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Poster 19

[P-19-01]

Differential Impacts of Workplace Bullying on Depression, Anxiety, and Stress by Gender Among Korean Employees

Sra Jung¹, *Yoosuk An², Min-Kyoung Kim¹, Sung Joon Cho^{3,4}, Sang-Won Jeon^{3,4} (1. Department of Psychiatry, CHA University Ilsan Medical Center, Goyang, Republic of Korea (Korea), 2. Department of Psychiatry, Seoul National University Hospital, Seoul, Korea (Korea), 3. Department of Psychiatry, Kangbuk Samsung Hospital, Sungkyunkwan University School of Medicine, Seoul, Republic of Korea (Korea), 4. Workplace Mental Health Institute, Kangbuk Samsung Hospital, Seoul, Republic of Korea (Korea))

[P-19-02]

Factors Affecting Quality of Life in Korean Adults: Analysis Based on the Data from the 9th Korea National Health and Nutrition Examination Survey (2023)

*Young Myo Jae¹, Eunsu Cho¹ (1. Bongseng Memorial Hospital (Korea))

[P-19-03]

The Mediating Role of Self-Efficacy in the Relationship Between Gerontechnology Acceptance and Successful Aging Among Older Adults

*SIN TUNG WAN¹ (1. The City University of Hong Kong (Hong Kong))

[P-19-04]

Irregular Meal Timing and Depression: Moderating Roles of Dietary Diversity and Breakfast Skipping in a Nationally Representative Korean Sample

*Hyejin Tae^{1,2} (1. Stress Clinic, Health Promotion Center, Seoul St. Mary's Hospital, The Catholic University of Korea, Seoul, Republic of Korea (Korea), 2. Department of Medicine, Graduate School, The Catholic University of Korea, Seoul, Republic of Korea (Korea))

[P-19-05]

Sociodemographic Determinants of Spirituality in General Population, Cancer Patients, and Clinicians in Korea: A Comparative Analysis

*Hyeyoon Park^{1,2}, Hye Jung Ahn², Sun Young Lee³ (1. Department of Psychiatry, Seoul National University College of Medicine (Korea), 2. Department of Psychiatry, Seoul National University Hospital (Korea), 3. Public Healthcare Center, Seoul National University Hospital (Korea))

[P-19-06]

Distinguishing Late-Life Depression from Dementia: A Predictive Model Based on Clinical Presentation

*Quankamon Dejatiwongse Na Ayudhya¹, Punyisa Prachgosin¹, Kritta Supanimitamorn¹, Nipaporn Supaprasert¹, Parawee Keawjamrus¹, Kankamol Jaisin¹ (1. Department of Psychiatry, Faculty of Medicine Siriraj Hospital, Mahidol University (Thailand))

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Poster 19

[P-19-01] Differential Impacts of Workplace Bullying on Depression, Anxiety, and Stress by Gender Among Korean Employees

Sra Jung¹, *Yoosuk An², Min-Kyoung Kim¹, Sung Joon Cho^{3,4}, Sang-Won Jeon^{3,4} (1. Department of Psychiatry, CHA University Ilsan Medical Center, Goyang, Republic of Korea (Korea), 2. Department of Psychiatry, Seoul National University Hospital, Seoul, Korea (Korea), 3. Department of Psychiatry, Kangbuk Samsung Hospital, Sungkyunkwan University School of Medicine, Seoul, Republic of Korea (Korea), 4. Workplace Mental Health Institute, Kangbuk Samsung Hospital, Seoul, Republic of Korea (Korea))

Keywords: workplace bullying, mental health, gender difference

Background:Workplace bullying is increasingly recognized as a serious mental health risk in South Korea. While gender differences in mental health are well established, it remains unclear how the psychological impact of bullying varies by gender. This study examined gender-specific associations between workplace bullying and levels of depression, anxiety, and occupational stress among Korean employees. **Methods:**A total of 12,361 employees (7,981 men and 4,363 women) from 18 companies and public organizations completed self-report surveys. Depression, anxiety, and occupational stress were assessed using the CES-D, CUXOS, and KOSS, respectively. Bullying experience was assessed dichotomously (yes/no). Two-way ANOVA and general linear models were used, adjusting for age, work duration, weekly hours, marital status, education, and income. **Results:** Workplace bullying was significantly associated with higher depression, anxiety, and stress scores (all p < .001). Employees exposed to bullying reported markedly elevated symptom levels compared to those unexposed. Gender-stratified analyses showed that women had higher baseline symptom scores than men, and bullying exacerbated depression and stress more severely among women. Interaction effects between gender and bullying were significant for depression (p = .010) and stress (p < .001), but not anxiety (p = .163). Additional risk factors included long working hours, low income, and lower educational attainment. **Conclusions:** Workplace bullying is a significant contributor to poor mental health among Korean workers, with more pronounced effects on depression and occupational stress in women. These findings support the need for gender-sensitive interventions and workplace policies that reduce bullying and address broader socioeconomic stressors to improve employee mental health.

