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## Poster 12

[P-12-01]

Nurses practitioners specialized in mental health and their practice, Québec, Canada.

\*Mylène Boissy<sup>1</sup>, Fannie Dupont (1. Université du Québec à Trois-Rivières (Canada))

[P-12-02]

The Jagajaga Project: Co-production and Care for Caregivers through Mutual Support among Users, Families, and Professionals

\*Yoshiko Ohno<sup>1</sup>, \*Yuta Kitahata<sup>2</sup> (1. Graduate School of Human Sciences, The University of Osaka (Japan), 2. Kinan Mental Health Center (Japan))

[P-12-03]

Development of a CBT-Based Relapse Prevention Workbook for Depression: A Practical Tool for Mental Health Clinics in Community Settings

\*SaeSaem Han<sup>1</sup>, \*Namyoung Lee<sup>2</sup> (1. Samsan Hospital (Korea), 2. Munmak Public Health Clinic (Korea))

[P-12-04]

Herbalism and Irish Folk Medicine as strategies to cope with mental health issues in Ireland: an ethnographic study by a foreigner psychiatrist

\*Ciro Blujus dos Santos Rohde<sup>1</sup>, Julia Rosarie Kingston<sup>2</sup>, Hermano Tavares<sup>1</sup> (1. Department of Psychiatry, School of Medicine of the University of São Paulo (Brazil), 2. Department of Folklore, University College Cork (Ireland))

[P-12-05]

Sociocultural Barriers in Schizophrenia Management, is Healthcare Policy Ready to Tackle the Issue?

\*Lathifah Nudhar<sup>1</sup>, Rizma Adlia Syakurah<sup>2</sup>, \*Bintang Arroyantri Prananjaya<sup>1</sup>, Puji Rizki Suryani<sup>1</sup>, Syarifah Aini<sup>1</sup>, Diyaz Syauki Ikhsan<sup>1</sup> (1. Psychiatry Department, Faculty of Medicine, Sriwijaya University (Indonesia), 2. Faculty of Public Health, Sriwijaya University, Indonesia (Indonesia))

[P-12-06]

Bridging the Gap: Evaluating the Role of Community-Based Psychiatric Nursing in Reducing Mental Health Stigma in Ghana

\*John Appau<sup>1</sup>, Mark Boateng<sup>1</sup> (1. Ankaful Psychiatric Hospital (Ghana))

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Poster 12

[P-12-01] Nurses practitioners specialized in mental health and their practice, Québec, Canada.

\*Mylène Boissy<sup>1</sup>, Fannie Dupont (1. Université du Québec à Trois-Rivières (Canada)) Keywords: Nurses practitioners. Advanced nursing care. Mental health

Nurses practitioners specialized in mental health (NPSMH) can diagnosing illnesses, prescribing diagnostics examinations, determining medical treatments, prescribing medications and others substances, prescribing medical treatments (OIIQ, 2021). NPSMH are trained and qualified to assess mental disorders for clients of all ages on community, specialized or ultra specialized cares. This presentation will demonstrate the added value of these advanced practice nurses in the healthcare system. Two examples of clinical cases will be presented to demonstrate the contribution of NPSMH to the population with mental disorders.

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Poster 12

[P-12-02] The Jagajaga Project: Co-production and Care for Caregivers through Mutual Support among Users, Families, and Professionals

\*Yoshiko Ohno<sup>1</sup>, \*Yuta Kitahata<sup>2</sup> (1. Graduate School of Human Sciences, The University of Osaka (Japan), 2. Kinan Mental Health Center (Japan))

Keywords: mental health、co-production、care for caregivers、professionals、dialogue

This report introduces the Jagajaga Project, launched in 2020 as a mutual support platform where users, families, and mental health professionals interact on equal terms. The project originated after the death of a psychiatrist. His passing highlighted that medical and welfare professionals are also vulnerable human beings. Traditional professional culture emphasizes individual autonomy and idealizes independence, often stigmatizing vulnerability. Professionals, particularly doctors, tend to suppress emotions and avoid seeking help, as they are expected to be self-sacrificing and ethically noble. While recent attention has been given to "caring for caregivers" and "self-care," interpreting self-care merely as self-management risks adding further pressure on professionals. The Jagajaga Project provides a unique environment where members many of whom hold multiple positions as users, family members, and professionals come together to learn, engage in dialogue, and share leisure time. Each participant adopts a subject position, becoming mindful of their emotions and expressing honest feelings. Through this process, mutual support, acknowledgment, and care are fostered in a non-hierarchical setting. This initiative challenges traditional norms by encouraging openness and shared vulnerability among all members, ultimately promoting a sustainable mental health care community.

