

Oral

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Room 8 (Meeting Room 1)

Oral 8

[O-8-01]

Preventing subculture fanaticism and promote healthy conflict resolution among adolescents: a pilot project in 100 Indonesian youths

*Nur Ihsanti Amalia^{1,2}, Puspita Alwi¹, Utari Dwi Zaharani¹, Syifa Khairunnisa¹ (1. Sehat Jiwa (Indonesia), 2. University of Auckland (New Zealand))

[O-8-02]

Towards ending gender-based violence and HIV crisis in sub-Saharan Africa: Pilot cluster randomized controlled trial of Stepping Stones and Creating Futures Plus to reduce emotional dysregulation among young men in South Africa

*Andrew Tomita¹, Princess Nyoni¹, Smanga Mkhwanazi², Andrew Gibbs¹ (1. University of KwaZulu-Natal (South Africa), 2. South African Medical Research Council (South Africa))

[O-8-03]

Effectiveness of a Multimedia-Based Acceptance and Commitment Therapy (ACT) Intervention for Adolescent Mental Health in China: A Cluster Randomized Controlled Trial with Mediation Analysis

*Yuting Yang¹, Jingyi Wang¹, Xiaomin He¹, Haijiang Lin², Fei Yan¹, Wei Wang¹, Qi Zhao¹, Xinping Zhao¹, Chaowei Fu¹ (1. Fudan University (China), 2. Taizhou City Center for Disease Control and Prevention (China))

[O-8-04]

Development and Validation of the Singapore Youth Resilience Scale-16 (SYRESS-16): A Brief Resilience Measure for Singaporean Adolescents

John Chee Meng Wong¹, *Brenda Lio Liaw Wen¹, Natalie Cheok Ling Lei¹, Liang Shen¹, Dennis Kom³, Victoria Fee³, Ruochen Du¹, Qai Ven Yap¹, Natalie Huijing Yap¹, Muhammad Nabil Syukri Bin Sachiman¹, Nicholas En-Ping Sii¹, Michelle Si Wan Jing¹, Jie Yu Teoh¹, Leoniek M Kroneman¹, Daniel Fung², Say How Ong², Cheong Sing Tian¹, Jia Ying Teng¹, Tze Pin Ng¹, Frank Verhulst⁴ (1. National University of Singapore (NUS) (Singapore), 2. Institute of Mental Health (IMH) (Singapore), 3. Ministry of Education (MOE) (Singapore), 4. Erasmus University Medical Center (Netherlands))

[O-8-05]

Invisible Wounds: Manifestations and Impacts of Racial Trauma on Asian Canadian Youth

*Lin Fang¹, Sharon Yeung¹, Kimberley Chan¹, Maria Al-Raes^{1,2}, Yahan Yang¹, Eumela Nuesca¹, Amy Choi³ (1. University of Toronto (Canada), 2. Department of Literatures in English, Cornell University, Ithaca (United States of America), 3. York University (Canada))

[O-8-06]

Applying Network Analysis to Understand Youth Risky Behavior as a System

*Abdurosid Nur Ali¹, Sherly Saragih Turnip¹ (1. Research of Community Mental Health Initiative (Indonesia))

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[O-8-01] Preventing subculture fanaticism and promote healthy conflict resolution among adolescents: a pilot project in 100 Indonesian youths

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Keywords : Adolescents、Mental health、Social-emotional learning、Conflict resolution、Wellbeing curriculum