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Poster 19

[P-19-02] Factors Affecting Quality of Life in Korean Adults: Analysis Based on the Data from the 9th Korea National Health and Nutrition Examination Survey (2023)

*Young Myo Jae¹, Eunsu Cho¹ (1. Bongseng Memorial Hospital (Korea))
Keywords: Quality of Life、HINT-8、Obesity、Health Survey、Korean Adults

Objectives: This study aimed to identify the factors influencing health-related quality of life (HRQoL) in Korean adults.

Methods: This study utilized data from the ninth Korea National Health and Nutrition Examination Survey (KNHANES). A total of 5,620 adults aged 19 years and older were included after excluding cases with missing data. Obesity was defined as a body mass index (BMI) of \geq 25 kg/m², and HRQoL was measured using the HINT-8 (Health-related Quality of Life Instrument with 8 Items). A complex sampling design and appropriate weights were applied. Differences in HRQoL by general characteristics and obesity were analyzed using general linear models, and multiple linear regression was conducted to identify factors associated with HRQoL.

Results: Among women, obesity was significantly associated with lower HINT-8 scores (B = -0.008, p = .032) even after adjusting for potential confounders. However, no statistically significant association was observed between obesity and HRQoL among men. Other factors including age, household income, educational level, perceived stress, and smoking status were significantly related to HRQoL in both sexes.

Conclusions: Multiple factors, including obesity, socioeconomic status, and mental health indicators, influence the quality of life among Korean adults. Notably, the negative impact of obesity on HRQoL was significant only in women, highlighting the need for sex-specific public health strategies and the utility of culturally relevant tools like HINT-8 in HRQoL assessment.

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Poster 19

[P-19-03] The Mediating Role of Self-Efficacy in the Relationship Between Gerontechnology Acceptance and Successful Aging Among Older Adults

*SIN TUNG WAN¹ (1. The City University of Hong Kong (Hong Kong))
Keywords: Gerontechnology, Self-efficacy, Successful Aging

Background:

As Hong Kong's population ages, the adoption of gerontechnology is increasingly relevant for supporting older adults' independence and well-being. While technology holds promise for promoting successful aging, the psychological factors that shape this relationship remain underexplored. This study investigates whether self-efficacy mediates the relationship between gerontechnology acceptance and successful aging, addressing a critical gap in aging and mental health research.

Method:

A cross-sectional survey was conducted with 153 older adults (aged 60 and above) recruited from a local community centre named Woopie Club. Participants were included based on adequate cognitive capacity and confirmed absence of a prior diagnosis of dementia, as assessed by the researcher. Data were collected through structured, face-to-face interviews using validated Chinese-language instruments, including the Brief Senior Technology Acceptance Scale to assess gerontechnology acceptance, the General Self-Efficacy Scale (GSE), and the Successful Aging Scale.

Results:

Gerontechnology acceptance was positively associated with successful ageing. Mediation analysis indicated that self-efficacy significantly mediated this relationship. Specifically, gerontechnology acceptance had both a direct and an indirect effect via self-efficacy on successful aging, demonstrating a partial mediation effect.

Conclusion:

Self-efficacy plays a key mediating role in the link between gerontechnology use and successful ageing. These findings highlight the importance of not only promoting technology adoption among older adults but also enhancing their confidence and competence in using such tools. Interventions that support digital self-efficacy may improve mental health and ageing outcomes. Future longitudinal and cross-cultural research is warranted to further examine causal pathways and explore additional mediators such as social support or health status.

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Poster 19

[P-19-04] Irregular Meal Timing and Depression: Moderating Roles of Dietary Diversity and Breakfast Skipping in a Nationally Representative Korean Sample

*Hyejin Tae^{1,2} (1. Stress Clinic, Health Promotion Center, Seoul St. Mary's Hospital, The Catholic University of Korea, Seoul, Republic of Korea (Korea), 2. Department of Medicine, Graduate School, The Catholic University of Korea, Seoul, Republic of Korea (Korea)) Keywords: Meal timing irregularity, Depression, Dietary diversity, Breakfast skipping, Lifestyle psychiatry

Background

Irregular meal timing has been increasingly recognized as a risk factor for mental health disturbances, but the combined influence of dietary and behavioral factors remains insufficiently understood.

Methods

Using data from 21,568 Korean adults in the 2014-2022 Korea National Health and Nutrition Examination Survey (KNHANES), we examined associations between meal irregularity and depressive symptoms measured by the PHQ-9. Multivariable logistic regression and restricted cubic spline analyses were conducted, adjusting for sociodemographic, lifestyle, and nutritional covariates. Moderation and subgroup analyses were performed to assess the influence of dietary diversity, breakfast skipping, and other lifestyle factors.