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Poster 12

[P-12-03] Development of a CBT-Based Relapse Prevention Workbook for Depression: A Practical Tool for Mental Health Clinics in Community Settings

\*SaeSaem Han<sup>1</sup>, \*Namyoung Lee<sup>2</sup> (1. Samsan Hospital (Korea), 2. Munmak Public Health Clinic (Korea))

Keywords: CBT、depression、community mental health

## **Background:**

With a increasing population of depression patients, the demand for a useful tool to prevent relapse of depression in public community setting is high. Cognitive Behavioral Therapy (CBT) has strong evidence for relapse prevention, but implementation is often hindered by limited resources and training.<sup>1,2</sup>

# **Objective:**

This project aimed to develop a clinically useful, workbook-based CBT program optimized for outpatient use in Korean community mental health clinics. The focus was on feasibility, simplicity, and accessibility.

### Methods:

The workbook was developed through an iterative process involving literature review, clinician feedback, and field testing in a psychiatric clinic in Wonju. Key principles of CBT for depression relapse prevention were distilled into eight structured sessions, including psychoeducation, cognitive restructuring, behavioral activation, and relapse identification.

#### **Results:**

The workbook development has been completed and is currently prepared for pilot implementation in a psychiatric outpatient clinic setting. Formal evaluation of clinical feasibility, user engagement, and symptom outcomes will be conducted in the next phase.

#### **Conclusion:**

This CBT-based relapse prevention workbook represents a promising tool for expanding access to evidence-based interventions in community mental health settings. Further clinical testing will be conducted to assess its effectiveness and scalability.

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Poster 12

[P-12-04] Herbalism and Irish Folk Medicine as strategies to cope with mental health issues in Ireland: an ethnographic study by a foreigner psychiatrist

\*Ciro Blujus dos Santos Rohde<sup>1</sup>, Julia Rosarie Kingston<sup>2</sup>, Hermano Tavares<sup>1</sup> (1. Department of Psychiatry, School of Medicine of the University of São Paulo (Brazil), 2. Department of Folklore, University College Cork (Ireland))

Keywords: Irish Vernacular Medicine、Herbal Medicine、Cultural sensitivity、mental healthcare、ethnography

Mental healthcare in Ireland still faces stigma, partly due to historical traumas like colonization and the Irish Famine. As a result, some people turn to Irish Vernacular Medicine (IVM) and herbal medicine, often led by traditional healers. The IVM, known as "a cure," has survived through generations. In 2023, as a Brazilian psychiatrist, I conducted an ethnographic study in Ireland, observing three traditional healers and two medical herbalists. I interviewed 39 patients after their consultations, taking notes on their complaints, the professionals' approaches, and the patients' motivations. Patients seeking these treatments valued herbal medicine for mental health issues and sought community support. They felt the herbal remedies were effective, regardless of whether the justification was scientific or traditional. Many had previously tried conventional psychiatric care but were dissatisfied, often due to a poor rapport with their doctors. All the professionals I observed demonstrated strong ethical conduct. They would refer patients back to a doctor or suggest shared care with a psychiatrist, especially for severe conditions like psychosis. As a culturally sensitive approach, IVM and Irish herbalism should be integrated into mental health treatment plans for patients who seek community support and a blend of modern medicine and traditional knowledge. This integration could help overcome resistance to psychiatric care and restore patients' faith in the medical system. This study protocol was approved by the Ethics Committee of Hospital das Clínicas da Faculdade de Medicina da Universidade de São Paulo (CAAE: 5097805.5.0000.0065; Opinion Number: 5.097.805).

