



QRMH10

QUALITATIVE RESEARCH IN MENTAL HEALTH

ABSTRACT BOOK

21-23 MAY 2025 **BUDAPEST**

Content

Welcome Message.....	2
Conference Chairs.....	2
Scientific Committee.....	2
Wednesday 21 st May	3
WORKSHOP_1	3
WORKSHOP_2	3
SYMPOSIUM_1.....	3
ORAL SESSION_1: Mental Health Issues of Couples and Families.....	5
ORAL SESSION_2: Families, Fathers, Finances.....	6
KEYNOTE_1	8
Thursday 22 nd May.....	8
ORAL SESSION_3: Life Narratives and Trauma	8
ORAL SESSION_4: Professional Identity 1.....	10
ORAL SESSION_5: Women Mental Health.....	12
SYMPOSIUM_2.....	14
ORAL SESSION_6: Challenging Situations in Mental Health Care.....	15
ORAL SESSION_7: Professional Identity 2.....	17
ORAL SESSION_8: Novel Approaches in Community Mental Health.....	18
ORAL SESSION_9: Narratives of Migration and Displacement	20
ORAL SESSION_10: Cultural Sensitivity in Qualitative Research	22
ORAL SESSION_11: Creative methods in mental health of the elderly/chronically ill persons.....	23
ORAL SESSION_12: Interpersonal Conflicts in Healthcare and Families	24
ORAL SESSION_13: Digital Tools	26
ORAL SESSION_14: Medical Issues	28
ORAL SESSION_15: Interviewing Techniques, Methodological Challenges	29
ORAL SESSION_16: Child Protection	31
KEYNOTE LECTURE	32
Friday 23 rd May	33
ORAL SESSION_17: Healthcare Services: Conflicts and Ressources, Eating Disorders	33
ORAL SESSION_19: Parents, Children, Ecological approach.....	34
POSTER PRESENTATION	36
KEYNOTE_3	38
DIALOGUE & OPEN DISCUSSION	39

Welcome Message

Welcome to the 10th Conference of Qualitative Research in Mental Health: Shared Journeys in a Troubled World: Interweaving Mental Health and Personal Experience.

Our theme highlights the essential role of storytelling and qualitative insight in deepening our understanding of mental health in troubled times. Central to the QRMH conference series are methodological innovation and pluralism, interdisciplinary collaboration, as well as the qualitative researcher's personal experiences and self-reflexivity. Together, we will explore the narratives, meanings, and shared experiences that define our field, opening pathways to fresh perspectives on care, community, and healing.

Conference Chairs

Angela Abela

*Professor in Child and Family Studies, Faculty for Social Wellbeing,
University of Malta, Malta*

Maria Borcsa

*Professor in Clinical Psychology, Institute of Social Medicine,
Rehabilitation Sciences and Healthcare Research,
University of Applied Sciences Nordhausen, Germany*

Zsuzsa Kaló

*Habil. Associate Professor, Institute of Psychology Lecturer,
Head of Department of Counselling and School Psychology,
ELTE University, Budapest, Hungary*

Viola Sallay

*Habil. Associate Professor, Clinical Health Psychologist, Family Therapist, University
of Szeged, Institute of Psychology, Hungary, Professor, Sigmund Freud Private
University, Vienna-Paris*

Scientific Committee

National Committee

*Veronika Bocsi, Hungary
Péter Bodor, Hungary
Márta Csabai, Hungary
Bea Ehman, Hungary
Márta B. Erdős, Hungary
Lan Anh Nguyen Luu, Hungary
Bernadette Péley, Hungary
József Rácz, Hungary*

International Committee

*Lene Berring, Denmark
Eugenie Georgaca, Greece
Julia Hille, Germany
Anne Kraye, United Kingdom
Hugh Middleton, United
Kingdom*

Wednesday 21st May

WORKSHOP_1

Story completion as qualitative methodology

Virginia Braun

Ahorangi, School of Psychology/Te Kura Mātai Hinengaro, Waipapa Taumata Rau, New Zealand

Story Completion as Qualitative Methodology

WORKSHOP_2

Metaphors in mental health communication - qualitative analysis of presuicidal interactions

Simon Gábor

Eötvös Loránd University, Hungary

Metaphors in mental health communication - qualitative analysis of presuicidal interactions

SYMPOSIUM_1

Methodological triangulation in qualitative research: exploring possibilities

Chair(s): **Reitske Meganck** (Ghent University, Belgium)

Discussant(s): **Reitske Meganck** (Ghent University), **Virginia Braun** (The University of Auckland)

In literature on qualitative methodology, triangulation of methods is considered to provide different perspectives or put different lenses on a phenomenon of interest. It is however time intensive to investigate a research question or data from different angles. Moreover, it can be challenging to combine different methodologies that each have their own ontological and epistemological assumptions. As such, it is not a common practice and few research papers present methodological triangulation examples.

In this symposium we aim to discuss four examples of studies investigating different mental health related research questions through different methodologies. On the one hand, the examples present combinations of methodologies focusing at different levels of analysis, i.e. cross case versus case level. On the other hand, the combination of more descriptive-interpretative methods (e.g., thematic analysis) versus more structural language-oriented approaches (e.g., narrative analysis, conversation analysis) are illustrated.

Presentations of the Symposium

Adolescent identity in a rapidly changing world: investigations using reflexive thematic analysis and narrative analysis

Margaux Schoofs

Ghent University

Though a critical task across the lifespan, the development of an identity is widely recognized to be most salient for the adolescent. If we want to study identity, it is vital to examine the socio-cultural conditions they draw on, resist and impose. These conditions are rapidly changing throughout the world (e.g., increasing urbanization, commercialization and technologization), and this has extensive psychological repercussions on the development of adolescents. In this presentation, we discuss two qualitative studies that employed the master narrative framework (Syed & McLean, 2015) to investigate adolescent identity within and throughout these socio-cultural conditions. First, 15 focus groups were conducted with Belgian adolescents and analyzed via reflexive thematic analysis (Braun & Clarke, 2022), revealing six contrasting socio-cultural imperatives. Second, we aimed to deepen our

understanding of this person-culture link by conducting an idiographic, holistic narrative analysis (Hammack & Josselson, 2019) of in-depth individual interviews with 4 adolescents. Utilizing these different methodologies for data collection and data-analysis provided us with a nuanced and multi-facetted understanding of the content of master narratives today's youth are engaging with, as well as individual differences in this engagement. Moreover, the presentation highlights the importance of considering the socio-cultural when investigating adolescent mental health.

Being Muslim to counter madness – from a generic-descriptive qualitative approach of lived experiences on radicalization to a case study approach

Amar El-Omari

Ghent University

Research on radicalization has increasingly emphasized the role of religiosity in shaping meaning, identity, and belonging, rather than functioning as a mere ideological pretext (Dawson, 2022). This dynamic was evident in our qualitative study (El-Omari et al., 2025), in which we conducted semi-structured life story interviews with Syria travelers. Our descriptive-interpretative analysis (Elliot & Timulak, 2021) highlighted the process of identity reconfiguration in participants' narratives, confirming Awan's (2007, 2023) concept of Transitional Religiosity Experiences (TREs). A notable pattern emerged in their shifts between the use of "we" and "I" in their speech, signaling transformations in how they articulated the role of religion in their identity formation. To deepen these findings, our follow-up study will employ a case study approach, allowing for in-depth exploration of individual experiences, which cannot be fully captured through generalized research alone (Willemsen, Della Rosa, & Kegerreis, 2017). While the broad analysis was essential in capturing overarching lived experiences, these insights will now inform a more detailed case study approach of the lived experiences of Jamal, offering a nuanced understanding of how religiosity and identity evolve within radicalization trajectories.

Transitioning to motherhood in complicated circumstances: combining interpretative phenomenological analysis with a discourse analytic perspective

Reitske Meganck

Ghent University

In this study we intensively studied five in-depth interviews with women who had difficult birth stories. Unexpected heart disease, premature birth, mother's life endangered during birth, highly complex fertility issues are circumstances that complexify the transition to motherhood substantially. These women gave birth during the Covid-19 pandemic and as such the related social isolation put a magnifying glass on the issues these mothers and their families encounter in general. There is hardly any research focusing on the experience of mothers with such difficult birth stories. In this study we investigate these stories through different lenses. On the one hand we focused on the experiences of these women through an interpretative phenomenological analysis. On the other hand, we try to understand how societal discourse on pregnancy, birth, and motherhood provide mothers with frameworks to understand their experience and how that allows them to conceive their own identity, what happened, how they think and feel about it and its effects, in a certain way. We additionally discuss how these two perspectives, although adding depth to the analysis and providing a more nuanced and contextualized understanding of the phenomenon of interest, do not merely add up, yet tell two different stories.

What's Going On Here? Investigating group processes in multidisciplinary teams in mental health care – A methodological challenge

Melanie De Boever

Ghent University

The complex communication dynamics and group processes within multidisciplinary teams (MDTs) are challenging to study (Bokhour, 2006). Qualitative data collection methods, such as retrospective and ethnographic approaches, have been criticized for their limitations in capturing these dynamics (Smart & Auburn, 2018). Furthermore, methodological challenges identified in psychotherapy research (Timulak & Elliott, 2019) are equally relevant when studying MDT interactions.

This presentation discusses an exploratory, theory-driven ethnographic study that combines observation with focus groups to examine group processes in MDTs. We conducted direct observations and audiotaped MDT meetings in a psychiatric hospital in Belgium to capture real-time interactions. Immediately after each meeting, we organised a focus group with the team to reflect on the meeting, allowing us to deepen our understanding of the group dynamics at play. These combined methods provided rich material for analysing both explicit communication and underlying group processes.

While future research will deepen this investigation, this presentation critically reflects on the methodological challenges encountered, specifically in our data collection techniques, assessing both the contributions and limitations of our approach. By reflecting on our data collection process, we aim to refine our framework for studying MDT group processes and develop a well-adapted methodology for future research.

ORAL SESSION_1: Mental Health Issues of Couples and Families

Breaking the silence: Navigating perinatal mental health challenges and social support in Tyrol, Austria

Laura Hölzle

Medical University Innsbruck/Leopold Franzens University, Austria

Perinatal mental illness (PMI) is a major health concern during pregnancy and the first year postpartum. It affects many parents during what is often perceived as a joyous time. While social support and peer exchange can be invaluable during this significant transition, stigma - particularly in the Austrian region of Tyrol - often hinders open discussions about perinatal mental health (PMH) challenges. This talk presents findings from a qualitative study exploring how mothers experience and navigate PMH challenges within their social networks. It is part of a broader research project aiming to improve support for new parents. The project was inspired by a mother's journey of struggling to find adequate formal support, leading her to establish a local self-help group. Based on 13 semi-structured interviews analyzed using reflexive thematic analysis, we report two overarching themes: (1) when expected joy meets unexpected struggles and (2) social and peer support: valued yet complex. Our findings highlight the emotional rollercoaster of mothers with PMH challenges and the critical role of lived experience in shaping meaningful support. These insights call for community-driven peer initiatives and more open discussions to reduce stigma and better meet the needs of new parents.

Journey: the metaphoric perception of couples relationships when one of them copes with mental issues

Tamila Kemelman Polyakov¹, Iris Lavi², Ruth Berkowitz³, Eli Buchbinder⁴

¹University of Haifa, Israel; ²University of BATH, UK; ³University of Haifa, Israel; ⁴University of Haifa, Israel

The interaction between mental health and relationships remains understudied, particularly regarding how couples navigate their relationship when one partner faces mental health challenges. This research examines how couples, where one partner has a mental disorder, perceive their relationship through metaphoric language.

This qualitative study involved semi-structured interviews with 12 couples (24 participants) living together in relationships. The sample included 8 women and 4 men with mental illness, and their partners (8 men, 4 women), aged 24-68, with relationship duration ranging from 5 to 37 years.

Analysis revealed that couples view their relationship as a shared journey, reflecting their partnership in facing illness together and experiencing mutual growth through challenges. The journey metaphor emerged as a representation of their shared experiences, encompassing love, acceptance, empathy, and mutual commitment. This metaphor enables couples to reframe mental crisis situations as opportunities for personal and couple growth, strengthening their belief in their ability to cope and grow stronger together.

The findings contribute to understanding how couples create meaning in the face of distress, suggesting that the journey metaphor could serve as a valuable therapeutic tool in mental health

contexts. This perspective offers new insights for clinical interventions and relationship support in mental health settings.

Parenting children with neurodevelopmental disorders in Malaysia: a qualitative exploration of parental wellbeing

Faith Martin¹, Trixie Tangit², Habibie Ibrahim², Nicholas Pang²

¹University of Bath, United Kingdom; ²Universiti Malaysia Sabah, Malaysia

Parenting a child with a neurodevelopmental disorder (NDD) in Malaysia is shaped by systemic, social, and cultural barriers. This qualitative study explores the lived experiences of 16 parents in Malaysian Borneo and Perak, focusing on their wellbeing, access to support, and cultural influences.

Thematic analysis identified six interconnected challenges:

- 1) Inaccessible support services—long waiting times, financial strain, and geographic barriers force parents to seek informal alternatives;
- 2) Communication difficulties—non-verbal challenges lead to frustration, misinterpretation, and social withdrawal;
- 3) Pervasive daily impact—caregiving responsibilities disrupt relationships, routines, and self-care;
- 4) Emotional and psychological toll—stress, stigma, and internalized blame worsen parental wellbeing;
- 5) Parental identity and advocacy—parents navigate isolation but develop resilience through peer networks and advocacy roles; and
- 6) Cultural constructions of disability—collectivist values both support and stigmatize, shaping caregiving experiences.

Findings challenge assumptions that community structures always provide support, highlighting the need for peer-support integration, rural outreach, and stigma reduction. Considering Bronfenbrenner's Ecological Systems Theory, the interaction between different systems is clear, with a need for multi-level interventions, not least to address distress placed in the parents that is related to lack of support and social stigma.

ORAL SESSION_2: Families, Fathers, Finances

Balancing family relationship processes during succession in family businesses

Viola Sallay^{1,4}, Attila Wieszt², Szabolcs Varga³, Tamás Martos^{4,1}

¹Sigmund Freud Private University, Paris; ²Corvinus University of Budapest, Institute of Strategy and Management, Budapest, Hungary; ³Semmelweis University, Budapest, Hungary; ⁴University of Szeged, Hungary, Institute of Psychology

In our grounded theory-based qualitative study, we explore how relationship-regulation processes among family members either support or undermine individuals' emotional and mental well-being, ultimately shaping the succession process in first-generation family businesses.

Drawing on in-depth interviews with incumbents and successors from twelve first-generation family firms, our grounded theory analysis produced a substantive theoretical model rooted in the interview data. We found that intrafamily succession is driven by relational negotiation processes that revolve around three main areas: establishing a shared identity between incumbent and successor, co-constructing their understanding of succession, and defining the family rules that guide the process.

In our proposed model, their common construction is metaphorically depicted as a bridge built "brick by brick," emerging from ongoing relationship-regulation efforts. Negotiations around shared identity form the foundation of this common construction, while negotiations over family rules provide its structural framework.

