EC) has reviewed all presentations and selected the best two presentations, which will be announced at the closing of this *Early Career Marathon*. The two winners of the best overall presentation, based on the interest of the topic in connection to Applied Psychology, the research method, and the quality of the communication skills and slides will receive special awards: the first award will receive airfare and free registration for the International Congress of Applied Psychology (ICAP) in Beijing, in July 2023. The overall second place will receive free registration for the ICAP in Beijing.

More events are dedicated to the young generation of psychologists, such as the *International Psychology: Students at the United Nations*, which will take place on line this coming October 28. [Look at the advertisement of this webinar](#) which is co-sponsored by IAAP, enclosed in the issue for more information.

Moreover, this Special Issue of APAW, includes a second section based on a report on the United Nations High Level Political Forum (HPLF) side event, organized jointly by IAAP, APA and the United African Congress, with the contributing participation of the World Health Organization (WHO), on the topic of *Building Back after Covid-19 through Addressing Health Equity, Mental Health and Well-Being*. This event was sponsored by the Mission of Sierra Leone along with 15 other countries, with the participation of a total of 28 international high-level representatives, ground-professionals and scientific experts.

The very interesting report was made by a team of students from Division 15: Pedro Altungy, Sara Liéba-na, Stéphanie Racine Maurice, Carlos Velo, Rayna Sardia, Marija Davcheva, and Monique Arantes Guimarães.

This first report is followed by another report about an event related to the role of the United Nations and environment carried out for students at Colombia University Teachers College. *Mental Health, the Environment, Climate Change and Sustainability: Engaging youth and psychologists for awareness and action*, acknowledging the role of Portugal, by Sarah Jordão and Dr. Judy Kuriansky.

This issue also presents papers by young psychologists. The first paper, from Nepal, is on the topic of *Self-esteem Among Students*, by Nishesh Acharya, while the second one, from Sri Lanka, is on the topic of *Attitude Towards Seeking Therapeutic Interventions for Mental Illness Among Teachers*, by Eesa Kushalie Hettige and Dr. Kalharie Pitigala.

Concerning the last Section, it is dedicated to Albert Bandura (1925-2021) and was prepared by Janel Gauthier. In Janel's closing reflections he states that,

“Despite his many achievements, when asked what he was most proud of in his professional life, Al would say that 'the knowledge and guidance he passed on to students' around the world was what he treasured most.”

And so will we.

Christine Roland-Lévy, President of IAAP (2018-2022)

Early Career Marathon Schedule

PRESENTER	DISCUSSANT	LA	NEW YORK	LONDON	PARIS	BEIJING	SYDNEY	ABSTRACT TITLE
Opening Remarks: Christine Roland-Lévy								
Xin Tang	Yiqun Gan	1:15 AM	4:15 AM	9:15 AM	10:15 AM	4:15 PM	7:15 PM	Opening Remarks Integrating Research Assessing and Monitoring School Wellbeing Through an Automated Scoring System: Schoolday Wellbeing Models and Practice
Mildred Ojaku Chioma	Pedro Neves	2:00 AM	5:00 AM	10:00 AM	11:00 AM	5:00 PM	8:00 PM	Covid-19-Induced Anxiety and Covid-19 Precautionary Measures as Predictors of Mental Wellbeing of Nigerians
Maria Zwicker	Erich Kirchler	2:30 AM	5:30 AM	10:30 AM	11:30 AM	5:30 PM	8:30 PM	(Not) Doing the Right Things for the Wrong Reasons: An Investigation of Consumer Attitudes, Perceptions, and Willingness to Pay for Bio-Based Plastics
Keynote - Pedro Neves								
		3:00 AM	6:00 AM	11:00 AM	12:00 PM	6:00 PM	9:00 PM	Participating Change: On the Relevance of Examining Intentions to Resist Future Change
Break								
Alaska-Carina Putinas	Erich Kirchler	4:30 AM	7:30 AM	12:30 PM	1:30 PM	7:30 PM	10:30 PM	COVID-19: Psychological Consequences and Changing Consumption Behavior
Carolina Garratio	Jose Maria Peiro	5:00 AM	8:00 AM	1:00 PM	2:00 PM	8:00 PM	11:00 PM	Working Time Arrangements and Exhaustion: The Role of Recovery Experiences and Satisfaction with the Schedule
Christina Derksen	Lori Foster	5:30 AM	8:30 AM	1:30 PM	2:30 PM	8:30 PM	11:30 PM	Psychological Intervention to Improve Communication and Patient Safety in Obstetrics: Application of the Health Action Process Approach
Keynote - Jose Maria Peiro								
		6:00 AM	9:00 AM	2:00 PM	3:00 PM	9:00 PM	12:00 AM	Digitalization and Professional Practice: The Challenge of Mastering Digital and Digitalized Competences.
Break								
Stéphanie Racine	Lori Foster	7:30 AM	10:30 AM	3:30 PM	4:30 PM	10:30 PM	1:30 AM	Childhood Socioeconomic Status Does Not Predict Late-life Cognitive Decline in the 1936 Lothian Birth Cohort
Marianne Larcoque	Daniel Dodgen	8:00 AM	11:00 AM	4:00 PM	5:00 PM	11:00 PM	2:00 AM	An Overview of the Literature on Anxiety in Bipolar Disorders
Tiara Ratz	Sonia Lippe	8:30 AM	11:30 AM	4:30 PM	5:30 PM	11:30 PM	2:30 AM	Strengthening Self-Management and Adherence to Therapy Guidelines in Patients with Hypertension, Chronic Ischemic Heart Disease, or Heart Failure with a Theory-based Digital Health Application
Keynote - Judy Kuriansky								
		9:00 AM	12:00 PM	5:00 PM	6:00 PM	12:00 AM	3:00 AM	IAAP at the UN: Building on the Past, Looking to the Future
Break								
PRESENTER	DISCUSSANT	LA	NEW YORK	LONDON	PARIS	BEIJING	SYDNEY	ABSTRACT TITLE
Monique Guimarães	Luminița Pătraș	10:30 AM	1:30 PM	6:30 PM	7:30 PM	1:30 AM	4:30 AM	Learning Strategies at Work, Psychological Flexibility and Work Design Among Brazilian Junior Entrepreneurs

PRESENTER	DISCUSSANT	LA	NEW YORK	LONDON	PARIS	BEIJING	SYDNEY	ABSTRACT TITLE
Rodrigo Costa	Luminita Patras	11:00 AM	2:00 PM	7:00 PM	8:00 PM	2:00 AM	5:00 AM	Link Between Narcissism and Rape Myth Acceptance: Moral Disengagement as a Mediator
Emma Wilson	Janel Gauthier	11:30 AM	2:30 PM	7:30 PM	8:30 PM	2:30 AM	5:30 AM	To Eat or Not to Eat: A Mindfulness-based Strategy to Manage Chocolate Cravings
Keynote - Janel Gauthier		12:00 PM	3:00 PM	8:00 PM	9:00 PM	3:00 AM	6:00 AM	Developing and Practicing Ethics: Challenges and Recommendations for Early Career Psychologists
	Break	1:00 PM	4:00 PM	9:00 PM	10:00 PM	4:00 AM	7:00 AM	Break
Jérémy Lemoine	Vincente Martinez-Tur	1:30 PM	4:30 PM	9:30 PM	10:30 PM	4:30 AM	7:30 AM	Profiles of Identity Leader
Azra Bukva	Jérémy Lemoine	2:00 PM	5:00 PM	10:00 PM	11:00 PM	5:00 AM	8:00 AM	Opportunity to Foster Excellent Performance in Organizations by Combining Machiavellianism, Quixotism & Political Intelligence
Masa Pupaher	Susan McDaniel	2:30 PM	5:30 PM	10:30 PM	11:30 PM	5:30 AM	8:30 AM	The Psychotherapy Process with People with Disabilities: a Therapists' Perception/Experiences and Their View on Disability
Keynote - Lori Foster		3:00 PM	6:00 PM	11:00 PM	12:00 AM	6:00 AM	9:00 AM	Applying Psychology to Public Policy Around the Globe
	Break	4:00 PM	7:00 PM	12:00 AM	1:00 AM	7:00 AM	10:00 AM	Break
Guido Martinoli	Bryan Porter	4:30 PM	7:30 PM	12:30 AM	1:30 AM	7:30 AM	10:30 AM	Promoting Sustainable Long-Haul Travels: The Role of Personal and Situational Factors
Andrea Doddoli	Janel Gauthier	5:00 PM	8:00 PM	1:00 AM	2:00 AM	8:00 AM	11:00 AM	Creation of Cognitive Dissonance from a Sociocultural Historical Premise of the Couple
Paola Eunice	Pedro Neves	5:30 PM	8:30 PM	1:30 AM	2:30 AM	8:30 AM	11:30 AM	The Role of Remote Social Contact in Mental Health During the Pandemic
Keynote - Michael Frese		6:00 PM	9:00 PM	2:00 AM	3:00 AM	9:00 AM	12:00 PM	What if Applied Psychology Mattered to the World?
	Break	7:00 PM	10:00 PM	3:00 AM	4:00 AM	10:00 AM	1:00 PM	Break
Rosario Abendan	Robyn Vines	7:30 PM	10:30 PM	3:30 AM	4:30 AM	10:30 AM	1:30 PM	Self-Stigma and Quality of Life among Adult Individuals with Tourette Syndrome: A Basis for Psychological Intervention Program
Andrian Liem	Yiqun Gan	8:00 PM	11:00 PM	4:00 AM	5:00 AM	11:00 AM	2:00 PM	Factors Predicting Anxiety and Depression Among Migrant Workers in the Greater China Area During the Early COVID-19 Pandemic
Ai Ito	Pedro Neves	8:30 PM	11:30 PM	4:30 AM	5:30 AM	11:30 AM	2:30 PM	Positive Effects of a Leader Self-disclosure of a Traumatic Experience
Keynote - Fanny Cheung		9:00 PM	12:00 AM	5:00 AM	6:00 AM	12:00 PM	3:00 PM	Mainstreaming Culture in Psychology
	Break	10:00 PM	1:00 AM	6:00 AM	7:00 AM	1:00 PM	4:00 PM	Break
Rhaff Jayson Guanco	Zhilin Hou	10:30 PM	1:30 AM	6:30 AM	7:30 AM	1:30 PM	4:30 PM	Mediating Effect of Mental Toughness Between COVID-19 Related Anxiety and Thriving Quotient of College Students during the COVID-19 Pandemic
Rosario Abendan	Ai Ito	11:00 PM	2:00 AM	7:00 AM	8:00 AM	2:00 PM	5:00 PM	Internet Addiction Behaviors as Predictors of Functional Impairment Among College Students
Keynote - Kristina Potocnik		11:30 PM	2:30 AM	7:30 AM	8:30 AM	2:30 PM	5:30 PM	How Can International Psychology of Women Advance Gender Equality?
	Keynote - Pedro Alkungy	12:30 AM	3:30 AM	8:30 AM	9:30 AM	3:30 PM	6:30 PM	IAAP and the Young Generation of Applied Psychologists
Closing Remarks - Christine Roland-Lévy		1:00 AM	4:00 AM	9:00 AM	10:00 AM	4:00 PM	7:00 PM	Closing Remarks and Awards

Early Career Marathon Awards & Voting

First and Second Place Presentations

The IAAP Executive Committee will review all presentations before the event and select two winners. In the event of a tie or inconclusive vote, Student Division President Pedro Altungy Labrador will cast the deciding vote.

The First Place winner will be awarded free airfare and registration to the International Congress of Applied Psychology in Beijing in 2023.

The Second Place winner will be awarded free registration to the International Congress of Applied Psychology in Beijing.

Runner Up Awards

All IAAP members will be invited to vote for the top seven presentations. The five presentations with the most votes will be awarded two years free membership in IAAP and a Young Board Observers seat for 2022.

Voting

Voting will be open until October 31 and the winner will be announced on November 2. The link to vote will be emailed to all members on October 17. A printable ranking sheet to use during the marathon is available on the next page.





Early Career Marathon Awards

Use this worksheet to rank the presentations during the Early Career Marathon. Online voting for the top five presentations will start on October 17 at 8:15 AM UTC. The voting form can be accessed in the members area of the IAAP website.

Winners will receive two years free membership in IAAP and a Young Board Observer seat for 2022. Voting will be open until October 31 and the winner will be announced on November 2.

PRESENTER	ABSTRACT TITLE	NOTES / RANKING
Xin Tang	Integrating Research Assessing and Monitoring School Wellbeing Through an Automated Scoring System: Schoolday Wellbeing Models and Practice	
Mildred Ojiaku Chioma	Covid-19-Induced Anxiety and Covid-19 Precautionary Measures as Predictors of Mental Wellbeing of Nigerians	
Maria Zwicker	(Not) Doing the Right Things for the Wrong Reasons: An Investigation of Consumer Attitudes, Perceptions, and Willingness to Pay for Bio-Based Plastics	
Aleska-Carina Putinas	COVID-19: Psychological Consequences and Changing Consumption Behavior	
Carolina Garraio	Working Time Arrangements and Exhaustion: The Role of Recovery Experiences and Satisfaction with the Schedule	
Christina Derksen	Psychological Intervention to Improve Communication and Patient Safety in Obstetrics: Application of the Health Action Process Approach	
Stéphanie Racine	Childhood Socioeconomic Status Does Not Predict Late-life Cognitive Decline in the 1936 Lothian Birth Cohort	
Marianne Couillard Larocque	An Overview of the Literature on Anxiety in Bipolar Disorders	

Tiara Ratz	Strengthening Self-Management and Adherence to Therapy Guidelines in Patients with Hypertension, Chronic Ischemic Heart Disease, or Heart Failure with a Theory-based Digital Health Application	
Monique Guimarães	Learning Strategies at Work, Psychological Flexibility and Work Design Among Brazilian Junior Entrepreneurs	
Rodrigo Costa	Link Between Narcissism and Rape Myth Acceptance: Moral Disengagement as a Mediator	
Emma Wilson	To Eat or Not to Eat; A Mindfulness-based Strategy to Manage Chocolate Cravings	
Jérémy Lemoine	Profiles of Identity Leader	
Azra Bukva	Opportunity to foster excellent performance in organisations by combining Machiavellianism, Quixotism & Political Intelligence	
Masa Pupaher	The Psychotherapy Process with People with Disabilities: a Therapists' Perception/Experiences and Their View on Disability	
Guido Martinolli	Promoting Sustainable Long-Haul Travels: The Role of Personal and Situational Factors	
Andrea Doddoli	Creation of Cognitive Dissonance from a Sociocultural Historical Premise of the Couple	
Paola Eunice	The Role of Remote Social Contact in Mental Health During the Pandemic	
Rosario Abendan	Self-Stigma and Quality of Life among Adult Individuals with Tourette Syndrome: A Basis for Psychological Intervention Program	
Andrian Liem	Factors Predicting Anxiety and Depression Among Migrant Workers in the Greater China Area During the Early COVID-19 Pandemic	
Ai Ito	Positive Effects of a Leader Self-disclosure of a Traumatic Experience	
Rhalf Jayson Guanco	Mediating Effect of Mental Toughness Between COVID-19 Related Anxiety and Thriving Quotient of College Students during the COVID-19 Pandemic	
Rosario Abendan	Internet Addiction Behaviors as Predictors of Functional Impairment Among College Students	

Assessing and Monitoring School Wellbeing through an Automated Scoring System: Schoolday Wellbeing Model

Xin Tang¹, Katja Upadyaya¹, Hiroyuki Toyama¹, Mika Kasanen², Katariina Salmela-Aro¹

Discussant: Yiquan Gan

Division 5 – Educational, Instructional and School Psychology

Division 2 – Psychological Assessment and Evaluation

Students' wellbeing is critical as it marks their positive development in school life and ensures their growth in the future. The assessment of wellbeing has often been static and lagged for the diagnostic/intervention purpose. In this research, we aim to introduce an automated scoring wellbeing system, Schoolday Wellbeing Model, that is featured as dynamic and real-time. During the COVID-19 pandemic, the call for such a system is imperatively needed as students' wellbeing has been largely dampened. The Schoolday model can collect wellbeing data at low cognitive cost, report wellbeing lively at multi-layer (e.g., individual-, class-, school-), and give immediate feedback. The model is constructed on the basis of the School Well-being Model (Konu & Rimpelä, 2002), School Demand-Resource Model (Salmela-Aro & Upadyaya, 2014), and OECD Social-Emotional Skill Model (OECD, 2021). In total, the model included four broad domains and 18 sub-domains: social-emotional skills (i.e., task performance skills, emotional skills, collaboration skills, open-mindedness, and social skills), learning (i.e., self-studying, study support, learning environment, learning material), social relationships (i.e., communication with teachers/peers, communication outside school, student services),

and wellbeing (i.e., physical health, healthy diet, emotions, psychological wellbeing, academic wellbeing).

This presentation also aims to report the psychometric properties of the Schoolday wellbeing model by using the first stage data (N of students = 2551) that we have collected during March-May 2020 around the globe. We then further aim to examine the predictive role of social-emotional skills in wellbeing. Through the analyses (e.g., Confirmatory Factor Analyses [CFA]), we found that the model's all sub-domain has good reliability (Cronbach's alpha = .72 - .85, except one alpha = .69 for academic wellbeing) and structural validity (model fits such as TLI, CFI, and RMSEA are adequate). Our further analyses with linear mixed models showed that task performance skills (e.g., self-control, persistence) and emotion control skills (e.g., stress resistance, emotional control) were the most consistent skills to promote psychological wellbeing, academic wellbeing, and health-related outcomes. Those findings were consistent across the globe.

In sum, our findings suggested that the Schoolday model is a valid skill, learning, and wellbeing

1 Faculty of Educational Sciences, University of Helsinki, Helsinki, Finland

2 School Day Oy, Helsinki, Finland

3 Correspondence concerning this article should be addressed to: Xin Tang, xin.tang@helsinki.fi;

Mika Kasanen, mika.kasanen@schoolday.com; Katariina Salmela-Aro, katariina.salmela-aro@helsinki.fi.

Assessing and Monitoring School Wellbeing through an Automated Scoring System cont.

assessment model for school students. For students who are experiencing less wellbeing, it is possible to help them by building task performance skills and emotional control skills. Moreover, the model is run with the help of an Artificial Intelligence-based system. Through continuous data collecting, scoring, and reporting, the school administrators can recognize the change of wellbeing and identify

the problems if there is a decline in wellbeing. The system will also inform a tailored intervention suggestion to take prompt action. This thus can largely improve our efficiency to provide help for the wellbeing. The future development of the model will also be discussed in the presentation.

Covid-19-Induced Anxiety and Covid-19 Precautionary Measures as Predictors of Mental Wellbeing of Nigerians

Mildred Ojiaku Chioma

Discussant: Pedro Neves

Division 6 – Clinical and Community Psychology

Abstract

The present study investigated the COVID-19-induced anxiety and Covid-19 precautionary measures as predictors of mental wellbeing of Nigerians during the COVID-19 pandemic.

Method

By using a cross-sectional design methodology, 340 participants (58.2% males and 41.8% females) were selected through the snowball sampling technique. Their age ranged from 15 to 56 years ($M=26.66$; $SD=6.485$). Participants responded to the COVID-19-Induced Anxiety Questionnaire (C-19-IAQ), COVID-19 Precautionary Measures Questionnaire (C-19PMQ), and the Warwick-Edinburgh Mental Wellbeing Scale (WEMWBS).

Results

Standard multiple regression analyses indicated that COVID-19 induced-anxiety and COVID-19 precautionary measures significantly predicted mental wellbeing. However, only COVID-19 induced-anxiety independently predicted mental wellbeing.

Conclusion

Based on these findings, the researchers recommended that mental wellbeing in the era of COVID-19 should be prioritized and given necessary attention by governments and other stakeholders. Information on COVID-19 should be structured in a manner that promotes health knowledge of the pandemic rather than inducing fear and anxiety. Individuals are also urged to engage in anxiety-reducing techniques which may help curb the rise of anxiety in these times of the COVID-19.

(Not) Doing the Right Things for the Wrong Reasons: An Investigation of Consumer Attitudes, Perceptions, and Willingness to Pay for Bio-Based Plastics

Maria V. Zwicker^{1*}, Cameron Brick¹, Gert-Jan M. Gruter^{2,3}, Frenk van Harreveld^{1,4}

Discussant: Erich Kirchler

Division 4: Environmental Psychology

Fossil-based plastics are significant contributors to global warming through CO₂ emissions. For more sustainable alternatives to be successful, it is important to ensure that consumers become aware of the benefits of innovations such as bio-based plastics, in order to create demand and a willingness to initially pay more. Given that consumer attitudes and (inaccurate) beliefs can influence the uptake such new technologies, we investigated participants' attitudes towards fossil-based and bio-based plastic, their perceived importance of recycling both types of plastic, their willingness to pay, and their perceptions of bio-based plastic in four studies (total $N = 961$). The pre-registered fourth study experimentally manipulated information about bio-based plastic and measured willingness to pay for different types of plastic. The results suggest participants hold very favorable

attitudes and are willing to pay more for bio-based products. However, they also harbor misconceptions, especially overestimating bio-based plastic's biodegradability, and they find it less important to recycle bio-based than fossil-based plastic. Study 4 provided evidence that educating consumers about the properties of bio-based plastic can dispel misconceptions, retain a favorable attitude and a high willingness to pay. We found mixed evidence for the effect of attitudes on willingness to pay, suggesting other psychological factors may also play a role. We discuss how attitudes and misconceptions affect the uptake of new sustainable technologies such as bio-based plastics and consumers' willingness to purchase them.

1 Department of Social Psychology, University of Amsterdam, Nieuwe Achtergracht 129-B, 1018 WT, Amsterdam, The Netherlands

2 Industrial Sustainable Chemistry, University of Amsterdam, Science Park 904, 1098 XH, Amsterdam, The Netherlands

3 Avantium NV, Zekeringstraat 29, 1014BV Amsterdam, The Netherlands

4 National Institute for Public Health and the Environment (RIVM), Antonie van Leeuwenhoeklaan 9, 3721 MA, Bilthoven, Netherlands

* Correspondence: m.zwicker@uva.nl Tel.: +31 6 87249100

COVID-19: Psychological Consequences and changing Consumption Behavior

Aleksa-Carina Putinas-Neugebauer¹

Discussant: Erich Kirchler

Division 9: Economic Psychology

The world has faced an unprecedented pandemic crisis since the outbreak of the highly contagious Coronavirus, or COVID-19, in China almost 19 months ago. The outbreak of the virus quickly spread all over the world, affecting each and every sector of public and private life as well as numerous collective behaviors. In addition to the physical and mental consequences that the virus brings with it, it also leads to a change in consumer behavior. My empirical research on the Corona crisis thus tackles two goals: First, it focuses on assessing the mental health consequences of COVID-19 for the German public. The purpose is to examine psychological vulnerabilities that go along with the pandemic and investigate how threat perception, generalized anxiety disorder, sleep disturbances, depressive symptoms, and psychological discomfort are affected by the crisis with respect to demographic characteristics, security importance and general affectivity.