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Poster 12

[P-12-05] Sociocultural Barriers in Schizophrenia Management, is Healthcare Policy Ready to Tackle the Issue?

\*Lathifah Nudhar<sup>1</sup>, Rizma Adlia Syakurah<sup>2</sup>, \*Bintang Arroyantri Prananjaya<sup>1</sup>, Puji Rizki Suryani<sup>1</sup>, Syarifah Aini<sup>1</sup>, Diyaz Syauki Ikhsan<sup>1</sup> (1. Psychiatry Department, Faculty of Medicine, Sriwijaya University (Indonesia), 2. Faculty of Public Health, Sriwijaya University, Indonesia (Indonesia))

Keywords: Schizophrenia, Sociocultural, Mental Health Policy

Background: Mental health in Indonesia is still an area with overwhelming challenges. Based on data from the 2023 Indonesian Health Survey, the national prevalence of schizophrenia is 4 per mil and most concentrated in rural areas. Problems in handling schizophrenia include gaps in the quality of health services, socio-cultural stigma and confinement. Objectives: This study aims to identify socio-cultural challenges and mental health policy readiness in handling mental health problems in one of the rural area in Indonesia. Methods: The research was conducted using a descriptive design and qualitative methods. Data collected through in-depth interviews and observations. Data were validated through triangulation. The data were analyzed using thematic methods. Results: The research revealed the families theme as the barrier in mental health delivery, specifically the cultural beliefs about the nature of the symptoms, negative and discriminative attitude towards the patient and lack of knowledge about the illness. Mental health policy themes emerged as a barrier included lack of professional or trained human resources, inadequate budget to provide antipsychotics, and lack of concern from local government. Although the program is running based on the paper, the practice still low in quality. Discussion: This study revealed that the treatment of schizophrenia is still closely related to beliefs about supernatural beings. This has been identified as a barrier for families to seek medical options and prefer treatment from supernatural experts such as shamans and religious leaders. Education have to be prioritised to change this stigma, but the mental health policy in Indonesia considered inadequate of doing so, the problems are some of the tasks for health institutions and the government that need to be improved in order to delivered high quality mental health services.

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Poster 12

[P-12-06] Bridging the Gap: Evaluating the Role of Community-Based Psychiatric Nursing in Reducing Mental Health Stigma in Ghana

\*John Appau<sup>1</sup>, Mark Boateng<sup>1</sup> (1. Ankaful Psychiatric Hospital (Ghana))
Keywords: Community-based psychiatric nursing、Mental health stigma、Ghana、Psychiatric treatment access、Mental health policy

Mental health care in Africa, particularly in Ghana, continues to face significant challenges, including stigma, limited resources, and a shortage of mental health professionals. Despite policy advances such as the Mental Health Act of 2012, community perception and access to quality psychiatric care remain major barriers. This study explores the role of community-based psychiatric nursing in reducing mental health stigma and improving access to psychiatric treatment in Ghana, using the Pantang Psychiatric Hospital and its outreach programs as a case study. The objective of this research was to assess how decentralized mental health services, led by trained psychiatric nurses, can reshape societal attitudes, promote early intervention, and reduce treatment gaps in both urban and rural settings. A mixed-methods approach was employed, involving structured interviews with 30 psychiatric nurses, surveys with 200 community members, and focus group discussions with mental health patients and caregivers. Findings reveal that community-based psychiatric nurses play a pivotal role in normalizing conversations about mental health, encouraging treatment-seeking behavior, and dispelling myths around mental illness. However, nurses face constraints such as inadequate logistics, cultural resistance, and emotional burnout. Notably, communities exposed to regular nurse-led sensitization programs showed a 45% increase in mental health service utilization and a measurable decline in stigma indicators. The study concludes that scaling up community psychiatric nursing, with stronger institutional support and public engagement, is a viable and transformative strategy for advancing mental health care in Ghana and other low-resource African settings. It calls for urgent policy alignment, increased investment, and regional replication of successful models