Overall, the findings point to a dynamic, relationship-focused perspective on succession in which planning is not the central mechanism; rather, relationship negotiations and family members' mental and emotional health and well-being play a pivotal role in shaping the succession's success.

Fathers' experiences of perinatal mental health in Austria: barriers, support, and looking for help

Philipp Schöch

Research Group Healthy Minds, Austria

Despite increasing recognition of paternal perinatal mental health (PPMH), with research showing that approximately 1 in 10 fathers experience mental health issues during this period, fathers' experiences remain overlooked in research and practice. This study explores how fathers in Austria navigate PPMH challenges and available support. Fourteen qualitative semi-structured interviews were conducted to gain a better understanding of fathers' experiences, with thematic analysis used to analyze the data. Participants described several barriers to seeking (professional) help, including stigma, societal expectations of fatherhood, traditional gender norms, and a lack of father-inclusive services. Many fathers hesitated to seek support due to societal pressures and the belief they should be strong and prioritize supporting their partner over their own wellbeing. While fathers relied on informal support networks, such as family, friends, and peers, for (emotional and) practical support, the availability and effectiveness of these networks varied. Fathers' approaches to PPMH were shaped by their mental health experiences, how they interpreted these, and societal pressure to neglect their own needs, affecting how they expressed emotions. These interviews highlight the need to rethink PPMH support, with a focus on greater visibility of fathers and co-parents in perinatal care and developing interventions tailored to their unique needs.

Being free and determined at the same time: An analysis of qualitative interviews with couples experiencing financial stress, inspired by the thinking of Simone de Beauvoir.

Joanna Rzadkowska^{1,2}, Helene Amundsen Nissen-Lie²

¹Modum Bad Research Institute; ²University of Oslo, Norway

There is a lack of qualitative research in a clinical setting that investigates the experiences of couples facing financial stress, and how this shapes their quality of life and couple dynamics. During a previous study with this population, we noticed that the participants reflected on existential questions such as freedom and determinism in a way that warranted closer analytic attention. Using existential philosophy to understand such material holds promise, as it allows the researcher to use interpretations from outside the clinical and sociological literature most often used to make sense of these phenomena. Simone de Beauvoir's philosophy was chosen for this specific topic, as she wrote about the ambiguities of being both a determined and self-constituting subject in *The Ethics of Ambiguity* (1947). In this study, we use de Beauvoir's thinking to re-analyse qualitative interviews with six couples, previously analysed using Interpretative phenomenological analysis (IPA). The couples are highly distressed, report financial stress and are interviewed during residential couple therapy. Their accounts illustrate how narratives of loneliness and inter-connectedness, freedom and determinism co-exist and illuminate each other in surprising ways. Implications for couple therapy are considered. The methodology is discussed in relation to IPA and Critical post-intentional phenomenological inquiry (CRIT-PIP).

KEYNOTE_1

Making the best and avoiding the worst of thematic analysis

Virginia Braun¹, Viktoria Clarke²

¹Professor/Ahorangi, School of Psychology/Te Kura Mātai Hinengaro, Waipapa Taumata Rau, The University of Auckland; ²Associate Professor in Qualitative and Critical Psychology, University of the West of England

This talk will explore problematic practices in reflexive thematic analysis (TA) – based on our reviews of published TA research across 7 health-related journals – and highlight examples of good practice. In this exploration, we emphasise the concepts and practices of methodological congruence, reflexive openness and being a knowing researcher. Methodological congruence – also known as methodological coherence, methodological integrity and paradigmatic congruence – captures the way different parts of a research project fit together to form a coherent and harmonious whole. This means our research questions, philosophical assumptions, understanding of researcher subjectivity, treatment of data and quality practices are all in conceptual alignment. Reflexive openness – more widely known as transparency – highlights the importance of qualitative researchers offering a transparent and comprehensive account of their research practice. For some, this can entail revealing some of the 'mess' and 'behind the scenes' of the research process rather than offering a seamless and polished account of the research. Both methodological congruence and reflexive openness are facilitated by researchers who recognise the importance of, and strive to become, what we call knowing practitioners – which includes having a sound understanding of the conceptual underpinnings of their research, being deliberative and reflexive in their choices, and being able to communicate these to others. We end by briefly highlighting two quality tools – the RTARG and the BQQRG – that we have developed to support researchers in conducting methodologically congruent and reflexively open reflexive TA.

Thursday 22nd May

ORAL SESSION_3: Life Narratives and Trauma

A thematic analysis of understandings of youth self-harm and suicidality among Rwandan youths, parents and health-care professionals

Faith Martin¹, Belise Isingizwe², Yves Gashugi², Faith Cheonga², Evangeline Ishimwe², Sarah Wicker³, Shu Yi Ong³, Joseph Kalisa², Vincent Sezibera²

¹University of Bath, United Kingdom; ²University of Rwanda, Rwanda; ³Cardiff University, United Kingdom

Suicidality and self-harm among young people in Rwanda remain underexamined, despite high reported rates and limited available support. This qualitative study explores the perspectives of young people, parents, and healthcare providers, examining how self-harm is understood, responded to, and shaped by social and cultural contexts.

Through inductive thematic analysis of interviews with 102 participants, we identify poverty, family conflict, stigma, and community rejection as key risk factors, while peer support, spirituality, and family relationships emerge as protective. Findings highlight how self-harm functions as a coping strategy, a response to distress, and a form of communication, yet community beliefs about shame and spiritual causation often exacerbate distress rather than reduce it.

Conducting research in this setting required critical reflexivity, particularly in navigating deeply personal and contested meanings of self-harm. Researchers' professional backgrounds in psychology at times contrasted with local conceptualizations of distress, necessitating open discussion and collaborative interpretation with Rwandan team members. This experience reinforces the need for participatory, culturally embedded interventions that align with local understandings of mental health,

distress, and healing. The centrality of the role of culture to cause, emotional experience, perceptions, and help-seeking for young people underscores the vital need for community integrated interventions.

The experience of patients with personality-disorder in a psychiatric setting, and their process of understanding their diagnosis

Judit Nora Pinter¹, Péter Ruscsák², Xénia Gonda³

¹Eötvös Lóránd University, Institute of Psychology; ²Ébredések Foundation; ³Semmelweis University, Department of Psychiatry and Psychotherapy, Budapest

Theoretical background: The diagnostic process is a crucial development in the history of illness, which shapes the personal history of patients, and indeed their very identity. **Aim:** Although a number of qualitative studies have attempted to explore aspects of personality disorder as a lived experience, no idiographic study of such a phenomenon has been conducted on a sample in Hungary with a focus on the actual subjective experience within the diagnostic process. The research questions include: How do psychiatric patients experience, and what meaning do they give to, their treatment in the institution? How do they interpret the diagnosis they receive? How does the diagnosis affect their identity? **Methods:** interpretative phenomenological analysis was used in analyzing semi-structured interviews. This study involved 6 participants, 4 women and 2 men, aged 19-32, treated in an acute psychiatric ward. **Results:** Three primary themes emerged from the analysis of the interviews: 1) The drift and vulnerability creating the road to psychiatry 2) The diagnostic process and the experience of psychiatric inpatients, and 3) The turning point in self-awareness. **Conclusions:** A key condition for recovery is the acceptance and integration of an appropriate diagnosis into patient identity, significantly facilitated by the attitude and approach of caregivers during the psychiatric stay.

What's in a title: The dialectics between narratives of trauma and mental health

Zvi Eisikovits, Eli Buchbinder

University of Haifa, Israel

Narrative inquiry assumes that lives are communicated in a storied mode. This assumes a construct that has a basic plot. The presentation discusses giving titles to life narratives to understand the meaning of trauma and distress in attempting to achieve of control and mental health. It is based on qualitative data from two research projects conducted in Israel: One with 20 abused Muslim women, ranging in age from 19 to 30 years, and the other with 20 Jewish women, survivors of incest. Each interviewee was asked to choose a title for her life story and elaborate on its meaning. The results indicate that titles integrate two functions: the first reflects the interviewees' struggle to face and make sense of helplessness and powerlessness due to past experiences of seemingly meaningless pain; the second reflects the interviewees' struggle to construct the future, including a map of tasks, vision, and existential mission. The two functions are intertwined in the titles and reflect the need to achieve mental well-being.

The discussion of the titles for life narratives is based on the conception of Sartre's "fundamental project" as a dialectic one involving past distress arising from trauma and the creation of meaning.

Stories beyond reality: storytelling of psychotic experience from the patients' voice

Giovanna Calabrese¹, Rosanna Barone²

¹Integral Transpersonal Institute, Milan, Italy; ²ASST Rhodense, Milan Italy

In psychiatry symptoms reported by the patient are deemed important to arrive at a diagnosis and decide for the best pharmacological therapy or psychoeducational or psychosocial intervention. Usually, little attention is given to how the patients live their condition, to their experience of reality, especially when considering subjects with psychotic symptoms. Yet the importance of the lived experience of psychosis is increasingly emphasized both for research purposes and to improve therapeutic interventions. This project, based on the theoretical model of narrative medicine, was conducted on six subjects with psychotic episodes (subjects had different DSM-V diagnosis), in clinical remission in the moment of the

study. Aim of the study was to give voice to the patients to describe their life before, during and after the most critical moment. They wrote their stories following a standard narrative track, using also images as metaphoric expression of their emotions. The narrative process favored the development of self-awareness in the patients helping them to reframe the subjective experience of psychosis in the larger frame of their life. Storytelling led them to reflect on their inner qualities which promoted the recovery process. Finally, they could reflect on their relationship with either family members and healthcare personnel.

Needs of Collective Trauma Survivors from October 7th in Israel

Adi Duchin^{1,2}, Rivka Tuval-Mashiach²

¹Bar Ilan University, Haifa University, Israel; ²Bar Ilan university

The present study explores the immediate needs of survivors from the massacre that happened in Israel on October 7th, 2023. During the events citizens were exposed to tangible danger and were evicted from their homes without knowing if, or when, they will return.

A survey exploring the needs of these trauma survivors was conducted a month after October, on purpose of gaining understanding of the types of help that will be beneficial for them. It included both quantitative questions in order to examine the concrete needs of the evacuees, and open-ended questions whose purpose was to let the evacuees express their needs in their own words. 800 people responded to the quantitative questions, and less than a 100 responded to the qualitative part.

The analysis of the survey generates several central themes, including concrete and existential loneliness that is present in the evacuees' stories. The need to regain a sense of control over their lives, to be the ones who tell their stories, stood in the basis of the survivors' narratives. They expressed a wish to create a bridge of agency between the lives that they had before the trauma, and the lives that they have at present, as evacuees.

ORAL SESSION_4: Professional Identity 1

Lived experiences of psychologists with a history of non-suicidal self-injury

Sam Dax, Jessica L Mackelprang

Swinburne University of Technology, Department of Psychological Sciences, Australia

Psychologists experience mental health difficulties at rates similar to the general population, including non-suicidal self-injury (NSSI). In this mixed-methods study (convergent parallel design), we explored the lived experiences of psychologists in Australia who have a history of NSSI, including how these experiences impact their work; decisions about disclosure to supervisors, colleagues, and clients; and choices concerning scar concealment. Ninety psychologists (65 provisional, 25 general) participated in an anonymous online survey that collected quantitative and qualitative data. Few psychologists had disclosed their NSSI history to supervisors (7.8%), colleagues (29.1%) or clients (2.2%). NSSI-related scar concealment (e.g. client work, supervision) was common in professional contexts. Four themes were generated using reflexive thematic analysis: 1) *Just one part of me*, 2) *Stigma fuels fear*, 3) *A history of value that need not be told* and 4) *Walking the tightrope of disclosure*. This study challenges assumptions that psychologists are immune to the conditions they treat, an assumption that needs to be disputed openly in training and research. Findings have implications for psychology and supervisory training, including how to cultivate safer, inclusive learning spaces that destigmatise lived experiences of mental health difficulties. These findings may inform future guidelines and combat stigma associated with NSSI.

Reflexivity in clinical psychology students: lessons from the rhetorical analysis of a graphic novel

Laura Margareta Van Beveren

Ghent University, Belgium

This presentation focuses on how we can educate clinical psychology students to become reflexive practitioners by building on theories and concepts from rhetorical studies. Rhetorical studies of mental

health (Reynolds, 2018; Melonçon et al., 2020) theorize and examine how language creates certain understandings of our mental health and how these understandings become persuasive and influence how we act upon our or others' 'healthy' or 'ill' bodies/minds. My contribution is based on a research project in which master students in clinical psychology rhetorically analysed cultural constructions of 'mental health (problems)' in Ellen Forney's autobiographical graphic novel 'Marbles: Mania, Depression, Michelangelo and me' (2012). A qualitative content analysis of students' reflective reports reveals that some students take a position of rhetorical othering, where being rhetorical and subjective or situated is only attributed to the Other (here: the patient) and personal assumptions are left unquestioned. Nevertheless, most students take a position of rhetorical listening, using rhetorical concepts to reflect on their own assumptions and on the different cultural logics, and the ethical and political ramifications of these logics, in which psychological practice and knowledge on 'mental health (problems)' are inevitably embedded. I conclude with some recommendations to implement 'rhetorical reflexivity' in the classroom.

Patient and staff lived experience of traditional and contemporary social spaces in acute mental health.

Donna Michelle Ciarlo

London South Bank University, United Kingdom

This research project explores the psychological dimensions of social spaces in acute inpatient wards, understanding and making sense of how inhabitants interact within both existing and newly developed environments. Acute wards are collective care spaces, monitored and supported by clinical staff, where individuals with diverse backgrounds and support needs coexist. These social spaces play a crucial role in fostering interaction and aiding recovery. However, despite their therapeutic importance, little research has focused on the lived experience of these spaces.

Drawing on mental health and cognitive neuroscience research, this project seeks to capture the emotions, thoughts, bodily sensations, and perceptions of inhabitants as they engage with traditional and contemporary environments. Two studies have been conducted: the first employs a visual qualitative approach using photo production in a current hospital setting, while the second utilises virtual reality to simulate a new environment. A multi-perspective interpretative phenomenological analysis is underway to understand how patients and staff experience existing social spaces and their perceptions of new (albeit virtual) ones.

By adopting an ecological approach, this research aims to deepen our understanding of these unique and complex spaces, highlighting their vital role in inpatient care.

Mixed-race therapists' accounts of racial identity experiences in the therapeutic professions

Olivia Behjat Mohtady

University of Manchester, United Kingdom

Mixed-race identity remains under-researched in mental health and psychotherapy literature, despite mixed-race people being one of the largest and fastest-growing racialised groups in the world. Like all therapists, mixed-race therapists need to reflect on how their racial identity may come into their therapeutic practice, to help navigate dilemmas, yet without research and discussion there is no context or support for this. Using a qualitative semi-structured interview design, I generated and analysed 10 mixed-race therapists' accounts, asking: How do mixed-race therapists experience their racial identity in the therapeutic professions? Reflexive thematic analysis yielded two main themes: *How does my mixed-race identity fit into my therapeutic practice?* and *Entering the therapeutic profession compounds feelings of being alone, othered and confused as a mixed-race person*. These themes highlight othering of mixed-race therapists in therapeutic professions, compounded by binary conceptualisations of racial identity which exacerbate practice-based dilemmas. This demonstrates the importance of intersectional approaches to conceptualising racial identity. As the presenter, I hope to make space for discussion of qualitative research methods and approaches to therapeutic training, development, and practice that value and welcome experiential differences in identity. The University Research Ethics Committee of the University of Manchester granted ethical approval for this research.