Second, this research incorporates psychological components to fully understand how consumer behavior changes in such an exceptional situation and what could be “new normal” consumption patterns after the crisis. This empirical work should help to better understand how a pandemic crisis could affect individual decision and consumption behavior.

Applied psychology helps to delineate an actual picture of human decision making in the twenty first century during an extreme and unfamiliar situation. Furthermore, my work sheds a light on the situation of the highly affected retail sector in general and its challenges, which became, due to Corona, more severe.

To examine the goals mentioned above, I conducted a cross-sectional online survey in Germany during June 2020 (n=320). The results of the study provide interesting insights. The mental health of the population is at great risk as certain psychological and mental health issues associated with the crisis are identified. These findings reinforce previous findings from other countries on the effect of COVID-19 on mental health. Furthermore, the research identified certain changes in consumption behavior and what are predispositional traits that promote a more locally focused purchasing behavior. A detailed analysis of the German retail sector highlights the challenges the retail faces due to changing consumption patterns.

My work thus delivers an actual picture and an assessment on long-term consequences of the Corona pandemic, either on an individual level and on a collective level, as well as strategies to mitigate the negative outcomes of the crisis.

¹ Université de Reims Champagne-Ardenne, France

Working time arrangements and exhaustion: The role of recovery experiences and satisfaction with the schedule

Carolina Garraio¹, Marisa Matias^{1,2}, Paula Mena Matos^{1,2}

Discussant: José Maria Peiró

Division 1: Work and Organizational Psychology

Working time arrangements differently influence the way employees balance their work and family responsibilities. Specific arrangements may pose higher demands and be a source of strain, entailing negative consequences for workers, one of which can be exhaustion. Based on the Job Demands-Resources and the Conservation of Resources theories, we argue that one of the factors that may minimize these consequences is recovery from work, which allows employees to restore resources who are compromised by time demands and thus reduce their impact on the individual. Another one is satisfaction with the work schedule, as it may be related to the employees' possibility to easily conciliate work with personal/family responsibilities. With a sample of 386 workers (n = 287 women; 99 men) and using a Cluster analysis, we identified five working time arrangements: Fixed Standardized, Part-Time, Irregular Standardized, Flexible Standardized, and Nonstandard Work Schedule (NWS). A One-Way ANOVA found that workers in the Irregular Standardized schedule report higher levels of exhaustion compared to the Fixed Standardized and the Part-Time. The exhaustion levels of workers in NWS are higher compared

to the Part-Time workers. A Multiple Linear Regression analysis found that satisfaction with the work schedule predicts lower levels of exhaustion in all clusters and that the effect of recovery experiences varies according to the time arrangement (i.e., higher levels of psychological detachment predicted lower levels of exhaustion in the Fixed Standardized cluster; higher levels of Relaxation predicted lower levels of exhaustion in the Fixed Standardized, Irregular Standardized and NWS; and higher levels of control predicted lower levels of exhaustion in the Flexible Standardized cluster). Lastly, an interaction analysis confirmed the moderator effect of satisfaction with the work schedule in the relationship between recovery experiences and exhaustion in all working time arrangements. This study highlights particularities associated with specific working time arrangements and their impacts on the worker and evidences the importance of recovery experiences and satisfaction with the work schedule in the adaptation to time demands related to these arrangements.

Keywords: working time arrangements, exhaustion, recovery experiences from work, satisfaction with the work schedule, cluster analysis

1 Faculty of Psychology and Education Sciences, University of Porto, Portugal; Email: carolinagarraio@fpce.up.pt

2 Center for Psychology at University of Porto

Psychological Intervention to Improve Communication and Patient Safety in Obstetrics: Application of the Health Action Process Approach

Christina Derksen^{1*}, Kötting, L.¹, Franziska Keller, Martina Schmiedhofer^{1,2}, Sonia Lippke¹

Discussant: Lori Foster

Division 8: Health Psychology

Authors Note: The research was funded by the German Innovation Fund (Project No. 01VSF18023) of The Federal Joint Committee (G-BA).

Background. Human failure and a lack of effective communication are main reasons for preventable adverse events, compromising patient safety in obstetrics. To avoid adverse events, team interventions and communication trainings have been implemented but often lack feasibility in the demanding setting of obstetric care. The research question was whether safe communication can be modeled as a typical health-related behavior in obstetric healthcare workers. Accordingly, the health action process approach was tested regarding its' ability to explain communication behavior and thus help to improve interventions targeting patient safety and patient outcomes.

Methods. In a cross-sectional online survey with N=129 healthcare workers (study 1), associations of social-cognitive variables as hypothesized in the health action process approach were tested in a path analysis and a multiple regression. Preliminary

results were replicated with and informed a training for N=137 obstetric healthcare workers at two university hospitals (study 2) for which 67 post-intervention measures could be matched. No control group was realized due to ethical concerns and the need to train all healthcare workers. A repeated-measures MANOVA was used to compare pre- and post-intervention data.

Results. In the path analyses, intention was significantly related to outcome expectancies in both models ($\beta = .30, p < .001$ and $\beta = .24, p = .004$, respectively). The association between intention and communication behavior was mediated by self-efficacy ($\alpha*\beta = .09, p = .014$ and $\alpha*\beta = .08, p = .028$). Planning was associated with communication behavior only in the second study ($\beta = .18, p = .035$) in which association between intention and communication behavior was not significant ($\beta = .13, p = .153$), indicating a full mediation. Regarding perceived patient safety, self-efficacy was related to fewer triggers of adverse events ($\beta = -.26, p = .01$) in the online sample, while barriers were associated with more triggers ($\beta = .24, p = .013$ and $\beta = .17, p = .013$). Planning of effective

1 Health Psychology and Behavioral Medicine, Psychology and Methods, Jacobs University Bremen gGmbH, Germany Campus Ring 1, 28759 Bremen, Germany

* Correspondence to: Christina Derksen, Jacobs University Bremen gGmbH, Germany Campus Ring 1, 28759 Bremen, Germany; c.derksen@jacobs-university.de; +49 421 200 4732

2 Aktionsbündnis Patientensicherheit e.V., Alte Jakobstraße 81, 10179 Berlin

Psychological intervention to improve communication and patient safety in obstetrics cont.

communication was related with a lower perceived patient safety ($\beta = .21, p = .045$). Communication behavior was only related to perceived patient safety in the second study ($\beta = -.24, p = .016$).

In study 2, healthcare workers rated the training positively (3,3/ 4). At the post-intervention measure, improvements in perceived patient safety ($F(df=1) = 10.67, p = .002$), as well as coping self-efficacy ($F(df=1) = 4.39, p = .041$), could be found; however, the target behavior of safe communication did not change significantly. Further analyses revealed group differences regarding hospital, experience and time.

Discussion. The health action process approach was applicable to safe communication in obstetrics and

can be used to inform future interventions. A short training based on the approach appeared feasible and acceptable. However, perceived patient safety improved but communication behavior did not. Communication behavior and planning of communication seem to be less intuitive and need to be trained carefully. Future research should aim to test a more comprehensive (digital) psychological communication training in a thorough RCT design, i.e. with a control group.

Keywords: Communication training, behavior change, obstetrics, healthcare workers, self-efficacy, patient safety

Childhood Socioeconomic Status Does Not Predict Late-life Cognitive Decline in the 1936 Lothian Birth Cohort

Stéphanie Racine Maurice¹, Alisone Hébert¹, Valérie Turcotte^{1,2}, Olivier Potvin², Carol Hudon^{1,2}, Simon Duchesne^{2,3}

Discussant: Lori Foster

Division 8: Health Psychology

This study examined childhood socioeconomic status (SES) as a predictor of later life cognitive decline. Data came from 519 participants in the Lothian Birth Cohort 1936 (LBC1936) study. SES measures at 11 years of age included parental educational attainment, father's occupational status, household characteristics and a composite measure of global childhood SES (i.e., a total of low SES childhood indicators). Cognitive abilities were assessed by the Mini-Mental State Exam at ages 69.8, 72.8 and 76.7 years. Most indicators of low childhood SES (i.e., father manual worker, less than secondary school father education, household overcrowding, exterior located toilet, and global childhood SES) did not predict cognitive decline

between the ages of 69.8 and 76.7. Participants with less educated mothers showed an increase in cognitive decline ($\beta = -0.132$, $p = 0.048$, CI = -0.80, -0.00). The relationship between maternal educational attainment and cognitive decline became non-significant when controlling for adult SES (i.e., participant educational attainment and occupation). Adult SES did not mediate the latter relationship. This study provides new evidence that childhood SES alone is not strongly associated with cognitive decline. New knowledge is critical to improving population health by identifying life span stages in which interventions might be effective in preventing cognitive decline.

1 Faculté des Sciences Sociales, École de psychologie, Université Laval, Québec, Canada

2 CERVO Brain Research Center, Centre Intégré Universitaire en Santé et Services Sociaux de la Capitale Nationale, Québec, Canada

3 Département de radiologie et médecine nucléaire, Faculté de médecine, Université Laval, Québec, Canada

An Overview of the Literature on Anxiety in Bipolar Disorders

Marianne Couillard Larocque, Louison Gros, Gregory Fortin-Vidah, Michel Angers, Laurence Garceau, Isabelle Fournel, Martin D. Provencher¹

Discussant: Daniel Dodgen

Division 6 : Clinical and Community Psychology

Introduction

Although anxiety is highly prevalent in people with bipolar disorders and has several deleterious impacts on the course of the illness, past reviews have shown that many aspects of the topic remain under-researched. This scoping review aims to provide a comprehensive overview of the literature addressing anxiety in bipolar disorders (AIBD), to assess if the interest in the topic has increased over the past decade and to map the publication trends.

Method

Three databases were searched; all articles were screened based on title and abstract and the remaining articles were assessed for eligibility based on full text. The annual number of articles on AIBD published between 2011 and 2020 was calculated. Articles addressing the subject as a primary topic were classified according to their main focus into four categories and 11 subcategories, in order to identify potential gaps in the knowledge.

Results

A total of 1051 articles were included in the study. Preliminary results indicate a slight increase in the annual number of publications. Only 28.2% of the articles addressed AIBD as a primary topic. Of those, over 50% were of a descriptive nature, primarily covering the observable impacts of the co-morbidity and its clinical characteristics. A smaller proportion of the literature addressed the treatment of AIBD (28.4%) and its underlying processes (13.5%). Of the four categories, the annual number of articles addressing the treatment of AIBD has shown the greatest increase, going from four articles in 2011 to 18 articles in 2020.

Discussion

These results might suggest that researchers' interest in AIBD have increased during this period, especially for aspects surrounding its treatment. However, the results raise important questions on the relevance of continuing to invest the majority of resources in research on descriptive aspects of the topic, while little is still known about the mechanisms underlying AIBD.

¹ Université Laval, Québec, (Québec), Canada

Strengthening Self-Management and Adherence to Therapy Guidelines in Patients with Hypertension, Chronic Ischemic Heart Disease, or Heart Failure with a Theory-based Digital Health Application

Tiara Ratz¹

Discussant: Sonia Lippke

Division 8 – Health Psychology

The evidence-based standard of care for treatment of cardiovascular diseases includes health education, reliable medication adherence and regular self-monitoring of blood pressure, and lifestyle-related changes. Reducing the risk profile for cardiovascular co-morbidity and mortality is a lifelong task and requires patients to have high self-management and self-regulation abilities. Thus, strategies to improve patient adherence to the comprehensive behavioral recommendations are needed.

Digital self-management applications hold the potential to support self-monitoring, facilitate health behavior change, and improve health literacy. However, existing self-management applications that are available in common app stores are rarely scientifically evaluated or based on psychological theories. In 2020, Germany passed a law (the Digital Health Care Act) allowing high standard digital health applications for the treatment of diseases to be prescribed by physicians, with the costs being covered by health insurance. This innovation introduced the evolution from “wellness apps” to scientifically evaluated, theory-based medical devices, fostering the integration of free market economy, applied health psychology, and clinical research.

As a response to the Digital Health Care Act, researchers from Jacobs University Bremen teamed up with a start-up company that develops digital health solutions to design and scientifically evaluate the digital health application “reCardial”. The medical device is a self-management tool for daily monitoring of cardiovascular risk factors and aims to support the adherence to therapy guidelines for patients with hypertension, chronic ischemic heart disease or heart failure. The app content is based on behavior change theory as proposed in the Health Action Process Approach (HAPA) and makes use of behavior change techniques. Within the app, patients are encouraged to set goals, define barriers to health behavior change, create if-then plans, and regularly monitor and critically assess their progress. They are supported by app features such as reminders, visual feedback, biofeedback, gamification, and praise.

Pre-clinical data (n=72) indicate that the reCardial app promotes self-management behaviors and that users regard the app supportive in self-managing their cardiovascular disease. Consequently, the aim of the planned randomized controlled trial is to demonstrate that the use of the reCardial app in addition to standard care shows superiority compared

¹ Department of Psychology & Methods, Jacobs University Bremen, Bremen, Germany

Strengthening Self-Management and Adherence to Therapy Guidelines cont.

to its non-use (i.e., standard care alone) with regards to the increase of therapy guideline adherence after twelve weeks. Eligible patients will be invited by physicians during routine appointments and randomly assigned to the intervention group (reCardial app plus standard care, twelve weeks, n=75) or waiting list (standard care only, twelve weeks, n=75; simple randomization). After twelve weeks, both groups will use the app for another twelve weeks. Therapy guideline adherence, medication adherence, physical activity, and disease self-management self-efficacy will be assessed with validated measures via online

questionnaires at baseline, after twelve weeks, and after 24 weeks. Physician-measured blood pressure will also be collected. Time, group and time*group effects will be analyzed with adjusted linear mixed models.

This project provides implications for improving healthcare and support for patients with cardiovascular disease using a theory-based digital health application, and for the interdisciplinary design and evaluation of digital health applications with high quality methodology.

Learning Strategies at Work, Psychological Flexibility and Work Design among Brazilian Junior Entrepreneurs

Monique Arantes Guimarães, Jairo Eduardo Borges-Andrade¹

Discussant: Luminița Pătraș

Division 1- Work and Organizational Psychology of IAAP

Learning strategies are practices used to promote the acquisition of knowledge and skills at work. These strategies include: (a) active reflection, (b) mental repetition, (c) seeking interpersonal help, (d) seeking help in written material, and (e) practical application. They are informal learning behaviors and may be predicted by situational (e.g.: work design) and personal (e.g.: psychological flexibility at work) characteristics. Work design refers to the dimensions of 1) content of tasks, 2) how these tasks are organized and to the 3) social and 4) physical environments in which they are performed. Psychological flexibility at work is understood as an individual ability to achieve self-directed goals at work, even in the presence of personal challenging experiences. The present study aimed to verify the association of learning strategies with psychological flexibility and work design in Brazilian Junior Enterprises (JEs). JEs are students' associations in higher education institutions that provide a learning environment with dynamic work characteristics and different job demands. JEs negotiate and offer projects and services similarly, to private organizations. A self-report questionnaire was answered by 198 junior entrepreneurs (members of JEs). Psychological flexibility was measured by the Work related Acceptance and Action Questionnaire (WAAQ). Its seven items are answered according to a scale that varies from never (1) to always (7). Furthermore, the first two of those four dimensions of The Work Design Questionnaire (WDQ) were used: knowledge characteristics (20 items) and task characteristics (24 items). These items are answered in a scale that ranges from totally disagree (1) to totally agree (5). The brief-version of the five-factors Learning Strategies at Work Scale (LSW)

was the third measure. Participants rated its 12 items with a 11-point scale ("never use it" to "always use it"). These measures had previous evidence of validity in Brazilian contexts and had satisfactory psychometric properties. Pearson correlation and multiple hierarchical regression were used to analyze data. There were significant positive associations of two learning strategies (active reflection and practical application) with: (a) task and knowledge characteristics (work design dimensions) and (b) psychological flexibility. Additionally, another learning strategy - seeking interpersonal help - and psychological flexibility at work had also a significant positive relationship. The resulting regression models indicated that flexibility and work design may be antecedents of learning strategies at work. In general, the findings suggested that higher scores of flexibility at work and work design characteristics (e.g. decision-making autonomy, problem solving task, task significance) were related to the individual's choice of using more sophisticated learning strategies (e.g. active reflection and practical application). Moreover, junior entrepreneurs with higher levels of flexibility proactively behave toward colleagues to get help for learning. This investigation contributes to evidence-based work and organizational actions in Brazilian JEs by suggesting that they may promote informal learning behaviors. By redesigning work and planning psychological flexibility interventions, these Enterprises may facilitate the use of cognitive and behavioral learning strategies which in turn might be more beneficial for their members as well as for these JE purposes.¹

Keywords: informal learning behaviors; flexibility at work; job design.

¹ Graduate Program in Social, Work and Organizational Psychology, University of Brasília (UnB)

Link Between Narcissism and Rape Myth Acceptance: Moral Disengagement as a Mediator

Rodrigo Costa¹

Discussant: Luminița Pătraș

Division 6: Clinical and Community Psychology

As a personality trait, narcissism has been found to be linked with low empathy for rape victims and with the endorsement of myths related to victim-blaming. Moral disengagement has been found to predict rape-supportive attitudes and sexual entitlement. The present study focused on the link between narcissism and rape myth acceptance and aimed to explore whether this association is mediated by moral disengagement. It also aimed to examine gender differences regarding narcissism and rape myth acceptance and determine what sub-dimension of narcissism more strongly predicts rape myth acceptance. The sample comprised 271 adults recruited via the online and off-line advertisement of this project. No significant gender differences were found regarding total narcissism, leadership/authority, and entitlement/exploitativeness. Males showed significantly higher levels of grandiose/exhibitionism and rape myth acceptance than females.

Narcissism was significantly, yet weakly, associated with the endorsement of rape myths. None of the sub-dimensions of narcissism significantly predicted rape myth acceptance. Moral disengagement was found to significantly mediate the association between narcissism and rape myth acceptance. These findings highlight the effect that self-centeredness and feelings of entitlement has on the endorsement of rape myths, suggesting that this association can be at least partially explained by the use of cognitive mechanisms to justify rape. Future research should explore the various types of rape myths using qualitative methods, assess whether different forms of narcissism (e.g., grandiose, vulnerable) are related with rape myth acceptance to the same degree, and examine whether this link is mediated, or moderated, by other variables, namely psychopathy.

Keywords: narcissism, rape myth acceptance, moral disengagement.

¹ Instituto Universitário da Maia

To Eat or Not to Eat; A Mindfulness-Based Strategy to Manage Chocolate Cravings

Emma Wilson¹

Discussant: Janel Gauthier

Division 6: Clinical & Community Psychology

Background

According to the elaborated intrusion (EI) theory of desire, loading visual working memory should help prevent and reduce cravings because cravings occur when intrusive thoughts are elaborated upon in working memory, often as vivid mental images. Mindfulness-based decentering strategies may also help prevent and reduce cravings since they may divert attention away from craving-related thoughts and mental imagery. This study aimed to see whether a short mindfulness exercise could prevent and reduce chocolate cravings over and above an exercise that used visualization (guided imagery) techniques.

Methods

Participants (N = 108, 58% female) with a mean age of 26.7 years (SD = 9.6) responded to adverts seeking 'chocolate lovers' interested in research on managing cravings for sugary foods such as chocolate bars. To compare the effects of visualization versus decentering on cravings, participants were randomly assigned to one of three conditions: (a) decentering, (b) visualization, (c) mind-wandering control. Participants in each condition received two audio exercises: (1) a 2-min exercise, preceding a craving induction but after initial deprivation and cue exposure, (2) a 4-min exercise, following a craving induction. The audios instructed participants to look at a plate of chocolate that was in front of them whilst either (a) decentering from their thoughts and feelings, (b) engaging in visualization or (c) letting their mind wander. Participants were asked to rate the strength of

their cravings at four time points (Time 1, baseline; Time 2, after the 2-min audio; Time 3, post-craving induction; Time 4, post-4 minute audio). Frequency of craving-related thoughts was also measured at Time 4.

Results

Compared to the control condition, results showed a significant reduction in strength of cravings for the decentering condition after both the 2-min audio ($p < .001$, $d = 0.97$), and the 4-min audio ($p = .018$, $d = 0.49$). Decentering was superior to visualization only after the 2-min audio ($p = .040$, $d = 0.40$). Participants in both the visualization and decentering conditions also had significantly lower frequencies of craving-related thoughts compared to control participants ($p = .005$, $d = 0.70$ and $p = .023$, $d = 0.59$, respectively).

Conclusion

The findings support EI theory and suggest that mindfulness-based decentering strategies may be useful for both the prevention and reduction of cravings, with particular utility in the early stages of craving development. The results of this study add to a growing body of literature that suggests that decentering strategies may be helpful for managing cravings. Given the simplicity of the decentering strategy used in the current study, it would also be relatively easy to incorporate it into existing weight management and healthy eating interventions.

Pre-registration: <https://osf.io/jv3pq>.

¹ emma.wilson@kcl.ac.uk, PhD student at King's College London

Profiles of Identity Leader

Dr. Jérémy E. Lemoine¹

Discussant: Vicente Martinez-Tur

Division 1 – Work and Organizational Psychology

Identity leadership is a recent conceptualization of leadership based on the social identity approach (i.e., social identity theory and self-categorization theory) which describes that leadership derives from the feeling of affiliation with a group. Identity leadership is based around four dimensions: identity entrepreneurship, identity prototypicality, identity advancement, and identity impresarioship. We conducted a study to investigate identity leadership profiles measured with the Identity Leadership Inventory (ILI) and their relationships with major organizational outcomes including job satisfaction, burnout and organizational citizenship behaviors (OCB). We used data from the ILI-Global Project and the sample comprised of 4,505 participants from 26 regions/countries. A latent profile analysis on the four dimensions of the ILI was conducted and three different identity leadership profiles (i.e., strong, moderate, weak) were identified. There were important differences between these three profiles on the levels of identity

prototypicality, identity advancement, identity entrepreneurship and identity impresarioship. Furthermore, these three profiles were relatively consistent across the four dimensions of identity leadership. Additionally, these profiles were associated with different levels of job satisfaction, burnout and OCB. Moreover, there were interaction effects between the identity leadership profiles and the levels of team identification on job satisfaction, burnout and OCB. There were amplified effects of team identification on the three outcomes for leaders who successfully create a sense of belonging within their team. These results, in line with the social identity approach of leadership, extend our knowledge and understanding of identity leadership.¹

Keywords: leadership; social identity; team identification

¹ University of East London, j.lemoine@uel.ac.uk

Opportunity to Foster Excellent Performance in Organisations by Combining Machiavellianism, Quixoteism, and Political Intelligence

Azra Bukva¹

Discussant: J r my Lemoine

Division 1: Work and Organizational Psychology

Division 2: Psychological Assessment and Evaluation

At the beginning of 16th century Niccol  Machiavelli published *The Prince*, a philosophical and political treatise. In that masterpiece he made a compelling case for justifying the use of manipulative and persuasive means to attain and wield power. That ended up to being for ever known as Machiavellianism.