Indonesia's rich diversity, with 1,340 ethnic groups and five recognized religions, is a unique asset but also a potential source of social tension. Adolescents and young adults are particularly susceptible to radicalization due to their developmental needs for belonging and identity formation, making them vulnerable to divisive ideologies and polarization. Prolonged exposure to societal tension can negatively impact their mental health, leading to anxiety, depression, and strained interpersonal relationships. To address this, it is essential for youth to develop skills for healthy relationships across differences. In late 2022, we launched *Bersosial: Socio-emotional Learning for Youth*, a pilot program designed to teach tolerance through mental health education. Grounded in the belief that tolerance is fostered through positive intrapersonal and interpersonal relationships, the program brought together 100 young participants (ages 18-22) from each province of Indonesia, ensuring the inclusion of ethnic and religious minorities. Over one month, participants engaged in lectures, group discussions, a large forum, and a final project. By the program's end, 70% had completed the full curriculum. Our findings indicate that prior to the program, 48% of participants struggled to accept differing opinions, and 17% opted for silence over expressing opposing views. Post-program, 82.6% reported improved understanding of conflict resolution, with 67% attributing this to enhanced emotional management skills. Participants also showed progress in managing emotions when faced with opposing perspectives. These outcomes underscore the impact of self-management and conflict resolution skills in diverse settings, forming the core of our Wellbeing Curriculum. By nurturing these abilities, we can empower youth to resist polarization, maintain mental wellness, and contribute to a harmonious society.

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[O-8-02] Towards ending gender-based violence and HIV crisis in sub-Saharan Africa: Pilot cluster randomized controlled trial of Stepping Stones and Creating Futures Plus to reduce emotional dysregulation among young men in South Africa

*Andrew Tomita¹, Princess Nyoni¹, Smanga Mkhwanazi², Andrew Gibbs¹ (1. University of KwaZulu-Natal (South Africa), 2. South African Medical Research Council (South Africa))

Keywords : South Africa、HIV、Emotional dysregulation、Intimate partner violence、Gender-based violence

Background: Gender inequality is a root cause of both HIV and GBV epidemic perpetuation in the sub-Saharan African (SSA) setting. Emotional dysregulation (ED), which refers to the difficulty in controlling emotional responses to stressful events, is an important (but challenging to address) risk factor associated with intimate partner violence (IPV) perpetration among young men in HIV-endemic SSA.

Objective: This two-armed pilot cluster randomized controlled trial examined the effectiveness of Stepping Stones and Creating Futures Plus (SSCF+), a participatory, gender-transformative, and livelihood-strengthening intervention, on ED outcomes among young men in South Africa (SA).

Methods: A total of 163 young men, aged 18-30 years, were recruited from 30 clusters (friendship groups) in urban informal settlements and rural areas of KwaZulu-Natal, SA. The clusters were randomly assigned (1:1) to either the experimental SSCF+ group or a control group. Participants were followed up at 5 months, and an intention-to-treat (ITT) analysis using generalized estimating equations (GEE) was conducted to assess the impact of SSCF+ on the men's ED outcomes (measured using the 16-item Difficulties in Emotion Regulation Scale).

Results: At the 5-month follow-up, SSCF+ did not significantly reduce ED in the overall sample. However, it did have a significant positive effect on ED among men who were at risk of depression at baseline (adjusted odds ratio: 0.12, 95% CI [.03-.46], p=0.002).

Discussion/Conclusion: The SSCF+ intervention, which is designed to address poverty and other socio-economic challenges through gender transformation and livelihood strengthening, effectively reduced ED among young men facing depression in KwaZulu-Natal Province, South Africa.

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[O-8-03] Effectiveness of a Multimedia-Based Acceptance and Commitment Therapy (ACT) Intervention for Adolescent Mental Health in China: A Cluster Randomized Controlled Trial with Mediation Analysis

*Yuting Yang¹, Jingyi Wang¹, Xiaomin He¹, Haijiang Lin², Fei Yan¹, Wei Wang¹, Qi Zhao¹, Xinping Zhao¹, Chaowei Fu¹ (1. Fudan University (China), 2. Taizhou City Center for Disease Control and Prevention (China))

Keywords : Multimedia-based intervention、Adolescents、Mental health、Loneliness、Randomized controlled trial

Purpose: Adolescent mental health challenges are increasingly prevalent, yet access to effective psychological support remains limited, particularly in China. Multimedia-based interventions may provide a scalable and accessible solution. This study aimed to evaluate the effectiveness of a multimedia-based Acceptance and Commitment Therapy (ACT) intervention on adolescent mental health and examine whether changes in loneliness mediated intervention effects.