The impact of ideologies on the helping professions in a troubled world

Marta B. Erdos¹, Anikó Vida², Eva Grigori³

¹University Of Pécs, Faculty of Humanities and Social Sciences, Hungary; ²University of Szeged, Faculty of Health Sciences and Social Studies, Hungary; ³St. Pölten University of Applied Sciences, Department of Social Sciences, Austria

Neutral themes may develop into highly sensitive ones in a troubled world. New authoritarianism is a societal context in which the values of the helping professions become threatened, potentially leading to derailment and deprofessionalization. Academics in social work with diverse research backgrounds from different Hungarian universities have conducted a community autoethnography (CA) session to study their notions concerning the impact of emerging far right ideologies on social work and reach a deeper understanding of the problem. Practicing CA acknowledges the importance of researchers' own experiences and requires systematic, detailed and honest observations, ongoing reflections and interpretations. Here, we have explored how our professional community construes this specific theme and proceed towards a common conceptualization to facilitate further research. The method has resulted in a rich material, also promoting trust and collaboration in a research team where not every member knew each other but were connected by their common professional values. In this study, the verbatim transcription of the discussion was analysed and then complemented by the participants' subsequent reflections. The emerging conceptual network shows the unique strengths of the method. Ethical challenges inherent in CA are also raised in the presentation.

ORAL SESSION_5: Women Mental Health

Hermeneutic circle women's journey

Zsafia Szekely

ELTE Budapest, Hungary, Institute of Psychology

In my presentation, I will report on the current status of my ongoing qualitative research, with the unhidden intention of finding some order in the archetypal creative chaos. I explore the nature of the transcendental, spiritual experiences associated with women's bodily experiences during childbirth – such as pain, altered states of consciousness. My research questions - my hermeneutic journey - revolve around motherhood, childbirth, the female body in social context, and the archetype of the female healer - the healing woman. This archetype seems to include both maternal and divine aspects. There are a number of references in the Jungian analytical psychology literature that may be useful for understanding this, including artistic and mythological contexts. "In childbirth, women are God's partners." (Mohás, 1998) – what does this sentence mean for us in the 21st century? In my lecture, I will follow this thread from the Hungarian psychologist Livia Mohás (quoted above), and I will use three mythological female figures, Lilith, Circe and Kinnaree to introduce my self-hermeneutic journey, via autoethnography (Williamson, 2018) and photovoice (Budig et al, 2018).

Women's experiences of menopausal healthcare in Hungary: A thematic analysis

Nikoletta Teller, Eszter Beran

Pazmany Peter Catholic University, Hungary

Menopause is a natural phase in a woman's life that may involve significant physical and psychological changes. Healthcare plays a crucial role in managing symptoms and improving quality of life. However, many women report inadequate care, shortcomings in the doctor-patient relationship, and a lack of personalized support. This qualitative study aims to investigate Hungarian menopausal healthcare experiences using thematic analysis of semi-structured interviews with twelve women aged 45–55. The research examines key shortcomings in menopausal care, characteristics of the doctor-patient relationship, symptom management strategies, and factors that may contribute to a dignified menopausal experience. Preliminary findings suggest that women often feel the healthcare system provides insufficient information and support. The doctor-patient relationship is frequently perceived as unsupportive, with communication barriers. Participants emphasized relying on self-management strategies, including lifestyle changes and alternative therapies. These initial results indicate a need for

improvements in menopausal healthcare. Enhancing medical education, strengthening patient information, providing psychological care, and improving physiological symptom management could significantly contribute to improvement of the quality of life for menopausal women.

Motherhood, care responsibility and mental health: the role of caregiving in the mental wellbeing of women with mental illness

Monika Schamschula, Jean Lillian Paul

Medical University of Innsbruck, Austria

Women and especially mothers often do most of the unpaid care responsibilities within the family. An uneven division of caregiving duties can increase the risk of psychological stress. Based on 20 interviews with mothers experiencing mental illness, we conducted a thematic analysis from a gender-theoretical perspective to examine ways in which these mothers relate their mental health and their role as mothers with associated caregiving duties. While some mothers perceive motherhood as a source of motivation and a positive influence on mental wellbeing, many highlight the negative connection between caregiving and mental health. The findings reveal a range of perspectives on this relationship. For some, motherhood and caregiving are perceived as triggers for mental illness; others describe them as additional stressors that exacerbate existing mental health issues. Additionally, although some mothers regard their mental health as independent from caregiving, care-related situations are frequently referenced when describing the nature and severity of their mental health. Across all three perspectives, societal expectations surrounding maternal roles and caregiving responsibilities emerge as key factors shaping these women's experiences of mental health. The findings contribute to the analysis of mental health by considering the gendered parenthood and the resulting unequal distribution of caring responsibilities.

Historical legacies and current challenges in perinatal mental health: a qualitative study from Tyrol, Austria

Jean Lillian Paul¹, Maximilian Bergmann¹, Laura Hölzle¹, Philipp Schöch¹, Laetitia Watzke¹, Anna Buchheim², Christine Hörtnagl¹, Astrid Lampe³, Campbell Paul⁴, Ingrid Zehmeister-Koss⁵

¹Medical University Innsbruck, Austria; ²Leopold-Franzens-Universität, Innsbruck, Austria; ³Ludwig Boltzmann Institute for Rehabilitation Research, Vienna, Austria; ⁴The Royal Children's Hospital Melbourne, Parkville, Australia; ⁵Austrian Institute for Health Technology Assessment GmbH, Vienna, Austria

From my Australian childhood, through my dad's work, I understood the value of empowering parents to meet and recognise their baby's unique personhood. My research career has led me across the world, and also investigating this important topic. One in five women and one in ten men develop a mental illness during the perinatal period, yet many go unrecognized due to stigma, reluctance to seek help, and structural barriers. We explore historical and social factors influencing early and supportive perinatal mental healthcare in Tyrol, Austria. Based upon symbolic interactionism, and using semi-structured interviews (n=33), we examine how shifting meanings of pregnancy, parenthood, and mental health shape contemporary care. Thematic analysis, combining inductive and deductive approaches, identifies service gaps and opportunities for improvement. Findings indicate persistent stigma, traditional gender roles, and inadequate early intervention pathways. While awareness of perinatal mental distress has increased, expectations of parenthood have intensified. Fathers are rarely included in services, and psychiatry's legacy of institutional mistrust deters help-seeking. Peer support and normalisation are valued but underutilized. Despite multiple organizations providing care, services remain fragmented, unevenly distributed, and not always able to provide holistic family focused services. Findings inform co-design efforts with stakeholders to develop locally relevant solutions.

Violence, trauma, and attachment in migration-affected women: a multidimensional qualitative research protocol on dance therapy

Crystal Tomaszewski¹, Rose-Angélique Belot^{2,5}, Aziz Essadek^{3,6,7}, Christophe Clesse⁴

¹University of Lyon 2, Lyon, France; ²University of Marie and Louis Pasteur, Besançon, France;

³Université de Lorraine, Nancy; ⁴University of Roehampton, London, United-Kingdom; ⁵Besançon

Research and University Hospital Center (CHRU), Maternity Unit, France; ⁶Eos Psy, Paris, France; ⁷Saint-Maurice Hospitals, Saint-Maurice, France

This contribution presents a multidimensional qualitative research protocol designed to explore the role of dance therapy in the psychological care of migration-affected women who are survivors of sexual violence. The protocol was crafted to provide a comprehensive understanding of how dance therapy interventions could benefit this population.

To investigate the integration of dance therapy into a multidisciplinary care, semi-structured interviews were conducted with both participants in dance therapy workshops and professionals involved in their care.

Longitudinal qualitative data collection assessed the direct impact of dance therapy on psychological processes and organization. Over a year, participants underwent three sessions at six-month intervals, including a semi-structured interview, the Adult Attachment Interview (AAI), self-report questionnaires, and the Rorschach test (interpreted using the French School method).

The diversity of tools employed reflects the complexity of the research subject and underscores the importance of qualitative methods in clinical psychology research. Semi-structured interviews uncovered challenges rooted in social context, personal experiences of violence, and psychological distress. Longitudinal qualitative analysis provided deeper insight into underlying psychological processes and organization, with a focus on attachment strategies, defense mechanisms, and trauma. These findings are illustrated through a detailed clinical case study.

SYMPOSIUM_2

Chair(s): **Maria Borcsa** (Institute of Social Medicine, Rehabilitation Sciences and Healthcare Research, University of Applied Sciences, Nordhausen, Germany)

Discussant(s): **Anssi Peräkylä** (University of Helsinki, Faculty of Social Sciences, Finland)

This symposium examines the interplay between memory, narrative, and identity, emphasizing their selective and socially constructed nature (Ricoeur 2003). Drawing on insights from Halbwachs, Foucault, Ricoeur, and Assmann, it highlights how memory operates within social frameworks and power structures, shaping what is remembered and forgotten (Halbwachs 1992 [1924], Foucault 1971). Memory actively organizes not only the past but also the present and future, playing a central role in constructing coherent identities (Assmann 2007). These dynamics are crucial for fostering resilience and supporting mental health through adaptive remembering. Understanding these processes provides a foundation for addressing contemporary challenges in resilience and identity formation.

We use in our presentations this conceptual framework to analyse interviews with mothers and their adolescent children who escaped to Germany from the war in Ukraine.

Presentations of the Symposium

Constructing family memory: Narratives, practices, and resilience

Dietmar Wetzel

MSH Medical School, Hamburg, Germany

Family memory is not a static repository, but an active process shaped by social practices, narratives, and symbolic actions that negotiate identity across generations. In forced migration contexts, the construction of family memory becomes critical as families reconcile fragmented histories with present challenges and future aspirations. This dynamic process involves storytelling to create coherence, rituals to sustain emotional stability, and the use of material artifacts as mnemonic anchors (Wetzel, 2021).

Central to this framework is the relational and performative nature of memory-making. Narrative practices frame trauma and loss within resilient, future-oriented stories, fostering collective identity and adaptability. Rituals, meanwhile, embody cultural persistence, providing stability in contexts of social and geographic disruption.

This contribution integrates insights from memory studies and migration research to highlight the multifaceted dimensions of family memory construction. It argues that family memory is not only a

tool for cultural preservation but also a strategy for resilience, offering a critical lens on identity formation within shifting socio-cultural landscapes (Morgan, 2011).

Self-presentations of mother-child dyads from Ukrainian war zones: A narrative positioning analysis

Paula Witzel¹, Maria Borcsa²

¹University of Erfurt, Germany, ²Institute of Social Medicine, Rehabilitation Sciences and Healthcare Research, University of Applied Sciences Nordhausen, Germany

Mothers and children who have to leave their homeland due to the war in Ukraine are confronted with biographical challenges that threaten their identity. In our project, we analyse how they manage to meaningfully integrate their traumatic experiences into their biography. Our central assumption is that communicative practices and narratives provide insights into integration achievements and resilience processes.

Narrative individual interviews with the mothers and semi-structured interviews within two family dyads (mother-child) are compared using positioning analysis (Bamberg, 1997, 2011). The text is analysed first structurally and then examined for positioning activities. This includes the positioning activities of narrators in relation to their past self ("narrated I"), their present self ("narrating I"), as well as in relation to societal discourses. The analysis of trauma representation is incorporated (Lucius-Hoene & Deppermann, 2004).

The results suggest that communicative practices offer insights into the course and status of integration and coping achievements. Progress depends on individual resources, subjective evaluations, and a sense of coherence.

Selective memorising in maintaining mental health

Maria Borcsa¹, Paula Witzel², Dietmar Wetzel³

¹Institute of Social Medicine, Rehabilitation Sciences and Healthcare Research, University of Applied Sciences Nordhausen, Germany, ²University of Erfurt, Germany, ³MSH Medical School Hamburg, Germany

The sense of coherence is a crucial aspect in the concept of salutogenesis by Antonovsky (1997). A meaningful integration of problematic experiences into one's life story creates coherence and helps to maintain a positive sense of identity. As we know from narrative therapy (White & Epston, 1990), problematic self-narrations block meaningful integration. Innovative moments (IMs) according to Santos et al. (2009) are small sparkling moments in self-narrations and exceptions to the problem-saturated storyline.

Individual interviews with mothers are compared with interview material from subsystem interviews, where mother and child are present. Using a circular interview method, we focus on innovative moments in our analysis to reflect on the therapeutic applicability of our research.

ORAL SESSION_6: Challenging Situations in Mental Health Care

Perspective taking in guided interviews conducted with individuals with schizophrenia from a functional linguistic approach

Csilla Egyed¹, Judit Fekete¹, Robert Herold², Aniko Hambuch¹

¹University of Pécs Medical School, Department of Languages for Biomedical Purposes and Communication; ²University of Pécs Medical School, Department of Psychiatry and Psychotherapy

Introduction: Individuals with schizophrenia demonstrate substantial ToM impairment reflected in their language use. In order to effectively take part in social interactions, perspective taking and mental state attribution expressed via deictic expressions and mental state terms are of utmost importance.

Objectives: Analysing the most commonly used deictic expressions and mental state terms may help describe the severity of linguistic disturbances and determine whether patients' language use reflects cognitive or affective ToM impairment.

Methods: The corpus involves 40 guided interviews including 20 individuals with schizophrenia and 20 controls. The interviews were conducted, recorded and transcribed in Hungarian and centred around Hemingway's short story entitled *The End of Something*. The qualitative analysis targeting the identification and classification of collocations associated with the interviewees' mentalizing processes was performed with Sketch Engine corpus analysis tool.

Results: Patients with schizophrenia referred the least commonly to the interpersonal aspects of the context, and made significantly less references associated with the characters' cognitive mental states. Based on their language use, patients' affective ToM skills were relatively intact, whereas cognitive deficits were more apparent.

Conclusions: The findings may add to future language therapeutic interventions targeting the enhancement of patients' social reintegration, particularly via improving cognitive ToM skills.

Interpersonal dynamics and therapeutic process in cases of good and poor alliance in non-improved functional somatic syndromes

Juri Krivzov, Vicky Hennissen, Van Nieuwenhove Kimberly, Meganck Reitske

HAN University of Applied Sciences, Netherlands, The

Patients with functional somatic syndromes (FSS) may present with complex biopsychosocial histories, high interpersonal burden, and are often perceived as hard to treat. Yet, interpersonal processes leading to psychotherapy impasses in FSS have been barely studied in-depth.

Because case studies can offer unique insights into complex psychotherapy processes from an interpersonal perspective, we compare psychotherapies of two patients, who were treated by the same therapist and characterized by opposite (poor and good) alliance. We examined how different alliance scenarios were connected to the symptomatic domains of FSS, depression, and interpersonal problems. We combined the Core Conflictual Relationship Theme method with qualitative analyses according to methodology of theory-building case studies.