Around 100 years later Miguel de Cervantes published *Don Quixote*, a novel about the adventures of a man who, after reading many chivalric romances decides to set out to “undo endless wrongs and set right endless injustices”. That masterpiece led to coin the now universal adjective of quixotic, which refers to the pursuit of great ideals in an impulsive, and often extravagant, fashion.

Can these two brilliant descriptions of the human nature being put together to lead us to inquire about an intriguing character, its psycho-social causes and behavioral consequences? Additionally, can the outcome of that research be of interest of those who must deal with enterprise of leading an organization? We think these questions can receive a positive answer.

That lead us towards creation of a new motivational profile, called Quixotic Machiavellians (QM). We define them as individuals willing to deploy bi-strategic moves, that is MQP will not hesitate to engage in manipulation of others if this will bring greater good. They are no strangers to wanting to have power and be acknowledged for their achievements as long as

it for better cause. And since the objective of the research is to create a predictive talent management model, within professional setting we’re introducing a political intelligence competency with its 4 aspects (social astuteness, networking ability, apparent sincerity, and influence) as a predictive factor of job performance.

With that, we have defined one general hypothesis:

- QM will show higher tendency towards manipulative strategies as means of obtaining greater good)
- and four additional hypotheses applicable to professional environment examining the QM relationship with job performance, and moderation/mediation effect of political intelligence.

In one of the studies, we have tested the hypothesis that in high-salience of Quixotic Machiavellian’s values condition participants will decide to be more manipulative. The data has been collected from 2 samples: international sample, mainly composed of active work force, and US sample, university students, totaling to 340 participants. As expected, the High QM participants have chosen the most manipulative mean in order to achieve the greater good. This pattern has been the same in both samples and the data supports our general hypothesis revealing a statistically significant ($p < .05$) difference between high QM profiles and other four groups.

The Psychotherapy Process with People with Disabilities: Therapists' Perception / Experiences and their View on Disability

Masa Pupaher

Discussant: Susan McDaniel

Division 6: Clinical and Community Psychology

Division 17: Professional Practice

Regardless of using any of the definitions of disability, therapists need to consider Adler's thesis which is based on his theory of individual psychology. He states that no intrinsic human phenomenon can be studied on its own, but only by taking into account one's personality as a whole. This study aims to examine therapists' points of view on people with disabilities, whether the therapist experiences discomfort when coming into physical contact with a client with blindness, what beliefs are present regarding the reason for entering the therapeutic process for people with physical disabilities, and how therapists perceive a sign language interpreter in therapy with a client with deafness. The study involved 78 participants, 15 male (19.23%) and 63 female (80.77%). The sample consists of 45 educators of the selected psychotherapy approach and 33 certified psychotherapists. The average age of all participants is 44.91 years. For the purpose of obtaining nominal data, a questionnaire was designed. The initial part of the questionnaire includes questions for acquiring demographic data. This part is followed by four sections for each form of disability. The first section consists of 11 statements concerning the therapists point of view on people with disabilities. The second section refers on working with clients with blindness. The content of the five statements of the third section, which relates to psychotherapy with persons with physical disabilities, mainly focus on the reasons for entering into the psychotherapy process of these clients. The last section includes 8 statements which refer to therapists perception of a sign language interpreter in therapy with clients with deafness. The

questionnaire ends with an open question asking about perceived challenges in working with people with disabilities. Results show that therapists think that people with disabilities are not faced only with personal but also societal barriers. Most therapists also believe that there are other topics besides disability, that need to be addressed. The results showed that most therapists would have no difficulties in providing help by guiding a client with blindness. Based on the results, the vast majority of participants believes physical disability is not the main reason for entering the process and also that experiencing one's own physical abilities is not the most important topic that needs to be addressed. The smallest differences between the answers "yes" and "no" are present in experiencing the presence of the interpreter. The reasons may be: experiencing the interpreter as "someone who knows the client best" or concern because of judgements the interpreter could make about the therapists work. Even though our results showed that communication is represented as a common challenge, therapists did not report that level self-disclosure or less spontaneous responses would be a consequence due to the presence of an interpreter.

Nevertheless, it is sometimes difficult to accept the unchangeable reality of people with disabilities as they reflect the absolute incompleteness of human existence and lead us to feelings of our own physical, mental and intellectual vulnerability, which are most human and experienced by all.

Promoting Sustainable Long-Haul Travels: The Impact of Biospheric Values, Service Satisfaction, Distance, and Geographic Location

Guido Martinolli

Discussant: Bryan Porter

Division 13: Traffic and transportation Psychology

Purpose

Long-haul travels represent a significant contributor of CO₂e in the atmosphere (Durberry & Seetanah, 2015). However, research has not addressed yet the exploration of the personal and situational factors that lead to the selection of unsustainable modes of transport for such long trips (De Angelis et al., 2020).

The present study explored personal and situational factors as possible antecedents of travel mode selection for long-distance travels. Among these the most relevant are the biospheric values, namely the extent to which “people judge phenomena on the basis of costs or benefits to ecosystems or the biosphere” (Stern & Dietz, 1994, p. 70), service satisfaction, travel distance, and the geographic location of departure and/or arrival (i.e., island and mainland).

Design and Methodology

A sample of 2312 students that participating in an Erasmus+ exchange program responded to an online survey measuring attitudes, modal choice, and travel distance and determining departure and arrival location. The research design is cross-sectional, and a moderated logistic regression was used for analyzing the data.

Results

Results highlight how biospheric values, service satisfaction, travel distance, and the geographic location of departure and arrival are significant antecedents of travel mode selection for long-haul travels. The sustainability of the selected modes of travel are associated with the here considered values, but situational factors moderate such association.

Limitations

The cross-sectional design precludes causality or chronological order of changes. The used sample refers to the Erasmus+ population, thus lacks in representativity when a different segment of the population is considered.

Research/Practical Implications

Thus, the present paper provides valuable knowledge on which factors to consider when promoting sustainable long-haul travels is the aim. Also, it provides unique insights for more accurate CO₂e estimations, when the incidence of behavioral factors are included in such computations.

Originality/Value

Although, long-haul travels represent a significant

1 ORCID: <https://orcid.org/0000-0002-2864-7979>

Research Institute on Personnel Psychology, Organizational Development and Quality of Working Life (IDOCAL) - University of Valencia
Address: Avenida Blasco Ibañez, 21, 46010 Valencia, Spain, Telephone +39 3381347865, Email address: martinol@alumni.uv.es

Promoting Sustainable Long-Haul Travels cont.

contributor of CO₂e in the atmosphere (Durbarray & Seetanah, 2015), the study of personal and situational factors that lead to the selection of unsustainable modes of transport remains unexplored (De Angelis et al., 2020). The present study analyzes both personal and situational factors and provides the scientific community with relevant findings to promote more sustainable long-haul trips.

References

- De Angelis, M., Prati, G., Tusl, M., Battistini, R., & Pietrantonio, L. (2020). Mobility behaviors of Italian university students and staff: Exploring the moderating role of commuting distances. *International Journal of Sustainable Transportation*, 1-11. <https://doi.org/10.1080/15568318.2020.1771641>
- Durbarray, R., & Seetanah, B. (2014). Assessing the impact of tourism and travel on climate change. *Journal of Hospitality Marketing & Management*, 24(4), 401-410. <https://doi.org/10.1080/19368623.2014.914363>
- Stern, P. C., & Dietz, T. (1994). The value basis of environmental concern. *Journal of Social Issues*, 50(3), 65-84.

Creation of Cognitive Dissonance from a Sociocultural Historical Premise of the Couple

Andrea Bravo Doddoli, Rolando Díaz Loving, Paola Eunice Díaz Rivera

Discussant: Janel Gauthier

Division 3: Psychological & Societal Development

Historical Sociocultural Premises (PHSCs) are norms and beliefs that regulate the behavior of each culture. A premise for Mexican couples is that “Commitment gives formality to couple relationships”. However, individuals do not passively receive PHSCs, they modify or contradict them with their actions, which can lead to cognitive dissonance. So, dissonance occurs when two incongruous cognitions coexist in an individual, caused by either receiving new information or transgressing a cultural norm. The objective of the study is to verify if counter attitudinal opinions on PHSCs about commitment in couple relationships cause cognitive dissonance in individuals, measured as anxiety.

We designed an experiment where we manipulated the PHSCs about couple relationships that individuals received, and the status of the source they came from: 2 (PHSC: Concordant / Counter attitudinal) × 2 (High and low status sources). We measured state anxiety as a dependent variable and the participants’ level of commitment in their couple relationship as a covariate. The sample was made up of 41 participants.

The results of this research showed that, in the low status source group, participants with a concordant

PHSC were more worried, while those who received a counter attitudinal PHSC were calmer. In the first group, there was dissonance due to two incongruous cognitions (educational level and thinking like a low status source). We speculate that the participants have generated a self-concept based on their cognitive abilities, which have been found to change when they have more education. For example, it has been found that the more education one has, there is a greater ability to problem solving, generate hypotheses, question the information received, among other skills to create scientific thinking. Thus, thinking like a fashion and beauty magazine could generate a contradiction to their own self-concept, generating dissonance. To decrease dissonance, some cognition must be changed, since this process is a strategy designed to protect the overall feeling of self-esteem and the Self. Which affected their self-concept, while the condition of high-status article did not generate any differences, may be due either to the fact that the cognitions are not relevant to the participants or because the opinions of an academic expert on the commitment of the couple are not as relevant to them, as it could be the opinion of someone in their close circle, eg, their parents.

The Role of Remote Social Contact in Mental Health During the Pandemic

Paola Eunice Díaz Rivera, Andrea Bravo Doddoli, Christian Enrique Cruz Torres

Discussant: Pedro Neves

Division 8: Health Psychology

Background

Physical distancing to reduce the spread of the SARS-CoV-2 virus decreased face-to-face social interactions, which we know have a positive effect on physical and mental health. As an alternative, remote interactions (through phone calls, video calls and text messages) have increased, however, it is unknown if they have a compensating effect on mental health and happiness.

Aim

This study aimed (a) to compare the influence of face-to-face social contact and remote contact (through phone calls, video calls and text messages) on mental health and subjective well-being; (b) to identify if virtual social contact mitigates the impact of the circumstances experienced during the pandemic on mental health and subjective well-being.

Participants

A total of 852 Mexicans participated in this study.

Method

After informing the participants about the study, they answered an online questionnaire. We measured subjective well-being (satisfaction with life, happiness and positive and negative feelings),

mental health (depression, anxiety and psychosomatic symptoms), the number of social ties maintained face-to-face and remotely (through phone calls, video calls and text messages) and qualitatively, we measured the types of problems experienced during the pandemic.

Results

The results show that being in contact with diverse groups (face-to-face or remotely) is positively correlated with mental health and well-being. For those mildly affected by the consequences of the pandemic, being in contact via phone calls or video calls is a predictor of subjective well-being. Regardless of the impact of the pandemic, being in contact via text messages is a predictor of mental health. Anyhow, face-to-face contact is the most important predictor of mental health and subjective well-being in all participants.

Conclusion

In those mildly affected by the pandemic, virtual contact increases well-being. For those highly affected by the pandemic, virtual contact does not increase well-being, but reduces the negative impact of the pandemic on their mental health. However face-to-face contact is the most important.

Self-Stigma and Quality of Life among Adult Individuals with Tourette Syndrome: A Basis for Psychological Intervention Program

Rosario S. Abendan, R^Pm, R^{Psy}¹

Discussant: Robyn Vines

Division 6: Clinical & Community Psychology

Division 17: Professional Practice

This study aimed to determine the relationship of self-stigma and quality of life among adult individuals with Tourette syndrome (TS). TS is a tic disorder and was classified by the fifth version of Diagnostic and Statistical Manual of Mental Disorders (DSM-5) as a neurodevelopmental motor disorder. It is characterized by multiple motor and vocal tics, which onset is before age 18 years and occurring over a period of at least one year. Self-stigma or internalized stigma occurs when a member of stigmatized group cognitively and emotionally absorbs stigmatizing assumptions and stereotypes about mental illness and comes to believe and relate them to him or herself. Meanwhile, quality of life refers to subjective evaluation of an individual which is embedded in cultural, social, and environment context.

Mixed method sequential explanatory design was utilized to analyze the quantitative and qualitative data. A total of 32 adult individuals aged 18 years old and above and formally diagnosed with TS participated in the quantitative part of the study and accomplished the demographic profile form, Internalized Stigma of Mental Illness Scale (ISMIS) and World Health Organization Quality of Life (WHOQOL-BREF) short version. The qualitative portion of the study included 12 respondents who qualified and took

part in the quantitative portion to answer the online interview questions. Statistical treatment used for quantitative data were Mean computation and Pearson Correlation while Thematic Analysis was utilized for qualitative data.

Results of the quantitative data suggest that age, marital status, and educational attainment are linked to self-stigma and quality of life scores of the respondents. Another finding in the quantitative portion shows that self-stigma and quality of life are negatively correlated. On the other hand, qualitative results revealed the experiences of the respondents that overlap with the constructs of self-stigma (alienation, discrimination experience, and social withdrawal) and quality of life domains (physical, psychological, social and environment). The integrated results identified areas of difficulties of the respondents suggesting the need for psychological intervention. It is therefore recommended the use of Rational Emotive Behavioral Therapy (REBT) that aims to emphasize the importance of cognitive control over emotional states to address self-stigma and improve the quality of life of adult individuals with TS.

Keywords: Tourette syndrome, self-stigma, quality of life, adult individuals, mixed method design

Factors Predicting Anxiety and Depression Among Migrant Workers in the Greater China Area During the Early COVID-19 Pandemic

Andrian Liem¹

Discussant: Yiquan Gan

Division 6 – Clinical and Community Psychology

Division 8 – Health Psychology

Background

Migrant workers have a greater risk of developing psychological problems during their stay in the host country. This study reported the prevalence and factors predicting anxiety and depression among migrant workers in the Greater China area, including Macau, Hong Kong, and Taiwan as they are close to the COVID-19 pandemic epicentrum. Psychological disorders among migrant workers have been investigated but relatively little is known when the migrant workers are in a crisis like the COVID-19 pandemic. Therefore, this study contributed substantially to understanding the prevalence of anxiety and depression among migrant workers early in the crisis.

Methods

An online survey was conducted between February and March 2020 among Indonesian migrant workers in Macau, Hong Kong, and Taiwan with the assistance of the Indonesian Migrant Workers Union. The Generalized Anxiety Disorder-7 (GAD-7) and the Patient Health Questionnaire-9 (PHQ-9) were used to measure the anxiety and depressive symptoms, respectively. Data from 491 participants, with an average age of 36 years old and were predominantly female participants (92.0%), were analyzed using a series of hierarchical logistic regression.

Results

The prevalence rate for anxiety was 31.8% with the

severity level prevalence was 30.3%, 19.6%, and 12.2% for mild, moderate, and severe, respectively. The prevalence rate for depression was 26.9%, with the severity level prevalence was 28.3%, 17.3%, 6.3%, and 3.3% for mild, moderate, moderately severe, and severe respectively. Factors predicting anxiety were age, marital status, income level, educational level, and Cantonese fluency. This model accounted for 13% of the variance in anxiety among participants. Older participants, married, have higher income and education, and more fluent in Cantonese were less likely to experience anxiety than their counterparts. Factors predicting depression were age, marital status, English fluency, and Cantonese fluency. This model accounted for 15% of the variance in depression among participants. Older participants, married, and more fluent in English and Cantonese were less likely to experience depression than their counterparts.

Conclusion

Stakeholders should consider these findings in public health planning, including during the pandemic, such as using multiple languages in any announcement and policy since migrant workers with poor local language fluency have a higher risk to experience anxiety and depression.

Keywords: clinical psychology, health psychology, global health

1 Faculty of Social Sciences, University of Macau, Macau; andrian.liem@uqconnect.edu.au; <https://orcid.org/0000-0002-1746-7235>

Positive Effects of a Leader Self-disclosure of a Traumatic Experience

Ai Ito¹

Discussant: Pedro Neves

Division 1: Work and Organizational Psychology

Drawing upon the Social Exchange Theory (Blau, 1964) applied to the leadership context, the presentation will explore the relationship between charisma, trust, and gratitude, when a leader self-discloses a traumatic experience in public. Sharing stories and anecdotes has been identified as an important antecedent of followers' perceptions of charisma in the leader when combined with a constellation of other tactics (Antonakis, Fenley, & Liechti, 2011). Nevertheless, such research does not outline which types of stories a leader should share in order to expect such effect.

Building on research in clinical psychology (Tsai, Plummer, Kanter, Newring, & Kohlenberg, 2010), previous research has demonstrated that a speech sharing a poignant story of a traumatic experience in public is a powerful charismatic leadership tactic which produces stronger followers' perceptions of charisma and related outcomes indicative of leadership, in comparison with a speech which does not contain any self-disclosure (Ito, 2020). This research delves into leader self-disclosure of traumatic experience by exploring its potential outcomes by stating the following hypothesis: follower's perceptions of charisma towards a leader predicts stronger follower gratitude by prompting follower trust in the leader, for followers exposed to a speech with self-disclosure of traumatic experience in comparison with followers exposed to a speech with no disclosure.

We used the vignette experimental method to test the effect of leader self-disclosure on follower's perceptions of charisma, trust, and gratitude. Participants were all students from an international

program of a French Business School. Participants read a vignette describing a leader who publicly self-discloses a traumatic experience, or a vignette with no disclosure. After participants read one of the two vignettes, they were asked to assess their perceptions of charisma towards this leader, the extent to which they would trust this leader, and how much grateful they feel. The manipulation was effective, and thus provides evidence that the mediation effect of trust on the relationship between charisma and gratitude is stronger for participants exposed to a speech with self-disclosure than those exposed to a speech with no disclosure. Overall, this presentation will argue that leader self-disclosure of traumatic experience is by far a persuasive charismatic leadership tactic which does more than saving the face of a leader.

References

- Antonakis, J., Fenley, M., & Liechti, S. (2011). Can charisma be taught? Tests of two interventions. *Academy of Management Learning & Education*, 10(3), 374-396. <https://doi.org/10.5465/amle.2010.0012>
- Blau, P. M. (1964). *Exchange and power in social life*. John Wiley.
- Ito, A. (2020). *Leader self-disclosure of traumatic loss – “Open your kimono and I will follow you”*. (Doctoral dissertation, Université de Reims Champagne-Ardenne, Reims, France). Retrieved from <https://www.theses.fr/2020REIML008.pdf>
- Tsai, M., Plummer, M. D., Kanter, J. W., Newring, R. W., & Kohlenberg, R. J. (2010). Therapist grief and functional analytic psychotherapy: Strategic self-disclosure of personal loss. *Journal of Contemporary Psychotherapy: On the Cutting Edge of Modern Developments in Psychotherapy*, 40(1), 1-10. <https://doi.org/10.1007/s10879-009-9116-6>

¹ IFC Renmin University of China, 158, Ren'ai Road, Industrial Park, Suzhou, Jiangsu Province CHINA, ai.ito@ifc@outlook.com

Mediating Effect of Mental Toughness Between COVID-19 Related Anxiety and Thriving Quotient of College Students during the COVID-19 Pandemic

Rhalf Jayson F. Guanco¹, Sheryll Ann M. Castillo, Edwin A. Balila

Discussant: ZhiJin Hou

Division 5: Educational, Instructional and School Psychology

Division 6: Clinical and Community Psychology

The COVID-19 pandemic has led to a dramatic change to students' life. The sudden shift to online classes because of COVID-19 placed a unique and serious strain on students, thereby posing psychological challenges and pressures such as anxiety of various concerns. But there remains much to be learned about them and what can be done to lessen their negative effects on student's academic journey. Through a feasible sampling method using a volunteer (opt in) panel for online research methods of SAGE, eight hundred thirty (n=830) sample male (n=146) and female (n=667) college students from public and private higher educational institutions in the Philippines participated in the study. Mediation analysis was conducted to understand the role of mental toughness between COVID-19 related anxiety and Thriving Quotient. COVID-19 Related Anxiety was assessed through the COVID-19 Related Anxiety Scale (CRAS-30) which is a self-constructed survey instrument. Mental Toughness was measured through the adapted and modified Mental Toughness Questionnaire (MTQ-18) and students' Thriving Quotient (TQ) questionnaire was used to assess the thriving of students during the pandemic. High COVID-19

related anxiety, meager levels of mental toughness and thriving quotient were revealed. Correlation analysis showed an inverse relationship between COVID-19 Related Anxiety, Thriving Quotient and Mental Toughness. Moreover, the results revealed a significant full mediation effect of Mental Toughness between COVID-19 Related Anxiety and Thriving Quotient. Specifically, the total effect of COVID-19 related anxiety (COV-19) on Thriving quotient (TQ) was significant ($\beta = -0.139$, $t = 5.587$, $p = .000$). With the inclusion of mental toughness as a mediating variable (MT), the impact of COV-19 on TQ became insignificant. But the indirect effect of COV-19 on TQ through MT was found significant ($\beta = -0.139$, $t = 0.025$, $p = .000$). Building mental toughness among students is paramount to confidently endure the specific challenges such as high COVID-19 related anxiety caused by the pandemic, and thus, move toward their goals and thrive. Strong support from the educational authorities and parents is recommended to help students develop a commendable level of mental toughness during the COVID-19 pandemic.

Keywords: thriving quotient, mental toughness, COVID-19, anxiety, pandemic

¹ Adventist University of the Philippines, RJFGuanco@aup.edu.ph

Internet Addiction Behaviors as Predictors of Functional Impairment among College Students

Rosario S. Abendan, R^Pm, R^{Psy}¹

Discussant: Ai Ito

Division 6: Clinical and Community Psychology

The internet was originally used for military purposes to facilitate communication. However, commercialization leads to worldwide internet use. Use of internet inevitably contributes to our daily life. It has provided the internet users new sources of communication, information and entertainment. As it changes our lifestyles, we also become more and more reliant to the internet. The demand for the internet is increasing and numerous studies have been published regarding the pathological use of the internet or internet addiction. This study aimed to investigate internet addiction as a predictor of functional impairment in young adults specifically to (i) examine the correlation between internet addiction and functional impairment and (ii) identify variables in internet addiction that predicts functional impairment.

