# Proceedings of the

## 2nd International Congress of Health and Well-being Intervention

Health and Well-being in the Life cycle (ICHWBI 2021)

## 1st international conference on human kinesiology (ICOHK)


International Conference
on Human Kinesiology

Kinesi Lab

28th & 29th MAY 2021

INSTITUTO PIAGET UNIVERSITY
CAMPUS OF VISEU

**Coordination by:**
Gustavo Desouzart

INSTITUTO PIAGET | VISEU
RECI
Research in Education and Community Intervention

**Proceedings of the**

# 2nd International Congress of Health and Well-being Intervention - ICHWBI 2021

and **1st international conference on human kinesiology - 1st ICOHK**

**Coordination by**
**GUSTAVO DESOUZART**

Instituto Piaget

Proceedings of the 2nd International Congress of Health and Well-Being Intervention - ICHWBI2021 and the 1st International Conference on Human Kinesiology – 1st ICOHK

**Author by**
Instituto Piaget

**Coordination by**
Gustavo Desouzart

**Graphic Design**: Luís Batista and Gustavo Desouzart | **Images**: Luís Batista | **Pagination**: Daniela Marins

**Edition**: Instituto Piaget
Lote 544, 2.º, Av. João Paulo II, 1950-157 Lisboa
T. 21 831 6500

Email: info@viseu.ipiaget.pt ◆ web: https://ipiaget.org//

**ISBN** (e-book): 978-989-759-154-9

**Edition** - November 2021



This book contains information obtained from authentic and highly regarded sources. This is an edition made for publication of the works resulting from the ICHWBI2021 which are available on Congress website, where the reader will find a significant heterogeneity. Abstracts are ongoing or completed project-based research papers submitted by researchers from various academic degrees. This diversity is also found in the authors' scientific areas, reflecting on the variety of research themes presented at the Congress itself.



**Based on ICHWBI2021 abstracts that are available at**
https://healthwellbeingcongress.ipiaget.org/pt-pt/abstracts

[1] University of Coimbra, Center for Research in Neuropsychology and Cognitive and Behavioural Intervention (CINEICC), Faculty of Psychology and Educational Sciences, Portugal. email: daniel_seabra_@hotmail.com;
[2] Psychology Centre, University of Porto, Portugal.
[3] Department of Psychological Science, John Cabot University, Rome, Italy.
[4] Compassionate Mind Italia, Rome, Italy.

**Background:** Early shame experiences have traumatic characteristics and are related with mental health outcomes (Matos & Pinto-Gouveia, 2010). Furthermore, gender-related sociodemographic characteristics (gender, sexual orientation, and gender identity) seem to be associated with mental health indicators (e.g. Ross et al., 2018). However, to the best of our knowledge, no research explored how traumatic shame experiences are differentially associated with individuals' gender-related sociodemographic characteristics. **Objectives:** 1) To investigate the prevalence of traumatic shame experiences, self-reported reasons for these experiences, and their association with current psychopathology and satisfaction with life indicators; 2) To explore how different traumatic shame experiences vary according to gender (women vs. men), sexual orientation (heterosexual vs. non-heterosexual individuals; monosexual vs. plurisexual individuals) and gender identity (cisgender vs. TGNC individuals). Methods: The cross-sectional study's sample included 779 individuals (62.1% women, 34.5% men, 2.4% non-binary, 0.6% other; 52.2% heterosexual, 21.7% gay, 8.7% lesbian, 10.8% bisexual, 5.1% pansexual, 0.4% asexual, 0.8% other; 82,7% monosexual, 16.3% plurisexual; 92.9% cisgender, 7.1% TGNC) with an age-range between 18 and 66 (M = 30.69, SD = 9.54). Participants filled a self-report instruments which assessed shame-related traumatic experiences, depression, anxiety, social anxiety and satisfaction with life. **Results:** Around 57% of participants reported traumatic experiences of shame, the more prevalent reason being homophobic-related (31.7%). People reporting traumatic shame experiences presented higher levels of depression, anxiety and social anxiety and less satisfaction with life compared to people without these experiences. Men, TGNC, non-heterosexual, and plurisexual participants reported more homophobic-related shame experiences. **Conclusions:** More than half the participants reported early traumatic shame experiences and these were associated with worse mental health indicators. Early shame experiences were associated with gender-related sociodemographic characteristics, and most notably homophobic-related ones. Clinical interventions should be tailored taking into account the found specificities.