The results suggest that poor alliance led to therapist's resignation and contributed to deteriorating of patient's FSS, depression, and interpersonal functioning. While in the case of good alliance, the patient partially improved on depression and interpersonal functioning, FSS complaints still persisted, and patient's focus shifted more towards the somatic domain. This demonstrates that good alliance alone may be not sufficient for achieving a sustainable progress in FSS.

It is especially interesting that qualitative data delivered superior insights into interpersonal dynamics as compared to pre-constructed categories of the CCRT and quantitative data.

Stories of comedy and tragedy in therapy: Psychological therapists' experiences of humour in sessions with clients diagnosed with a terminal illness

Gauri Chauhan

Southern Association for Psychotherapy and Counselling, UK

This presentation explores psychological therapists' experiences of humour in sessions with clients diagnosed with a terminal illness. In considering the extensive research uncovered involving humour and death, comparatively little was found in the field of terminal illness, humour and the psychological therapies, and none specifically on therapists' experiences of these phenomena. Bruner's (1991, 2004) narrative approach is used to examine six psychological therapists' experiences which elicited: participating therapists' personal experiences of humour compared to those experiences with clients; how preconceptions of working in terminal care shaped their experiences of humour once they were experienced therapists; the nature of working with terminally ill clients; the nature of humour as a hindrance and/or help; the differences between humour with clients in terminal settings compared to other settings; and finally, what therapists have learned through their experiences. The findings are presented as the script of a play and then analysed by looking at not only the content of participants' narratives but also how they were told, paying close attention to character, plot, temporality, and situatedness.

ORAL SESSION_7: Professional Identity 2

Engaging students in the advanced training program in psychiatric nursing as co-researchers: An evaluation of bridging clinical practice and academia

Lisbeth Hybholt^{1,2,3}, Lene Lauge Berring^{2,3,4}

¹Research Unit. Mental Health Services East, Smedegade 16, 4000 Roskilde. Psychiatry Region Zealand, Denmark; ²Psychiatric Research Unit. Fælledvej 6, 4200 Slagelse. Psychiatry Region Zealand, Denmark; ³Institute of Regional Health Research, University of Southern Denmark, 5000 Odense, Denmark; ⁴University College Absalon, Campus Roskilde, Trekroner Forskerpark 4, 4000 Roskilde. Denmark

As lecturers in the advanced training program for psychiatric nurses (60 ECTS), we explored how engaging students as co-researchers could deepen their understanding of research methods and evidence-based clinical practice within recovery-oriented care. The training program is organized with an interplay between theoretical and practical models. Rather than limiting the teaching to traditional lectures, we incorporated hands-on research training. We guided the students through the key elements of the research process. In a mini-version, the students conducted systematic literature searches, designed and carried out qualitative interviews, analyzed data, and presented their findings through research posters and invitations to co-write an article in a professional journal.

Using different methods including surveys, Delphi evaluation, and student reflections we examined the students learning about recovery and conditions that supported or hindered research-based learning in clinical settings.

Findings indicate that the hands-on approach fostered critical reflection and deeper discussions on recovery-oriented care, while practical constraints such as time pressure, competing clinical responsibilities, and varying levels of leadership support affected students' ability to carry out and engage in the research activities within clinical practice.

Feasibility of strategies to promote researchers' mental health in emotionally demanding research

Mary Louise Quinton¹, Karen L Shepherd^{1,2}, Jennifer Cumming^{1,3}, Grace Tidmarsh^{1,4}, Georgia Amie Bird¹, Amanda Skeate⁵, Anita Fernandes^{6,7}, Tasneem Choucair⁷, James Downs^{7,8}, Karen Harrison Dening^{7,9}, Meghan H McDonough^{7,10}, Lizzie Mitchell^{3,7}, Daniel J A Rhind¹¹, Charlie Tresadern^{3,7}

¹University of Birmingham, United Kingdom; ²University of Oxford, United Kingdom; ³Institute for Mental Health, University of Birmingham, United Kingdom; ⁴University of Leicester, United Kingdom; ⁵Birmingham Women's and Children's NHS Foundation Trust, United Kingdom; ⁶Mind, United Kingdom; ⁷Project Advisory Group; ⁸Patient Representative, Royal College of Psychiatrists, United Kingdom; ⁹Dementia UK, United Kingdom; ¹⁰University of Calgary, Alberta, Canada; ¹¹Loughborough University, United Kingdom

Emotionally demanding research (EDR), including qualitative research, brings unique risks for researchers' mental health. Researchers can be those within or outside of academia (e.g., peer researchers), where lived experience is increasingly recognised as important in shaping the research. However, EDR must be conducted within a psychologically informed culture to avoid harmful mental health effects. Strategies have been identified to protect researchers' mental health in EDR (Quinton et al., 2025). This study investigated the acceptability and feasibility of implementing these strategies across academic and non-academic contexts. 20 participants across research sectors and EDR disciplines completed an online survey on their views of strategies' (1) acceptability, feasibility, and utility, and (2) barriers and enablers towards their implementation. Open-ended responses were analysed through reflexive thematic analysis. Reflexive diaries and advisory group meetings further informed the analysis. Preliminary themes generated were: the need for further tailoring, supplementary educational resources, and the dependency on organisational resource. Strategies were perceived as acceptable and feasible but tailoring and resource is essential to ensure their effectiveness for the researcher and their context. This study contributes towards a better understanding of how to implement a more inclusive research culture for researchers' mental health in EDR.

Paramedics' experiences of trauma and working-through: An interpretative phenomenological analysis

Petra Kovács¹, Orsolya Papp-Zipernovszky²

¹Hungarian National Ambulance Service, Psychology and Mental Health Group; University of Pécs, Doctoral School of Psychology; ²Eötvös Lóránd University, Faculty of Education and Psychology, Institute of Psychology, Department of Personality and Health Psychology; Semmelweis University, Faculty of Medicine, Heart and Vascular Center

Paramedics work under extreme stress and in such conditions the risk of traumatisation and vulnerability is increased. From a psychological point of view, it is an important question which cases they identify as trauma, how individual trauma is transformed into a narrative and become part of their personal and professional identity, and what self-protection strategies they have developed during their careers to cope with emotionally stressful situations. In our research, we conducted semi-structured interviews with six Hungarian paramedics, which were interpreted by interpretative phenomenological analysis. The focus of our analysis was the experience of trauma deriving from emergency situations, as well as individual characteristics and ways of coping with trauma.

In the stories told by the ambulance workers, we identified risk factors of traumatisation such as *personal involvement, parallels with their own lives, and difficulties in experiencing overwhelming emotions emerged during patient care*. The master themes of trauma recovery and self-protection include a *sense of "I have done everything", the importance of individual meaning-making or the need to share trauma*.

The aim of our research is to better understand the qualities of individual experiences in order to improve the effectiveness of interventions to support the mental health of ambulance workers.

Experience of the hungarian psychoanalytical training model

Ágoston Schmelowszky

Eötvös Loránd University, Institute of Psychology, Hungary, Hungarian Psychoanalytical Society

In this communication I present some preliminary findings of one part of my ongoing qualitative research which aims at discovering various aspects of the psychoanalytic training as it is practiced according to the Eitingon training model of the International Psychoanalytical Association.

According to the Eitingon psychoanalytical training model, the supervisors of the candidate are different from her/his training analyst, so the supervisory experience is detached and different radically from the training analytic experience. In the Hungarian training model, however, the training analyst and the first supervisor is the same person and, sometimes, the first supervision is a natural continuation of the candidate's personal analysis. This method was still practiced in the Hungarian Psychoanalytical Society until quite recently.

Based on an earlier survey (Ajkey 1988) I conducted five interviews with those members of the Hungarian Society who were still trained in this method. The interviews are analyzed by mixed methodology using narrative analysis and grounded theory. That results seem to imply that, contrary to the commonly accepted view, the overdetermined nature of the relationship between the candidate and the training analyst does not diminish the candidate's learning experience and professional maturation.

ORAL SESSION_8: Novel Approaches in Community Mental Health

Towards a person-centered care approach in community mental health services

Michael Galea, Nathalie Mallia

University of Malta, Malta

Mental illness is widespread among adults and remains the foremost cause of years lived with disability. Despite its importance, there is a scarcity of research on person-centered care (PCC) from the viewpoints of mental health service users, particularly within clinical community mental health

services. This study sought to investigate the potential for enhancing PCC through the lived experiences of individuals with mental health conditions who use local community mental health clinics (CMHC) in Malta.

A qualitative research design was utilized, following the principles of Interpretative Phenomenological Analysis (IPA). Ten participants from Malta, who frequently visit CMHCs, were recruited through intermediaries. Each participant took part in an interview, conducted at a mutually convenient time and location. These sessions were audio-recorded and transcribed verbatim for subsequent analysis.

The analysis identified three main themes: quality care, emotional support, and partnership and collaborative care, each comprising various sub-themes. The study illuminated both the strengths and shortcomings of the existing system and their implications for a PCC-oriented healthcare approach. The findings emphasize the importance of continuous education, practice, and research in PCC within this domain. Furthermore, the research offers healthcare professionals (HCPs) a chance for ongoing professional development in accordance with the latest PCC principles.

Haunting data: Mental health, data hacking and digital temporalities

Marjo Kolehmainen

University of Turku, Finland

This paper maps the experiences of the Vastaamo's data breach victims by analysing their stories through the lens of temporality. The Finnish psychotherapy centre Vastaamo fell victim to a data hack in 2019 and more than 30 000 clients were affected. While this incident is often considered as an extraordinary tragedy, cybersecurity breaches in the healthcare sector are growing and personal mental health data makes a valuable form of data on the dark web. In this presentation, I examine the anonymous accounts (N=100) provided by the data hacking victims through the lens of temporality. I especially focus on the ways in which the writers themselves draw connections between datafication of health care, their leaked personal information and mental (ill)health. Further, as the personal data generated in the past may potentially continue to 'haunt' the victims in the future in several ways, I discuss the leaked data as 'haunting data' with their own multitemporal (after)lives. The paper provides insights to the multiple ways in which datafication comes to matter in mental health care, paying particular attention to the ways in which digital temporalities entangle with mental (ill)health.

A critical perspective on mental health news in six European countries: how are 'mental health/illness' and 'mental health literacy' rhetorically constructed?

Laura Margareta Van Beveren

Ghent University, Belgium

Recent developments in critical health communication research emphasize the need for critical inquiry into the different ways in which media actively co-construct what constitutes 'mental health/illness'. In this presentation, I respond to Lynch and Zoller's (2015) suggestion to turn to rhetorical studies to examine how language constructs specific cultural understandings of mental health/illness and mental health literacy and how, at particular moments, these constructions become persuasive to particular audiences and particular causes. My contribution is based on a research project I coordinated in which a group of interdisciplinary researchers studied the rhetorical construction of 'mental health/illness' in newspapers and magazines in six European countries (Belgium, the Netherlands, Cyprus, Greece, Norway and Sweden) and how these constructions relate to specific understandings of mental health literacy. Our rhetorical analysis reveals that we cannot unambiguously assume that biopsychiatric discourses or discourses aimed at empathy and understanding are either exclusively stigmatizing or exclusively empowering and destigmatizing. We consequently call for a critical conception of mental health literacy arguing that all mental health news socializes its audience in specific understandings of and attitudes towards mental health and that discourses on mental health/illness can work differently in varying contexts.

"It is not a miracle, it is methodology": Integrating Mentalization and Mindfulness in Healing Processes

Liraz Samish M.A., Yael Enav (Ph. D), Guy Enosh (Ph. D)

University of Haifa, Israel

This qualitative study explores healing processes often referred to as "miracles" experienced by individuals who have faced significant personal or environmental adversities, including exposure to war. We examine these transformative experiences not as supernatural events, but as methodological processes emerging from integrating mentalization and spiritual contemplation practices.

Mentalization, the ability to understand the thoughts, feelings, and behaviors of oneself and others, fosters self-understanding and improves mental health. Mindfulness, as a foundation of spiritual contemplation, cultivates present-moment awareness and self-acceptance, offering documented mental and social benefits. Together, these approaches create a bridge between scientific understandings of mental health and spiritual traditions. Through analyzing practitioners' narratives of perceived "miracles," this research investigates how the integration of these approaches contributes to mental health and relationship quality, emotional regulation and meaning making.

This qualitative part of a larger mixed-methods study, employs semi-structured interviews and self-reported questionnaires, utilizing thematic analysis for the interview transcripts. The findings advance our understanding of holistic recovery processes. They reveal how personal experiences illuminate pathways to hope, connection, and comprehensive healing while challenging the perception of "miracles" healing by highlighting its methodological foundations.

ORAL SESSION_9: Narratives of Migration and Displacement

Exploring the acculturation experiences of Russian-speaking adolescents living in Hungary in the context of their non-suicidal self-injurious behaviour- Interpretative phenomenological analysis (IPA) of mentally vulnerable adolescents

Xénia Volovik¹, Lan Anh Nguyen Luu³, Judit Balázs^{1,2,4}

¹Doctoral School of Psychology, Eötvös Loránd University, Budapest, Hungary; ²Institute of Psychology, Eötvös Loránd University, Budapest, Hungary; ³Institute of Intercultural Psychology and Education, Eötvös Loránd University, Budapest, Hungary; ⁴Oslo New University College, Oslo, Norway

Purpose: Exploring the adaptation and acculturation experiences of Russian-speaking young people reporting non-suicidally self-injurious behaviour and mental health difficulties. In addition, the study aims to better understand their experiences of stress and coping strategies. **Method:** Russian-speaking adolescent immigrants were included in the study in Hungary. Adolescents who had experienced at least one episode of nonsuicidal self-harm or mental difficulties were included. The Mini International Neuropsychiatric Interview for Children and Adolescents, the Deliberate Self-Harm Inventory, and interviews related to the experience of immigration were analyzed using interpretative phenomenological analysis.

Instruments: We used the Mini -International Neuropsychiatric Interview for Children and Adolescents, the Deliberate Self-Harm Questionnaire (DSHI), and interviews about the experience of immigration. The interviews were analysed using interpretative phenomenological analysis (IPA). We highlighted five interviews with adolescents who were identified as having at least one non-suicidal self-injurious behaviour and mental health difficulty.

Results: The adolescents' experiences were organised around six themes. Through the themes presented, the stressors associated with immigration and adolescents' coping strategies are visible.

Conclusion: From a mental health perspective, potentially stressful circumstances are embedded in an immigration context. Understanding them can be used for targeted culturally sensitive prevention.