A total of 257 young adults participated and filled out a self-report questionnaire including Internet Addiction Test (IAT) and Weiss Functional Impairment Rating Scales Self-Report (WFIRS-S). There were 161 (62.6%) females and 96 (37.4%) males. The participants' ages range were from 18 years old to 24 years old ($M=20.25$, $SD= 2.08$). Pearson correlation

was conducted to examine the relationship between Internet Addiction (Salience, Excessive Use, Neglect Work, Anticipation, Lack of Control, and Neglect Social Life) and Functional Impairment (Family, Work, School, Life Skills, Self-Concept, Social, and Risky Activities). The result shows that there were significant positive correlations among variables at $N=257$, $p < .05$ except between self-concept and neglect social life. Multiple regression analyses were also utilized to find predictors of Functional Impairment (FI) in terms of Internet Addiction (IA). Regression results suggest that IA variables namely: Salience, Neglect Work, Lack of Control, and Neglect Social Life are possible predictors of FI in the Family, Work, School, Self-Concept, Social and Risk. However, no evidence was found in excessive use and anticipation of using the internet to functional impairment. In addition, the result has shown that life skills are not associated with any of the predictors. The result may contribute to the further understanding of psychological problems concerning internet addiction and functional impairment of the individual.

Keywords: Internet addiction, Functional impairments, Young adults

¹ PHILIPPINES, Email Address: rhio0908@gmail.com

Section 2

Student Contributions

Building Back After COVID-19 Through Addressing Health Equity, Mental Health, and Well-being

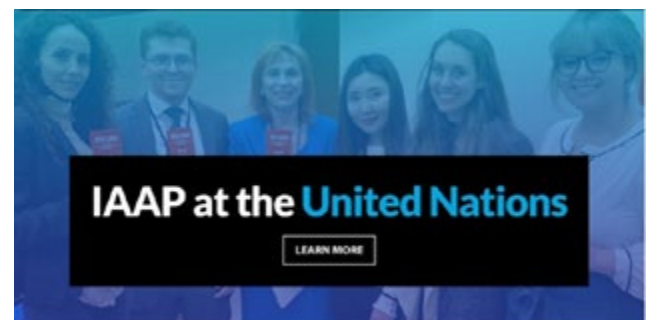
Pedro Altungy, Sara Liébana, Stéphanie Racine Maurice, Carlos Velo, Rayna Sadia, Marija Davcheva and Monique Arantes Guimarães

Last July 12th, the Permanent Mission of the Republic of Sierra Leone to the United Nations (UN) hosted an international forum titled “Building Back Better after COVID-19 through Addressing Health Equity, Mental Health and Well-being: Contributions of Psychological Science and Practice to Leave No One Behind”. This event was co-sponsored by IAAP and moderated by Dr. Judy Kuriansky (representative of the project IAAP in the UN). IAAP President, Dr. Christine Roland-Levy was also responsible for giving the closing remarks of the event. The forum was framed within the High-Level Political Forum on Sustainable Development (HLPF2021), a UN central platform for follow-up and review of the 2030 Agenda for Sustainable Development and the Sustainable Development Goals. Specifically, the project is focused on promoting resilient and sustainable recovery from COVID-19 pandemic by addressing challenges and solutions to achieve physical and mental health equity.

been exacerbated in the context of COVID-19 (World Health Organization; WHO, 2020). And, when we talk about health, we are of course also referring to mental health. 2020. Marginalized and at-risk populations, such as racial and ethnic minorities, migrants and refugees, women and girls, older persons, persons with disabilities and compromising health conditions, and those living in poverty or conflict, are disproportionately vulnerable to experiencing adverse social determinants of health. These factors, in turn, cause physical and mental health disparities, such as limited access to essential healthcare, food, education, and employment.



Holistic health equity is both a driver and an outcome of sustainable, inclusive progress, as nations of the world advance to build back better in the COVID-19 recovery period. There is already an important amount of scientific research showing that health inequities are prevalent globally and have



In this context, applied psychology has been shown to be vital to advancing health equity. Considerable research shows enduring deleterious effects of poverty, racism, and stigma, and the importance of psychosocial resilience in the face of emergencies. Psychologists have also developed strategies to reduce inequalities and implement evidence-based approaches for the prevention and treatment of mental health conditions. Holistic programs integrating physical and mental health are most effective.

This event was divided in three main parts: (1) interventions of UN and WHO High-Level speakers, (2) debate on health equity carried out by scientific experts

Building Back After COVID-19 cont.

and (3) interventions of professionals working on the ground. Thus, the forum counted with the participation of 28 international high-level representatives, ground-professionals and scientific experts who dived into the following specific goals:

1. Explain the scope of global physical and mental health inequities especially in specific cultural contexts and among vulnerable populations facing COVID-19.
2. Propose models to reduce physical and mental health inequities to build back better from COVID-19.
3. Demonstrate the nexus of [Sustainable Development Goals \(SDGs\)](#) 3, 10 and 17 to recover from the pandemic, as well as the inter-linkage with other SDGs under review, namely, 1, 2, 8, and 13.
4. Urge efforts to increase global vaccine access and uptake through myth-busting, de-escalating fears and distrust, and other interventions.
5. Create awareness of evidence-based technological tools to increase access to healthcare.
6. Urge national governments to provide mental health and psychosocial support (MHPSS) in the pandemic recovery period for all communities, particularly those also affected by conflict and crisis.
7. Underscore the importance of partnerships among Member States, UN agencies, other stakeholders, and the psychological community to advance physical and mental health equity, consistent with SDG 17.

Dr. Judy Kuriansky was responsible for presenting and opening this compelling and captivating webinar. She started by introducing the inspirational song



“[One Love](#)” performed by MDG, an astounding musician from Sierra Leone, who “captures the sentiments of these terrible times, the needs of the people but, also, a wonderful way forward”. She then went on to present H.E. Ambassador Alie Kabba, permanent representative of the Mission of Sierra Leone to the UN.

Ambassador Kabba began his intervention highlighting how the group of experts gathered in the event was a proof of the international commitment to strengthen global resilience for achieving a sustainable recovery from the pandemic, addressing both physical and mental health challenges. He stated that Sierra Leone was fully committed to the implementation of the Agenda 2030, emphasizing the importance of SDGs 3 and 17. He also remarked the importance of “delivering mental health and psychosocial support now and in the post-pandemic era”. In addition, Ambassador Kabba underlined that only through international partnership and cooperation, the aforementioned goals will be achieved.

Next speaker, **H.E. Epsy Campbell Barr**, Vice-President of Costa Rica. She commenced her intervention pointing out how psychosocial well-being requires the attention of international governments, academia, and people themselves. She stressed the impact that shut down measures have had both in the mental health of people and in the economic situation of countries (which, in turn, has worsened the psychological problems too). Another interesting reflection made by Vice-President Campbell is that Mental Health services must acknowledge the rich diversity people have (e.g., ethical, sexual, political, social) in order to grant quality and non-discriminative interventions. She highlighted that scientific research has also shown how women and vulnerable groups have been more severely hit by the psycho-social effects of the pandemic. Thus, special attention must be paid by governments and authorities to ensure they have adequate access to psychosocial attention.

Following, **Dr. Jennifer Kelly**, President of the American Psychological Association (APA) focused her

Building Back After COVID-19 cont.

intervention on health equity and the social determinants of health (physical and psychological). As she brilliantly exemplified with a visual example, “Equity is about giving people what they need, when they need it, and in the amount that they need it. Equality doesn’t mean equity”. If health equity is to be reached, social efforts ought to be done to address historical and current injustices she stated. Dr. Kelly declared that UN members should promote conditions for its citizens to attain their best possible health, starting by incorporating mental health as a key component of their health programs. Dr. Kelly ended her intervention speaking about the social conditions (e.g., economic stability, environment, education or access to care) that are involved in health disparities. In this regard, she states that “Psychology has the expertise to address the social determinants of health that contribute to health disparities and can thereby help to improve the overall health of populations” and that, through equity, the disproportionate harm caused by COVID-19 in vulnerable collectives may be mitigated.

The first UN Member state statement was provided by **Ambassador Francisco Lopes**, Permanent Representative of the Mission of Portugal to the UN. In the context of the [Human Rights Council](#), Portugal has been a leader regarding the international call for a paradigm shift in mental health and human rights. Portugal has led the General Assembly Resolution on Mental Health and Human Rights and has also hosted the first international conference discussing climate change and mental health. A decentralized mental health program has also been implemented to ensure equitable access to services to all people suffering from mental health conditions, aiming to reduce inequalities. Furthermore, in connection with two sustainable development goals (e.g., [SDG13: Climate Action](#), [SDG14: Conserve and sustainably use the oceans, seas and marine resources](#)) and mental health, Ambassador Lopes quotes Dr. Kuriansky, stating that “science supports the positive effect of ensuring people’s wellbeing on environmental sustainability”. To further discuss these two goals, Portugal is co-hosting with Kenya, the upcoming [UN Oceans](#)

[Conference](#) held in Lisbon in 2022. Ambassador Lopes concludes by highlighting the importance of increasing access to health and mental services within developing countries as well as Portugal’s commitment to collaborating with partners to achieve global health coverage.

The second UN speaker, **Ambassador Juan Ramón de la Fuente**, Permanent Representative of the Mission of Mexico to the UN, is a former Minister of Health of Mexico that has been working for several years in the fields of psychiatry and mental health. He begins by highlighting the importance of cooperation to address both the physical and psychological inequities that have been exacerbated by the context of COVID-19. The unprecedented global health emergency induced by the pandemic has led Mexico to promote [Resolution 74/274](#), adopted by consensus at the UN General Assembly and produced with the aim of helping address some of the anticipated challenges and inequalities of COVID-19 (e.g., equal access to medicines, vaccines, and medical equipment worldwide). Ambassador de la Fuente states that uneven progress of the COVID-19 vaccination campaign worldwide is unacceptable and that one of Mexico’s priorities is to promote mental health and psychosocial wellbeing within this type of context. Mental health and psychosocial wellbeing are crucial to rebuilding social fabric and if unaddressed, they have the potential of becoming a pandemic of their own with devastating societal consequences and costs. He calls on the need for further evidence-based science to help reduce health inequalities, especially in low-income countries. He concludes by stating that the [HLPF2021](#) is a great opportunity to reflect on possible venues to achieve UN [SDGs](#) within the next decade as well as the necessity of adapted innovative solutions.

Ambassador Issa Konfouru, Permanent Representative of the Mission of the Republic of Mali to the UN, is a former advisor to the Ministry of Foreign Affairs and to the International Cooperation and African Integration. He begins the discussion by bringing attention to the additional societal (e.g.,

Building Back After COVID-19 cont.

terrorism, climate change, education, unemployment) and health (e.g., malaria, HIV AIDS, tuberculosis, Ebola) challenges faced by developing countries within the context of COVID-19 global phenomenon. Ambassador Konfouru calls on international cooperation from different sectors (i.e., government, health organizations, civil society, academia, private sectors) to strengthen existing world organizations with the goal of ensuring equal access to medicines, vaccines, mental health, as well as achieving current [SDGs](#). He concludes by stating that the Republic of Mali remains committed to the COVID-19 pandemic recovery.

Following this statement, Dr. Kuriansky shares that UN Member states have formed a Group of Friends of Mental Health and Wellbeing with four co-chairs (i.e., Bahrain, Belgium, Canada, and Ecuador). She highlights that Ecuador is the first country to include the rights of nature in their constitution equal to the rights of a person and is a leader in recognizing the rights of marginalized populations.

The first speaker of the Group of Friends of Mental Health and Wellbeing is **Ambassador Cristian Espinosa**, Permanent Representative of Ecuador to the UN. Ambassador Espinosa presents the main objective of the Group of Friends which is to raise awareness to the challenges surrounding mental health, as well as to tools, resources and strategies that can help address individual and collective mental health needs. To do so, the group aims to share information about the work of international organizations, the application of national policies, as well as the current pandemic and its negative effects. The ambassador then shares that suicide remains the main cause of death among young people. Additionally, suicide rates have been exacerbated by current economic hardships and global confinements, especially among vulnerable groups (e.g., women, children, migrants). Thus, the wider inequality gap led by poverty has increased mental health issues in our societies. The ambassador quotes part of the [Policy Brief: COVID-19 and the Need for Action on Mental Health](#) (UN, 2020):

Good mental health is critical to the functioning of society at the best of times. It must be front and center of every country's response to and recovery from the COVID-19 pandemic. The mental health and wellbeing of whole societies have been severely impacted by this crisis and are a priority to be addressed urgently. (p. 2)

Ambassador Espinosa concludes by stating that the promise to leave no one behind is the commitment of all states and having access to vaccines is at the core of the solution to reopen economies as soon as possible, preventing the increase of social problems.

Ambassador Jamal Auuwei, the permanent representative of the Mission of the Kingdom of Bahrain to the United Nations, shared his ideas about building back better from COVID-19 pandemic through addressing the essential issues of mental health. He expressed the uncertain perspective on what life will be like after the pandemic, as the long-term effects are multifaceted. As he is currently a co-chair of the group of friends of Mental Health and Wellbeing, Ambassador Auuwei indicated that its members have been promoting knowledge to different aspects of mental health, raising awareness of the matter and discussing best practices from different parts of the world. In his opinion, the results of the pandemic have an enduring negative impact on mental health and it's now more important than ever before to address this matter while there is worldwide attention toward this theme. In conclusion, he highlighted that mental health is a core issue and the 2030 agenda can only be achievable with health as a center approach.

The next invited to speak was **Ambassador Kaha Enamzi** who is a permanent representative of the mission of Georgia to the UND and talked about equity. He began by saying that the pandemic showed that no country, whether developed or in developing, is secure when it comes to health-related issues. He stated that vaccines are a great tool, but they are not the only answer. Their combination with proper investment in critical medical infrastructure is

Building Back After COVID-19 cont.

needed. In his words, it's necessary to have health equity to make the future more secure. Additionally, when it comes to vaccines, Ambassador Enamzi indicated that health equity and equitable access are related not only with consumers but also with the production facilities equitably spread throughout different regions, and the exchange of scientific information to data as well. He concluded his speech by declaring that proper lessons should be learned in order to equip society for the future when similar or other health emergencies happen.

In sequence, the special guest was **Brenda Maison**, which is her English name. She is an elder of the Oji-Cree people from Ontario (Canada) where she does holistic mental, physical, and spiritual counseling. Firstly, she introduced herself by sharing with the audience a little bit of her personal background, where she was raised and from where she was speaking from. Then, Brenda Maison asked to make a prayer in her language and once finished she translated to English. With an emotional message, she ended her prayer by saying: "As we come together in this forum, that You [creator] will continue to provide Your guidance and direction that we need, and we continue to see what we are searching for and with our leaders, each one of them."

After the spiritual moment, **Dr. Omal Mulali** was introduced. Dr. Mulali has a PhD in Political Communication and is currently a permanent representative of the Mission of Lebanon to the UN. In the beginning of her presentation, Dr. Mulali expressed how thankful she was for the important initiative. In her speech, she manifested her concern regarding the millions of pandemic survivors who are chronically ill. Although some people are recovering and the discussion is about building back better, there are millions of people around the world who still do not have access to vaccines and they are really struggling to be safe. In her opinion, it's necessary to question the long-term effects of the COVID-19 disease to plan for a better future. Dr. Mulali indicated that nearly 34 million people who got COVID still have symptoms such as fatigue and respiratory problems, even after 7-8 months of recovery. This fact is going to be

a mental problem for people with a far-reaching impact around the world, especially in developing or vulnerable countries, according to her. In conclusion, she shared her thoughts about the importance of looking at this disability and to insist that vaccines must be shared by everybody.

Mr. Richard Rbiter, Ambassador to Canada, the deputy permanent representative of the mission of Canada to the UN, addressed how Canada is aspiring to do better on mental health issues. He stressed that equity should be inclusive of evidence and the understanding of the people (to be served). He explained that mental health affects all, as he presented that by the age of 40, almost 50 % of Canadians suffer from mental health related issues. His Excellency elaborated on the existence of health inequities in Canada and that they are the results of socio political and economic disadvantages. For instance, experiences of discrimination of racism, historical trauma are important social determinants of health for certain groups including indigenous peoples in Canada, LGBTQ, and black Canadians. Canada is addressing these inequalities through multiple approaches including better data collection, more tailored policies, and increased financing. He emphasised on the need of learning and enabling systemic level of individualized responses as this makes sense for the individual concern. He addressed the role of empathy, de-stigmatization, and all issues at the systemic level must be a comprehensive package of mental health for everyone.

Mr. Ghanshyam Bhandari, the deputy permanent representative of the mission of Nepal to the UN, addressed how the pandemic has affected the physical and psychosocial health of people and how it brought attention to mental health to its centre. He stressed the impacts of the pandemic on the marginalised communities and countries, such as LDCs, LLDCs and SIDS. He explained government of Nepal's efforts in dealing with the impacts of the pandemic; (1) by introducing a health sector emergency response plan in May to provide counselling and support to both patients and health care professionals, (2) Guidelines for the smooth functioning of health services, (3)

Building Back After COVID-19 cont.

free of cost COVID-19 testing and treatment for the needy people. He addressed the need of multistakeholder approach to reach out to the most vulnerable. He lastly emphasized that both holistic health equity and the goals of SDG 3 and 10 would not be possible without addressing the issue of health inequalities and universal access to vaccines to all countries and communities.

Mr. Toturia Kimora, His excellency, Ambassador, mission of Japan, explained Japan's contribution in the global pandemic and building back together. He stressed on the importance of timely and appropriate response to infectious diseases, commitment to universal health coverage, comprehensive health services (both mental and physical) to ensure health equity to the most vulnerable segments of the society in the post COVID-19 recovery. He addressed Japan's collaboration with the Covax facility for equitable access of vaccines and to ensure 1.8 billion doses Covid vaccines for low-income economies through funding from International leaders and the President of Japan. In addition to this, Japan has assisted developing countries in developing hospitals, medical equipment, human resources, and training regarding response to infectious diseases. Lastly, the ambassador ensured that the government of Japan will continue to work with countries to improve basic hygiene, nutrition, and health related issues as the pandemic addressed the importance of these issues in a global network.

Mr. Ambassador Sidiq Abou-Bakarr Wai, Chief of Mission, Embassy of the Republic of Sierra Leone to the United States addressed Building back better after COVID-19. He highlighted that health equity is important and the cooperation of all stakeholders is important in achieving this. He addressed the contribution of 7.5 million from COVID-19 task force, constituted of Sierra Leone diaspora. He also established his collaborations with different organizations to help raise awareness and funds to address the most vulnerable people. He stressed the immense contribution of Sierra Leone government's role in establishing human capital development to address education,

health, and security of the people during COVID-19 pandemic. Lastly, he applauded the event's efforts to call for action.

Mr. Werner Obermeyer, director of the World Health Organization (WHO) office at the UN, discussed the pandemic's disproportional effects on the vulnerable groups especially in countries with weaker health systems. He called for action toward vaccine equity taking in consideration that less than 1 % of people in low-income countries had received one dose of COVID-19 vaccine, whereas developed countries had started to vaccinate teenagers. Moreover, he highlighted the need to invest in health systems and workers, equitable distribution of diagnostics, test treatments, medical supplies, because 'Global health security starts with local health security'. He concluded that the mental health impacts of the pandemic are an increasing concern since they will most likely exceed the direct impact of the virus. In fact, WHO's survey results show that the pandemic halted critical mental health services in more than 93% countries in the world. To achieve health for all a crucial tool is the collaboration with the private sector, NGOs and multiple stakeholders.

In addition, a panel of scientific experts presented their research findings and recommendations. **Dr. Geoffrey Reed**, Professor of Medical Psychology in the Department of Psychiatry, Columbia University gave a speech on *Improving health equity by addressing global mental health needs*. Since the start of the pandemic 76 % to 85 % of people with mental disorders had not received treatment. To make matters worse, the pandemic has exacerbated chronic underfunding of mental health. Dr. Reed provided important recommendations with a special focus on SDGs 3, 10 and 17 including: (1) Universal health coverage that includes mental health, (2) Global mental health community must clearly communicate how investment in mental health increases economic productivity necessary to achieve SDGs, (3) Adopting systematic intervention to improve health of people with mental health disorders (e.g., whole person interventions).

Building Back After COVID-19 cont.

Dr. Sherifa Noman Al-Emadi a psychologist and family counselor at the Doha International Family Institute, illustrated how the primary response to the pandemic prioritized physical health, however soon after, mental health was addressed in government, as well as non-government policies and practices in Qatar. Moreover, she presented the results from several research projects on adolescents and family wellbeing in Qatar. The pandemic had both positive and negative effects on families' wellbeing. Regarding the negative impacts, increased anxiety at home isolation, fears and struggles with work family balance had been reported. However, the pandemic had also brought important positive impacts on wellbeing such as: increase in family cohesion, increased flexible working arrangements that improved the overall mental health. In particular, the pandemic had positive effects on adolescents who reported increased support from their mothers, increased family cohesion due to more time spent with their family in lockdowns. The research results show that the families in Qatar had gotten stronger in times of crisis.

Mr. Johan Carlson, Director-General of the Public Health Agency of Sweden spoke on the topic *Health equity as a driver for and an outcome of sustainable development*. He described how the Swedish public health agency has launched a technical supportive structure for surveillance of actions that focuses not on health outcomes but on determinants of health. This structure addresses targets in 44 areas, most of which are outside the health area such as education, gender equality, employment. The rationale behind it is that disparities in health only to a limited extent can be handled within the health sector. Hence, it is also important to focus on the development in other areas. He concluded that better health will follow as a consequence of the achievement of other identified sustainable development goals. This approach allows local and regional institutions to compare achievements, benchmark the book and get technical support and knowledge transfer from the national level. Thus, true interconnectivity of the SDGs becomes apparent also on the local level.

Next expert speaker was **Dr. Willem Hanekom**, current director of the Africa Health Research Institute. Dr. Hanekom expressed the vital importance of achieving equity in COVID vaccine access and acceptance. He wisely showed a heatmap on vaccines around the world to illustrate the problem. It could be seen how just 1.2% of the African population had been so far vaccinated, vs. the over 60% of people in Europe. Dr. Hanekom also underlined that vaccination has two goals: the prevention of severe diseases and epidemic control. He also mentioned that, even though the Delta variant is increasing rapidly in the UK, the vaccines seem to be controlling the severe disease and, therefore, the impact of the epidemic. However, he indicates that, when many people are not vaccinated, it is easier to see the emergence of other strains.

