

Ministry of Higher Education and Scientific Research
University of Abderrhmane Mira- Bejaia,
Faculty of Human and Social Sciences
Department of Psychology and Orthophonie



1st International Conference

Mental health:

Multidisciplinary approach



Call for papers

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University of Abderrhmane Mira- Bejaia, Algeria



Health in its broadest sense includes physical and psychological health. However, although many health specialists agree with this broad concept of health, physical health is what specialists focus on. Indeed, health specialists are not comfortable dealing with mental health problems and their definitions.

However, mental health specialists are increasingly convinced that health at different ages is linked to “good” mental functioning. The latter is necessary to lead a life of daily well-being: at school, at work, in the family, in one's behavior with others, etc. We seek, in fact, a state of balance on a daily basis. It will be understood that mental health does not mean the absence of mental pathology because everyone is susceptible to falling ill. However, the abnormality lies in having a mental functioning that does not allow one to overcome the illness, or which does not allow one to be well in one's environment (family, school, professional, etc.).

If mental health relates to the good mental functioning of an individual, its care, therefore, requires diversified systems regardless of the environment (school, professional, hospital, etc.). We cannot address mental health risk factors and their care without taking into consideration health management by public authorities. This observation shows that sometimes individual care is no longer enough and more organized means are needed (in a network for example) to meet the demand (this is the case of abuse against minors and family violence for example or scourges which are rife in educational and university institutions, this is also the case of harassment at work, crises in general whether "structural (economic, climatic, environmental, etc.), cyclical (wars, etc.) .), or a crisis of professional meaning which highlights the existential anxieties of everyone, as well as key stages in the impact of the pandemic on mentalities: astonishment, reactionary adaptation, resilience, over-

adaptation, achievement of ideals professionals” (Mauger-Riffault, 2022); Crisis of social ties, particularly during a pandemic and the effects of confinement and the deployment of health and social measures among people in situations of poverty. Maisonneuve (2022), provides avenues for reflection on the effect of user expertise on public policies and the construction of a collective approach and speech.

Finally, we cannot approach mental health without adding to all this, the individual crisis: facing a sudden change, a rupture in life, acute, crucial, difficult, decisive moments in an individual's existence. Whatever its category, that is to say whether it is individual, collective, national or global, the crisis, according to E. Morin, 2012, has effects on the lives of people, communities and institutions, etc.

Because similar mental disorders exist in all societies, this colloquy aims to address the different ways of managing problems relating to mental health and of course to arrive at beneficial and, if possible, less expensive strategies. We know that in most developing countries there are relatively few mental health professionals. Indeed, in these countries, there is approximately one psychiatrist for half a million people or more or less depending on the country (Vikram Patel, 2003). These few mental health professionals spend most of their time caring for people with serious mental illnesses. The vast majority of common mental suffering is not treated by a specialist. It is clear that in these circumstances, health professionals will only be able to provide mental health care to the “most affected”.

Even though mental illnesses are almost the same all over the world, their vision and representation differ. It should be noted that in certain countries, like ours, the psychiatrist and the psychologist

who serve the social sector, immediately find themselves stuck in their positions as intermediaries between, on the one hand, their scientific knowledge and on the other hand, their daily confrontations with sociocultural realities. The late professor Mahfoud Boucebcı (1979) says in this regard that geographical, historical, socio-economic, cultural and religious factors give the psychiatric phenomenon a very particular dimension and that this cultural heritage articulated in this “traditional social system” further complicates more the work of the psychiatrist.

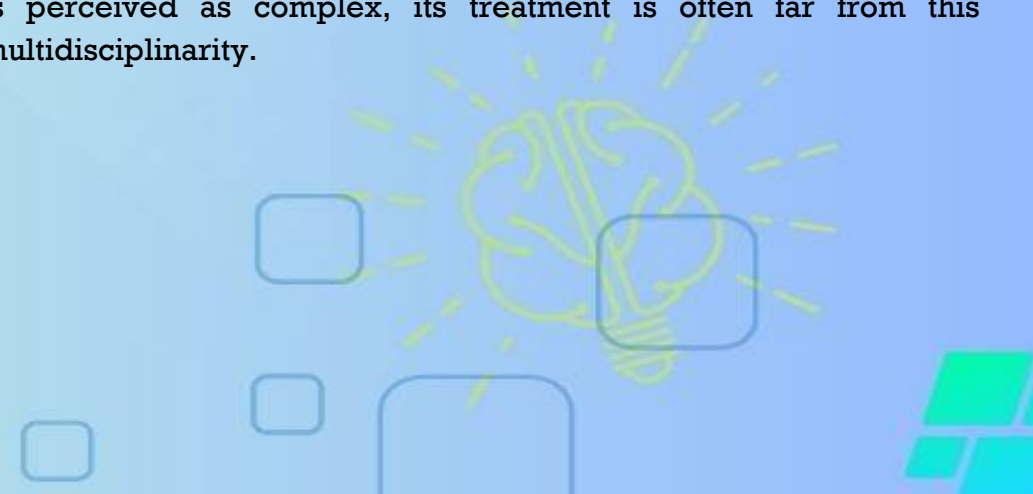
An important characteristic shared by most developing societies is that psychiatry and psychology are exotic “products” imported relatively recently, mainly due to colonization. The theories underlying psychiatry and psychology are deeply rooted in European and North American medical systems. This has had a significant impact on descriptions of mental illnesses and how they are identified.