Maladaptive adjustment patterns among second generation transnational young female immigrants from the Former Soviet Union in Israel

Rivka A. Eisikovits

Univeresity of Haifa, Israel

Second generation immigrant youths are commonly oriented more to the culture of the country of migration than to the culture of their country of origin. In contrast to the main trend in the literature this was not found to be the case among the 20 participants in this phenomenological study of 18 year old transnationalist female high school graduates. The transnationalist disposition of the immigrant

population from the Former Soviet Union, which means that the migrants are guided by two cultural codes, is at the root of this phenomenon. The enmeshed structure characteristic of Post-Soviet Jewish families took a serious toll on the participants' ability to adjust successfully to the receiving culture. Though these girls, born in Israel, have never set foot on Russian (term used at large) territory, the family ambience programmed them to prioritize the Russian way in all spheres of life. The paper examines how this tendency negatively affected their day to day interactions and life routine in the receiving society and chances for effective accommodation.

Perceptions of mental health from Roma people in the context of forced displacement: preliminary results of a qualitative study

Anna Brandão¹, Eszter Gueth², Xenia Roszik-Volovik^{1,3}, Judit Balázs^{3,4}

¹Doctoral School of Psychology, Eotvos Lorand University, Hungary; ²Cseppekő Gyermekotthoni Központ, Budapest, Hungary; ³Department of Developmental and Clinical Child Psychology, Eötvös Loránd University, Budapest, Hungary; ⁴Department of Psychology, Oslo New University College, Oslo, Norway

Roma people are often socioeconomically vulnerable due to exclusion and violence perpetrated by majority societies. A recent integrative review indicated a lack of studies about Roma mental health. To our knowledge, this is a first study exploring the topic with a Roma forced-displaced community. We aim to explore meanings, factors, and needs regarding mental health and forced displacement following perceptions of Roma currently in Hungary due to the Russia-Ukraine war. Descriptive qualitative method was applied following a reflexive thematic analysis approach. Nine individual semi-structured interviews were conducted by two non-Roma researchers in August 2024 in shelters accommodating Roma forced-displaced families. Interviews lasted around 30 minutes and were audio recorded to enable verbatim transcription. The interviews are in the transcription and analysis phase. Forced displacement consequences to mental health state were noted, such as: 1) feeling stressed and helpless due to the difficulties and uncertainties regarding accommodation, 2) feeling sadness and inferiority for being discriminated against in various contexts. Positive mental health state was related to family well-being and connection. Coping mechanisms included working, doing favorite activities, and talking to, being listened to, and being encouraged by significant people. Results can be informative for contexts supporting Roma and displaced people.

A qualitative study of Kahramanmaraş earthquake experience of Turkish students living in Hungary

Yagmur Ekin Demirtas, Irem Güler, Mónika Ágnes Kovács

Eötvös Loránd University, Hungary

The earthquake on February 6, 2023, had devastating effects on Turkey (Dal Zilio & Ampuero, 2023). This study examines the collective trauma experiences of Turkish sojourners in Hungary following the Kahramanmaraş Earthquake. It focuses on how the participants perceived their situation before and after the disaster, and the emotional and psychological challenges they faced while living abroad. The study adopts an exploratory approach to understand how various factors shape their trauma experiences in the context of living in a foreign country.

Eighteen Turkish sojourners over the age of 18 residing in Hungary were recruited online, with demographic data collected via Qualtrics. Participants then took part in one-hour semi-structured interviews, discussing their experiences of the earthquake, their lives before and after the event. Ethical protocols were followed to ensure participant well-being, and all interviews were recorded with consent. Data analysis is being conducted using Atlas.ti, following a reflexive thematic analysis approach, grounded in the framework of Braun and Clarke (2006), and applying it as outlined by Byrne (2022) to explore the nuances of complex, lived experiences.

While the themes are still being refined, current findings highlight key areas, including Experiencing the Earthquake (with subthemes related to initial reactions, loss, and grief); Coping and Social Support (addressing strategies like emotional distancing, resilience, and communal coping); Media Exposure (encompassing concerns about increased media coverage, violent content, and misinformation); and Social Interactions and Cultural Challenges (examining reactions from Hungarians, international

communities, and issues of empathy and cultural differences). This ongoing analysis aims to provide insights into the challenges faced by sojourners in post-disaster contexts and offer valuable implications for future support systems

ORAL SESSION_10: Cultural Sensitivity in Qualitative Research

Culturally responsive qualitative research: A mental health perspective from the global south

Magnus Mfoafo-M'Carthy¹, Festus Moasun², Jeff Grischow³

¹Wilfrid Laurier University, Canada; ²University of Windsor, Canada; ³Wilfrid Laurier University

Qualitative research methodologies—ranging from narrative and phenomenological approaches to grounded theory, ethnography, and case studies—are typically structured to provide researchers with organized frameworks for inquiry. However, these methodologies are often rooted in Eurocentric and Western paradigms, reflecting the perspectives and priorities of the Global North. This raises critical questions about the cultural sensitivity and applicability of such methods in contexts shaped by different cultural values and traditions, such as those in the Global South. How can qualitative researchers creatively adapt their approaches to better integrate and respect cultural nuances? Should research observations adhere to universal norms, or should they instead be filtered through culturally specific lenses? Drawing on personal experiences as qualitative mental health researchers in the Global South, this presentation explores strategies for making qualitative mental health research more culturally sensitive and responsive, ensuring that cultural contexts are not only acknowledged but are central to the research process.

The Role and Work Experiences of Interpreters in the Psychological Support Processes of Refugees from Ukraine

Szocsivko Jelizaveta, Roszik-Volovik Xénia

Eötvös Loránd University, Hungary

This study explores the experiences of interpreters involved in the psychological support of Ukrainian refugees and highlights the challenges they face in therapeutic settings. Additionally, it examines the role of supervision groups in providing emotional and professional support.

Methodology: Using Interpretative Phenomenological Analysis (IPA), we conducted semi-structured interviews with six interpreters (five women and one man) who have worked for 1.5 to 2 years at a foundation offering psychological and psychiatric assistance to Ukrainian refugees.

Findings: Five key themes emerged: (1) Traumatic experiences—interpreters are frequently exposed to distressing narratives, increasing their risk of secondary trauma. (2) Support systems—while monthly supervision is available, it does not fully address interpreters' specific needs. (3) Role ambiguity—therapeutic interpreting lacks clear role definitions compared to legal settings, leading to uncertainty. (4) Helping as motivation—the drive to assist others serves as both a motivational and protective factor. (5) Professional identity—interpreters struggle to balance ethical principles with the emotional demands of therapy.

Discussion: The findings highlight the need for tailored supervision groups to help interpreters process emotional challenges and strengthen their professional resilience. Additionally, they provide important, concrete recommendations for supervision groups based on interpreters' experiences.

An interpretative phenomenological analysis of the experiences of interpreters in the counselling room when working with survivors of sex trafficking.

Karen Foran

University of Salford, Ireland

The role of interpreters within the counselling room is an integral part of accessing therapy for clients and therapists that do not share a common language. The use of interpreters allows survivors of sex trafficking to access therapeutic services.

The purpose of this study is to look at the experiences of interpreters in a counselling setting working with survivors of sex trafficking. Therapists that work with trauma have training and supervision that enables them to work with complex trauma. There is no requirement for interpreters to have training or supervision when working in a counselling setting.

This qualitative study, using an interpretative phenomenological analysis, interviewed eight interpreters working in the UK and Ireland. For the purpose of this review, three of the eight participant's data from the interviews were analysed.

Findings revealed four overarching group experiential themes and six subthemes. The emerging themes were as follows: *'My world, their world, The emotional impact of the horror, My skills are needed, and, We are not machines'*.

Once analysis of all eighth participants is completed, it is hoped that findings from this study will provide interpreter and trauma psychotherapy services with guidelines and support when working with complex trauma in counselling settings.

ORAL SESSION_11: Creative methods in mental health of the elderly/chronically ill persons

Faith in pictures, faith in words – Studying elderly people's spirituality

Nora Valentina Tegzes¹, Péter Bodor^{1,2}

¹ELTE, Hungary; ²University of Miskolc, Hungary

Religiosity and faith are among the perennial issues of humankind. How do those worshippers, who frequently visit the church practice their faith outside of it? Faith is an integral part of everyday life for many, still it is challenging to capture the nature, meaning and individual variations of lived religiosity and faith practice.

The study aims to uncover deeper layers of religiosity through a qualitative investigation conducted among Catholic believers over the age of 70. To achieve this, in addition to verbal accounts we employed tools suitable for visual representation. Thus, the research focuses on identifying which objects and events participants encounter in their daily lives and the way our participants imbued them with additional religious significance.

The method used was the Photovoice method combined with Thematic Analysis. Participants were asked to take photographs regularly of objects, people, and situations that represent their everyday lived religion and faith over three weeks. They used their own smartphones or cameras provided for the study. After collecting photographs, semi-structured interviews were conducted to map the representations of religion and faith. Through the photographs and interviews, we gain insights into participants' experiences related to the transcendent, their faith, and their religious practices.

Collaging uncertainty: Arts-based research and mental health in post-Brexit Britain

Lorena Georgiadou^{1,2}, Zoi Simopoulou²

¹The American College of Thessaloniki, Greece; ²The University of Edinburgh

Britain's socio-political and health crises have confronted people with a prolonged and multifaceted uncertainty, which is known to be a trigger for negative mental health outcomes such as stress, anxiety and depression (Massazza et al, 2022). In this presentation, we consider the impact of Britain's exit from its former union, followed by the pandemic's disruption to existing forms of community and sense of safety, on people's mental health. Specifically, we explore ways in which arts-based research tools may promote mental health through community-building, creativity and self-reflection.

We draw from an arts-based research project investigating mental health in Brexiting Britain by means of online collage-making workshops in the aftermath of Brexit and the beginning of the pandemic. Drawing on the idea of the 'borderlands' epistemology, we explore the way in which collage-making and reflective writing enabled a space of live inquiry into questions around the 'undecidability' of belonging and identity. Attending to 'juxtaposition' and 'overlapping' (Vaughan, 2005) as embodied in the making of collage, we explore arts-based research as a material attempt at making meaning of a

more fragmented sense of experience, and ultimately, contributing to more positive mental health outcomes.

Examining the experiences of oncology patients participating in the Healing Imagination group in Hungary

Enikő Földesi¹, Dorottya Óri¹, Rupali Chowdhury¹, Virág Bognár², Adrienne Kegye¹

¹Semmelweis University, Hungary; ²South Pest Central Hospital - National Institute of Hematology and Infectious Diseases, Hungary

Introduction: Relaxation and imaginative techniques are vital components of the diverse psycho-oncology toolkit, aiding cancer patients in achieving psychological well-being. At Semmelweis University's Institute of Behavioral Sciences Healing Imagination Group, oncology patients are trained in progressive relaxation and guided imagery.

Aim: This study aims to explore the experiences of patients evaluate their goal attainment, and identify factors that could contribute to further development of the group program.

Methods: A mixed-methods approach will be used. Quantitative data is collected through questionnaires administered at the beginning and end of the 12-session group program (e.g. to assess symptoms of anxiety, depression, and sleep disturbances).

The qualitative component involves semi-structured interviews, which will be analyzed using Interpretative Phenomenological Analysis (IPA) to examine the impacts of the group, as well as the participants' experiences and coping mechanisms.

Results: The study is ongoing from 2024 to 2025. To date, interviews with 10 participants (mean age: 49,3 years, males: 10%) have been completed. Preliminary results based on IPA will be presented.

Conclusions: Evaluating the Healing Imagination group is crucial for its development and integration into regular Hungarian psycho-oncology practices. This research aims to optimize the group's structure and contribute to the broader psycho-oncology toolkit.

Content creators above sixty: A qualitative analysis on the ageing discourse by older adults on TikTok

Edit Andrea Pauló, Regina Gradwohl

Eotvos Lorand University, Hungary

Popular memes often paint a similar picture about older adults using digital devices: technophobes who cannot keep up with the changing world of digitalisation. However, the number of older internet users grows rapidly, even on platforms associated with the younger generations, such as TikTok. Older adults contribute to internet discourses on various topics; therefore, it is important to broaden our understanding of their online activities.

This presentation aims to exhibit, using qualitative approaches, how Hungarian older adults above sixty use TikTok to reflect on their age and ageing through content creation. Utilising the Visual and Verbal Video Analysis and Discourse Analysis method, four topics emerged: reflection on age, negative experiences (including mental health issues), depiction of stereotypes, and humour. In contrast to the international results, these videos depict social disadvantages more often and interpret stereotypes in particular ways. The videos speak from different social positions, legitimating the sociological statement that there is no uniform image of older adults. Furthermore, our presentation shows an example of a qualitative analysis of social media short videos.

ORAL SESSION_12: Interpersonal Conflicts in Healthcare and Families

Experiencing liminal hotspots in permanent liminality

Marta B. Erdos

University Of Pécs, Faculty of Humanities and Social Sciences, Hungary

The analysis focuses on how sociocultural contexts of permanent liminality (Szokolczai, 2001; 2017) with their sustained chaos and absurdities impair meaning making and expose culture members to

frequent experiences of liminal hotspots. The latter term has been introduced by Stenner (2017), and is defined as an impasse in transitions, resulting in enhanced affectivity and suggestibility. Using epistemic discourse analysis as a method, the author studies the discursive patterns of Hungary's soft dictatorship on a prototypical sample of contemporary political speeches, films, and jokes. Results indicate that the absurdities inherent in double bind discourse, as well as floating and empty signifiers are powerful discursive means to halt constructive transformations. On a societal level, this is the shared experience of living in a troubled world – with an enhanced probability of exploitation through manipulation. On the personal level, such contexts and cultural practices lead to the disintegration of the dialogical self and the development of a vulnerable, defensive, or fake identities. The implications of these domestic findings can be generalized to today's rapidly expanding global-level contexts of permanent liminality with their tormenting liminal hotspots.

Reducing coercive measures in France: a systemic and decision-oriented model

Xavier Boucher^{2,3,4}, Sébastien Saetta^{5,6,7}, Cemre Gunes Sengul-Vautier^{1,12}, Johanna Clerc², Magali Coldefy⁸, Loïc Rohr⁹, Yvonne Quenum⁶, Eric Fakra^{1,10,11}

¹Claude Bernard Lyon 1 University; ²Mines Saint-Etienne, Engineering and Health Centre; ³Clermont Auvergne University; ⁴CNRS; ⁵Center Max Weber; ⁶University Hospital of Saint-Etienne; ⁷ENSEIS Research; ⁸Institute for Research and Information in Health Economics (IRDES); ⁹General Hospital of Saunt-Cyr-au-Mont-d'Or; ¹⁰INSERM; ¹¹Jean Monnet University; ¹²Lyon Neuroscience Research Centre

Background: Seclusion and restraint continue to be used despite evidence of their harmful effects in healthcare settings. This study aims to develop a systemic, decision-oriented model to understand and mitigate these practices within the French healthcare system.

Methods: The study uses a modeling-based approach to explore systemic factors affecting coercive practices in psychiatric care. It involves two phases: (1) creating a Coercion Descriptive Model (CD-Model) from literature reviews and qualitative surveys to outline influencing factors; (2) developing a Coercion Quantitative Model (CQ-Model) by quantifying the CD-Model, assigning weights through expert evaluations, and assessing hospitals' ability to reduce coercion.

Results: The CD-Model outlines four hierarchical dimensions and 24 factors that affect coercion-related decisions, offering a detailed framework for analysis. The CQ-Model enhances this by introducing 11 supervision indicators through mathematical aggregation, providing precise tools for organizational evaluation.