The last of the experts' panelists was **Dr. María Elena Medina-Mora**, from the National University of Mexico and PAHO adviser. In her presentation, Dra. Medina-Mora addressed the situation of long-termed migrants and refugees in Latin America in the current pandemic situation, which had widened inequalities between them and local communities. As she stated, in this context psychology has much to offer. For instance, 6% of the total regional population is in the process of migration, mainly to Colombia, the USA and Mexico, due to poverty and endemic violence in their mother countries. She informed that, according to WHO, 22% of them have developed mental disorders, and the vast majority, especially children, require care and assistance, including psychosocial intervention. She finished her intervention remarking that mental intervention is not only an emergency in this population but should also be a part of the community care system, where psychologists can help and provide with diagnosis and treatments for mitigating stress and developing coping strategies.

Following, **Ms. Jordan Levinson**, Dimagi project manager for Africa, explained the case of Sierra Leone, where with the COVID-19 outbreak, the government was determined not to repeat the 2015

Building Back After COVID-19 cont.

Ebola crisis mistakes. Thus, they set a central technology system to control pandemic response helped by Dimagi, who developed an app to guide quarantine managers to track cases and deliver quality care. Meanwhile, in Somalia, Ms. Levinson commented how the government partnered with WHO to tackle COVID-19 vaccination, relying on the “Comcare” app to systematize and aggregate information, and facilitate detailed real-time visibility into vaccine distribution with an easy use dashboard. Their products are not only useful for campaigns but for the whole system instead. They are pursuing agreements in Jamaica, Burkina Faso and Guatemala, and developing digital tools to manage mental health by detecting problems and providing basic treatment for mental health conditions.



The first intervention of the Voices from the field section was carried out by **Mr. Gordon Tapper**, representative of the United African Congress. Mr. Tapper presented a ground-breaking pilot project in the Democratic Republic of Congo, in the small mining town of Miabigwe. It was focused on allowing members of the local communities to protect themselves from COVID-19, while strengthening their psychological resilience. This population has been long-term exposed to ethnic segregation, military militias and endemic poverty, and that is why they planned to help them through education and workshops of psychosocial support activities. The project included health education to correct the myths about COVID-19, hired women to make thousands of masks and distribute them in the community, installed 500

hand washing stations and trained the population into how to wash their hands. Furthermore, they provided two culturally adapted infographics to show the sanitation measures. As Mr. Tapper states, an impressive outcome was obtained with statistically significant results in all measures.

After Mr. Tapper’s fabulous intervention, Dr. Kuriansky presented a delightful video titled “Voices from the Field”, in which ground-professionals expressed their feelings and thoughts regarding experience fighting the pandemic. It also provides the thoughts and observations of people around the world about questions such as “How afraid of COVID-19 are you?”, “How has COVID-19 affected you or your community?”, “What are your fears about the vaccine?” or “Will you take the vaccine?”.

After this video, **Dr. Kamal Gautam**, from Nepal, presented the results of a Multi-Stakeholder program to provide psychosocial support in Nepal in response to COVID-19. He began providing a general background of the mental-health situation in Nepal, where 90% of those suffering from any psychological problem don’t have access to appropriate assistance, a situation which has been worsened due to the pandemic. That is the reason why, as Dr. Gautam explains, the Multi-Stakeholder program was developed. A program which was implemented with the support of the government and NGO’s, such as the IAAP (with the direct supervision of Dr. Kuriansky). The initiative provided assistance to the Ministry of Health and Population for providing psychological first-aid, stress management and grief counseling to front line health workers. The idea was that, subsequently, they could also help their peers and people whom they assisted. Thus, the project was conceptualized as an exponential one. The detailed results of the program can be found in [scientific journals](#).

Closing the round of the voices from the field, **Mr. Sujay Santra**, from India, explained the implementation of a hybrid outreach program which combines virtual and face-to-face interventions, the [iKure program](#). It is a social enterprise that delivers primary healthcare, wellness and prevention services to communities in

Building Back After COVID-19 cont.

India through the use of technology in combination with trained front line health workers and a network of both Hub and Spoke Clinics, addressing the health (physical and psychological) needs of population in rural, semi-rural and urban areas. Mr. Santra informed that, so far, the program had reached more than 2.5 million people since it started, while covering up to 12 million people in 8 India's states.

The event finished with the intervention of the IAAP President, **Dr. Christine Roland Lévy**. She started her intervention rightly asserting that, despite the many challenges that we all are facing due to the pandemic, the results from the many civil society initiatives and the different government's commitment shown in the webinar lead us to be hopeful in achieving equity in health and mental health. As she also stated, one important conclusion that can be gathered from the many voices heard in the event is that



only through mutual collaboration and learning can we really tackle the different challenges that we face today, and which are also lying ahead. In this regard, applied psychology combined with on-ground experience can be of great benefit for everyone. As she highlighted, *“Physical and mental health equity along with well-being are crucial in order to achieve the UN SDGs”*.





International Ψ : Students at the United Nations



How can students be more involved in international work, including the United Nations? In this 80-minute webinar, 7 experts speak for 7 minutes each on their specialty. This is followed by 20 minutes of guided dialogue, questions and answers on why and how student can be more involved in the UN and international activities.

Moderator: **Daniel A. Balva**, *APA International Division*

Welcomes: **David Marcotte**, *President, PCUN*

Luca Tateo, *University of Oslo, Norway*

Harold Takooshian, *Editor, PCUN-IAP book series*

Rita M. Rivera, *APA Int'l Division*

Nadine Clopton, *NGO Exec. Comm.*

Elaine P. Congress, *PCUN*

Ani Kalayjian, *Meaningful World*

Irina Novikova, *RUDN, Moscow*

Shenae C. Osborn, *PCUN*

Judy Kuriansky, *Columbia TC, IAAP*

APA Division 52 student opportunities

Youth activities at the UN

Guiding students with UN NGOs

Fellowships for humanitarian work

Publishing UN and students' work

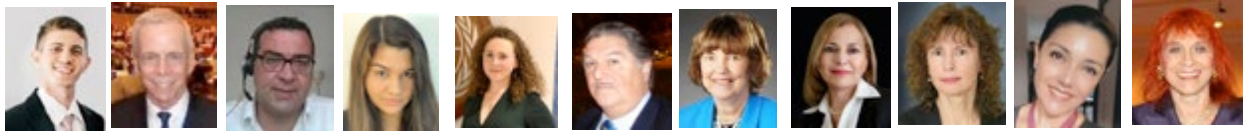
Promoting PCUN with social media

Transformational UN course projects

28 October 2021, Thursday, 9AM-10:30AM EST

(check local times) by Zoom

All are welcome



THREE LEARNING OBJECTIVES:

1. What are roles of psychological science in the United Nations?
2. How can students and young people be more involved in this international work?
3. How can students advance their careers with UN and international work?

*** Note: This webinar is hosted by the APA Division of International Psychology and the Psychology Coalition of NGOs accredited at the UN, in cooperation with other cosponsors (logos below). For details and link, contact: takoosh@aol.com*



Mental Health, the Environment, Climate Change and Sustainability: Engaging youth and psychologists for awareness and action, acknowledging the role of Portugal

Sarah Jordão and Dr. Judy Kuriansky

“It’s our world, we have to protect the people on the planet.”

With those words, Professor Judy Kuriansky enthusiastically introduced the class on “Psychology and the United Nations” at Columbia University Teachers College on 9 March 2021, to the encompassing topic of the nexus between mental health and the environment, with special emphasis on climate change, sustainability, and the special role of events in Portugal and the role of the Mission of Portugal to the United Nations.

This subject matter is consistent with the increasingly popular field of Ecopsychology, which synthesizes ecology and psychology and promotes sustainability.

Addressing climate change is essential to preserve the environment, and a topic which many students, and young people in general, care about.

Portugal has played a particular part in this subject, hosting the first-ever International Summit on Psychology and Global Health focusing on climate change. Also, the Mission of Portugal to the United Nations is preparing to host a major conference in 2022, with Kenya, on the Oceans.

These subjects are elaborated in this paper.

As is typical, the class addressed the Sustainable Development Goals (SDGs) of the UN Agenda 2030. This session focused on the inter-relationship between SDG 3 (insuring health and well-being for all) and specifically target 3.4. (promoting mental health and well-being) with SDG 13 (climate action), SDG 14

(protecting life under water), and SDG 15 (protecting life on land). The topic also intersects with SDG 2 (ending hunger) and SDG 12 (ensuring sustainable production and consumption) reflecting how all the goals of the Agenda are inter-connected, a point which becomes ever evident over the entire course.



Opening slide of class and photo with delegates from LIN Mission of Portugal

As with other modules in the course, the guest speakers were an impressive example of SDG 17 about multi-stakeholder partnerships, since they represented government as well as civil society, academia, and youth. All friends of Dr. Kuriansky, the combination of speakers demonstrated the importance of relationships among distinguished leaders from all perspectives and creating opportunities to bring them together, and especially of sharing such a model with graduate students.

The government guest speakers were delegates from the Mission of Portugal to the United Nations, which is notably taking a lead in the issue of the Oceans (SDG 14), led by H.E. Ambassador Francisco Antonio Duartes Lopes, with three members of his staff: Dr. Sérgio Alves de Carvalho, Legal Advisor; Dra. Joana Estrela, First Secretary, 3rd committee; and Dr. Afonso Lages dos Santos, First Secretary, 2nd committee.

Guest speaker who are leaders in psychological civil society included Dr. Francisco Miranda Rodrigues,

Mental Health, the Environment, Climate Change and Sustainability cont.

president of the Order of Portuguese Psychologists (OPP) who hosted a major international meeting on climate change in Portugal; Dr. Wendy Greenspun, a noted clinical psychologist who is an expert on climate stress; and Shelby Parks, M.A., an outstanding former student of Dr. Kuriansky, whose class project on creating a sustainable environment led to a major movement.

Many students in the “Psychology and the United Nations” class are highly passionate about climate change and figuring out how they can help their own communities and also support global change.

In the opening didactic presentation, Dr. Kuriansky provided an overview of the intersection between mental health and the Sustainable Development Goals (SDGs) 2, 3, 12, 13, 14, & 15, and background on the importance of addressing mental health in the context of the climate crisis. Then, the guests presented their perspectives and students had a chance to engage in meaningful exchanges with them.

Climate change has quickly risen to become one of the top pressing issues faced by our society due to evident and devastating recent events around the world, such as the 2021 Hurricanes Ida and Grace, the 2019-2020 Australian bushfires, Hurricane Maria which ravaged Puerto Rico, the U.S. Virgin Islands, and other surrounding areas in 2017, and the tragically sinking Marshall Islands and other island states. Much of the focus surrounding climate change has been on environmental issues (natural disasters, rising temperature and sea levels, ravaging weather, dangers to ocean and wildlife) and physical health effects (cardiovascular disease, asthma, allergies, malnutrition), although recently, the discussion has included significant psychological impacts (anxiety, depression, trauma, PTSD).

This emphasis on psychological impacts is evident in survey results from the Stress in American 2020 report that 55% of people consider climate change as a significant source of stress (American Psychological Association, 2020). Yet limited research reviews the impact of climate change on mental health. Notably

filling this gap is a new policy by the American Public Health Association (2019). Also, a report released by the American Psychological Association identifies common disorders related to the climate crisis and provides advice for mental health professionals on how to address “climate anxiety” (Clayton et al., 2017).

The class guest speakers elaborated on these topics and the importance of awareness and even small actions in one’s daily life which can lead to big global change.

Climate Anxiety (renamed as “Climate Stress”)



The first guest speaker for class was Dr. Wendy Greenspun, a clinical psychologist in private practice specializing in Family Systems Theory and Psychoanalysis, who was in the Columbia University “family” as a counselor for 25 years in the Counseling and Psychological Services. At the outset, she made an important argument to redefine the commonly-used term “climate anxiety” as “climate stress.”

During her time as a counselor at Columbia, she said she saw firsthand how young people are emotionally effected by climate change, experiencing depression and anxiety surrounding the climate crisis, which can become particularly debilitating due to “existential” and “unknown” elements.

Building on both her personal and professional experience with client stress, she confirmed the integral interaction between SDG 3: Good Health and

Mental Health, the Environment, Climate Change and Sustainability cont.

Wellbeing and SGD 13: Climate Action.

Another of Dr. Greenspun's thought-provoking points was that therapists and clients are "embedded in the same crisis" whereby therapists need to acknowledge their "own emotional reactions" to climate change, she said.

Reactions include distress, grief, anxiety, guilt and despair, all of which are "reasonable" responses to the current climate and environmental emergency.

Emotions can be "down-regulated" by calming and soothing oneself, she advised

Another term Dr. Greenspun introduced was "composting emotions", to describe how she helps conceptualize to her clients how to process difficult emotions and turn them into positive actions, to foster new purpose.

In clinical practice, she said, climate stress can present in different forms of trauma, such as: anticipatory trauma from climate change (pre-traumatic stress); compounded stress due to inequality (chronic traumatic stress); or trauma as a result of environmental disasters and change (post-traumatic stress).

Reactions can also derive from "unprocessed trans-generational trauma" she said, which must be uncovered.

In terms of treatment for climate stress, Dr. Greenspun highlighted the importance of social support, building emotional resilience through action and community involvement, and finding meaning.

She stressed the importance of finding balance in life, sharing the lesson from her own experience of becoming overwhelmed with climate change information.

Thus, it is important, she said, to acknowledge the importance of being in touch with our specific emotions about climate change in the context of our own emotions in general.

Resources were offered, as the Climate Reality Project at www.climaterealityproject.org and the Climate Psychology Alliance at www.climatepsychologyalliance.org.

Climate, Food Waste, Sustainability and Mental Health

Mental health and climate change is inextricably linked to SDG 2 about eradicating hunger. This point was made clear by one of Dr. Kuriansky's former students in the "Psychology and the United Nations" class, Shelby Parks, a recent graduate of the clinical psychology masters program at Columbia University Teachers College (TC), who is an activist about sustainable food systems.

Parks' interest in food waste started from her learning about the creative and effective food waste mitigation program of the government of South Korea, based on behavioral science and psychological principles of creating motivation for change. Specifically, in the South Korea program, a fee is charged based on the amount of food waste discarded in "smart bins" and biodegradable bags which is weighed to determine the amount. This practice resulted in a significant increase in food waste recycling.

Parks applied this interest in food waste to her semester report for the class, about "Food Waste Mitigation in Industrialized Countries: The Problem and Model Solutions to Achieve Sustainable Development, Well-being and Eradication of Hunger through Behavior Science featuring the Case of South Korea" (Parks, 2021). Expressing appreciation to Dr. Kuriansky for this opportunity afforded by the course, Parks was able to realize her personal and professional dream in life to confirm the intersectionality between SDG 2: Zero Hunger, SDG 12: Responsible Consumption and Production, SDG 13: Climate Action, SDG 15: Life on Land and SDG 3: Good Health and Wellbeing.

Then, for her class project, Parks greatly expanded this interest in food waste to co-create an all-day conference, called Conversations for Change, which

Mental Health, the Environment, Climate Change and Sustainability cont.

addressed the need for climate change and environment education, integrating mental health awareness as well as artistic expression (Parks et al., 2021). The impressively comprehensive and multi-dimensional all-day conference was held virtually in May, since the COVID-19 pandemic had caused massive mandated lockdowns. Presentations were from experts, including TC Psychology Professors Judy Kuriansky and Dan Tomasulo, TC's food education and policy professor Dr. Pamela Koch, and practitioners of permaculture on-the-ground in Costa Rica, as well as artists and performers. This led to the founding of an earth leadership school, Ecoversity, to encourage sustainable living.

Parks inspired the class to be aware and educated about their environment and also about how they can make a difference through their voice, and even small individual actions.

"You can do small acts every day to help the environment and manage food waste," she said, advising: not to over-purchase groceries, to buy locally-grown food, to avoid single-use products, and to shop at thrift shops.

She also mentioned the value of storytelling about climate change, sharing her personal enjoyment of "writing stories that do not create fear around climate change, and instead foster hope and change."

Mental Health in Portugal

The next section of the class focused on Portugal and Portuguese speakers, given their leadership and dedication to combating climate change and to addressing mental health.

Dr. Kuriansky began by showing slides of highlights of the country, which prides itself on the kindness of its people, and whose psychologists and government show leadership in mental health.

Over the past 40 years, Portugal has risen to become one of the more progressive and proactive nations, being one of the first countries to decriminalize drugs

in 2001 and to prioritize mental health by funding rehabilitation centers and providing mental health care to those struggling with addiction. Portugal is also a leader in environmental issues, with increasing utilization of renewable energy sources, particularly wind and hydro energy.

Notably, the United Nations Secretary-General António Guterres is from Portugal and is very passionate about the environment and addressing climate change. He previously served as the Prime Minister of Portugal from 1995 to 2002, and then as the United Nations High Commissioner for Refugees, based in Geneva, from 2005 to 2015.

Recently speaking at the Security Council Debate on Climate Change and Peace & Security on 23 February 2021, Secretary-General Guterres stated that, "the climate crisis is the multilateral challenge of our age. It is already impacting every area of human activity. Solving it requires coordination and cooperation on a scale we have never before seen," urging the importance of action about climate change.

The Secretary-General has recently been very vocal also about the importance of mental health and well-being, especially given the impact of the COVID-19 pandemic on people's psychological state and on children, submitting policies on these issues (United Nations Sustainable Development Group, 2020, 2021).

Also especially notable, the President of Portugal, Marcelo Rebelo de Sousa, was very vocal about the importance of mental health, in his welcome opening address at the first-ever International Summit on Psychology and Global Health on the topic of climate change and mental health, co-hosted by the Order of Portuguese Psychologists (OPP) and the American Psychological Association, held on November 14-16, 2019 in Lisbon, Portugal, attended by representative leaders of psychological associations around the world.

In his speech, President de Sousa noted that mental

Mental Health, the Environment, Climate Change and Sustainability cont.

health action is vital for Portuguese people and for all of society.

Video clips of the President's address were played for the class.

"We do recognize how important it is for Portugal, the Portuguese, and for all society...and for all those that face not only climate change problems but daily problems, the contribution of psychologists," he said, expressing strong belief that psychologists have a valued role across society and policy.

The President expressed sincere gratitude to the Portuguese psychologists and all the psychologists gathered at the conference from around the world -- which included Dr. Christine Roland Lévy, the President of the International Association of Applied Psychology, the NGO for which Dr. Kuriansky represents at the United Nations.

He acknowledged the UN Secretary-General, a Portuguese national (as mentioned above) in affirming the statement that "There is no health without mental health".

And President deSousa acknowledged the psychologists gathered at the conference, for their working together, saying that, "Together we are stronger" in emphasizing the importance of multi-nationalism and multilateral cooperation in approaching global issues.

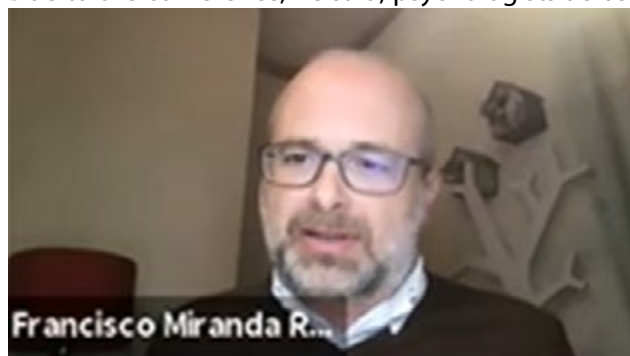
Providing details about the conference and elaborating on the role of psychologists in Portugal and global change, Dr. Francisco Miranda Rodrigues joined the class, speaking on Zoom from Lisbon, Portugal. A social, organizational, and counseling psychologist, as well as an expert in occupational health psychology, Dr. Rodrigues is currently the President of the OPP (the Organization of Portuguese Psychologists) and chaired the international conference about climate change.

Consistent with the conference topic, Dr. Rodrigues' presentation centered around SDG 13: Climate Action and SDG 3: Good Health and Well Being, noting

how the Conference on Climate Change served as a "unifier" and "mobilizer" for psychologists around the world, including about 60 countries and international organizations, to bring awareness to climate change and mental health and also to motivate action, helping psychologists learn how to advocate for mental health in the context of the climate crisis.

Speaking at the conference, the CEO of the American Psychological Association, Arthur Evans, advised psychologists to help people understand and modify their behavior, and work through and cope with challenges, as well as to influence policy leaders and other decision-makers.

Due to the conference, he said, psychologists across



the globe are sharing research and answers on the topic of climate change and also about the COVID-19 pandemic, since there is now a focus on both crises.

He also pointed out the pressing need for government leaders to listen and respect psychologists' input.

The Mission of Portugal to the United Nations

With great appreciation and admiration, Professor Kuriansky introduced the class to the next speaker, H.E. Ambassador Francisco Antonio Duarte Lopes, Permanent Representative of the Mission of Portugal to the United Nations, who has been in his post since 2017.

The Portuguese UN Mission's support of mental health, she described, is eminently evident in their sponsorship of the Human Rights Council Resolution

Mental Health, the Environment, Climate Change and Sustainability cont.

on Mental Health and Human Rights, which establishes mental health as of equal importance to physical health, promotes the vital need for de-stigmatization surrounding mental illness, and stresses the need for mental health services to become more accessible for all people (United Nations Human Rights Office of the High Commissioner, 2020).

Members of the Portugal Mission to the UN have participated in meetings of the United Nations Member State Group of Friends of Mental Health and Well-being, and expressed an interest in sponsoring a General Assembly resolution about mental health and well-being that she and Ambassador Caleb Otto of the Mission of Palau to the UN had drafted after the adoption of the UN Agenda 2030 -- which historically included mental health and well-being as a target -- given its consistency with the Human rights Council resolution they championed.

From the Mission of Portugal to the UN: (top) H.E. Ambassador Francisco Lopes (Below, left to right) Dr. Sérgio Alves de Carvalho Dra. Joana Estrela and Dr. Afonso Lages dos Santos



From the Mission of Portugal to the UN: (top) H.E. Ambassador Francisco Lopes (Below, left to right) Dr. Sérgio Alves de Carvalho Dra. Joana Estrela and Dr. Afonso Lages dos Santos

Ambassador Lopes brought with him three members of his staff: Dr. Sérgio Alves de Carvalho, legal advisor and specialist on the seas and oceans, who is responsible for the UN General Assembly 6th committee; Dr. Afonso Lages dos Santos, First Secretary, responsible for the 2nd committee, Migration and IOM (the International Organization for Migration), the UN Agenda/SDGs, Commission on Population and Development (CPopD), Climate Change, and Funds and Programs from UN agencies; and Dra. Joana Estrela, First secretary from the 3rd Committee, with an extensive portfolio for which she is responsible,

including the UN Security Council focus on “Women, Peace and Security” and “Youth, Peace and Security,” as well as the Commission on the Status of Women (CSW), Commission on Social Development (CSocD), Committee on NGOs (CoNGO), UNWomen, and the Youth Forum.

