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Session (Foyer 1)

Poster 2

[P-2-01]

Close the talk with Clozapine: Resurgence of the medical in community mental health programmes in India

*Sudarshan R Kottai¹ (1. Indian Institute of Technology Palakkad (India))

[P-2-02]

Developing mental health assessment skills using Data Wise methodology and case studies.

*Ernesto Magallon-Neri^{1,2}, Dámaris Muñoz¹, Virginia Krieger^{1,2}, Juan Antonio Amador^{1,2} (1. Department of Clinical Psychology and Psychobiology. Faculty of Psychology. University of Barcelona (Spain), 2. Institute of Neurosciences, UB. Group of Studies about Measure Invariance and Analysis of Change (GEIMAC) 2021SGR01071. (Spain))

[P-2-03]

EFFECTIVENESS OF THE TAS PAK HAJI PROGRAM AS AN INNOVATION IN TREATING SEVERE MENTAL DISORDER PATIENTS WITH PASUNG IN MUARA ENIM, SOUTH SUMATERA: A DESCRIPTIVE STUDY FROM 2022-2024

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[P-2-04]

The Impact of Multidisciplinary Training on Mentoring and Mental Well-Being: A Mixed-Methods Study within the Indian Air Force, investigating Contextual Adaptation and Efficacy

*Meena Kolar Sridara Murthy¹ (1. National Institute of Mental Health and Neurosciences (India))

[P-2-05]

The Manas Samvaadha Project: Culturally-Contextualized Street Theatre for Mental Health Literacy and Stigma Reduction in Rural Adolescent Males

*Manasapriya BHM¹ (1. National Institute of Mental Health and Neuro Sciences (NIMHANS) (India))

[P-2-06]

Differential Exposure of Adverse Childhood Experiences Across Ethnic Subgroups of Asian American, Native Hawaiian, and Pacific Islander Youth in Northern California

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[P-2-01] Close the talk with Clozapine: Resurgence of the medical in community mental health programmes in India

*Sudarshan R Kottai¹ (1. Indian Institute of Technology Palakkad (India))

Keywords : community mental health、 clinical Eethnography、 pharmaceuticalisation、 medicalisation、 task-shifting

Background: The flagship community mental health programme run by the government of India has been criticized by scholars for failing to deliver on its policy objectives (Jain & Jadhav, 2009; 2012). Responding to the global call to fill the treatment gap (Patel et.al, 2007) community mental health services have been set up by nongovernmental organisations (NGOs) which partner with local homegrown organizations. But after these local organizations began partnering with the government and the NGOs in the field of community mental health, home grown approaches to care have been marginalised.**Aims:** The community mental health programmes run by mental health NGOs target the poorest of the poor for its services. The power to 'medicalize' is expanding from the mental health professionals to the laypersons trained by them pitching for a large tent of 'patients' who are 'ill' and in need of 'treatment'. This paper explores how the entry of NGOs in mental health has engulfed the community-led organisations like pain and palliative clinics turning them into agents of the medical.**Method:** A clinical ethnographic study of community mental health programmes run by five organizations in India was undertaken for a period of 14 months.**Results:** The desperation and urgency to somehow 'treat' and fill the 'treatment gap' through task-shifting have led to employing non-medical professionals to prescribe medicines and laymen to offer psychotherapies all in turn leading to 'patient communities' beset by violations of their bodies, minds and spirits.**Discussion:** The broader notion of community, health and illness which evolved bottom-up using experience as expert knowledge by the community-led organisations have lost its autonomy, freedom in choice of intervention after associating with mental health NGOs which employ and proliferate the biomedical model ripping apart its broad community outlook. Prevention is out of focus; a major departure from policy.

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[P-2-02] Developing mental health assessment skills using Data Wise methodology and case studies.

*Ernesto Magallon-Neri^{1,2}, Dámaris Muñoz¹, Virginia Krieger^{1,2}, Juan Antonio Amador^{1,2} (1. Department of Clinical Psychology and Psychobiology. Faculty of Psychology. University of Barcelona (Spain), 2. Institute of Neurosciences, UB. Group of Studies about Measure Invariance and Analysis of Change (GEIMAC) 2021SGR01071. (Spain))

Keywords : Mental health assessment、 Training、 Data wise

The learning process of developing competencies and skills in the field of mental health assessment is a priority in the courses of the Master's Degree in General Health Psychology (MUPGS). Method: Using the Data Wise methodology, a collaborative procedure for analyzing data and experiences in educational communities, teaching development strategies are developed, based on student needs and the promotion of professionals' skills in adapting training and learning programs. The flexible use of data obtained through this methodology focuses on fostering strengths to address training deficits and promoting new competencies. Results: several groups of graduate psychologists (n=104) were assessed in several skills training in psychological assessment. The modules identified as being of greatest interest and benefit to students are those focused on clinical interviews (83,8%), case formulation (82.9%), and psychological reporting (79,1%), while the module with less interest are the ethical and deontological aspects and psychometric aspects (32,4%). Discussion: It is important to promote training based on professional practice and encourage new professionals to incorporate concepts and practices based on metrics and best ethical procedures in the field of mental health assessment.