Conclusion: By synthesizing qualitative insights and quantitative assessments, these models equip healthcare managers to critically examine and reform practices related to coercion. This research marks a significant step towards systemic change in mental health practices, emphasizing the role of qualitative methods in developing operational frameworks to decrease coercive measures in mental healthcare, encouraging further mixed-methods research for deeper understanding and application.

An ecological-systemic perspective on contact severance in high-conflict divorced families: A qualitative study

Guy Enosh, Dikla Tamar Sherel

University of Haifa, Israel

This study examines contact severance phenomena between parents and children in high-conflict divorced families through an ecological-systemic lens. Using a qualitative-ethnographic methodology, we conducted semi-structured interviews with 60 participants, including professionals and family members. The analysis was based on the Dialectical-Constructivist approach. The research aims to develop an innovative theoretical model mapping the various systems influencing contact severance phenomena, including welfare, legal, psychological, health, and educational systems. Initial findings identified three central axes: (1) systemic splits and mutual sabotage versus cooperation needs, (2) visibility issues and professional-parental self-positioning, and (3) systemic chaos versus planning and professional responsibility. Results indicate that understanding and treating contact severance requires considering the complex interactions between family dynamics and institutional systems. The findings emphasize the need for enhanced collaboration among and between systems, and for

development of specialized expertise development in therapeutic, health, legal and education domains to address this challenging phenomenon effectively.

Stakeholder perspectives on self-harm and interpersonal violence (IPV) registers in secondary care: Challenges and opportunities

Anne Kraye¹, Rob Poole¹, Catherine Robinson², Gemma Hobson³, Emily Bebbington¹

¹Bangor University, United Kingdom; ²University of Manchester; ³Public Health Wales

Self-harm is a major cause of morbidity and the strongest predictor of suicide worldwide, disproportionately affecting deprived communities and people with mental illness. Factors linked to self-harm are common in violence. Registers can provide long-term data that can inform prevention strategies, track emerging trends, and monitor the effectiveness of interventions. The aim of the study reported here was to understand stakeholders' perspectives on setting-up and running a self-harm and IPV register. So far, we have completed 26 online semi-structured interviews with a range of stakeholders. Preliminary analysis of data using reflexive thematic analysis indicate that that stakeholder groups differ in their interpretations of key concepts such as self-harm, IPV and mental health and how they relate to each other, as well as the type of information to be collected. Stakeholders agree on the challenges of collecting, sharing, and using meaningful information – including at individual (e.g. asking questions about IPV), organisational (e.g. decisions about data sharing) and policy level (e.g., funding arrangements). Preliminary findings highlight the need to raise awareness of drivers of and links between self-harm and IPV, and the need of engagement work with key stakeholders to develop a shared understanding and vision of a registry.

ORAL SESSION_13: Digital Tools

Vibrant Screens: Remote therapy and counselling through the lens of digital materiality

Marjo Kristiina Kolehmainen

University of Turku, Finland

This presentation draws upon an article that analyses the digital screen as a health technology. In particular, the study in question asks how screens as a part of therapy settings or counselling practices materialise – or fail to materialise – care. The empirical data comprise interviews with Finnish therapy and counselling professionals, whose experiences with technology during the COVID-19 pandemic were my original interest. Adopting a sociomaterial approach to technology use, it scrutinises not only how screens are used, but also how screens themselves act and operate. This approach foregrounds the screen as 'multiple', complicating a dichotomous understanding between in-person therapy and remote therapy. The paper argues that the screen operates in a variety of ways that might either facilitate or degrade care and is an essential part of more-than-human care in digitalised societies. Acknowledging the agential capacities of all matter, it also conceptualises screens as 'vibrant matter'.

SAFE-app: A voice from individuals with self-harm experience – A Co-operative Inquiry

Lene Lauge Berring

Region Zealand Psychiatry/ University Of Southern Denmark,

Background: Individuals with self-harm experience often face challenges when interacting with healthcare professionals. A lack of understanding and inadequate support can worsen their distress and, in the worst cases, lead to coercive measures. The SAFE-app has been developed as a platform where individuals with self-harm experience can educate others about their perspectives and needs, promoting a more understanding and supportive healthcare approach.

Method: SAFE-app is the result of a co-produced action research project, where individuals with self-harm experience actively contributed to its development. The project employed qualitative interviews,

workshops, and iterative design to ensure that the app's content and functions reflect users' experiences and needs.

Results: SAFE-app highlights the importance of respect, understanding, and a genuine willingness to help in healthcare interactions. It provides a platform to foster dialogue on improving responses to self-harm. Preliminary findings suggest that the app raises awareness, shifts attitudes from "fixing" to "being," and promotes a more empathetic approach among caregivers.

Conclusion: SAFE-app integrates experiential and scientific knowledge into healthcare practice, fostering more supportive and meaningful interactions. This project underscores the importance of including user voices in healthcare development to enhance understanding and improve responses to self-harm.

Ensuring cultural fit: adapting and testing an Australian online self-screening tool for perinatal anxiety and depression in Tyrol, Austria

Laetitia Watzke¹, Jean Paul², Rebecca Schafer³, Julie Borninkhof³, Campbell Paul⁴

¹Medical University Innsbruck, Department of Psychiatry, Psychotherapy, Psychosomatics, and Medical Psychology, Division of Psychiatry I / University of Innsbruck, Institute of Psychology, Innsbruck, Austria; ²Medical University of Innsbruck, Department of Psychiatry, Psychotherapy, Psychosomatics, and Medical Psychology, Division of Psychiatry I; ³Perinatal Anxiety and Depression Australia (PANDA), Melbourne, Australia; ⁴The Royal Children's Hospital Melbourne/The University of Melbourne/Murdoch Children's Research Institute/Parkville, Victoria, Australia

Perinatal mental health conditions often go unrecognized, especially in rural regions like Tyrol, Austria, where stigma surrounding mental illness impacts help-seeking behavior. Perinatal Anxiety & Depression Australia (PANDA) developed an online Mental Health Checklist for Expecting and New Parents, which was designed as a non-diagnostic self-screening tool to support early recognition of mental health challenges. Their tool was co-designed with their community of parents to ensure it was accessible, safe, and useful for families. This talk presents our study plan which aims to explore the feasibility and acceptance of implementing an adapted version of the PANDA self-screening tool in Tyrol, with a particular focus on its potential to empower individuals in a high-stigma environment to seek help in the early stages of their illness. We will use qualitative methods, including focus groups with parents with lived experience of perinatal mental illness and experts in the perinatal field, to assess perceived usability, barriers, and facilitators of the tool. Insights gained from this study will inform adaptations to better align with the needs of the target population. By evaluating the role of self-screening in perinatal mental health, this research seeks to contribute to a more accessible and stigma-sensitive approach to early intervention.

Virtual counseling was a lifeline" - Lived experiences of adolescent cyberbullying victims during the COVID-19 pandemic: An IPA study

Sabrina Mahmood, Zsuzsa Kalo

Eotvos Lorand University, Hungary

The novel study sought to explore the lived experiences of adolescent victims of cyberbullying receiving counselling interventions during this period through an interpretative phenomenological analysis (IPA) lens. We conducted semi-structured interviews with a purposive sample of ten high school students (seven females and three males) who had attended at least five counselling sessions during the pandemic as victims of cyberbullying. The interviews were audio-recorded, transcribed verbatim, and analyzed using IPA guidelines. We explored five personal experiential themes, and eighteen subthemes were identified from the analysis: 1) *Intensified emotional turmoil from cyberbullying* pointed out the deep emotional and psychological distress cyberbullying took on adolescents, particularly during the pandemic. 2) *Navigating internal and external hurdles in seeking support* outlined the barriers, such as privacy concerns and technical issues. 3) *Counselling as a Crucial Support System* emphasized how counselling assists in dealing with the impact of cyberbullying. 4) *An Evolving Sense of Self-Perception* explored the positive changes in self-identity and emotional resilience that emerged through counselling. 5) *Sense of Sustained Development and Personal Growth* illustrated their self-commitment

to continue follow-up sessions. This study emphasized that virtual counselling emerged as a vital resource for personal growth and development during the pandemic.

ORAL SESSION_14: Medical Issues

Crisis or turning point? Posttraumatic growth in oncology

Laura Posta

Pazmany Peter Catholic University, Hungary

Background, objectives: Our exploratory research examines posttraumatic growth (PTG) in the clinical population of oncology. The question is what PTG dimensions appear, what factors help patients move towards a PTG-path, and what resources are attributed to the positive changes.

Methodology: The research involved 70 cancer-patients. Data-collection's been going on for a year at clinics and on the internet. We use qualitative and quantitative tools.

Results and conclusions: The results show 85% of the patients experienced PTG. The strongest increase was on the 'self-efficacy' subscale. We could detect no significant differences between the groups in terms of gender, social support, presence/absence of symptoms, time since diagnosis. We mainly see the explanation in the fact that confronting the fragility of life may be enough to experience PTG. We explored a new factor of PTG: becoming a better person. The aspects mentioned are increased joy, helpfulness, trust, a deeper ability to express and experience love, awareness, etc. The positive change was attributed to being able to maintain activity, have someone to share feelings with, collect adequate information, and to use the experience of successfully processed traumas as a resource. The implications of the research may contribute to the psychological care of cancer patients.

How can 'health' become an issue in the gp consultation?

Ottomar Bahrs^{1,2}, Tanja Altmann³, Natalie Seuken⁴

¹University of Düsseldorf, Germany; ²Umbrella Organization Salutogenesis, Germany; ³Ruhr University of Bochum, Germany; ⁴natalie.seuken@uni-wh.de

The 'positive health' concept has gained recognition in the Netherlands* primary care and is spreading to other health-/social care areas. The spider web provides a method for self-assessment of subjective health, encouraging patients to reflect on themselves and serving as a basis for a dialogue beyond routine care. Many patients appreciate it, and many professionals feel relieved and supported when performing their primary tasks as helpers. The 'positive health' tools seem suitable for strengthening a paradigm shift, drawing on existing resources and sustainable effectiveness: a promising approach for applying the salutogenesis model.

However, there is a lack of information about the concrete interactions in the '#alternative dialogue'. Therefore, we initiated a pilot project for the real-life analysis of positive health discussions based on assuming, that the corresponding research results can promote the implementation of 'positive health' and support the further development of target group-specific training. We started in the context of an existing working group on the initial medical history in general practice. The presentation will outline the process structure for the initial medical history, show why this could be followed by a positive health conversation, and illustrate this with a case study based on the analysis of videotaped conversations.

Navigating proximity and distance: a grounded theory study of relationship dynamics in couples living with inflammatory bowel disease

Zsolt Szatmári^{1,2}, Dorottya Bíró^{1,2}, Tamás Martos^{1,3}, Viola Sallay^{1,3}

¹Institute of Psychology, University of Szeged, Szeged, Hungary; ²Doctoral School of Clinical Medicine, University of Szeged, Szeged, Hungary; ³Sigmund Freud Private University, Vienna, Austria

Background: Inflammatory Bowel Disease (IBD) significantly impacts patients' quality of life including their intimate relationships, yet little is known about how couples navigate their shared lived space and relationship dynamics in the context of this illness.

Objectives: This ongoing research aims to explore the relational processes that help or hinder IBD patients and their partners' well-being in their shared lived space.

Methods: The study employs qualitative methodology using experience mapping through semi-structured interviews with 14 couples. Data analysis follows Grounded Theory to explore couples' lived experiences with IBD.

Preliminary Results: Analysis reveals an emerging narrative of relationship adaptation through the regulation of proximity-distance influenced by IBD symptoms. This story unfolds across four dimensions: temporal (*shared history with illness*), spatial (*illness defining relationship boundaries*), emotional (*illness as a shared roller coaster*), and regulatory (*finding balance*). Our findings suggest that couples respond to and actively shape their relationship dynamics across these dimensions, continuously forming their patterns of closeness and distance as they transform their experience with chronic illness.

Implications: These findings will contribute to the development of psychological interventions considering both relationship dynamics and socio-physical environment in supporting couples affected by chronic illness, ultimately enhancing their capacity for mutual adaptation and support.

Diabetes through experienced eyes: illness narratives of people living with type 1 and type 2 diabetes

Fanni Öry¹, Szidális Ágnes Teleki²

¹University of Pécs, Faculty of Humanities and Social Sciences, Institute of Psychology, Department of Cognitive and Evolutionary Psychology; ²University of Pécs, Faculty of Humanities and Social Sciences, Institute of Psychology, Department of Personality and Health Psychology

Diabetes mellitus (DM), a major chronic disease, disrupts glucose processing due to insulin deficiency (type 1) or insulin resistance (type 2). Effective management requires active patient engagement regardless of type. The illness narratives, stories told by patients about their experiences related to the disease, can help to protect or modify identity. This study examines illness narratives in DM1 and DM2 patients using the McGill Illness Narrative Interview (MINI). Semi-structured interviews were conducted with five participants per group (DM1: $M_{age}=24.6$, $SD_{age}=2.8$; DM2: $M_{age}=64.8$, $SD_{age}=3.3$). Thematic content analysis was performed by three analysts. Differences were identified in the manifestation of DM and the process of acceptance among DM1 and DM2 patients. However, similar trends were observed in the daily management of DM. Patients' active coping is influenced by their social networks. Interactions with individuals living with the disease and trusted professional guidelines have been identified as key factors in ensuring appropriate self-management. Furthermore, the increased knowledge about diabetes among the general population enhances patients' feelings of safety, support and understanding. A key finding was that all patients think that DM is a condition that can be lived with, and it allows a good quality of life with sufficient motivation and active self-management.

ORAL SESSION_15: Interviewing Techniques, Methodological Challenges

Can a qualitative review be truly rigorous?

Zsuzsa Kalo

ELTE Eötvös Loránd University, Hungary

Qualitative reviews play a crucial role in synthesizing research, offering nuanced insights, and advancing theoretical understanding. However, concerns about their rigor often arise due to subjective interpretations, varied methodologies, and potential biases in synthesis. By examining best practices in qualitative literature synthesis, including transparent methodology, systematic data extraction, and critical appraisal, we argue that rigor is achievable when reviews are conducted with methodological reflexivity and coherence. We discuss strategies such as thematic synthesis, meta-ethnography, and framework analysis to enhance the credibility, dependability, and confirmability of qualitative reviews. Additionally, the role of researcher positionality and reflexivity in maintaining analytical depth is considered. This discussion aims to provide scholars with a clearer understanding of how to balance

flexibility with systematic rigor, ensuring that qualitative reviews contribute meaningfully to academic discourse while maintaining methodological integrity.

With devices on public places - a go-along interview study of using wheelchair, pushchair and crutch on the streets of Budapest

Peter Bodor^{1,2}, Bence Zsidó², Nikolett Baranya², Márton Csejtei²

¹University of Miskolc, Faculty of Arts, Teacher Training Institute, Department of Psychology, Miskolc, Hungary; ²Eötvös University, Faculty of Social Sciences, Department of Sociology, Budapest, Hungary

The research explores the experiences of pedestrians who are reliant on some form of device during their strolls or commutes. What challenges do people with reduced or modified mobility using devices like wheelchairs, pushchairs or crutches face with? What aspects of the space, of their own movement, of other passers-by are in focus for them? What are the differences and similarities of experiences in relying on various devices?