The discussion addressed the intersection among SDG 3: Good Health and Well Being, as well as SDG 12: Responsible Consumption and Production, SDG 13: Climate Change, SDG 14: Life Below Waters, and SDG 15: Life on Land.

H.E. Ambassador Lopes started his presentation stating, “Many people around the world suffer from mental problems, but the truth is that mental health is still one of the most neglected areas in the U.N. and the U.N. system.”

He acknowledged the shortfalls of UN leaders in terms of taking the mental health crisis seriously. This is important, he explained, given the interaction between climate change and mental health, citing the case of the Marshall Islands, saying, “Imagine the stress of someone in the Marshall Islands who is seeing their village sinking, actually sinking. This is real and very obvious climate stress.”

The U.N. and Portugal have taken action about climate change, he said, remarking how Portugal has been very conscious to ensure that their policies are aligned with international standards set by the U.N, and noting Portugal’s commitment to close all coal power plants by 2021 and to reach carbon neutrality by 2050.

Due to the pandemic, he said, many of the SDG targets, which had 2020 deadlines, were not achieved. Further due to the pandemic, the plan to finance development aid to developing countries has been -- and will continue to be for the foreseeable future -- severely hindered, further setting back SDGs implementation.

Focusing on the important role of youth, he noted that, “Global leaders need pressure from youth” to help bring about climate change action.

Mental Health, the Environment, Climate Change and Sustainability cont.

Accentuating the value of collaboration with, and input from, young people, Ambassador Lopes graciously invited his staff from the mission to join in the conversation, noting that he “still had a lot to learn from his young team.”

Dra. Joana Estrela elaborated that engaging youth is a priority of the Mission of Portugal, revealing that the Oceans Conference planned for 2022, to be co-hosted by Portugal and Kenya, will have a Youth Forum where young people will have the opportunity to voice their concerns and solutions revolving around SDG 14.

Professor Kuriansky voiced great appreciation for this recognition of the role of youth, and said that students in the class are certainly interested in climate change, and can contribute to the efforts of the mission especially regarding the upcoming Ocean conference. Mental health can certainly be an added dimension, she said. Ambassador Lopes agreed, acknowledging that this point of view had not yet been recognized. It was agreed that the contributions of psychology and mental health can be explored, in a special event to occur in conjunction with the Oceans conference, and in collaboration with a focal point from the Portugal Mission.

Dr. Kuriansky was especially thrilled to hear of this plan, since such collaborations are exactly what the community of psychologists accredited as NGOs at the United Nations look to create, to work with governments and highlight the contributions of psychological science and practice to global issues. She also was thrilled that her students can become involved with such a high-level project that would coincide precisely with her goals for teaching the class, to introduce the students to important initiatives where they can “make a true difference in the world.”

After all, as Professor Kuriansky clearly said, there is a connection between mental health and SDG 14. “If we do not have well-being in our life, we will not care for life below water, and vice versa, if we care about life below water, we will feel better about ourselves,” she said.

Dr. Sérgio Alves de Carvalho then acknowledged how the students can contribute and support SDG 14 by their commitment to help raise awareness and advocacy.

Dr. Afonso Lages dos Santos highlighted the link between migration and climate change, noting the legal challenges and complexity surrounding commonly-used terms of “climate refugees,” “migrants,” or “forced displacement” to describe people who are displaced by natural disasters as a result of climate change. This issue is particularly difficult, he pointed out, because “We have still yet to define the approach to this issue, whereas it is already happening”.

A particularly charming moment of the meeting occurred when Ambassador Lopes was asked about his greatest motivation to remain in diplomacy. Smiling, he appeared a little taken aback by the question indicating a personal interest in his background. He revealed that he comes from a family of farmers that had no connection to diplomacy, but found his calling in young adulthood, recalling that he believed, “One of the best ways of serving my country today would be serving my country in diplomacy because I always thought we had a lot to learn from each other.”

Sarah Jordão’s personal reflections

The presentations of the Portuguese speakers had a special impact on me, given my background with Portugal. Ambassador Lopes’ personal account particularly enamored me because it reminded me of my own family. I have a strong and loving connection to Portuguese culture due to both my parents emigrating from Portugal and being raised in a Portuguese community. Thus, throughout the class presentations, I felt incredible pride for my culture. The Portuguese speakers demonstrated how impactful and beautiful it is to care for all people and life on this planet.

This class was rich in both information and conversation surrounding climate change and mental health. I was deeply inspired by the guest speakers and their passion and efforts in addressing climate change

Mental Health, the Environment, Climate Change and Sustainability cont.

as well as highlighting the relationship of climate change and mental health. Like others Dr. Greenspun described, I have experienced “climate stress” at certain times in my life and a sense of powerlessness in terms of reversing the effects of climate change. While I have taken some action -- in that I stopped using plastic straws and bags, and I recycle and shop responsibly by not overbuying groceries and by shopping from local farms and shops -- I find these acts to be drops in the ocean, so to speak. I want to help lead the action of addressing climate change forward, particularly in relation to mental health.

Therefore, I made a commitment to take the leadership to create the event proposed in class, to bring awareness to the relationship between the Ocean and mental health. I know other students will want to join me, like Leo Weaver, who is also a former student in Dr. Kuriansky’s class. Together, we will create a space for youth to share their experiences and knowledge, and to promote steps for action surrounding Ocean-related climate change and mental health.

Class Overview

Title: Psychology at the United Nations: Mental Health, Climate Change, and Ecopsychology, featuring the UN Mission of Portugal and the Oceans

Date/Time: Tuesday, 9 March 2021, 5:00PM-7:00PM

Location: Zoom

Moderator: Professor Judy Kuriansky

Panelists: Dr. Wendy Greenspun, clinical psychologist; Shelby Parks, M.A.; Dr. Francisco Miranda Rodrigues, president of Order of Portuguese Psychologists (OPP); H.E. Ambassador Francisco Antonio Duarte Lopes, Permanent Resident of the Mission of Portugal to the UN; Dr. Sérgio Alves de Carvalho, Mission of Portugal, Legal Advisor; Dra. Joana Estrela, Mission of Portugal: First Secretary – 3rd committee; Dr. Afonso Lages dos Santos, Mission of Portugal: First Secretary – 2nd committee

References

- American Psychological Association. (2020). Stress in America 2020: A National Mental Health Crisis. <https://www.apa.org/news/press/releases/stress/2020/sia-mental-health-crisis.pdf>
- American Public Health Association. (2019). Addressing the Impact of Climate Change on Mental Health and Well-being. <https://apha.org/policies-and-advocacy/public-health-policy-statements/policy-database/2020/01/13/addressing-the-impacts-of-climate-change-on-mental-health-and-well-being>
- Clayton, S., Manning, C. M., Krygsman, K., & Speiser, M. (2017). Mental Health and Our Changing Climate: Impacts, Implications, and Guidance. Washington, D.C.: American Psychological Association, and ecoAmerica. <https://www.apa.org/news/press/releases/2017/03/mental-health-climate.pdf>
- Kuriansky, J. (2019). Climate Change and Disaster Recovery at the United Nations: Activities, Achievements and Contributions of the IAAP New York Team. *Applied Psychology Around the World*, 1(3), 49-55. https://iaapsy.org/site/assets/files/1082/apaw_vol1i3.pdf
- Kuriansky, J., Magnabosco, J. & Otto, J. (2020). Climate Change, Mental Health and Wellbeing: A New Policy Statement for Advocacy. *Applied Psychology Around the World*. 2:3. 27-32. https://iaapsy.org/site/assets/files/1082/apaw_2020_sep_vol2_3.pdf
- Kuriansky, J., LeMay, M. & Kumar, A. (2015). Paradigm Shifts in Nature and Well-being: Principles, Programs, and Policies about the Environment and Climate Change with Actions by the United Nations for a Sustainable Future.” In Nemeth, D.G., and Kuriansky, J. (Eds., Volume 11: Interventions and Policy). *Ecopsychology: Advances in the Intersection of Psychology and Environmental Protection*, Santa Barbara, California: ABC-CLIO/Praeger.
- Parks, S. A. (2021a). Food Waste Mitigation in Industrialized Countries: The Problem and Model Solutions to Achieve Sustainable Development, Well-being and Eradication of Hunger through Behavior Science featuring the Case of South Korea. *International Association of Applied Psychology: IAAP at the United Nations*. <https://iaapsy.org/iaap-and-the-united-nations/reports-meetings-events/food-waste-mitigation-achieving-sustainable-development-well-being-and-hunger-eradication-applying-behavior-science-in-the/>

Mental Health, the Environment, Climate Change and Sustainability cont.

Parks, S.A., Kuriansky, J., Koch, P., Rosenthal, A. & Brooks, S. (2021, submitted for publication). Mitigating the Consequences of COVID-19: Evolution of an Ecoresilience Model for the People and the Planet.

United Nations Human Rights Office of the High Commissioner. (2020). The Right to Mental Health. <https://www.ohchr.org/EN/Issues/Health/Pages/RightToMentalHealth.aspx>

United Nations Sustainable Development Group (2020). Policy Brief: The Impact of COVID-19 on children. <https://unsdg.un.org/resources/policy-brief-impact-covid-19-children>

United Nations Sustainable Development Group (2021). Policy Brief: COVID-19 and the Need for Action on Mental Health. <https://unsdg.un.org/resources/policy-brief-covid-19-and-need-action-mental-health>

Authors:

Sarah Jordão, member of the Student Division of the International Association of Applied Psychology pursuing a masters' degree in the Department of Clinical Psychology, Columbia University Teachers College, and a student in Professor Judy Kuriansky's class on "Psychology and the United Nations".

Dr. Judy Kuriansky, Department of Clinical Psychology, Columbia University Teachers College and NGO Representative of the International Association of Applied Psychology to the United Nations.

Self-Esteem Among BASW Students

Nishesh Acharya

We all want to feel good about self. Feeling good about self is so important that it has been able to grab the interest of psychologists for more than a century, by the name 'self-esteem'. Self-esteem is one of the oldest concepts studied of human psychology. It is also the third most used term in psychological literature. (Rodewalt & Tragakis 2003). The term 'self-esteem' was first used by American psychologist and philosopher William James (Hewitt, 2005; Seligman, 1996) to describe how we view our self-image, and whether or not we approve of it. Psychologist Morris Rosenberg defines self-esteem simply as one's attitude towards ones self, which can be positive or negative (1965). Rosenberg also developed Rosenberg's self-esteem scale (RSES), which is the first and most popular tool for the measurement of self-esteem (Miller, 2020). Self-esteem became so popular that in 1986, the California state of USA established the "California Task Force to Promote Self-Esteem and Personal and Social Responsibility" with the belief that by raising children's esteem, academic improvement social kindness, and personal success in life would occur. This resulted in schools adding curriculum and changing teaching styles to boost the self-esteem of students. (Singal, 2017)

Nepal is a geographically, culturally, and socio-economically diverse country. There are 126 ethnic groups speaking 123 different languages in Nepal (2012). Though more than 25% of the population is still under the poverty line (2011), the society is also economically diverse. Also, society and lifestyle is rapidly changing with globalization and progress in technology. Educational institutes are the places where all the diversities meet. Students from different backgrounds gather, interact and study together under the same roof for years. It is always fascinating to think if these diversities have any impact on the self-esteem of the students.

A descriptive cross-sectional study was conducted

among Bachelor level students majoring in social work in Nepal. The general objective of the research was to study the level of self-esteem among social work students of Bachelor level of different colleges of Kathmandu valley. The specific objectives were to access the level of self-esteem BASW students of Kathmandu valley, to study the socio-demographic characteristics of the respondents and to find out the association between the selected socio-demographic variables and self-esteem level.

The study used Self-concept inventory developed by Dr. Usha Kiran Subba, DPhil and Dr. Timothy Aryal, PhD to assess the self-esteem level of students. From the responses entered in the questionnaire, a self-esteem score for each respondent was calculated. The questionnaire categorizes the obtained self-esteem scores in three areas- low level of self-esteem, average level of self-esteem, and high level of self-esteem. A different set of questions was developed to collect data for socio-demographic variables. The socio-demographic questionnaire collected information on eleven different variables which included age, sex, religion, family type, caste, major source of family income, total family income, education of parents, grades, pocket money/income of participant, and background of participant. Data collection was done using Google forms and data was analyzed using IBM SPSS 20 software.

The total number of respondents was 218, which included 98 males and 120 females. More than 70% of the respondents were from the age group 20-23 years. 39.7% of the participants had some kind of job whereas 68.3% did not a job. The average monthly salary of students with a job was 4,943 Nepalese Rupee (\$42.68 USD) and the average pocket money of students without a job was NRs.16,826 (\$145.29 USD). The highest level of education achieved by fathers was below high-school for 45.8% of students. Similarly, the highest level of education achieved by

Self-Esteem Among BASW Students cont.

mothers for 64.6% of participants was below high school. The monthly household income of 24% of participants was below NRs. 30,000 (\$260 USD) and only 6.4% of participants had a monthly household income of more than NRs. 135,000 (\$1,160) USD.

The data analysis revealed that 27.5% of the students had a low level of self-esteem, 38.5% had a medium level of self-esteem, and 34% had a high level of self-esteem. The mean self-esteem score of bachelor-level social work students of Kathmandu Valley fell under 'average level of self-esteem'. A Chi-square test was conducted to find out the association between self-esteem scores and different demographic variables. The Chi-square test revealed that only the job status of the student had a significant association with the level of self-esteem of the participant (P-value = 0.034, χ^2 value = 6.791 at degree of freedom = 2). Other demographic variables like family income, exam grades, education of parents, etc. did not show any significant association with self-esteem score at a confidence level of 95%.

In Nepali society, parents generally do not encourage children to work and study at the same time. There is a general assumption that this distracts the children from their studies and has a bad impact on their overall success. This is a study conducted with limited resources, sample, and time frame, but the findings of this study question this assumption. Also, maybe parents need to change their views as a society, economy, lifestyle, and needs of children are changing? Further in-depth study on this can find the answers.

References

- Hewitt, J.P., (2005). The social construction of self-esteem. In Snyder, C.R., & Lopez, S.J. (Eds.), *Handbook of Positive Psychology* (pp.135-148). New York : Oxford University
- Miller, K. D. (2020, March 12). The Rosenberg Self-Esteem Scale 9 More Questionnaires. PositivePsychology.com. Retrieved from <https://positivepsychology.com/rosenberg-self-esteem-scale-questionnaires/>
- National population and housing census 2011 (Vol. 1, 3-4). (2012). Retrieved from <https://unstats.un.org/unsd/demographic/sources/census/wphc/Nepal/Nepal-Census-2011-Vol1.pdf>
- Nepal Living Standards Survey Household 2010-2011 (Vol. 1). (2011). Kathmandu, Nepal: Central Bureau of Statistics (CBS).
- Rodewalt, F. & M. W. Tragakis. (2003). Self-esteem and self-regulation: Toward optimal studies of self-esteem. *Psychological Inquiry*. Vol. 14, No. 1, 66–70. <https://www.jstor.org/stable/1449045>
- Rosenberg, M. (1965). *Society and the Adolescent Self-Image*. Princeton University Press, Princeton NJ .326. doi:10.1515/9781400876136
- Seligman, M. (1996). *The optimistic child*. New York : HarperCollins
- Singal, J. (2017, May 30). How the Self-Esteem Craze Took Over America. *The Cut*. Retrieved from <https://www.thecut.com/2017/05/self-esteem-grit-do-they-really-help.html>
- Ward, S. (1996). Filling the World with Self-Esteem: A Social History of Truth-Making. *The Canadian Journal of Sociology / Cahiers Canadiens De Sociologie*, 21(1), 1-23. doi:10.2307/3341430

Attitude Towards Seeking Therapeutic Interventions for Mental Illness Among Teachers

Eesa Kushalie Hettige¹, Dr. Kalharie Pitigala²

This quantitative study explores the mental health literacy and how it has an effect on the attitude towards seeking therapeutic interventions, among a group of secondary school teachers. Teachers play a crucial role in shaping the lives of young children with mental or developmental disorders and they themselves may experience stress, burnout and other issues. Hence, it helps to further look into how demographic characteristics of teachers, such as level of education affect mental health literacy and whether their attitude is positive or negative towards seeking professional help for mental illnesses. The study focused on a sample of 117 secondary school teachers in the Colombo district, between grades 6-8 recruited for the study through social media platforms such as Facebook and Instagram. The data collection was done via an online survey form including demographic questions, the Mental Help Seeking Attitudes Scale (MHSAS) and the Mental Health Literacy Scale (MHLS). A simple linear regression test showed that the independent variable (sum of the MHLS) was able to predict the outcome of the dependent variable (mean score of MHSAS). The study shows that the level of mental health literacy can predict if one has a positive or negative attitude towards seeking therapeutic help. Future implications of this study suggest using a larger sample size for generalizability and a qualitative study method to gather more data in relation to awareness of mental illnesses and seeking therapy.

Introduction

The number of people seeking psychological help is slowly but surely on the rise. Seeking help for mental

illnesses is not only about treating it or managing it, rather, a way of living with positive mental health to lead a full life. Since the start of the Covid-19 pandemic, most individuals have found it to be a time full of stress, fear, anxiety and feelings of extreme overwhelm, even to those who are trying to cope with pre-existing health conditions. During this period, symptoms may precipitate or worsen, leading to situational or chronic mental health conditions (Coping with stress, 2020). Furthermore, education delivery methods have changed, which have led teachers to employ new methods to do their best. Not only have teachers switched to online methods, but they have also had to find balance between their work and home life, which can be quite stressful. A research done in England, found that teachers were worried about vulnerable children (Kim and Asbury, 2020). It is known that teachers experience burnout under prolonged stressful conditions which can lower their confidence (Buric & Kim, 2020).

In 2017, the global estimate of people with a mental health condition was close to 792 million people. The highest number was recorded for anxiety disorders, depression, followed with substance use and other disorders. In Sri Lanka, the highest prevailing mental health condition has been depression at 3.44% and anxiety disorders at 3.37% followed by other mental health disorders (Ritchie & Roser, 2018). Most mental illnesses can be triggered under stressful conditions (Stress, 2020), which is why it is important that teachers just like any other person needs to be aware that it is okay to seek help, when it is difficult to cope. For the longest time, individuals have held a negative

1 Graduate of Cardiff Metropolitan University (ICBT), Sri Lanka – eesakushalie@gmail.com

2 Child Adolescent and Counseling Psychologist (Visiting Consultant) Asiri Hospital Holdings, Sri Lanka – kalharie_30@yahoo.com

attitude or a stigmatic outlook on seeking therapeutic help for mental illnesses. This stigma can be affected with one's knowledge of mental illnesses, cultural factors and other. People's attitudes towards a topic could be positive or negative depending on the knowledge they hold in this area (McLeod, 2018). In fact, Sri Lankan communities see individuals with mental illnesses as violent people and they have a tendency to believe that more traditional healing methods are effective (Samarasekare et al., 2012; Gomez et al., 2017).

According to the 2016 Census and Statistics, 3424 male and female teachers were employed in private schools, which represented 49.8% of the total population of private school teachers in Sri Lanka (School Census, 2016). The specific problem is that many individuals lack the knowledge around mental illness, which in turn affects their attitude towards reaching out for help, hindering them from receiving the deserved treatment. Taking these facts into consideration, the focus of this study was to find out if teachers' being part of the education sector, hold a positive or negative attitude towards seeking psychological help and if their knowledge in the area of mental illnesses has any effect on it.

1.1 Stigma and Attitudes toward Help-Seeking Behaviors

Attitudes as we know can be a great predictor of behavior towards something in particular. Help seeking in general refers to being aware of the problem, the readiness to receive or seek out treatment (Chandrasekara, 2016). The behavior of help seeking can be understood by further exploration of attitudes and what might be influencing these attitudes. An individual's attitude towards mental illness could be influenced by religious ideations, stigma (Brenner et al., 2018) and lack of knowledge (Picco et al., 2018). Mental illnesses are prevalent and the diagnoses continue to rise, especially among adolescents and young adults, although a less number of people seek treatment due to the prevailing stigma. There is no effective way of reducing stigma around seeking therapeutic help, but understanding the reasons

behind this stigma, could help improve the interventions needed to reduce it and increase help-seeking behaviors (Talebi et al., 2016). In addition, one's social group can also be an influential factor, whether it is a higher self-esteem or social support, in having a positive outlook towards therapy (Brenner et al., 2018). This societal, traditional outlook on seeking help can be a perpetuating factor towards stigma around seeking therapeutic help.

Research related to Asia, have focused on psychological help in terms of an individual's personality, cultural traits or the stigma that revolves around talking about family problems. In the past, it has been suggested that Koreans, have reached out for traditional help in regard to psychological issues, by reaching out to religious clergy, community members or even family (Choi & Doh, 2019). In a Nepal study, it was found that caregivers with an education, were more likely to dismiss the myths around mental illness than those who were not educated. However, the patients displaying behavioral symptoms due to their mental illness was more likely to be viewed with a negative attitude (Neupane et al., 2016). Not much research exists around attitudes toward mental illness in Sri Lanka, however, a study based on the Theory of Planned Behavior was done with students from state universities, giving results that suggest that female students and the students who are studying psychology are more likely to have a positive attitude towards seeking psychological help than students of other subject areas (Chandrasekara, 2016).

1.2 Mental Health Literacy and Seeking Help

Mental health literacy (MHL) is the ability to distinguish stress from other characteristics of mental illnesses and the beliefs and knowledge one has regarding the risk factors and the mental health help available through professionals (Jorm et al., 1997). It further includes knowing how to gather information regarding mental health, awareness of treatments and even causes of mental illnesses (O'Keeffe et al., 2016). Higher recognition levels of mental illness have been associated with higher chances of seeking help from mental health professionals (Picco et

al., 2018) whereas, those with a lower level of MHL is less willing to seek out professional help (O’Keeffe et al., 2016). Therefore, having a good level of MHL can be helpful in recognizing mental illnesses, leading to a more positive outlook on reaching out for therapeutic help.

However, there is further research suggesting that delayed help seeking could have negative results as the individual has gone without treatment for a period of time which could lead to poor treatment results (Picco et al., 2018). In some communities, even with awareness or educational interventions on mental illness, and MHL, people tend to distance from individuals with a mental illness (Talebi et al., 2016). A study in Singapore, tried to connect MHL of depression and schizophrenia with seeking professional help and found that higher recognition means higher the chance of seeking therapeutic interventions rather than support from loved ones (Picco et al., 2018). Although these studies showed consistencies in terms of recognition, stigma and MHL, it lacked in areas of showing how MHL had a direct impact on seeking treatment in terms of specific demographic characteristics.