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[P-2-03] EFFECTIVENESS OF THE TAS PAK HAJI PROGRAM AS AN INNOVATION IN TREATING SEVERE MENTAL DISORDER PATIENTS WITH PASUNG IN MUARA ENIM, SOUTH SUMATERA: A DESCRIPTIVE STUDY FROM 2022-2024

*Ervana Ikha Yusnita¹, Frenti Amalia², Bintang Arroyantri Prananjaya³, Irna Permanasari Gani⁴ (1. dr. H.M Rabain Muara Enim Public Hospital (Indonesia), 2. Public Health Office of Muara Enim District Government (Indonesia), 3. Faculty of Medicine, Sriwijaya University (Indonesia), 4. Faculty of Medicine, Maranatha Christian University (Indonesia))

Keywords : The TAS PAK HAJI PROGRAM、 severe mental disorder、 pasung

Background

Pasung is an act of restraint against patients with severe mental disorders using inhumane methods. This condition is common in the treatment of Severe Mental Disorder Patients (SMDP) in Indonesia. Some of the reasons that cause Pasung are the stigma, the difficulty of getting access to health facilities, lack of public understanding regarding mental health problems and the difficulty of caregivers in caring SMDP. Pasung in Muara Enim District is still becoming serious problem and the number continues to increase every year. To overcome this issue, in 2022 the Muara Enim district government began introducing the TAS PAK HAJI program, a program that facilitate mental health workers at primary health facilities, in the form of a special bag containing equipment needed by health workers to conduct home visits to SMDP as well as carry out both medical and non-medically equipment. The bag itself contain antipsychotic drugs; both oral and injection, wound care tools, equipment for cleaning patients such as shaver and nail clippers and a saw to cut the chains/wooden blocks used to shackle patients. Objective This study aims to assess the effectiveness of the TAS PAK HAJI program in reducing the incidence of SMDP with pasung in Muara Enim.

Method

This research was conducted descriptively using secondary data on the incidence SMDP with Pasung from 2022-20224.

Results

Based on study, there was a decrease in incidence of SMDP with pasung from 48 patients in 2022 to 39 patients (18,75%) in 2023 and 36 patients (8,33%) in 2024.

Conclusion

There is a decrease in the incidence of SMDP with Pasung in 2023 and 2024 in Muara Enim. This study is the baseline data for conducting larger studies to assess the effectiveness of the program.

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[P-2-04] The Impact of Multidisciplinary Training on Mentoring and Mental Well-Being: A Mixed-Methods Study within the Indian Air Force, investigating Contextual Adaptation and Efficacy

*Meena Kolar Sridara Murthy¹ (1. National Institute of Mental Health and Neurosciences (India))

Keywords : Military mental health、Well-being、Training efficacy

Background: Despite established mental health challenges in military personnel, empirically validated interventions often lack detailed analysis of their contextual and cultural efficacy within military training. This study addresses that gap by quantitatively and qualitatively evaluating a structured, needs-based mentoring and mental well-being training program developed for the Indian Air Force (IAF). We aimed to assess its impact on participants' knowledge and self-perceived competence in managing mental health within the IAF's unique operational and cultural framework.

Methods: Quantitative analyses showed a statistically significant increase in participants' knowledge and self perceived competence in mental health management. Thematic analysis of qualitative data revealed salient themes: enhanced skill application, identification of systemic barriers, reported personal growth, and increased mental health awareness, all collectively affirming the program's contextual effectiveness.

Results: Quantitative analyses demonstrated a statistically significant increase in participants' knowledge and self perceived competence in mental health management. Thematic analysis of qualitative data yielded salient themes including enhanced skill application, identification of systemic barriers, reported personal growth, and a discernible increase in mental health awareness, collectively affirming the program's contextual effectiveness.

Conclusion: These findings provide empirical evidence that structured, needs-informed training programs, thoughtfully adapted to specific organizational and cultural contexts like the Indian Air Force, are efficacious in augmenting mental health support systems. This study contributes to the literature on evidence-based mental health interventions in military populations, emphasizing the imperative of culturally sensitive program development.