To observe the interviewees' movements and to consider the accompanying verbal accounts, go-along interview was chosen as data collecting method. On-site observations and the experiences of our informants and the interviewers were recorded in field notes.

After analyzing and coding the field notes inductively, the main topics that emerged were infrastructure deficiencies, positive and negative examples of assistance, and spatial and temporal constellations that require outstanding awareness. Walking is both a locomotion and an interactional achievement in our understanding, so we interpreted our data deductively through Goffman's concept of interactional order, considering both the physical requirements and the ritual constraints of locomotion with devices.

The study documents both differences and similarities of the problems our interviewees faced regarding their spatial mobility and their well-being, interpreted within the conceptual framework of interaction order.

Exploring psychological wellbeing in cohousing communities: a novel focused-ethnography

Jake Maxwell Watts

University of Manchester, United Kingdom

It is widely understood that supportive social relationships play a significant role in mental health. Despite this, more people in developed nations now live alone or with impoverished social environments than ever before, and psychological research continues to rely on traditional research methods that emphasise individualist, didactic therapeutic modalities. In a counselling psychology doctoral thesis that uses a novel focused-ethnography design, we aim to better understand community groups that have deliberately built housing environments that bring people together, referred to as "cohousing." Using observations, interviews and field notes from living in a cohousing community we ask: how do co-housing communities and their members experience and address mental health disorder and distress? Key findings address 1) the methods by which communities protect their members from common mental health difficulties, 2) the importance of homogeneity and intentionality in community design, 3) the impact of deconstructing "defensible" private spaces, and 4) conflict and resolution. The presenter of this talk hopes to engage conference delegates in a discussion about how novel qualitative research methods in counselling and psychotherapy such as ethnography can understand the social causes of psychological distress.

Use of prospective longings for analyzing change in Longitudinal Interpretative Phenomenological Analysis (LIPA)

Ingunn Holbæk^{1,2}, KariAnne Vrabøl^{1,2}, Margrethe S. Halvorsen²

¹Modum Bad, Norway; ²University of Oslo

Most qualitative studies focus on either cross-sectional or narrative data. However, there is a growing trend towards longitudinal designs also using a qualitative approach. This presentation will review the methodological choices related to such a study where we examine the experience of change over a

period of approximately four years for people with a complex dissociative disorder (CDD). We follow six individuals at three interview points: before, 6 months, and 2 years after a psychoeducative skills training group.

We chose LIPA because it is suitable for exploring a range of temporal experiences, such as health interventions. In LIPA, it is crucial to have an analytical perspective that shifts between focusing on the case, theme, and time. We became concerned with how their longings for the future in the first interview interacted with the changes that actually occurred. Their aspirations for life guided our analysis and presentation of the results. Restoring the sense of 'next' (Bohart, 1993) seems to hold significant influence on the participants. The approach ensured a unique focus on each participant's changes while also identifying shared prospective categories across the 6 participants. Theoretical, conceptual, methodological and ethical questions are discussed.

ORAL SESSION_16: Child Protection

Narratives of Healing: Ethical and Therapeutic Considerations in Research with Survivors of Child Maltreatment

Katerina Kyriakou¹, Maria Roth², Éva László², Shiran Reichenberg³, Pia Rockhold⁴, Andrea Racz⁵, Dorottya Sík⁵, Wafaa Sowan⁶, Zeynep Sofuoglu⁷, Elif Bulut⁸, Bahar Aksoy⁹, Imola Antal², Zoran Ilieski¹⁰

¹Institute of Child Health, Greece; ²Babes-Bolyai University (UBB), Romania; ³Hebrew University, Israel; ⁴Department of Regional Health Research, Denmark; ⁵Eötvös Loránd University (ELTE), Hungary; ⁶Haifa University, Israel; ⁷Izmir Democracy University, Turkey; ⁸Tokat Gaziosmanpaşa University, Turkey; ⁹Akdeniz University, Turkey; ¹⁰Coalition SEGA, Republic of North Macedonia

This paper explores the complexities of involving adult survivors of child maltreatment in research, with a focus on the value of lived experience, the empowering potential of participation, and the need for sensitivity when addressing emotionally charged topics. As part of COST Action CA19106, we surveyed self-selected survivors and volunteer students from Hungary, Israel, Macedonia, Romania, and Turkey on their interpretations and research expectations.

In line with the conference's themes of storytelling and qualitative inquiry, it examines how survivors share their personal narratives, shedding light on their trauma and healing. These narratives offer invaluable insights that inform mental health care and contribute to a deeper understanding of survivors' experiences, which might otherwise be overlooked.

The therapeutic value of storytelling in research provides participants with an opportunity for healing while offering critical insights into mental health challenges. This process fosters new pathways to healing for both individuals and the community, contributing to improvements in support systems. The paper also addresses ethical challenges, emphasizing the importance of anonymity, confidentiality, ongoing informed consent, and the right to withdraw without consequences.

Ultimately, it underscores the importance of respecting survivors' privacy and emotional boundaries while ensuring their meaningful contribution to research and efforts for social change.

The online child pornography offenders in France. Presentation of a qualitative research program

Barbara Smaniotto, Crystal Tomaszewski, Cedric Le Bodic

Lyon 2 Université, France

This contribution presents the qualitative part of a multidisciplinary study (psychology, sociology, law), the first of its kind in France, on online child pornography offenders. Our aim is to better understand the personal experiences, the personality and psychic functioning of those involved in online pedopornography.

The research protocol requires 30 voluntary adults convicted of offences related to online child pornography (viewing, downloading, filming). Participants were interviewed in care centers at the beginning of their treatment. The protocol includes two clinical interviews (the first focusing on the "life story" model; the second on their practices) and the projective tests (Rorschach and Thematic Apperception Test, interpreted according to the French School method). The results are analyzed from a psychodynamic approach.

Using this qualitative methodology, the project aims to explore how these people represent and explain their relationship with online child pornography; to understand the meaning and subjective (and intersubjective) underlying logic of these practices - beyond “profiles” or general classifications.

Short clinical cases illustrate our initial hypotheses.

Identifying psychic fragilities and resources will enable us to investigate the potential for changing, and to consider therapeutic strategies that refers to individuals themselves, rather than to their types of behavior or preferred victims.

Preferred modes of self-identification of participants with child maltreatment experiences

Maria Roth¹, Katerina Kyriakou², Éva László¹, Shiran Reichenberg³, Pia Rockhold⁴, Andrea Racz⁵, Dorottya Sík⁵, Wafaa Sowan⁶, Zeynep Sofuoglu⁷, Elif Bulut⁸, Bahar Aksoy⁹, Imola Antal¹, Zoran Ilieski¹⁰

¹Babes-Bolyai University (UBB), Romania; ²Institute of Child Health, Greece; ³Hebrew University, Israel; ⁴Department of Regional Health Research, Denmark; ⁵Eötvös Loránd University (ELTE), Hungary; ⁶Haifa University, Israel; ⁷Izmir Democracy University, Turkey; ⁸Tokat Gaziosmanpaşa University, Turkey; ⁹Akdeniz University, Turkey; ¹⁰Coalition SEGA, Republic of Makedonia

Research with adult survivors of child maltreatment (CM) is considered sensitive and uneasy for researchers but is essential for the understanding of survivors’ needs and their healing process. In the COST19106 consortium, we interviewed CM survivors from Turkey, Israel, Romania, and Hungary to follow how they interpret their experiences and identify themselves within the duality victim-survivor.

Based on the theoretical grounding of Georg Simmel’s social types, Mazur (2024) discusses victimhood between dichotomies like weakness/strength, sameness/difference, institutionalization/individualization experiences, and apology/versus unforgivable. Analysing the interviews and focus groups, we captured the survivors’ identification between victimhood and survivorhood, and how this is linked with research participants’ needs and healing process. Several accounts mentioned the non-conflictual and dynamic aspects of the seemingly dichotomous concepts of victim and survivor, which might become dominant by turns, depending on the developmental life stage and the treatment process they went through. The presentation will discuss the themes connected to self-identification as a victim or survivor, like feeling included or excluded, taking responsibility for their healing, and preventing CM in society, as well as the potential of participatory research, that can empower survivors of CM to engage in forms of social activism.

KEYNOTE LECTURE

Narcissim in social interaction

Anssi Peräkylä

University of Helsinki, Finland

Narcissism—whether considered a psychiatric illness or a personality trait—involves self-related cognitions and emotions, as well as interactions between persons. Therefore, to understand narcissism, a conceptualization of both intra- and interpersonal processes, and their systemic relations is needed. In the presentation, I will offer such conceptualization, extending the psychological model of narcissism of Morf and Rhodewalt by Erving Goffman’s micro-sociology. In the light of this model, I will discuss a string of empirical studies, employing conversation analytical and experimental methods which elucidate the ways in which self-related cognitions and affects are played out and reproduced in interpersonal interactions.

Friday 23rd May

ORAL SESSION_17: Healthcare Services: Conflicts and Ressources, Eating Disorders

More pressure, more release? Description of a Consensus and Practice-based Treatment Policy in Compulsory Care for Young People with Anorexia Nervosa

Lisanne Lilian Stone

Tilburg University, Netherlands, The

Compulsory care for adolescents with anorexia nervosa (AN) is characterized by relational themes with the tension between the need to trust in order to recover and the power dynamics of coercive practices operating at the heart of treatment, especially in crisis care. Surprisingly, empirical evidence for this type of care is a) mostly lacking and b) flawed by primarily focusing on quantitative methods. Compulsory care is controversial given its negative impact on adolescents and their families. Finally, ethical dilemmas are commonplace in compulsory care while the time and space to discuss these dilemmas in detail is usually lacking in crisis care. Therefore, this paper focuses on presenting three case reports wherein an alternative treatment policy was applied in crisis care following ethical dilemmas in treatment. Conceptual implications for the treatment rationale for anorexia nervosa will be discussed based on qualitative analyses of the recovery process of the three cases. Furthermore, future qualitative studies will be discussed in order to further develop the field of compulsory care for AN.

Understanding the experiences of individuals with eating disorders and obsessive-compulsive disorder: An Interpretative Phenomenological Analysis (IPA)

Sukriye Acar, Emily Newman, Gemma Brown

School of Health in Social Science, The University of Edinburgh, United Kingdom

Comorbidity between eating disorders (EDs) and obsessive-compulsive disorder (OCD) has long been investigated. Recent meta-analyses reported lifetime prevalences of OCD in EDs ranging from 13.9% to 18%, with up to 40% in follow-up studies (Drakes et al., 2021; Mandelli et al., 2020). Despite the extensive quantitative research focusing on the nature of this comorbidity and potential contributing mechanisms, there is a lack of qualitative studies. Given the heterogeneity of symptoms in both disorders and the adverse outcomes associated with the co-occurrence of OCD and EDs (Sallet et al 2010), a qualitative exploration of lived experiences could provide deeper insights into this association and how individuals experience this relationship. Therefore, this study aims to understand how individuals who have both OCD and EDs make sense of and experience the comorbidity. Employing interpretative phenomenological analysis (IPA), semi-structured interviews were conducted with six individuals diagnosed with both OCD and an ED across the UK. Interview questions focused on receiving diagnoses, their interactions and impacts, and the contributing factors to the comorbidity. Transcriptions of the interviews have been completed, and the analysis is currently in progress. The final findings derived from the IPA analysis will be presented at the conference.

The role of self-justification in conflict narratives of healthcare professionals in the United States and Hungary. A qualitative approach for cross-cultural comparison

Dóra Kocsis¹, Zsófia Buczkó², Sara Kim³, Ágnes Kuna⁴, Márta Csabai¹

¹Károli Gáspár University of the Reformed Church, Hungary; ²Újpesti Egészségfejlesztési Iroda, Budapest, Hungary; ³University of Washington, Seattle, USA; ⁴Department of Applied Linguistics and Phonetics, Eötvös Loránd University of Sciences, Budapest, Hungary

Background and Aims: Conflicts among healthcare professionals directly affect patient care, highlighting the need to understand their characteristics. Self-justification, a common yet understudied conflict indicator, was the focus of this study. We aimed to develop a qualitative method to analyse its features using narratives from healthcare professionals across cultures.

Methods: We analysed previously recorded semi-structured interviews of 25 doctors and 25 nurses from Hungary (transcribed) and from the USA (field notes). The analysis identified expressions of self-justification and avoidance of self-justification.

Results: We identified 371 expressions indicating self-justification and 42 indicating avoidance in the Hungarian conflict stories and categorized them into 10 self-justification-related categories and one avoidance category. In the U.S. sample, 210 expressions of self-justification and 40 of avoidance were similarly coded. The most common category in both samples was Judgement, typically involving negative evaluations of others. Hungarian doctors accounted for 71.7% of self-justification expressions, compared to 28.3% by nurses, while the U.S. sample showed no significant difference. Unresolved conflict narratives in both samples featured more self-justification and fewer avoidance expressions.

Discussion: Self-justification in conflict narratives may impede constructive conflict resolution. Supporting healthcare professionals in recognizing and addressing self-justification tendencies is therefore vital for fostering effective conflict resolution.

Exploring the positive impacts of financial resources on recovery: A capability approach

Jarkko Olavi Salminen

Tampere University, Finland

While the negative effects of financial scarcity on health are well-known, the positive impacts of financial resources on recovery are less explored. Quantitative methods demonstrate that money alleviates many adverse effects of scarcity. However, I argue that the positive impact of money should be studied qualitatively, where money not only mitigates scarcity but also serves as a source of freedom. For this, I employ Amartya Sen's capability approach.

My research examines the rehabilitation allowance provided by Kela to support recovery. Through interviews with 78 participants, I analyze the allowance's role in promoting health and recovery.

The rehabilitation allowance alleviates constant worry about income, improves health, and facilitates better nutrition and sleep. It supports professional development by reducing the mental pressures related to academic progress. Additionally, the allowance helps build financial skills, breaking cycles of debt.

From the capability perspective, income transfers should not be based on the notion that scarcity motivates everyone towards goals like studying and saving money. Instead, for those experiencing mental distress, these should be individual choices enabled by rehabilitation allowances. When money provides opportunities and freedoms, studies can progress quickly, and individuals can start saving and even investing money.

ORAL SESSION_19: Parents, Children, Ecological approach

Patients' experiences with therapeutic climbing: A qualitative study of its impact

Carina S. Bichler¹, Anika Frühauf², Linda K. Rausch², Mirjam Limmer³, Rene Gorfer², Sina Löffler², Vera Wallner¹, Martin Kopp², Katharina Hüfner¹

¹Medical University Innsbruck, Austria; ²Department of Sport Science, University Innsbruck; ³Institute of Outdoor Sports and Environmental Science, German Sports University Cologne

Background

Therapeutic climbing is increasingly used to treat mental health disorders, yet its subjective benefits remain underexplored. This qualitative study investigates the lived experiences of individuals undergoing therapeutic climbing to uncover its therapeutic potential.