According to the WHO, mental disorders, particularly depression, will represent the leading cause of morbidity in the world by 2030. Based on data from 14 countries, the prevalence of mental disorders over a year ranges from 4.3% (China) to 26.4% (United States). Mental disorders, including alcoholism and drug abuse (or dependence/addiction), are among the most important causes of absenteeism from work, they are also often associated with physical health problems and problems of abuse or dependence on psychoactive substances (spa) (WHO, press release, 2022). Furthermore, the suicide rate worldwide remains the leading cause of death among individuals aged under 35 (Fleury, 2014).

In addition to this complexity, reality shows us that whatever the decisions of public authorities concerning mental health and whatever the availability of specialists, in certain contexts, as is the case with problems relating to schooling for example, it is difficult to

guarantee the availability of a doctor and/or psychologist to take care of each child with various difficulties: this would require a very costly investment in time and money. Thus, certain countries, among the richest elsewhere (we cite the example of Canada), have adopted strategies developed by psycho-educators to offer them as an alternative to meet the needs of children in difficulty and help them to better adapt to school. Using computerized programs applied by teachers, children or teenagers at risk (of dropping out, for example) are identified before it is too late. By acting in this way, we can allow mental health workers (general practitioners, psychiatrists, clinical psychologists, school psychologists, etc.) to remain available for the clinical care of children who have developed a serious pathology or are having deep difficulties in learning.

The above shows us to what extent phenomena relating to mental health are very complex phenomena and require understanding the link between internal factors of the person and external factors relating to their daily life. This link is never linear and requires a global vision of the phenomena. This reality of mental health amply justifies a multidisciplinary approach in this conference, which aims to be international. Indeed, if mental health is perceived as complex, its treatment is often far from this multidisciplinary.



OBJECTIVES OF THIS CONFERENCE

- The objective of this conference is to explore the different aspects and approaches to the subject of mental health, to raise points of convergence and divergence between them, and possibly to coordinate the reflections of researchers and practitioners from different disciplines concerned by mental health. The objective in this perspective is to improve the quality of psychological interventions for vulnerable people.
- Present work that reports on academic research and field experiences on current and crucial issues related to mental health and psychological interventions with vulnerable populations, combining the plurality of theoretical perspectives with a variety of related concerns.
- Think about the link between teacher-researchers and practitioners (all specialties combined), to create a working framework that integrates as much as possible new developments in theoretical and practical knowledge, resulting from scientific research and the daily experiences of practitioners.
- Consider developing practical guides relating to mental health.
- Explore the different concepts and models for understanding and measuring so-called positive psychological health and its contributions to public health promotion policies.
- Identify the difficulties relating to the promotion of mental health in all sectors and propose adequate alternative strategies.

TOPICS OF INTEREST:

- Axis 01:** Epidemiology and theoretical approach (definition, concepts, and theories).
- Axis 02:** Mental health indicators: risk factors and protective factors:
 - At school (mental disorders, behavioral problems, learning difficulties, dropping out of school, school burnout, school stress, violence, etc.)
 - Among mothers: (postpartum depression, high-risk pregnancy, denial of pregnancy, quality of reception of the baby, etc.)
 - Among adolescents: (drug addiction, delinquency, acting out, etc.)
 - Among adults: (violence, depression, schizophrenia, etc.)
 - Among seniors: (Alzheimer's, depression, etc.)
- Axis 03:** Trauma-proof health (pandemics and disasters: COVID, earthquakes, storms, fires, floods, etc.)
- Axis 04:** Health management policies and the practice of the strategies adopted.
- Axis 05:** Management and assessment of the mental health of school students, adolescents, workers, pregnant women, adults, and seniors: strategies, support, tools, and models.
- Axis 06:** Staff training: in school, work, and personal hospital environments.
- Axis 07:** Assessment and care of mental health
- Axis 08:** Collaborative work and Mental health promotion
- Axis 09:** Health at work and the reality of the practice of work psychologists in companies
- Axis 10:** Practice of managers in human resources and occupational health
- Axis 11:** The development of the construction of health at work.
- Area 12:** Support for people with specific needs

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Important dates :

- ✓ From 30 November 2023 to 15 January 2024 (Full paper submission).
- ✓ From 16 January 2024 to 28 February 2024 (Notification of Acceptance).
- ✓ 06 and 07 May (Conference date).

Conference languages: Arabic, French, English.

Cost of participation

Participation with hotel and catering included
 1 night: 6000 DA
 2 nights: 9000 DA
 Participation with catering only (no hotel): 3000 DA
 Participation for doctoral students: 1500 DA

NB

**Ticketing and transport costs are the responsibility of the participant.
 Remote participation will be possible for participants from outside the country.**

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