1.3 Mental Illnesses, Mental Health Literacy and Teachers

Secondary school teachers usually deal with students who are at the onset of puberty and in their adolescence. This period can be a huge transition for most adolescents and they may take on more responsibilities, build new or different relationships with their peers and adults and they can find difficulty in coping with these new challenges (Bashir & Puju, 2018). The brunt of this change is usually felt by parents and secondly, their teachers in schools. The teacher’s ability to spot any distressing symptoms in a child is crucial and quite helpful (Venkataraman et al., 2020), which is why, the mental health literacy and the teachers attitude towards mental illness is a key area in this research. Especially during a pandemic or other situation, where teachers have limited access to students via an online medium, it can be an added responsibility for a teacher to be able to spot a

difficulty in a student, which can also lead to burnout unless they are able to adapt and cope.

In general, teachers with better awareness around the topic of mental illness were able to spot the students exhibiting symptoms of mental health issues and refer them to professional therapeutic help. One study consistent with these findings, suggest that teachers hold a negative attitude towards those suffering with mental illnesses unless their level of education was higher, in which case, they would hold a more positive attitude (Venkataraman et al., 2020). Teachers who had access to students with disabilities or certain difficulties found that they had a more positive attitude towards mental health disorders, especially, female teachers, as they were more supportive of inclusive education (Dods, 2016). The more aware, the teacher is, the better help they can be in their line of work. Sri Lanka research in the area of teachers’ involvement in mental illnesses and mental health literacy has not been found and it is possible that it has not been conducted until now. Taking the limitations of the past researches in the Asian region and other regions of the world, the following study has been conducted. Most of the past research has been focused on cultural context and how it impacts stigma around seeking therapeutic help. This research is more focused on how the level of mental health education one has can have an impact on their attitude towards seeking professional help and how other educational and demographic characteristics has an impact on both mental health literacy levels and attitude towards seeking therapeutic interventions.

Method

The following research has been done as a quantitative study in the hope of being able to measure attitudes towards seeking therapeutic interventions and measure of the participants’ level of mental health literacy. The research includes two main variables: an independent and dependent variable. The independent variable is the level of mental health literacy and the dependent variable is the attitude towards seeking psychological help. The research design that was used in this study was a descriptive

cross-sectional study with the use of a survey including basic demographic questions, the Mental Help Seeking Attitudes Scale (MHSAS) and the Mental Health Literacy Scale (MHLS). The research has been done as a descriptive cross-sectional study to collect data from the target population to answer the research questions of what sort of attitude is held by the teachers in regard to seeking therapeutic interventions and what the mental health literacy levels are of the teachers and how the two variables relate to each other along with other inferences.

The target population for this study was a group of secondary school teachers between grades 6 – 8, teaching in state private schools or international schools in the Colombo district. Through a sample size calculation based on the population estimate of 3424 teachers in private schools in Colombo district (School Census, 2016) an estimated number of participants for the study was calculated as 304. The sample of participants were chosen with the following inclusion criteria: 1) teachers between the ages 20-45 years, 2) teachers employed in secondary school between grades 6-8. A non-probability sampling method was chosen with the snowball sampling approach, as the recruitment of participants was done via social media. A social media advertisement was published along with the google form link consisting the survey. The social media platforms used for this study included: Facebook and Instagram.

When the participants clicked on the google form link, they were directed to the survey which included the information sheet, informed consent, the demographic questions, the MHSAS, MHLS and the debrief. The information sheet consisted of all the necessary details regarding the research, how it is conducted and who is conducting it, for the reference of the participant. The consent form included that the participation in the study is voluntary and they may withdraw from the study by exiting the browser prior to submitting any details, as they will not be able to withdraw from the study once the form has been submitted due to anonymity of the data collected.

The debrief sheet included contact details of the supervisor and a helpline if any psychological distress was caused when taking part in the survey. After the participants were done submitting the form, their participation in the study was completed. The data gathered from the form was collected in an Excel spreadsheet, which is stored in the google drive which can only be accessed from a locked private computer.

2.1 Measures

The measures included in the survey were the demographic questions, MHSAS and MHLS. The demographic questions inquired about age, gender, highest education level, which field the highest education is in and if the participant is employed in an international private school or a state private school. The MHSAS is a 9-item scale which has counterbalanced items as shown in Appendix A. The scale is a semantic differential scale which will be scored by assigning points to each item, which will be calculated to give a mean score which will range from 1-7. The mean score will suggest if the participant holds a positive attitude (high mean score) or a negative attitude (low mean score) towards seeking therapeutic interventions (Hammer, 2018).

The MHLS is a 35 item scale which includes all the items from Mental Health Literacy (MHL) and it assesses the knowledge one has and it can also determine if an individual would seek help. The MHLS is an ordinal scale as shown in Appendix B. The MHLS is also a univariate scale which can be administered and scored by summing up the scores of all items. The Cronbach's alpha for the 9-item MHSAS Mean Score was .905. Hence, the null hypothesis was accepted, supporting internal consistency of MHSAS. The Cronbach's alpha for the 35-item MHLS Sum is 0.925. Hence, the null hypothesis was accepted, supporting internal consistency of MHLS. Therefore, both measures, MHSAS and the MHLS are reliable in the study.

Results

The descriptive statistics of the demographic characteristics which were asked in the study are as shown in Table 2.

Table 2 : Other Descriptive Statistics

		Frequency	Valid Percent
Age Group (n = 117)	20-24 years	20	17.1
	25-29 years	50	42.7
	30-34 years	12	10.3
	35-39 years	23	19.7
	40-45 years	12	10.3
Gender (n = 117)	Female	87	74.4
	Male	30	25.6
EduLevel (n = 117)	Diploma	12	10.3
	Bachelor's	76	65.0
	Master's	29	24.8
EduArea (n = 117)	Teaching	41	35.0
	Psychology	15	12.8
	Other (Business etc.)	61	52.1
SchoolIP (n = 117)	International school	63	53.8
	State Private school	54	46.2

Hypothesis 1 – Mental Health Literacy Predicts Attitude towards Seeking Therapeutic Help. To test the predictability between the independent (MHLS Sum) and the dependent variable (MHSAS Mean Score), a linear regression test was performed. In the model summary in Table 3, the R² value of 0.407, suggests that 40.7% of variability of the MHSAS mean score is explained by the relation with the MHLS Sum scores. A simple linear regression was carried out and a significant regression equation was found ($F(1,115) = 78.901, p < 0.001$), with an R² of .407. Participants' predicted attitude towards therapeutic intervention is equal to $1.780 + 0.035$ MHLS sum. Participants' mean score of MHSAS increased by 0.035 for each MHLS sum.

Table 3 : Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate	Change Statistics				
					R Square Change	F Change	df1	df2	Sig. F Change
1	.638 ^a	.407	.402	.58794	.407	78.901	1	115	.000

- a. Predictors: (Constant), MHLS Sum
- b. Dependent Variable: MHSAS Mean Score

Hypothesis 2 – Attitude toward seeking therapeutic interventions. The MHLS includes item 27 "If I had a mental illness, I would not seek help from a mental health professional", which is a reverse coded item. Spearman's rho indicated the presence of a weak positive correlation between ranked MHLS27r item and MHSAS mean scores, $r_s = .50, p < .001$, two-tailed, $N = 117$ as shown in Table 4. Since r_s is not 0, the null hypothesis (H₀) is rejected and the alternative hypothesis (H₁) is accepted, suggesting there is a relationship between the MHLS27r item and the MHSAS mean score.

Table 4 : Correlation test for MHSAS mean score and MHLS27r

		MHLS27r	MHSAS Mean Score
Spearman's rho	MHLS27r	Correlation Coefficient	1.000
		Sig. (2-tailed)	.000
	MHSAS Mean Score	Correlation Coefficient	.496**
		Sig. (2-tailed)	.000

**Correlation is significant at the 0.01 level (2-tailed).

Hypothesis 3 – Effect of stigma on attitude towards seeking therapy. MHLS18 item inquires if one is confident in seeking information on mental illness through in-person appointments. Spearman's rho indicated the presence of a weak positive correlation between ranked MHLS18 item and MHSAS mean scores, $r_s = .39, p < .001$, two-tailed, $N = 117$ as shown in Table 5. Since r_s is not 0, the null hypothesis (H₀) is rejected and the alternative hypothesis (H₁) is accepted, suggesting there is a relationship between the MHLS18 item and the MHSAS Mean Score.

Table 5 : Correlation Test for MHSAS Mean Score and MHLS18

			MHSAS Mean Score	MHLS18
Spearman's rho	MHSAS Mean Score	Correlation Coefficient	1.000	.392**
		Sig. (2-tailed)	.	.000
	MHLS18	Correlation Coefficient	.392**	1.000
		Sig. (2-tailed)	.000	.

** . Correlation is significant at the 0.01 level (2-tailed).

MHLS Sum and Age Group. A Kruskal-Wallis ANOVA indicated that there were no statistically significant differences between the MHLS sum and age groups 20-24 years (Mean Rank = 65.50), 25-29 years (Mean Rank = 64.63), 30-34 years (Mean Rank = 48.04), 35-39 years (Mean Rank = 53.72), 40-45 years (Mean Rank = 45.79), H (corrected for ties) = 5.747, $df = 4$, $N = 117$, $p = .219$, Cohen's $f = .229$. Since, there is no significant difference, we fail to reject the null hypothesis (H_0) which means all age groups have similar MHLS sum values.

MHLS Sum and Gender. A Mann-Whitney U test indicated that the MHLS Sum of the female participants (Mean Rank = 66.17, $n = 87$) were significantly higher than those of the male participants (Mean Rank = 38.20, $n = 30$), $U = 681.00$, $z = -3.90$ (corrected for ties), $p = .000$, two tailed. Since, the significant value is less than 0.05 at 5% level of significance, the null hypothesis (H_0) is rejected and alternative hypothesis (H_1) is accepted, which means that the females and males do not have equal MHLS sum values.

MHLS Sum and EduArea. A Kruskal-Wallis test indicated that there were statistically significant differences between the MHLS sum values and educational areas, teaching (Mean Rank = 47.33), psychology (Mean Rank = 107.93), other (business etc.) (Mean Rank = 54.81), H (corrected for ties) = 37.033, $df = 2$, $N = 117$, $p = .000$, Cohen's $f = 0.684$. Since the significant value is lower than 0.05 at 5% level significance, there is a significant difference, suggesting that at least one educational area scored different MHLS sum values.

MHLS Sum and EduLevel. The ANOVA was statistically significant, indicating that the teachers' mental

health literacy level was influenced by the level of education, $F(2, 114) = 3.81$, $p = .025$, $\eta^2 = .07$. Since the significance level is less than 0.05 and the null hypothesis is rejected at 5% level of significance and the alternative hypothesis accepted, hence, there is a difference in at least two educational levels MHLS Sum values. Post hoc analyses with Tukey's HSD (using α of .05) revealed that the teachers with a diploma ($M = 110.75$, $SD = 11.45$) had significantly lower mental health literacy levels than the teachers with a bachelor's ($M = 120.74$, $SD = 14.08$). However, there was no significant difference between the teachers with a diploma and the teachers with a master's ($M = 123.38$, $SD = 12.52$), nor between the mental health literacy levels between teachers with a bachelor's and a master's.

MHSAS Mean Score and Age Group. A Kruskal-Wallis ANOVA indicated that there were no statistically significant differences between the MHSAS mean scores and age groups 20-24 years (Mean Rank = 68.30), 25-29 years (Mean Rank = 63.56), 30-34 years (Mean Rank = 35.21), 35-39 years (Mean Rank = 56.67), 40-45 years (Mean Rank = 52.75), H (corrected for ties) = 8.866, $df = 4$, $N = 117$, $p = .065$, Cohen's $f = .287$. Since, there is no significant difference, we fail to reject the null hypothesis, which means all age groups have similar MHSAS mean scores.

MHSAS Mean Score and Gender. A Mann-Whitney U test indicated that the MHSAS mean scores of the female participants (Mean Rank = 64.79, $n = 87$) were significantly higher than those of the male participants (Mean Rank = 42.20, $n = 30$), $U = 801.00$, $z = -3.15$ (corrected for ties), $p = .002$, two tailed. Since the significant value is less than 0.05 at 5% level of significance, the null hypothesis is rejected, which means that the females and males do not have equal MHSAS mean score values.

MHSAS Mean Score and EduArea. A Kruskal-Wallis ANOVA indicated that there were statistically significant differences between the MHSAS mean scores and educational background as shown by the areas of teaching (Mean Rank = 52.88), psychology (Mean

Attitude Towards Seeking Therapeutic Interventions for Mental Illness Among Teachers cont.

Rank = 93.57), and other (business etc.) (Mean Rank = 54.61), H (corrected for ties) = 18.014, $df = 2$, $N = 117$, $p = .000$, Cohen's $f = 0.428$. Since the significant value is lower than 0.05 at 5% level of significance, the null hypothesis is rejected and the alternative hypothesis is accepted suggesting there is a significant difference in at least one educational area's MHSAS mean score.

MHSAS Mean Score and EduLevel. A Kruskal-Wallis ANOVA indicated that there were no statistically significant differences between the MHSAS mean scores and the level of education, diploma (Mean Rank = 47.58), bachelor's (Mean Rank = 61.41), and master's (Mean Rank = 57.40), H (corrected for ties) = 1.817, $df = 2$, $N = 117$, $p = .403$, Cohen's $f = .128$. Since the significant value is higher than 0.05 at 5% level significance, there is a significant difference, suggesting that at least one educational area scored different MHLS sum values.

Discussion

Finding out if teachers hold a positive or negative attitude towards seeking therapeutic interventions has been established through this research and how MHL plays a role in having an effect on it has also been studied through this research. The majority of the participants were females and the highest number of participants are between the ages 25-29 years. Most of the participants have an educational background in areas other than teaching and psychology. Majority of the participants reported having a bachelor's degree for their highest level of education. The means of the two scales suggest that the majority of the participants have a positive attitude towards seeking therapeutic interventions and has a fairly high level of MHL. The results of the hypotheses are supportive of the research questions that were focused on, in this study.

The first hypothesis, of whether MHL has an effect on the attitude towards seeking therapeutic interventions suggests that it does. The MHLS sum values was able to predict the MHSAS mean score, suggesting

that the higher the MHLS sum value, the higher the MHSAS mean score and vice versa. It would mean that having awareness and being educated on mental illnesses can help a teacher have a positive outlook towards seeking therapeutic help. The second hypothesis focused on item 27 - "If I had a mental illness, I would not seek help from a mental health professional" in which the participants had to mention their agreeability to the statement, showed that most participants disagreed with it suggesting that they would seek help. The results suggest that this item on the scale has a positive relationship with the MHSAS mean score, which means that the participants who disagreed with the statement showed a higher mean score which meant they hold a positive attitude towards seeking help.

The third hypothesis focused on stigma and its' effect on attitude towards seeking therapeutic help. The MHLS scale included item 18 with the statement "I am confident attending face to face appointments to seek information about mental illness (e.g., seeing the GP)" with which, most of the participants disagreed with. The ability to go and seek information about mental illness can suggest if their open to talking about mental illness with a professional or not which could also show that there is stigma or not surrounding seeking help. The results suggest that there is a weak positive relationship, which could mean that although they have a positive attitude towards seeking therapeutic help, there is some stigma that comes with it. Since most participants disagreed with this statement, it shows that there is a level of stigma around seeking mental help, even with a good level of mental health literacy. This result is similar to the findings of previous research which looked at personal stigma and its' effect on seeking help which showed that the Asian populations are more likely to have a personal stigma which can be associated with a less positive attitude towards seeking help (Arora, Metz & Carlson, 2016).

The MHLS and MHSAS results were compared among demographic characteristics including age

group, gender, highest education level and area in which education has been received. There was no research found on how age has an effect on mental health literacy or attitude towards seeking help, therefore, the result in relation to age would be a new finding through this study. Age did not show any effect on MHLS scores and MHSAS mean scores, suggesting that age does not have an impact on the participants' level of MHL and their attitude towards therapeutic help. Gender of the participants did have some differences in the MHLS scores and MHSAS mean scores. Females scored higher on both the MHLS and the MHSAS, than the males. This suggests that female teachers have a higher level of MHL and a more positive attitude towards seeking therapeutic help than males. It could also mean that males are more likely to live up to masculine roles or societal expectations that hinders them from seeking necessary help (Brenner et al., 2018). The educational background of the participants have shown that it has an effect on the MHLS and MHSAS scores. Having a background in psychology showed that there is a difference in the level of MHL and the attitude towards seeking therapeutic help. In terms of level of education, the highest education received by a participant shows that there is a difference in MHLS scores. A participant with a diploma is likely to have a lower MHL level than a participant with a bachelor's degree, suggesting higher education levels might also, be an influential factor in the level of MHL or play a role in one seeking therapeutic help.

Conclusion

This study has a few limitations which includes the following: accuracy of results, missing demographic characteristics and generalizability. Recruitment of the sample via social media leaves no transparency of the participants taking part in the study, anyone could possibly take part in the study which tampers with the accuracy of the result. Honesty of the results is a risk that had to be taken due to the difficulty in recruiting participants physically due to the current pandemic situation. Furthermore,

certain demographic characteristics were not inquired through the survey, for example, religion, ethnic background, whether participants have sought therapy, whether they suffer from a mental illness, could have been useful to the study. Taking the Sri Lankan context, stigma can be influenced by religion and ethnic background, which would have helped further understand specific items on the scale relating to these areas. Moreover, if participants have sought therapy or know someone who has, they are more likely to have a positive attitude towards seeking help even if they lack the education on mental illnesses and getting professional help. Furthermore, knowing if they suffer from a mental illness could be helpful in understanding their level of MHL and attitude. In terms of generalizability, the sample size is too small and did not reach the estimated sample size, to make an inference on the entire population of Sri Lankan teachers. In addition, the sample has been collected from an urban area and the results are likely to differ with a sample from a rural area.

5.1 Future Implications

Future studies could incorporate a qualitative design study with interviews. This suggestion has been made, as it would help understand the participant's attitude or MHL with more open-ended questions. It would allow the participant to provide answers regarding factors that have affected their attitude towards seeking therapeutic help and if and how they have received mental health education and to what extent they are aware of treatment methods and how therapy could be useful to them. Another factor to consider is the area from which the sample is collected, whether it is urban or rural, for comparison and generalizability, it would be advisable to have participants from both areas. Furthermore, an experimental study where a MHL program could be implemented on a group of teachers, with before and after scores on the MHLS for comparison would benefit in understanding how much awareness is required to increase a positive attitude towards mental health concerns.

Attitude Towards Seeking Therapeutic Interventions for Mental Illness Among Teachers cont.

In conclusion, a higher level of awareness or education in the area of mental health in terms of mental illnesses and therapy, can increase the chance of a person seeking therapeutic help. Although, there is no real understanding of what exactly causes stigma around seeking help, the more research that is done in the areas of MHL, stigma and seeking therapeutic help with different representative samples, the more chance of eliminating this stigma, and a higher chance of normalizing therapy. Therefore, it is important to increase awareness, educate and provide society with the right resources about mental illnesses and receiving professional mental help.

References

- Bashir, L., & Pujju, B. A. (n.d.). Mental health among senior secondary school students in relation to life skills and self efficacy. *International Journal of Multidisciplinary Research Review*, 3(9), 587-591.
- Brenner, R. E., Engel, K. E., Vogel, D. L., Tucker, J. R., Yamawaki, N., & Lannin, D. G. (2018). Intersecting cultural identities and help-seeking attitudes: The role of religious commitment, gender, and self-stigma of seeking help. *Mental Health, Religion & Culture*, 21(6), 578-587. doi:10.1080/13674676.2018.1519782
- Burić, I., & Kim, L. E. (2020). Teacher self-efficacy, instructional quality, and student motivational beliefs: An analysis using multilevel structural equation modeling. *Learning and Instruction*, 66, 101302. doi:10.1016/j.learninstruc.2019.101302
- Chandrasekara, W. S. (2016). Help Seeking Attitudes and Willingness to Seek Psychological Help: Application of the Theory of Planned Behavior. *International Journal of Management, Accounting and Economics*, 3(4), 233-245.
- Choi, S., & Doh, N. (2019). An exploratory study about Koreans' attitudes towards counselling services. *Counselling Psychology Quarterly*, 32(1), 100-120. doi:10.1080/09515070.2017.1367273
- Coping with Stress. (2020, July 1). Retrieved November, 2020, from <https://www.cdc.gov/coronavirus/2019-ncov/daily-life-coping/managing-stress-anxiety.html>
- Dods, J. (2016). Teacher Candidate Mental Health and Mental Health Literacy. *Exceptionality Education International*, 26(2). doi:10.5206/eei.v26i2.7740
- Gomez, D., Gunarathna, C., Gunarathna, S., Gnanapragasam, K., & Hanwella, R. (2017, December 26). Help-seeking behaviour and its impact on patients attending a psychiatry clinic at National Hospital of Sri Lanka. Retrieved November 22, 2020, from <https://www.ncbi.nlm.nih.gov/pubmed/29390598>
- Hammer, J. H., Parent, M. C., & Spiker, D. A. (2018). Mental Help Seeking Attitudes Scale (MHSAS): Development, reliability, validity, and comparison with the ATSPPH-SF and IASMH-PO. *Journal of Counseling Psychology*, 65(1), 74-85. doi:10.1037/cou0000248
- Jorm, A. F., Korten, A. E., Jacomb, P. A., Christensen, H., Rodgers, B., & Pollitt, P. (1997). "Mental health literacy": A survey of the public's ability to recognise mental disorders and their beliefs about the effectiveness of treatment. *Medical Journal of Australia*, 166(4), 182-186. doi:10.5694/j.1326-5377.1997.tb140071.x
- Kim, L., & Asbury, K. (2020, September 25). 'Like a rug had been pulled from under you': The impact of COVID-19 on teachers in England during the first six weeks of the UK lockdown. Retrieved November 22, 2020, from <https://bpspsychub.onlinelibrary.wiley.com/doi/full/10.1111/bjep.12381>
- Mental Help Seeking Attitudes Scale (MHSAS). (2018, October 17). Retrieved November 22, 2020, from <http://drjosephhammer.com/research/mental-help-seeking-attitudes-scale-mhsas/>
- Neupane, D., Dhakal, S., Thapa, S., Bhandari, P. M., & Mishra, S. R. (2016). Caregivers' Attitude towards People with Mental Illness and Perceived Stigma: A Cross-Sectional Study in a Tertiary Hospital in Nepal. *Plos One*, 11(6). doi:10.1371/journal.pone.0158113
- O'Keeffe, D., Turner, N., Foley, S., Lawlor, E., Kinsella, A., O'callaghan, E., & Clarke, M. (2016). The relationship between mental health literacy regarding schizophrenia and psychiatric stigma in the Republic of Ireland. *Journal of Mental Health*, 25(2), 100-108. doi:10.3109/09638237.2015.1057327

Attitude Towards Seeking Therapeutic Interventions for Mental Illness Among Teachers cont.