Methods: A two-arm cluster randomized controlled trial was conducted in eight middle schools in Taizhou City, China. Schools were randomly assigned (1:1) to receive either a teacher-led, multimedia-based ACT intervention (short videos, audio tracks, group discussions, and leaflets) or a self-guided ACT intervention delivered through leaflets (the control group). Within each school, three classes from grades 7-8 or 10-11 were randomly selected. Online assessments were conducted at baseline, 3 months (end of intervention), and 12 months. Primary outcomes included stress, depression, anxiety, and emotional and behavioral problems. Mixed-effects models under the intention-to-treat principle were used, with a prespecified mediation analysis examining loneliness as a mediator.

Results: From October 2023 to November 2024, 2,103 eligible participants were enrolled (1,055 intervention; 1,048 control). Follow-up data were available for 1,945 (92.5%). At 3-month follow-up, the intervention group showed significantly greater reductions in stress (adjusted mean difference -1.20, 95% CI -1.73 to -0.67; $p < 0.001$), depression (-1.23, -1.85 to -0.61; $p < 0.001$), anxiety (-0.86, -1.24 to -0.49; $p < 0.001$), and emotional and behavioral problems (-1.16, -1.65 to -0.66; $p < 0.001$) compared to the control group. The reductions were maintained to 12-month follow-up. Mediation analysis indicated that reductions in loneliness partially mediated the intervention effects on all primary outcomes.

Conclusion: The multimedia-based ACT intervention effectively improved adolescent mental health with sustained benefits. Scalable digital approaches hold promise for school-based mental health promotion. Targeting loneliness may be a key mechanism to enhance intervention effectiveness.

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[O-8-04] Development and Validation of the Singapore Youth Resilience Scale-16 (SYRESS-16): A Brief Resilience Measure for Singaporean Adolescents

John Chee Meng Wong¹, *Brenda Lio Liaw Wen¹, Natalie Cheok Ling Lei¹, Liang Shen¹, Dennis Kom³, Victoria Fee³, Ruochen Du¹, Qai Ven Yap¹, Natalie Huijing Yap¹, Muhammad Nabil Syukri Bin Sachiman¹, Nicholas En-Ping Sii¹, Michelle Si Wan Jing¹, Jie Yu Teoh¹, Leoniek M Kroneman¹, Daniel Fung², Say How Ong², Cheong Sing Tian¹, Jia Ying Teng¹, Tze Pin Ng¹, Frank Verhulst⁴ (1. National University of Singapore (NUS) (Singapore), 2. Institute of Mental Health (IMH) (Singapore), 3. Ministry of Education (MOE) (Singapore), 4. Erasmus University Medical Center (Netherlands))

Keywords : resilience、adolescents、Singapore、scale validation、psychological assessment

Introduction

Resilience is shaped by sociocultural environments, especially during adolescence—a period of development. In Singapore, where academic and societal demands are high, there is a need for a culturally appropriate tool that can efficiently identify resilience capacities in youths. This study presents the development and validation of the Singapore Youth Resilience Scale-16 (SYRESS-16), a brief self-report instrument designed to assess resilience within the Singapore context.

Methods

Data were collected from a nationally representative sample of 3,336 adolescents aged 11 to 18 ($M = 14.2$ years, $SD = 1.30$; 54.4% female) from mainstream secondary schools in Singapore. Participants completed the original 50-item SYRESS, the Perceived Stress Scale (PSS), and the Youth Self-Report (YSR). The SYRESS-16 was developed through item reduction guided by theoretical and statistical criteria. Confirmatory factor analysis (CFA) was conducted, and convergent validity was examined via correlations with the PSS. Known-groups validity were assessed using ANOVA and MANOVA, comparing SYRESS-16 total and subscale scores between adolescents classified as clinical or non-clinical based on YSR Total Problems scores. Internal consistency was evaluated using Cronbach's alpha.

Results

The six-factor model showed excellent fit ($CFI = 0.982$, $TLI = 0.975$, $RMSEA = 0.057$). The SYRESS-16 demonstrated strong convergent validity, showing a significant negative correlation with perceived stress ($p = -.53$, $p < .001$). Known-groups validity was supported: adolescents with clinical-level symptoms reported significantly lower total resilience scores ($M = 44.44$) than their non-clinical peers ($M = 55.69$), $F(1, 3334) = 249.10$, $p < .001$, $\eta^2 = 0.070$. MANOVA revealed significant group differences across all six subscales ($p < .001$). Internal consistency for entire scale was strong ($\alpha = .89$).

