

ABSTRACTS

ASSBI PRIZE WINNING ABSTRACTS

Kevin Walsh Award for Most Outstanding Masters Student (2021)
Winner of the Kevin Walsh Award was Josephine Paasila

Do reasons for living and other protective factors buffer against psychological distress and suicide ideation following severe TBI? A cross-sectional study

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Abstract

Background: Psychological distress including depression, hopelessness and suicide ideation are serious consequences of severe traumatic brain injury (sTBI). Little is known about whether positive ‘protective factors’ such as self-esteem, proactive coping, and resilience act as a buffer to psychological distress. Furthermore, although the Reasons for Living Inventory is the global gold standard tool to determine protective factors in suicide risk assessment, it has not been tested within the TBI population.

Objective: To examine correlations among potential protective factors and psychological distress after sTBI.

Method: A total of $N = 50$ adult community clients of the Liverpool Brain Injury Rehabilitation Unit with sTBI completed a battery of questionnaires exploring negative psychological variables and positive protective factors.

Results: The 50 study participants were mostly male (72%), with an average age of 34.2 ± 14.2 years and 3.2 ± 3.4 years post-injury. Almost half the sample (48%) reported mild to severe depressive symptoms, with 36% expressing some degree of suicide ideation within the previous year. Significant inverse correlations were found between the protective factors and psychological distress variables. In particular, reasons for living ($-0.654, p < .001$), resilience ($-0.600, p < .001$) and self-esteem ($-0.755, p < .001$) were all strongly negatively correlated with suicide ideation. A series of multiple regression analyses tested a model of protective factors with the psychological distress variables. All models were significant ($p < .05$) and accounted for significant proportions of the variance in psychological distress (depression $F(2, 47) = 17.15$, $\text{Adj } R^2 = 0.397$; hopelessness $F(1, 48) = 48.89$, $\text{Adj } R^2 = 0.494$; suicide ideation $F(3,46) = 43.73$, $\text{Adj } R^2 = 0.724$). For suicide ideation, self-esteem ($\beta = -0.09$), reasons for living ($\beta = -0.02$) and resilience ($\beta = -0.02$) were all significant individual predictors ($p < .05$).

Conclusions: Results suggest that protective factors can play a role in modulating negative psychological outcomes for after sTBI. Finding ways to build self-esteem and resilience could reduce long-term psychological morbidity post-injury. The Reasons for Living Inventory showed promise as an important screening tool in evaluating suicide risk after sTBI.

Luria Award for Most Outstanding Doctoral Student (2021)
The Winner of the Luria Award was Amelia Hicks

Does ongoing cognitive decline occur decades after a moderate to severe traumatic brain injury? A prospective controlled study

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Abstract

Background and Objectives: This prospective controlled study examined long-term trajectories of neuropsychological performance in individuals with traumatic brain injury (TBI) compared to healthy controls, and the impact of IQ, age at injury, time since injury, and injury severity on change over time.

Method: Fifty-three individuals with moderate to severe TBI (60.37% male; M 59.77 years), and 26 controls (53.85% female; M 63.96 years) were recruited and studied prospectively (M 12.72 years between assessments). Participants completed measures of premorbid IQ (Wechsler Test of Adult Reading), processing speed (Digit Symbol Coding Test), memory (Rey Auditory Verbal Learning Test) and executive function (Trail Making Test Part B), at a mean of 10.62 years (initial) and 23.91 years (follow-up) post-injury.

Results: Individuals with TBI did not show a significantly greater decline in neuropsychological performance over time compared with demographically similar controls. There was no association between change over time with IQ, time since injury or injury severity. Being older at injury had a greater adverse impact on executive function outcomes at the follow-up time point.

Conclusions: In this small sample, a single moderate to severe TBI was not associated with ongoing cognitive decline up to three decades postinjury. Changes in cognitive function were similar between the groups and likely reflect healthy ageing.

Travel Award for Students (2021)
The Winner of the Travel Award was Grace Wei

Behavioural and psychological effects of the COVID-19 pandemic on people living with dementia and their carers: an international study

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Abstract

Background and Objectives: As a global health emergency, the rapid spread of the novel coronavirus disease (COVID-19) led to the implementation of unprecedented restrictions (e.g., quarantine, physical/social distancing). However, while these restrictions reduce the viral spread of COVID-19, they may exacerbate behavioural and cognitive symptoms in dementia patients and increase pressure on caregiving. Here, we aimed to assess the impact of COVID-19 and related restrictions on both carers and people living with dementia across the world.

Method: We conducted an international survey (Australia, Germany, Spain, and the Netherlands) to assess the impact of COVID-19 on carers and people living with dementia ($n = 287$).

Results: Carers reported a worsening of neuropsychiatric symptoms in people with dementia, including depression, apathy, delusions, anxiety, irritability and agitation, since the outbreak of COVID-19. Regression analyses revealed that limited understanding of the COVID-19 situation was associated with worsened neuropsychiatric symptoms in people with dementia. Carers also reported a decline in their own mental health, increased stress and reduced social networks as a result of COVID-19 and related restrictions. Regression analyses revealed uncertainty about the future and loneliness were associated with worsened carer mental health.

Conclusions: Findings from this study will inform strategies for the development of relevant support services that meet the evolving needs of those living with dementia and their carers.

Douglas & Tate Prize for the Best Research Article in Brain Impairment (2020)

Skilbeck, C., Thomas, M., & Holm, K. (2020). Predicting mood outcome following traumatic brain injury (TBI): PTA & demographic variables. *Brain Impairment*, 21(1), 65–85.