Methods

Outpatients diagnosed with anxiety disorders or comorbid anxiety and post-traumatic stress disorder (PTSD) participated in eight 90-minute therapeutic climbing sessions led by trained therapists. Semi-

structured interviews were conducted to capture their views and experiences, and the data were analyzed using thematic content analysis.

Results

Participants described a range of positive experiences, barriers, and transfer effects. Key positive themes included a sense of mastery, enhanced group cohesion, and improved cognitive focus—reflecting successes in overcoming anxiety, building trust, and maintaining present-moment awareness. Reported barriers comprised both psychological challenges (e.g., heightened anxiety) and physical limitations (e.g., exhaustion). Notably, participants experienced lasting improvements in calmness, persistence, and motivation, suggesting sustained benefits beyond the climbing sessions.

Discussion

These findings highlight the multifaceted impact of therapeutic climbing on anxiety and PTSD. In addition to corroborating previous quantitative evidence on symptom reduction and self-efficacy, the study reveals unique benefits such as reframing anxiety and fostering social trust. Integrating qualitative perspectives is crucial for a comprehensive understanding of climbing interventions' therapeutic potential.

From numbers to narratives: The transformative role of qualitative inquiry in school-based mental health research

Lorena Georgiadou

The American College of Thessaloniki, Greece

In a world where adolescent mental health is increasingly fragile, capturing students' lived experiences requires more than quantitative data alone. This paper presents a longitudinal study in a private school in Greece, where three years of survey data revealed concerning trends but lacked depth in explaining students' distress. To bridge this gap, we turned to storytelling—conducting semi-structured focus groups with middle school, high school, and IBDP students. Using Thematic Analysis, we uncovered key themes: Emotional Turmoil in Adolescence, The Fine Line Between Teasing and Bullying, and The Desire to Connect with Adults. However, beyond these themes, a crucial meta-insight emerged: the very process of engaging with students qualitatively reshaped our understanding of their struggles. Students expressed frustration with the impersonal nature of surveys, revealing how they sometimes answered dismissively to signal distress. Their narratives exposed the limitations of our quantitative approach, prompting a fundamental redesign of our data collection methods—one that now integrates qualitative inquiry to foster a more meaningful dialogue on student wellbeing. This study underscores the power of qualitative research in not only uncovering hidden dimensions of mental health but also in reshaping the ways we listen, interpret, and respond.

Participation Action Research at the Development of Social Farming

Ilona Liliána Birtalan^{1,2}, József Rác^{2,3}

¹Department of Psychiatry and Psychotherapy, Semmelweis University; ²Qualitative Psychology Research Group, Institute of Psychology, ELTE Eötvös Loránd University; ³Department of Addictology, Faculty of Health Sciences, Semmelweis University

Recognizing that agriculture and food systems offer a range of integrated services, this study explores how a certain local farmer can contribute its best to the social, educational, civic and nutritional impacts of its local food system activities in urban settings.

Participatory action research (PAR) is a scholar–activist research approach that emphasizes experiential knowledge to tackle problems stemming from unequal social systems and develop alternatives. The first author via the cooperation with the second author were working more than one year long in a certain local food community to generate new knowledge and drive social change.

After five years, we recognized how the certain farm changed its model within the local food system (farmer-to-consumer interaction) and altered its social relationship structure (peer-advising network), or reinforced some elements of its projects whereas finished others (collective action-reflection). As a result, we observed, analyzed, reflected on our actions and their impact to gain insights, refine understanding of the social change.

As a result of the research, we can see that researchers have various opportunities to support sustainable development in the local level via PAR, particularly through their involvement in local dialogues.

POSTER PRESENTATION

P_01 The experience of mastery through rebalancing in IBD patients' life space - an experience mapping qualitative study

Dorottya Bíró, Zsolt Szatmári, Tamás Martos, Viola Sallay

SZTE, Hungary

Background and objectives: Our qualitative, exploratory research investigates the subjective health experiences of people living with IBD, using environmental and relational self-regulation as theoretical context. We aimed to understand the processes embedded in the persons' sociophysical environment that facilitate or hinder coping with everyday stress.

Methods: In the research interviews with IBD patients (n=17,11 female, 6 male), we used the experience mapping method. Emotionally important experiences, such as security, insecurity, togetherness, were marked on the map of the individual's life space. The subsequent interview elicited stories about these places and experiences that shaped individuals' well-being.

Results: Through a Grounded Theory qualitative analysis of the interview transcripts, we explored patterns of IBD patients' place-related self-regulatory and relational experiences. As a result of the coding process, the core category that emerged is "mastery over the body through rebalancing" which occurs on three levels: extending mastery over the body; finding shared balance in relationships; extending mastery in the use of life-space. These three levels are deeply interconnected and not separable from each.

Conclusions: Exploring these self-regulatory processes and experiences can provide information for healthcare professionals and contribute to tailoring health-psychological interventions to the person and their social and physical environment.

P_02 Necrophilia and agalmatophilia : a qualitative study on the bond to inanimate objects

Margaux Andrea Lemaire, Barbara Smaniotto

Lyon 2 Université, France

Necrophilia and agalmatophilia (sexual attraction to figurative objects) question the individual in their inter-relational dimension; the choice of an inanimate anthropomorphic object shows the antinomy of a *sexuality* linked to a non-living object; a mortified and unreachable otherness. But what does this tell us about the individual themselves? The aim of this dissertation (PhD) is to understand these people, their life stories and the way in which the inanimate object is invested. In this way, the qualitative approach seems the closest to the study of such "relational" and subjective modalities. Our methodology therefore consists of three different clinical meetings: an initial semi-structured interview focusing on sexual interests and associated practices, followed by an unstructured interview in which the participant is asked to tell the story of their life, a final interview dedicated to projective testing (Rorschach & TAT). The fieldwork for this research is international, involving both French- and English-speaking volunteers. Our approach is overtly psychodynamic, in order to grasp the complexity of a clinic mobilizing the *bond* in its most archaic anchorage. The aim is to shed light on certain mechanisms that have received little coverage in the scientific literature, and to propose therapeutic recommendations.

P_03 Qualitative research collective mental health care / Kwalitatief Onderzoekscollectief GGZ

Juri Krivzov¹, Femke Truijens², Arjen Noordhof³, Annemarie Köhne⁴, Marjolijn Heerings², Lisa Wijsen³, Nienke van Sambeek^{2,5}

¹HAN University of Applied Sciences, Netherlands, The; ²Erasmus University Rotterdam; ³University of Amsterdam; ⁴GGZ Noord Holland; ⁵University Medical Centre Utrecht

The dominance of the quantitative research paradigm in the Dutch mental health system is increasingly leading to one-sided view of mental health issues, loss of contextual and cultural information and promoting “quick-fix” solutions to mental health problems.

Qualitative Research Collective (KOG GGZ) started recently as a movement across various research and clinical institutions in the Netherlands to broaden the way of thinking about mental health. Nowadays, the KOG is a collective of critical thinkers, engaged caregivers, enthusiastic academic researchers, experiential meaning makers and passionate science innovators.

The KOG does so through three pillars:

- **LEARNING:**
KOG offers freely accessible knowledge transfer through its website. We provide navigation of the literature and training and data sessions for students and professionals.
- **DEPARTMENTS:**
KOG organizes seminars with guest speakers who explain qualitative methodology from their own research. We share inspiring thought-provoking examples.
- **CONNECTIONS:** KOG provides a platform where members can connect in collectives, seek out co-authors and stay abreast of ongoing lines of research in the mental health field.

We elaborate on current projects and future aspirations of the KOG and provide information to everybody willing to connect in the Dutch-speaking countries and beyond.

Link in English: <https://koggz.nl/en/what/>

P_04 Nonverbal representations of pain and emotions in chronic pain patients – a pilot study

Lilla Nemes-Farle^{1,2}, János Tajti¹, Márta Csabai³, Délia Szok¹

¹University of Szeged, Albert Szent-Györgyi Health Centre, Department of Neurology, Szeged, Hungary; ²Doctoral School of Clinical Medicine, Szeged, Hungary; ³Károli Gáspár University of the Reformed Church in Hungary, Faculty of Humanities and Social Sciences, Institute of Psychology, Budapest, Hungary

Background: Alexithymia has been identified as a key determinant in the somatization symptoms and a negative impact on the quality of life of chronic pain patients.

Aim: Our study aimed to explore the role of nonverbal pain and emotional representations, and other psychological factors.

Methods: With 33 chronic headache and musculoskeletal pain patients, we used questionnaires (Toronto Alexithymia Scale, Spielberger State-Trait Anxiety Inventory, Beck Depression Inventory). By applying drawing tests (Pain Drawing Test, PRISM-D Test) in our exploratory research, we also aimed to explore the qualitative aspects of how patients perceive their pain and emotions, as well as the nonverbal characteristics of the visual representation of their emotional resources in coping with chronic pain.

Results: The size of the painful body area in the pain drawings correlated with depressive symptoms ($r = 0.45$; $p = 0.009$) and trait anxiety ($r = 0.37$; $p = 0.034$). In headache patients, the dimensions of joy ($p = 0.019$), sadness ($p = 0.035$), and fear ($p = 0.014$) were larger. In the PRISM-D test pain was represented with a larger circle [$F(1, 19.2) = 4.86$, $p = 0.04$], described with more words [$F(1, 26.8) = 4.31$, $p = 0.048$] and more colours [$F(1, 29.8) = 10.68$, $p = 0.003$]. We also explored the nonverbal, qualitative attributes patients associate with their chronic pain.

Conclusion: The differences in pain characteristics and emotional representations are not solely due to alexithymia but also to the heightened intensity of negative emotions, which can be examined using nonverbal qualitative techniques.

P_05 Through the shadow: self-reflection on the personal experience of the shadow in mental health care practitioners.

Giovanna Calabrese¹, Fabio Freddi²

¹Integral Transpersonal Institute, Italy; ²Integral Transpersonal Institute, Italy

Working on the shadow side of personality is part of the psychotherapy practice. However, how do practitioners in mental health perceive their own shadow? In this qualitative study we explored both theoretical and personal experience of shadow in a sample of 50 psychotherapists and counsellors graduated from a transpersonal school (recognized by the Ministry of Education) in Milano, Italy. Through a semi-structured interview, sent by e-mail, we explored what participants know about the archetype of shadow and asked them to report about their personal experience of it. Using an automated program (Tlab) we conducted a thematic analysis. The analysis showed that for the interviewees the shadow is identified with chaos, disharmony, in contrast to light, order and harmony. When they were invited to reflect on their own experience of this archetype, they recognized it as their own shadow and disharmony projected into the world. As far as painful the experience with the strength and the field of the shadow could be, it allowed to become aware of it and integrate its parts into an evolutionary process. Most importantly the self-reflection on their personal experience with shadow helped them to better understand how to deal with it in the therapeutic setting.

P_06 Trauma-informed group counselling for women in prison settings - first results

Zsuzsanna Koday, Zsuzsa Kaló

Doctoral School of Psychology, Eötvös Loránd University

Based on international literature (Messina et al., 2010, 2013, Morrissey et al. 2005, Richie, 2001, Saxena et al., 2014), women in prison are in a special situation, as they have a higher prevalence of PTSD, childhood abuse, victimisation, and mental and physical health problems. Women in prison also have high rates of drug dependence (Binswanger et al, 2010; Staton et al, 2003 in McCann et al, 2020), with nearly half of women reporting a drug problem on entry to prison (Light et al, 2013, in McCann et al, 2020).

This paper describes a trauma-informed group counseling session in a Hungarian prison in 2024. An important aim is to develop a guideline for a psychoeducational and supportive trauma-informed counselling group that could provide evidence-based support to women prisoners in the future. The impressions, experiences and comments of the women who participated in our group sessions were collected through semi-structured interviews before and after the group process, using qualitative methods and interpretative phenomenological analysis (IPA). Our research is still ongoing and the first results will be presented.

KEYNOTE_3

Metaphorical navigation across troubles: cultural conceptualizations and the way we rely on them

Simon Gábor

Eötvös Loránd University, Hungary

The talk explores how metaphors influence our understanding of problematic situations and help individuals negotiate solutions within shared socio-cultural contexts. Even though the category of metaphor gained some prominence in investigating mental health issues and in therapeutic discourse, cognitive and corpus linguistic approaches to metaphor still have the potential to make a valuable contribution to qualitative research in psychology. The primary goal of the talk is to explain the concept of metaphor as a crucial element of distributed and emergent cultural cognition, as introduced by Sharifian. In this framework, the representation of the world is continually (re)negotiated among members of cultural groups.

Metaphor, as a conceptual mapping process, systematically highlights aspects of our experiences. Beyond its mere representational function, it also conveys an evaluative attitude and grounds subjective experience in intersubjectively shareable frames of reference. Therefore, metaphors play an important role in creating and sustaining a shared understanding of what is going on with us. This intricate function of metaphors in addressing and resolving troubles is illustrated in the analysis of metaphorical expressions found in online posts about suicidal thoughts and intentions.

DIALOGUE & OPEN DISCUSSION

Untold Motherhood Encounters: An Autoethnographic Account of Postpartum Psychosis. A conversation with a researcher

Debbie Atanasio

The University of Malta, Child and Family studies

This autoethnography explores my lived experience with postpartum psychosis in Malta, focusing on the intersection of personal, familial, and professional narratives. Through a qualitative lens, this research incorporates the voices of key collaborators: my mother, husband, sister, former Head of School, my perinatal psychiatrist, and midwife present during my hospital admission. The results reveal that my experience with postpartum psychosis, while profoundly personal, is also shaped by broader social dynamics, including cultural, systemic, and relational influences. For example, despite the pervasive stigma surrounding mental health in Malta, which led me to conceal my pre-psychotic depression, I received significant material support from my close network. However, no one detected the warning signs of depression until the condition escalated into a full-blown psychotic episode. This may have been partly due to my efforts to mask my depression, influenced by the idealised narrative surrounding motherhood. Emotionally, I did not feel entirely 'safe' with those around me, reflecting how my attachment style contributed to the situation. My avoidant tendencies may have played a role in the progression of my condition. The findings also highlight that severe stressors served as unavoidable triggers. Additionally, the midwives lacked experience with postpartum psychosis. My treatment improved after diagnosis. My twin sister, a midwife, also helped to ensure that I received treatment at the main state hospital in a gynae ward together with my baby while other mothers with postpartum psychosis are to this day separated from their babies and referred to a psychiatric hospital. I critique this preferential treatment as I am aware that keeping the baby with the mother in a mother and baby unit is a treatment of choice in these circumstances. All Maltese mothers should benefit from such a service, and not only persons like me who have family members who advocated for the best service I could get. This study's strengths include the use of autoethnography to capture my lived experience with postpartum psychosis, the incorporation of the father's perspective, and the contributions of my co-storytellers. Policy recommendations include improving family-work policies, evidence-based training for healthcare professionals on maternal mental health, integrating family therapists and peer experts into care services, and ensuring equitable treatment for all patients.