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[P-2-05] The Manas Samvaadha Project: Culturally-Contextualized Street Theatre for Mental Health Literacy and Stigma Reduction in Rural Adolescent Males

*Manasapriya BHM¹ (1. National Institute of Mental Health and Neuro Sciences (NIMHANS) (India))

Keywords : Mental Health Literacy、Community Intervention、Human Library、Stigma Reduction、Rural Health

Objectives: This pilot study investigated the efficacy of a culturally-contextualized street theatre intervention as a pre engagement strategy to enhance mental health literacy and reduce stigma among males in rural Karnataka, preceding "Human Library" sessions for the "Manas Samvaadha" project. The "Manas Samvaadha" project aims to address significant mental health disparities by utilizing Human Libraries as a grassroots-level communication tool in communities.

Methods: A single-group pre- and post-intervention design was employed. A street play was performed for a cohort of 128 male students enrolled at ITI College, Kantanakunte, Doddaballapura, as an Information, Education, and Communication (IEC) component of the "Manas Samvaadha" initiative. Participants completed pre- and post-intervention questionnaires to assess changes across multiple domains, including understanding of mental health issues, perception of superstitions affecting mental illness, cultural relevance of the content, relatability of characters, challenge to pre-existing beliefs, awareness of stigma, empathy towards individuals with mental illness, confidence in discussing mental health, and perceived efficacy of the street play format. Qualitative feedback was concurrently collected to elucidate impactful elements and inform future refinements.

Results: Post-intervention data revealed significant positive shifts in participant attitudes and knowledge. A substantial majority (79.5%) of participants reported improved understanding of mental health issues (50.4% Strongly Agree, 29.1% Agree). The play effectively highlighted the impact of superstitions on mental illness (82.8% combined Strongly Agree/Agree). Over 82% perceived the content as culturally relevant and relatable. Furthermore, 78.4% indicated that the play challenged previous beliefs about mental illness (53.6% Agree, 24.8% Strongly Agree), and 82.3% demonstrated increased awareness of stigma and discrimination (47.6% Agree, 34.7% Strongly Agree). Empathy towards individuals with mental illness increased in 84.1% of respondents (49.2% Agree, 34.9% Strongly Agree). Participants also reported enhanced confidence in discussing mental health (72.3% combined Strongly Agree/Agree). Qualitatively, the "Swamiji" character and character transitions were frequently cited as impactful.

Conclusions: Culturally-contextualized street theatre serves as a highly effective and impactful preparatory intervention for mental health awareness and stigma reduction, particularly among adolescent males in rural settings. The observed improvements in mental health literacy, empathy, and willingness to discuss mental health underscore its utility as a foundational component for community-based initiatives like the Human Library model. Findings suggest continued integration with strategic refinements for audience engagement and voice projection.

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[P-2-06] Differential Exposure of Adverse Childhood Experiences Across Ethnic Subgroups of Asian American, Native Hawaiian, and Pacific Islander Youth in Northern California

*Phillip Yang¹, Sara Aghaee², Janice Tsoh¹, Julianna Deardorff³, Ai Kubo² (1. University of California, San Francisco (United States of America), 2. Kaiser Permanente Northern California (United States of America), 3. University of California, Berkeley (United States of America))

Keywords : Child Abuse、Public Health、Asian Americans、Health Disparities、Adolescent

Introduction. Adverse childhood experiences (ACEs) are well-established predictors of poor physical and mental health outcomes across the lifespan. Asian American (AsA) and Native Hawaiian and Pacific Islander (NHPI) populations face subgroup-specific risks, yet research on ACEs in these groups is limited. Aggregated racial data often masks critical health disparities and perpetuates harmful stereotypes. This study examines the prevalence and distribution of ACEs among disaggregated AsA and NHPI subgroups in a large clinical sample of children.

Methods. We conducted a cross-sectional analysis using data from Kaiser Permanente Northern California, an integrated health system that serves approximately 29% of adolescents in Northern California. The Pediatric ACEs and Related Life Events Screener was completed by caregivers of children aged 2–12 and by adolescents aged 13–18. Subgroups included Asian Indian, Chinese, Filipino, Japanese, Korean, Vietnamese, multiracial, multiethnic, Other South Asian, Other Southeast Asian, and NHPI youth. We used descriptive statistics to report individual ACE distributions and conducted Dunnett's tests to compare subgroup ACE scores using Chinese youth as the reference group.

Results. Multiracial and Filipino youth had significantly higher ACE scores than Chinese youth ($p < .01$), while Asian Indian youth had significantly lower scores ($p = .03$). Domestic violence was the most common ACE across most subgroups, although emotional abuse was most common in Vietnamese participants and parental mental illness was most common in Other South Asian and multiracial participants.

Conclusions. Our study reveals meaningful variation in ACE exposure across AsA and NHPI subgroups that would be hidden under aggregate racial categories. Cultural and structural influences, including migration history, racism, and intergenerational trauma, likely contribute to these disparities. Culturally responsive ACE assessments and interventions that consider subgroup-specific contexts are essential to advancing equity in mental health care.