

Symposium | Forensic Psychiatry : [Symposium 50] Anti-stigma 2

📅 Fri. Sep 26, 2025 4:30 PM - 6:00 PM JST | Fri. Sep 26, 2025 7:30 AM - 9:00 AM UTC 🏛️ Session Room 4
(Large Hall B)

[Symposium 50] Anti-stigma 2

Moderator: Shigeki Seki (Silver Ribbon Japan)

[SY-50]

Anti-stigma 2

Ken Udagawa², Shu-jen Lu³, Elizabeth King⁴, Deborah Wan⁵, Tsuyoshi Akiyama¹ (1. Rokubancho Mental Clinic (Japan), 2. Community mental health & welfare bonding organization (Japan), 3. National Taiwan University (Taiwan), 4. University of Sydney (New Zealand), 5. Past President of World Federation for Mental Health (Hong Kong))

[SY-50-01]

Let's think about what we need to do to fight stigma together, let's share Our Thoughts

*Ken Udagawa¹ (1. NPO COMHBO (Japan))

[SY-50-02]

Anti-stigma in Taiwan

*Shu-Jen Lu¹ (1. National Taiwan University (Taiwan))

[SY-50-03]

From Stigma to Safety: Leadership Mechanisms for Normalising Mental Health in the Workplace

*Elizabeth Lorraine King¹ (1. WFMH (Australia))

[SY-50-04]

Global Mental Health Promotion and Community Mental Health Framework in Hong Kong

*DEBORAH WAN¹ (1. Past President of World Federation for Mental Health (Hong Kong))

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Keywords : Stigma、Mental Health、Psychiatry

In Anti-stigma 2, Ken Udagawa, a committee member of the Japanese Society for Elimination of Barriers to Mental Health, feels the need for horizontal relationships, empathy, and the willingness to learn mutually among the various stakeholders, including professionals, consumers, and families. People can think together about and fight against the stigma in the mental health system. In the anti-stigma movement, every citizen should be together and have a deliberate horizontal relationship. Shu-jen Lu presents "The Movement of anti-stigma in Taiwan since the amendment of Mental Health Law." Research indicates that the level of mental illness stigma in the Asia-Pacific region is higher compared to the other areas. From 1990 to 2022, after 32 years of revising the Mental Health Law, which will officially take effect in 2024. This represents the effort to move from illness management to wellness management and even from a recovery model to peer support, hoping to change the stigma of the past. The aim is to let mental illness be integrated into today's diverse, equal, and integrated society. Elizabeth King will speak about "Leadership in Action: Driving Anti-Stigma Culture in the Workplace." She leads the section on workplace mental health of the World Federation for Mental Health. This section has been conducting several webinars to achieve the goal of the World Mental Health Day 2024 theme, "It is Time to Prioritize Mental Health in the Workplace." Deborah Wan will present "Global Mental Health Promotion and Community Mental Health Framework in Hong Kong" based on her many years of activities and experiences in community mental health in Hong Kong. Her commitment and devotion to mental health stem from her role as chief executive of Hong Kong New Life Psychiatric Rehabilitation Association for 28 years and the World Federation for Mental Health President from 2011-2013.

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[SY-50-01] Let's think about what we need to do to fight stigma together, let's share Our Thoughts

*Ken Udagawa¹ (1. NPO COMHBO (Japan))

Keywords : horizontal relationship、horizontal dialogue、share the thought together

In this presentation, I will explore how horizontal relationships and horizontal dialogue can strengthen anti-stigma efforts. Fighting stigma requires the participation of all citizens, not just those directly involved in mental health.

By sharing perspectives and fostering inclusion, we can build a society where no one is left behind due to stigma.

let's share Our Thoughts Together

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[SY-50-02] Anti-stigma in Taiwan

*Shu-Jen Lu¹ (1. National Taiwan University (Taiwan))