Conclusion

The SYRESS-16 is a psychometrically robust, developmentally and culturally sensitive tool for assessing adolescent resilience. Its brevity and multi-domain structure support use in clinical and school settings. Importantly, it enables population-based profiling for early identification of pre-clinical population and guides resilience building interventions and programs in Singaporean youths.

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Keywords : Racial trauma、Complex trauma、anti-Asian racism、Youth identity development

Introduction: Although Canada has promoted multiculturalism since the 1970s, whiteness remains deeply embedded in societal norms, continuing to marginalize people of colour. Anti-Asian racism (AAR), while prevalent, often manifests in subtle and indirect ways. Racialised youth are especially vulnerable to these impacts. Centering the experiences of Asian Canadian youth, this study uses a racial trauma lens and community-based approach to explore (1) how youth navigate growing up in Canada, and (2) the effects of AAR on their identities and well-being. *Methodology:* In collaboration with a Toronto-based community organization and its Youth Advisory Committee (YAC), we recruited 36 Asian Canadian youth (ages 14–23; average age 18.8) to participate in online focus group discussions. We used reflexive thematic analysis to analyze study data. The YAC and the community organization was informed and consulted throughout the study process. *Results:* Youth shared recurring experiences of alienation and being perceived as outsiders. Ranging from unsolicited remarks, mockeries, to explicit acts of discrimination, experiences of AAR often appeared in subtle, unacknowledged forms that began early in life. These experiences resemble complex forms of trauma that engender not only acute traumatic reactions but persistent emotional experiences of shame and disempowerment. Over time, these effects can undermine self-worth and identity, causing some to normalize racism as a part of life and feel insignificant, while others engaged in racial dissociation by approaching whiteness and distancing themselves from their Asian identities and anything that is “too Asian”. *Conclusion:* This research sheds light on how racial trauma shapes the experiences and well-being of Asian Canadian youth in a society rooted in white supremacy. By sharing their personal narratives, the study reveals the often-invisible harm of racism and calls for collective action to dismantle the systems that sustain racial inequality.

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[O-8-06] Applying Network Analysis to Understand Youth Risky Behavior as a System

*Abdulosid Nur Ali¹, Sherly Saragih Turnip¹ (1. Research of Community Mental Health Initiative (Indonesia))

Keywords : behavior difficulties、 youth risky behavior、 suicide ideation、 longitudinal、 network analysis

Prevalence of risky behavior engagement by youth still rising. This kind of behavior also likely to pushing the ideation of suicide and planned suicide within youth. Mental health condition such as loneliness, anxiety, difficulties, and peer problems will likely predict youth conduct problems. Various youth risky behavior such as substance use, risky driving, unsafe sexual intercourse, aggression, and peer victimization increasing substantially. However, the contribution of age predictors is still uncertain and there is intercorrelation between youth risk behaviors. This study still limited in developed country, such as Indonesia. Despite rapid economic changes, mental health issues in youth remain overlooked. By understanding the intercorrelation strength between variables, we can map stability of pattern and consistency as well as identify initial behavior risk among adolescents. This study uses network analysis to examine teenagers stress symptoms, parent-peer-child relationships, victimization, and suicidal risk contribute to youth risky behavior in Jakarta adolescents ($N = 940$). We assess central and bridge symptoms and compared network structure longitudinally. We found that the most central bridge symptoms were substance use such as alcohol, behavior difficulty, and suicide ideation. Alcohol consumptions by adolescents and high level of stress and depression were greater prediction of suicide activation. Cigarette uses were connected to many nodes. Mental health factors are clustered together. Behavior risks are also clustered together. There were no differences in network structure through 2017-2019. These findings suggest that alcohol use, having behavior difficulties, and suicide ideation may contribute to the high rates and co-occurrence of risky behavior in adolescence. Based on network theory, these behavior difficulties in adolescent may represent important targets for intervention. Further discussion will address the stability in year one and year two would predict the suicidal occurrence in year three.