**Acknowledgements:** *The authors would like to thank all people who kindly accepted to participate in this study.*

**Keywords:** *homophobic bullying, traumatic experiences of shame, early memories of warmth and safeness, psychopathology, satisfaction with life*

**References:**

Matos, M., & Pinto-Gouveia, J. (2010). Shame as a traumatic memory. Clinical Psychology and Psychotherapy, 17(4), 299–312. https://doi.org/10.1002/cpp.659

Ross, L. E., Salway, T., Tarasoff, L. A., MacKay, J. M., Hawkins, B. W., & Fehr, C. P. (2018). Prevalence of Depression and Anxiety Among Bisexual People Compared to Gay, Lesbian, and Heterosexual Individuals: A Systematic Review and Meta-Analysis. Journal of Sex Research, 55(4–5), 435–456. https://doi.org/10.1080/00224499.2017.1387755

## O212

### Qualidade do Sono *VS* Consumo de Cafeína

**Ana Barbosa[1], Ana Pereira[2], Antonio Fernandes[3]**
[1] Escola Superior de Saúde de Bragança, Instituto Politécnico de Bragança, Bragança, Portugal;
[2] Escola Superior de Saúde de Bragança, Instituto Politécnico de Bragança, Bragança, Portugal; CIMO - Centro de Investigação de Montanha, Instituto Politécnico de Bragança, Portugal. amgpereira@ipb.pt
[3] Escola Superior Agrária de Bragança, Instituto Politécnico de Bragança, Bragança, Portugal; CIMO - Centro de Investigação de Montanha, Instituto Politécnico de Bragança, Portugal. toze@ipb.pt

**Introdução:** A quantidade de horas de sono, é influenciada através de fatores externos como consumo de cafeína (Bartel et al., 2016). A cafeína está presente em diversas substâncias, e em diferentes concentrações como, café; chá; chocolate e refrigerantes (De Maria & Moreira, 2007; Persad, 2011). **Objetivos:** Compreender a influência do consumo de cafeína na qualidade do sono. Métodos: Estudo transversal, observacional e quantitativo numa amostra não probabilística de 289 indivíduos com idade compreendia entre os 18 e 65 anos. Procedeu-se a uma avaliação da qualidade do sono, através do questionário do índice da qualidade do sono de *Pittsburgh* (PSQI) e uma avaliação do consumo de cafeína através de um questionário de frequência de consumo. **Resultados:** Neste estudo, 58.5% (n=179) dos participantes apresentavam uma má qualidade do sono. Constatou-se que não existiam diferenças, estatisticamente significativa, entre a qualidade do sono e o consumo de cafeína (p>0,05), no entanto componentes da qualidade do sono de PSQI eram influenciadas pelo consumo de cafeina. Verificou-se uma correlação, estatisticamente significativa, (p=0.004) entre a frequência do consumo de café e a "Qualidade subjetiva do sono", e ainda uma correlação positiva entre a frequência do consumo (p= 0.020) e quantidade (p=0.030) de coca-cola com a "Latência do sono". No que concerne à "Eficiência habitual do sono" constatou-se uma correlação positiva com a frequência do consumo de descafeinado (p=0.020) e negativa relativamente à quantidade de café consumido (p=0.046). A componente "Disfunção do sono" encontrava-se relacionada com a frequência de consumo de café (p=0.034), *Ice Tea* (p=0.002), coca-cola (p=0.033) e chocolate (p=0.042) e com a quantidade consumida de *Ice Tea* (p=0.001), coca-cola (p=0.042) e chocolate (*p*= 0.009). **Conclusão:** Constatou-se que o consumo de cafeína não condiciona a qualidade do sono dos participantes, mas condiciona as componentes da qualidade do sono de PSQI.

**Palavras chaves:** *Cafeína, Qualidade do Sono, Adultos*

**References**

Bartel, K., Williamson, P., van Maanen, A., Cassoff, J., Meijer, A. M., Oort, F., … Gradisar, M. (2016). Protective and risk factors associated with adolescent sleep: findings from Australia, Canada, and The Netherlands. Sleep Medicine, 23, 97–103. https://doi.org/10.1016/j.sleep.2016.07.007

De Maria, C. A. B., & Moreira, R. F. A. (2007, January). Cafeína: Revisão sobre métodos de análise. Quimica Nova, Vol. 30, pp. 99–105. https://doi.org/10.1590/S0100-40422007000100021

Persad, L. A. B. (2011). Energy drinks and the neurophysiological impact of caffeine. Frontiers in Neuroscience, Vol. 5. https://doi.org/10.3389/fnins.2011.00116

## O214

### Symptoms of visual discomfort in college students

**Mara Leitão[1], Mariana Cunha[2], Amélia Nunes[3]**
[1] Universidade da Beira Interior, Faculdade de Ciências da Saúde; Portugal; mara.leitao@ubi.pt
[2] Universidade da Beira Interior, Faculdade de Ciências da Saúde; Portugal; mariana.cunha@ubi.pt
[3] Universidade da Beira Interior, Centro de investigação em Ciências da Saúde, UbiMedical; Portugal; amnunes@ubi.pt