The stigma surrounding mental illness refers to negative and unequal beliefs about mental disorders, which can hinder and limit various aspects of life for individuals with mental disorders, such as social participation, healthcare access, housing, and employment. Stigma is tied to social interaction processes, making it easier for individuals with mental disorders to internalize societal stigma responses, leading to self-stigma, which affects self-efficacy, self-esteem, quality of life, and willingness to seek help during episodes of mental illness. Research indicates that the level of mental illness stigma in the Asia-Pacific region is higher compared to other regions, while countries with individualistic values, such as the United States, have the lowest levels of stigma. Media reports tend to highlight individuals with mental disorders during major social events, reinforcing public fear and prejudice, despite the fact that only a small percentage of individuals with mental disorders exhibit violent behavior. These negative reports lead to perceptions of individuals with mental disorders as dangerous or helpless, further excluding them from social activities and fostering self-stigma and social withdrawal. This stigma also affects the families and caregivers of individuals with mental disorders, increasing their stress and sense of isolation. Service providers' expectations of individuals with mental disorders are often lower, hindering their recovery. To address this issue, it is recommended to establish family and social support networks, promote public mental health awareness, increase professional training, provide education and psychological support, and create opportunities for positive social interactions. I will exchange anti-stigma movement experiences in Taiwan.

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[SY-50-03] From Stigma to Safety: Leadership Mechanisms for Normalising Mental Health in the Workplace

*Elizabeth Lorraine King¹ (1. WFMH (Australia))

Keywords : Psychological Safety、 Stigma、 Leadership

Despite decades of anti-stigma campaigns, help-seeking remains stubbornly low in employed populations. Meta-analytic evidence indicates that supervisory attitudes account for up to 30 % of the variance in workers' willingness to disclose psychological distress (Martin, Sanderson, & Cocker, 2021), while longitudinal studies show that psychologically unsafe climates double the risk of prolonged sickness absence (Brough, Biggs, & Barbour, 2023). Concurrently, 69 % of Australian working women were report chronic time-stress over a decade ago (Pocock, 2012) now mental-health compensation claims across the Asia-Pacific have risen by more than 50 % in the past decade (SafeWork Australia, 2024). These data implicate leadership—rather than individual resilience—as the pivotal, yet under-utilised, lever for stigma reduction.

Representing the World Federation for Mental Health, this presentation synthesises findings from occupational psychiatry, organisational psychology, and implementation science to propose a three-level leadership model for dismantling workplace stigma: **Symbolic Leadership** – Values-based messaging and selective self-disclosure by senior figures interrupt stereotype activation and reset perceived norms (Corrigan & Penn, 2015).

Relational Leadership – Compassionate, inclusive, and transformational styles enhance psychological safety (Edmondson & Lei, 2014), mitigating self-stigma and shortening latency to care.

Structural Leadership – Board-level adoption of ISO 45003 psychosocial-risk standards and closed-loop feedback systems converts attitudinal change into enduring practice.

Multi-site case studies—from tertiary hospitals, a trans-Tasman bank, and a technology SME—demonstrate measurable impacts: 27 % less presenteeism, 41 % higher EAP utilisation, and board-monitored mental-health KPIs within 18 months. The session concludes with a “Stigma Disruption Checklist” aligned to the WHO (2022) Mental Health at Work Guidelines and adaptable to the diverse cultural contexts represented at PRCP-WACP 2025. By reframing stigma as a modifiable leadership variable rather than an individual deficit, organisations can advance the WFMH mission of global mental-health equity while realising the productivity dividends of a truly inclusive workplace.

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[SY-50-04] Global Mental Health Promotion and Community Mental Health Framework in Hong Kong

*DEBORAH WAN¹ (1. Past President of World Federation for Mental Health (Hong Kong))

Keywords : Global Advocacy on Mental well-being、World Mental Health Day、Policy formulation on Mental Health in Hong Kong

The much neglected aspect of Mental Health - prevention and promotion of mental well-being and the reduction of risks among the population in Hong Kong. On global aspect, I share my involvement with WFMH which connected me with colleagues & professionals, those with lived experience and care-givers. The significant project is World Mental Health Day on 10/10 which is held yearly since 1992. On advocacy aspect, I actively involved with the Global Alliance for Mental Health Advocacy ever since 2018 which advocacy efforts are made through seminars and conferences. In Hong Kong, I share the formulation of Rehabilitation Programme Plan till the latest in 2020. Recently, a Policy Paper "Towards a Fit-for-Purpose Mental Health System" was formulated. There is no lack of policy papers but there is a huge gap in implementation from prevention to treatment and rehabilitation. Despite of all these obstacles, there are possible solutions to overcome and to advocate for the mental well-being in Hong Kong.