- Patil, R., Venkataraman, S., & Balasundaram, S. (2020). Stigma toward mental illness among higher secondary school teachers in Puducherry, South India. *Journal of Family Medicine and Primary Care*, 8(4), 1401. doi:10.4103/jfmpc.jfmpc_203_19
- Picco, L., Abdin, E., Pang, S., Vaingankar, J. A., Jeyagurunathan, A., Chong, S. A., & Subramaniam, M. (2018). Association between recognition and help-seeking preferences and stigma towards people with mental illness. *Epidemiology and Psychiatric Sciences*, 27(1), 84-93. doi:10.1017/s2045796016000998
- Ritchie, H., & Roser, M. (2018, January 20). *Mental Health*. Retrieved November, 2020, from <https://ourworldindata.org/mental-health>
- Samarasekara, N., Lloyd, M., & Siribaddana, S. H. (n.d.). The Stigma of Mental Illness in Sri Lanka: The Perspectives of Community Mental Health Workers. *Stigma Research and Action*, 2(2), 93-99.
- School Census Preliminary Reports. (2016). Ministry of Education Sri Lanka.
- Stress. (2020, November 02). Retrieved November, 2020, from <https://www.mentalhealth.org.uk/a-to-z/s/stress>
- Talebi, M., Matheson, K., & Anisman, H. (2016). The stigma of seeking help for mental health issues: Mediating roles of support and coping and the moderating role of symptom profile. *Journal of Applied Social Psychology*, 46(8), 470-482. doi:10.1111/jasp.12376

Section 3

In Memoriam: *Albert Bandura (1925-2021)*

Janel Gauthier

Remembering One of the Most Influential Psychologists of All Times: Albert Bandura (1925-2021)

Janel Gauthier^{1,2}



Albert Bandura (1925-2021)
(Image credit: Courtesy Albert Bandura)

Albert Bandura died peacefully in his sleep at his home in Stanford, California, on July 26, 2021, at age 95. He is survived by his daughters, Carol and Mary, and two grandsons, Timothy and Andrew. He is predeceased by his loving wife, Virginia. At the time of his death, he was the David Starr Jordan Professor

Emeritus of Social Science in Psychology at Stanford University. He was widely regarded as one of the greatest and most influential living psychologists of all times. In 2002, a survey (Haggblom, Warnick, Warnick, et al., 2002) ranked him fourth among the most-cited psychologists of the 20th century” behind B. F. Skinner, Jean Piaget, and Sigmund Freud.

I am deeply humbled by the opportunity to honor one of the giants of our field, known to his friends and colleagues as Al. I met Al for the first time in the early 1980s after I published the results of a study on perceived self-efficacy (Gauthier & Ladouceur, 1981). The study was designed to test the relation between self-efficacy ratings and approach behavior in a fear situation depending on whether the self-efficacy ratings were made public or kept private. I had hypothesized that private ratings would be less powerful predictors of fear avoidance behavior than public ratings. To my surprise, the study proved me wrong. I shared my results with Al, and in 1982, thanks to his support, I was appointed Visiting Scholar at Stanford University where I spent a year conducting research, consulting with him on a wide range of topics, and attending all his lectures. I subsequently published a paper with him (Bandura, O’Leary, Taylor, Gauthier, & Gossard, 1987), which gave me a rare insight into how he organized his thoughts and approached writing. Over the years, I continued to visit him, sometimes for several weeks at a time, catching up with his research and getting a preview of his draft articles or book chapters. In 2012, Al asked me to receive on his behalf the Lifetime Career Award from

1 Professor Emeritus at Laval University, Canada, and former President of IAAP (2014-2018).

2 Correspondence concerning this article should be addressed to Prof. Janel Gauthier, École de psychologie, Université Laval, Québec, QC, G1V 0A6, Canada. E-mail: janel.gauthier@psy.ulaval.ca

Albert Bandura cont.

the International Union of Psychological Science. His cardiologist had advised him against travelling to Cape Town, South Africa, to receive the award. I never felt so honored and privileged in my life, both by his request and to have him as a mentor and friend.

Now, let us remember.

Albert Bandura's Early Life

Al was born on December 4, 1925, in Mundare, a small hamlet of some 400 inhabitants, largely immigrants from Poland and Ukraine, in northern Alberta, Canada. He was the last of six children, and the only boy. His parents had each emigrated to Canada when they were adolescents – his father from Poland, and his mother from the Ukraine. Al's early education consisted of one small school, which housed first grade through high school. It was the only one in town, with only two teachers for the entire high school curriculum. For Al, this paucity of educational resources turned out to be an enabling factor that served him well. He wrote later: "We [the students] had to take charge of our own learning." (Bandura, 2006, p. 1). These early experiences contributed to his later emphasis on the importance of personal agency.

During summer vacations while in high school, Al's parents encouraged him to seek experiences beyond the confines of their small town. One summer he worked in a furniture manufacturing plant in Edmonton, Alberta. Another summer he worked in the far North, at Whitehorse in the Yukon, where he found himself in the midst of a curious collection of fellow workers, most of whom had fled creditors, alimony, the draft board, or probation officers. When speaking about his experience in the far North, he would sometimes say jokingly: "This wasn't Mr. Rogers' Neighborhood." He quickly developed a keen appreciation for the psychopathology of everyday life, which seemed so evident in the austere Canadian tundra in which he found himself.

After high school graduation, Al enrolled at the University of British Columbia in Vancouver, Canada. He started out as a biological sciences major, but he majored in psychology. There was an element of fortuity to his entry into psychology. While working nights and commuting to school with a group of pre-med and engineer students, he found himself arriving at school each day very early, much earlier than his courses started. To fill the time, he began taking "filler classes" during these early morning hours. Al explained later that, one morning, "while waiting for my English class, I flipped through a course catalogue that happened to have been left on a table in the library. I noticed an introductory psychology course that would be an early time filler. I enrolled in it and found my future profession." (Bandura, 2006, p. 2). The impact of his accidental entry into psychology would influence his theorizing later. In 1982, he published an article on the psychology of chance encounters (Bandura, 1982) in which he discussed how personal initiative often places people into circumstances where fortuitous events can shape the course our lives take. Rather than treating fortuity as uncontrollability, Al focused on how to make chance work by exploiting fortuitous opportunities in one's self-development.

Al earned his Bachelor's degree from the University of British Columbia in 1949 after three years of study. He graduated with the University Bolacan Award in psychology. He then went on to graduate school at the University of Iowa where he earned his M.A. in 1951, and his Ph.D. in clinical psychology in 1952 under the direction of Arthur Benton who was an academic descendant from William James. This was the heyday of theoretical and experimental analyses of learning, with the Hullian approach being the dominant theory. At the time, Faculty at Iowa included Kenneth Spence who collaborated with his mentor Clark Hull at Yale University, and other psychologists such as Kurt Lewin, John Dollard, and Neal Miller. Although the program took an interest in social learning theory, Al felt that it was too focused on behaviorism. He would

Albert Bandura cont.

later explain: "Learning would be exceedingly laborious, not to mention hazardous, if people had to rely solely on the effects of their own actions to inform them what to do." (Bandura, 1977a, p. 22). Influenced by Miller and Dollard's studies of modeling and imitation, Al began to conceptualize learning with a social cognitive framework.

Al met his wife at the University of Iowa through another fortuitous event. While he was a graduate student, he would spend some of his leisure time playing golf. Arriving late to the golf course one Sunday, Al and a friend were bumped to a later starting time. Then, while they were speeding up when playing, there were two women ahead of them who were slowing down. Before long, Al and one of the women encountered each other in a sand trap. Al was later to write, "I met my wife in a sand trap!" (Bandura, 2006, p. 3). The woman destined to become Al's lifelong partner was Virginia Varns, who was on the teaching staff of the College of Nursing. Al and Virginia (affectionately called "Ginny") married in 1952 and became parents to two daughters, Mary, who was born in 1954, and Carol, born in 1958. Mary went on to become a clinical psychologist, and Carol became the director of an adolescent clinic for children of migrant workers and the poor.

Career, Theories, and Legacy

In 1953, Al joined the faculty at Stanford University, and remained an active faculty member there until he retired in 2010. He found Stanford much to his liking – distinguished colleagues, gifted students, considerable freedom to go wherever one's curiosity might lead, and a university culture that approached scholarship not as a matter of publish or perish but with amazement that the quest for knowledge could require coercion.

When Al arrived at Stanford, Robert Sears was exploring the familial antecedents of social behavior and identificatory learning, as well as nonaggressive reactions to frustration. Influenced by Sears' work, Al

began field studies of social learning and aggression in collaboration with Richard Walters, his first doctoral student. This research, which underscored the paramount role of modeling in human behavior, led to a program of laboratory research into the determinants and mechanisms of observational learning. In turn, this work led to Al's first book, *Adolescent Aggression* (Bandura & Walters, 1959).

Having gained a better sense of how people learn by observation, Al subsequently extended this research to abstract modeling of rule-governed behavior and to disinhibition through vicarious experience. This led him to conduct programmatic research on social modeling involving the now famous inflated plastic doll, "Bobo." The children in these studies were exposed to an adult who demonstrated either violent or nonviolent behavior toward the rebounding doll. Children who observed an adult hitting and yelling at the doll were more likely to display aggressive behavior toward the doll when playing with it later. These studies demonstrated not only that children learn new patterns of behavior vicariously without actually performing them or receiving external rewards, but also challenged the prevailing theory that watching violence on television alleviated aggressive impulses in children. This research led to a second book, *Social Learning and Personality Development* (Bandura & Walters, 1963).



Albert Bandura in 1973 with photo of Bobo doll experiment in background. (Image credit: Courtesy Albert Bandura)

Albert Bandura cont.

During the 1960s, Al conducted research on children's development of self-regulatory capabilities. He found that children who observed a model forego small immediate rewards in favor of larger long-term rewards increased their preference for delayed rewards. These pioneering studies of the social origins of children's self-regulation provided experimentally testable alternative hypotheses to prevailing personality trait theories.

Because his interests ranged widely, Al pursued several lines of research concurrently. During the 1970s and early 1980s, for example, he devoted a major share of his attention to elucidating how self-referent thoughts mediate action and affective arousal, while he continued to explore theoretical problems relating to observational learning, self-regulation, aggression, and psychotherapeutic change. In the course of investigating the processes by which modeling ameliorates phobic disorders, Al found that changes in behavior and fear arousal are mediated through changes in the level and strength of perceived self-efficacy, i.e., the belief that people have in their capacity to execute behaviors necessary to produce specific performance attainments. This finding led him to propose the self-efficacy theory as one of the key features of a unifying theory of behavioral change in a landmark article published in 1977 (Bandura, 1977b). This theory states that psychological treatment procedures, whatever their form, alter the level and strength of self-efficacy. It hypothesizes that expectations of personal efficacy determine whether coping behavior will be initiated, how much effort will be expended, and how long effort will be sustained in the face of obstacles and aversive experiences. Using the self-efficacy theory as a conceptual framework, Al went on to study the influential role of self-efficacy beliefs in psychological functioning.

The theory of human behavior that Al started to develop at the University of Iowa in response to the limitations of behavioral theories of learning was first presented in his book, *Social Learning Theory* (Bandura, 1977a). While the behavioral theories suggested

that all learning was the result of associations formed by conditioning, reinforcement, and punishment, Al's social learning theory proposed that learning also occurs simply by observing the actions of others. His theory added a social element, arguing that people learn new information and behaviors by watching other people. Known as observational learning, this type of learning could explain and predict a wide variety of behaviors, including those that often could not be accounted for by other learning theories.

In 1986, Al published another highly influential book, *Social Foundations of Thought and Action: A Social Cognitive Theory* (Bandura, 1986), in which he presented cognitive social theory as a new conceptual framework to explain and predict personal and social behavioral change. Al's decision to re-label his theoretical approach from "social learning" to "social cognitive learning" was due to his growing belief that the breadth of his theorizing and research had expanded beyond the scope of the social learning label. In the more fitting appellation as "social cognitive theory," the social portion of the title acknowledges the social origins of much human thought and action; the cognitive portion recognizes the influential contribution of cognitive processes to human motivation, affect, and action. Moreover, the label had become increasingly misleading because it applied to several theories founded on dissimilar tenets, such as Miller and Dollard's drive theory, Rotter's expectancy theory, Gewirtz's operant theory, and Patterson's functionalist theory.

The social cognitive theory is one of the few "grand psychological theories" that continue to thrive in the 21st Century. It accords a central role to cognitive, vicarious, self-regulatory, and self-reflective processes in human adaptation and change. It focuses on processes that are pervasive and influential across contexts and domains of human functioning. Social cognitive theory is rooted in an agentic perspective. In this view, people are self-organizing, proactive, self-reflecting, and self-regulating, not just reactive organisms shaped and controlled by environmental

Albert Bandura cont.

forces or driven by concealed inner impulses. Human functioning is the product of a dynamic interplay of personal (i.e., cognitive, emotional, and biological), behavioral, and environmental influences. In this model of triadic reciprocal causation, people are producers as well as products of their environment.

In the 1990s, to represent more fully how human agency is exercised, Al expanded the concept of personal agency to collective agency. People do not live in isolation. They work together on shared beliefs about their capabilities and common aspirations to better their lives. People's shared beliefs in their capabilities to produce desired effects and forestall undesired ones by collective action are a key ingredient of collective efficacy. This conceptual extension makes the social cognitive theory applicable to understanding human adaptation and change in collectivistically-oriented societies as well as individualistically-oriented ones. In his book, *Self-Efficacy: The Exercise of Control* (Bandura, 1997), Al set forth at length the basic tenets of his theory of self-efficacy and its fruitful applications to the fields of life-course development, education, health, psychopathology, sport, business, politics, and sociocultural change.

At the age of 90, Al published *Moral Disengagement: How People Do Harm and Live with Themselves* (Bandura, 2016). It was an emotionally heavy and challenging book to write as his wife had died five years earlier. The book was dedicated to her memory. His wife was an environmentalist, and Al devoted the final chapter of his book to the influential role of moral disengagement in impeding environmental sustainability. For Al, this book constituted his most important legacy to the world. He had been working for more than two decades on unlocking one of the greatest mysteries of our time: how do otherwise considerate people do cruel things and still live in peace with themselves? Drawing on his agentic theory, Al provided enlightening new perspectives on the psychosocial mechanisms by which people selectively disengage their morality from their harmful conduct in business, politics, and social life. His book was a breakthrough in moral psychology and ethics because it provided a practical conceptual model

showing how to counteract unethical practices by mindful moral engagement.

Recognitions

Al's contributions to psychology have been recognized in the many awards and honors he has received. They include the *Distinguished Contribution Award* from the International Society for Research in Aggression; the *Lifetime Achievement Award* from the Association for the Advancement of Behavior Therapy; the *Outstanding Lifetime Contribution to Psychology Award* from the American Psychological Association; the *Gold Medal Award for Distinguished Lifetime Contribution to Psychological Science* from the American Psychological Foundation; the prestigious *Grawemeyer Award*; the *Lifetime Career Award* of the International Union of Psychological Science, and the *National Medal of Science* bestowed personally by President Barack Obama in 2016. He received 19 honorary degrees from universities around the world.



Albert Bandura receives the National Medal of Science from President Barack Obama in a ceremony held at the White House on May 19, 2016. (Image credit: Association for Psychological Science)

Closing Reflections

Al left us an extraordinary legacy that provides important knowledge and guidance for addressing many of today's critical global challenges. Despite his many achievements, when asked what he was most proud of in his professional life, Al would say that "the knowledge and guidance he passed on to students" around the world was what he treasured most.

Albert Bandura cont.

Al was an esteemed mentor and colleague, known for his wisdom, humility, integrity, humanity, thoughtfulness, kind and caring nature, and sense of humor. He was always happy to talk and invariably generous with his time. Al often would say: "Let the efficacy force be with you!" He lived his theory of self-efficacy, instilling confidence in others for achieving successful experiences.

Al continues to live on in those he taught and befriended, as well as those who never had the privilege of meeting him yet were influenced by his insightful and thought-provoking work.

References

- Bandura, A. (1977a). *Social Learning Theory*. Englewood Cliffs, NJ: Prentice-Hall.
- Bandura, A. (1977b). Self-efficacy: Toward a unifying theory of behavioral change. *Psychological Review*, 84(2), 191–215. <https://doi.org/10.1037/0033-295X.84.2.191>
- Bandura, A. (1982). The psychology of chance encounters and life paths. *American Psychologist*, 37(7), 747–755. <https://doi.org/10.1037/0003-066X.37.7.747>
- Bandura, A. (1986). *Social Foundations of Thought and Action: A Social Cognitive Theory*. Englewood Cliffs, NJ: Prentice Hall.
- Bandura, A. (1997). *Self-Efficacy: The Exercise of Control*. New York, NY: W H Freeman/Times Books/ Henry Holt & Co.
- Bandura, A. (2006). Autobiography. In M. G. Lindzey & W. M. Runyan (Eds.) *A History of Psychology in Autobiography* (Vol. IX). Washington, DC.: American Psychological Association. Available at <https://www.uky.edu/~eushe2/Bandura/BanduraAutobiography2007.html>
- Bandura, A. (2016). *Moral Disengagement: How People Do Harm and Live with Themselves*. New York, NY: Worth Publishers.
- Bandura, A., O'Leary, A., Taylor, C.B., Gauthier, J., & Gossard, D. (1987). Perceived self efficacy and pain control: Opioid and nonopioid mechanisms. *Journal of Personality and Social Psychology*, 53, 563–571.
- Bandura, A., & Walters, R. H. (1959). *Adolescent Aggression: A Study of the Influence of Child-Training Practices and Family Interrelationships*. The University of Michigan, IL: Ronald Press.
- Bandura, A., & Walters, R. H. (1963). *Social Learning and Personality Development*. New York, NY: Holt, Rinehart and Winston.
- Gauthier, J., & Ladouceur, R. (1981). The influence of self efficacy ratings on overt behavior. *Behavior Therapy*, 1981, 12(3), 436–439.
- Haggblom, S. J., Warnick, R., Warnick, J. E., Jones, V. K., Yarbrough, G. L., Russell, T. M., Borecky, C. M., McGahhey, R., John L. Powell, J. L., Beavers, J., & Monte, E. (2002). The 100 Most Eminent Psychologists of the 20th Century. *General Review of Psychology*, 6(2), 139–152.

APAW Mission Statement

Applied Psychology Around the World (APAW) is one of three official publications of the International Association of Applied Psychology (IAAP). We have two academic journals - *Applied Psychology: An International Journal* (<http://bit.ly/IAAPintl>) and *Applied Psychology: Health and Well-Being* (<http://bit.ly/IAAPhealth>). Our e-News is published once a month with a series of regular information about Applied Psychology and our community.

Applied Psychology Around the World (APAW) is our newest publication; APAW ISSN registration number is: 26939-6521. The APAW is only distributed online, with three thematic issues per year.

The purpose of APAW is to share news and reports about applied psychology, through theme-based articles. The themes are determined in advance so that one can prepare a paper in relation to the theme of the issue.

Submissions are encouraged from members in all regions of the world. Articles should be written to be understood by a diverse range of readers with differing levels of expertise in psychology (undergraduate students, postgraduate students, practitioners or Professors), in correct English (using the US spell check).

How to Prepare Articles for APAW

Authors may correspond with the Chief-Editor, Christine Roland-Lévy at president@iaapsy.org. In the subject line of your email, enter the subject: "**Submission for Publication in APAW**". All articles and news items for consideration should be submitted in electronic form only in a Word compatible file. Short papers are preferred.

Requirements:

- Written in North American English (use US spell check)
- A short title
- Authors and their e-mail address and institutions
- References should follow the style of the American Psychological Association
- All works cited should be listed alphabetically by author after the main body of the text.
- Single space between paragraphs, no indentation, font should be Arial, size 10, section heads/subhead should be bold.
- Figures (including photos), should be at least 300 dpi resolution, and saved as a TIF, EPS, PNG, JPG, or PDF

The copyright of all papers published in APAW is held by the IAAP.

IAAP Board of Directors

OFFICERS

Christine Roland-Lévy, France
President

Lori Foster, USA
President-Elect

Pedro Neves, Portugal
Secretary-General

Kurt Geisinger, USA
Treasurer

Luminița Pătraș, Spain
Membership Coordinator

DIVISION PRESIDENTS

- 1: Barbara Kozusznik, Poland
- 2: Kurt Geisinger, USA
- 3: Rolando Díaz Loving, Mexico
- 4: Terry Hartig, Sweden
- 5: Frédéric Guay, Canada
- 6: Daniel Dodgen, USA
- 7: Despina Moraitou, Greece
- 8: Sonia Lippke, Germany
- 9: Tomasz Zaleśkiewicz, Poland

- 10: Fanny Verkampt, France
- 11: Wilson López López, Colombia
- 12: Elisabeth Rosnet, France
- 13: Kazumi Renge, Japan
- 14: Peter Graf, Canada
- 15: Pedro Altungy, Spain
- 16: Paul Hartung, USA
- 17: Robyn Vines, Australia
- 18: Ana Maria Jacó-Vilela, Brazil

MEMBERS AT LARGE

Harris Shah Adb Hamid, Malaysia
Wolfgang Beiglböck, Austria
Lisiane Bizarro, Brazil
Sheyla Blumen, Peru
Klaus Boehnke, Germany
James Bray, USA
Renan de Almeida Sargiani, Brazil
Nele de Cuyper, Belgium
Annamaria Di Fabio, Italy
David Dozois, Canada
Ferdinando Fornara, Italy
Nuria Gamero, Spain
Yiquan Gan, China
Richard Griffith, USA
Anwarul Hasan Sufi, Bangladesh
James Kagaari, Uganda
Erich Kirchler, Austria
Gosia Kozusznik, Belgium
Saswata Kumar Biswas, India
Judy Kuriansky, USA
Jérémy Lemoine, United Kingdom
Kobus Maree, South Africa

Susan McDaniel, USA
Andrew A. Mogaji, Nigeria
Kristina Potocnik, Scotland
Diana Prescott, USA
Walter Reichman, USA
Raymond Saner, Switzerland
Ralf Schwarzer, Germany
Tomoki Sekiguchi, Japan
Tushar Singh, India
Tholene Sodi, South Africa
Ute Stephan, England
Yanjie Su, China
Akira Tsuda, Japan
Ole Tunold, Norway
Richu Wang, China
Kan Zhang, China
Liqi Zhu, China