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Aging as risk factor of post-traumatic stress disorder

Andres Fontalba Navas

Malaga University Medical School, Spain

Background: Post-disaster mental health problems may affect population in different ways. Population exposure to a natural disaster has been associated with psychological distress, in particular, in the development of Posttraumatic Stress Disorder (PTSD). Most people experience distress after their exposure to an extreme event. For people with good psychosocial resilience and access to social support, mental health problems can be relatively less important since supporting relationships and inner capabilities may begin the adaptation processes.

Objectives: The aims of this study were to investigate the effects of flooding on mental health population, particularly on the general health and the symptom's emergence of PTSD.

Methods: A random sampling method was conducted in a population affected by a flood occurred in September 2012, an area of 20.000 inhabitants in the North of Almería (Spain) (N=70). The control population was a near region (30 Km) of 30.000 inhabitants non-affected by the flood (N=41). The sample were screened with a socio-demographic questionnaire, 12-item General Health Questionnaire (GHQ-12) and the Questionnaire to rate Traumatic Experiences (TQ). We also counted the distribution of stress exposure among people with various kinds of exposures (physical risk or/and economical losses).

Results: The mean age of the individuals was 53, 69 years, SD 15.99. Distribution by sex was 34.62% men – 65.38% women. There were no statistical differences between age and genders between case and control population. There were statistical differences in TQ scores between case populations (5.39) vs. control population (1.8). An association between age and TQ scores was demonstrated, increasing TQ scores by age. Also, there were no statistical differences between individuals that suffered physical risk in the flood versus people that didn't suffered in TQ scores. On the other hand, a multiple regression model was adjusted by age and sex. Significant differences were found in the TQ scores mean values for individuals that suffered economical losses (9.51 TQ score) versus individuals that didn't suffered it (2.94).

Conclusions: Older people were more likely to develop PTSD. It's necessary to consider secondary stressors, such as economical losses in the development of PTSD.

andresfontalba@gmail.com

Conversations on integrated care: Perceptions among direct care professionals

Sara J Hills

Oklahoma State University, USA

Integrated care has become an important topic in health psychology, medicine, and other related fields since the endorsement of the Affordable Care Act (ACA). Integrated care (health care professionals working in teams) is expected to lower health costs, improve overall health and well-being, provide more preventive care opportunities, increase quality of care, increase ease of access to care, and decrease the stigma attached to some services such as those associated with mental health. Integrated care models and strategies vary by site and offer different levels of integration in every area of care management. The integration of practitioners from various training backgrounds and perspectives is difficult and practitioners often resist changing the ways that they conceptualize their roles and implement their services. The majority of current research of satisfaction with integration health care appears to seek and to explain the patient's experiences with integrated care models. There seem to be fewer studies interested in the perceptions of health care practitioners. In the medical and health fields in particular, there is a need for qualitative research that explores the experiences of participants in-depth to support the volumes of existing quantitative data. The purpose of this phenomenological qualitative study is to explore direct care practitioners' perceptions of and experiences with integrated care in Midwest University, pediatric diabetes and endocrinology clinic.

sara.hills@okstate.edu