Results

Greater meal irregularity was significantly associated with increased odds of depression in both linear and spline models (p < 0.001), with no evidence of non-linearity. In stratified spline analyses by tertiles of Dietary Diversity Score (DDS), the positive association remained robust, with the steepest gradient observed in the lowest DDS group. Moderation analyses revealed that dietary diversity significantly attenuated the relationship between meal irregularity and depressive symptoms (B = -0.128, p = 0.027), whereas frequent breakfast skipping amplified it (B = 0.731, p = 0.0016). The three-way interaction among meal irregularity, DDS, and breakfast skipping was not statistically significant, indicating independent moderating roles rather than a combined effect. Subgroup analyses identified stronger associations in males, current smokers, individuals with frequent late-night eating, and those with abdominal obesity, suggesting heightened vulnerability in these behavioral and metabolic profiles.

Conclusions

This study provides novel evidence that irregular eating patterns are associated with elevated depressive symptoms and that dietary diversity and breakfast habits may

modulate this relationship. These findings underscore the need for targeted dietary interventions and public health strategies promoting regular and diverse eating patterns to support mental well-being.

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Poster 19

[P-19-05] Sociodemographic Determinants of Spirituality in General Population, Cancer Patients, and Clinicians in Korea: A Comparative Analysis

*Hyeyoon Park^{1,2}, Hye Jung Ahn², Sun Young Lee³ (1. Department of Psychiatry, Seoul National University College of Medicine (Korea), 2. Department of Psychiatry, Seoul National University Hospital (Korea), 3. Public Healthcare Center, Seoul National University Hospital (Korea))

Keywords: spirituality, religion, cancer patients, psycho-oncology

Background: Spirituality is a crucial component of holistic care in psycho-oncology. This study explored differences in spirituality levels and their sociodemographic determinants across the general population (GP), cancer patients, and clinicians in Korea, with special attention to the domain of "meaning of life."

Methods: A cross-sectional survey was conducted among 816 participants: the GP (n=500), cancer patients (n=116), and clinicians (n=200). Spirituality was assessed using a multidimensional scale with five domains rated on a 5-point Likert scale: transcendence beyond self and the present life, connectedness, meaning of life, and engagement in spiritual practices. Sociodemographic variables and religious affiliation were analyzed. Intergroup comparisons and logistic regression were performed to identify predictors of high spirituality.

Results: Overall spirituality scores did not significantly differ among groups (GP: 15.3, patients: 14.3, clinicians: 14.9; p=0.108). However, the "meaning of life" domain differed significantly (p=0.002), with cancer patients scoring the lowest (3.3), suggesting existential vulnerability. Religious affiliation strongly predicted spirituality: Christians had the highest scores (mean 19.4) compared to non-religious participants (mean 11.8; p<0.001). Logistic regression confirmed this trend (OR for Christians = 15.57, 95% CI: 10.56–22.94). Age 40–59 (OR=1.71) and female sex (OR=1.49) were also associated with higher spirituality. Among cancer patients, "meaning of life" remained notably lower, highlighting a potential area for targeted spiritual intervention.

Conclusions: Although overall spirituality levels were similar, cancer patients showed a significant decline in perceived meaning of life, underscoring the importance of addressing existential concerns. Religion, especially Christianity, emerged as the strongest predictor of high spirituality. These findings highlight the need for personalized spiritual care tailored to patients' sociodemographic and existential contexts in psycho-oncology.

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Poster 19

[P-19-06] Distinguishing Late-Life Depression from Dementia: A Predictive Model Based on Clinical Presentation

*Quankamon Dejatiwongse Na Ayudhya¹, Punyisa Prachgosin¹, Kritta Supanimitamorn¹, Nipaporn Supaprasert¹, Parawee Keawjamrus¹, Kankamol Jaisin¹ (1. Department of Psychiatry, Faculty of Medicine Siriraj Hospital, Mahidol University (Thailand))
Keywords: Late-life depression、dementia、predictive model、geriatric psychiatry

Introduction: Differentiating late-life depression from dementia remains a diagnostic challenge due to overlapping clinical features. Older adults with depression often present with cognitive impairment — commonly termed pseudodementia — while those in the early stages of dementia may exhibit depressive symptoms. This overlap may result in misdiagnosis and delays in appropriate treatment.

Objective: This study aimed to develop a predictive model based on the chief complaint at presentation and routinely available clinical data from an outpatient geriatric psychiatry setting to differentiate late-life depression from dementia in older adults.

Methods: We conducted a retrospective chart review of 141 patients aged 60 or older who presented to a geriatric psychiatry outpatient clinic. Chief complaints at initial evaluation were categorized and analyzed as predictors in a binary logistic regression model, with diagnosis of either depression or dementia as the dependent variable. Key covariates included age, sex, and cognitive screening scores. Model performance was evaluated using Nagelkerke R² and receiver operating characteristic (ROC) analysis. **Results:** Binary logistic regression analysis revealed that chief complaints involving neurovegetative symptoms — such as sleep disturbance, fatigue, and appetite change significantly predicted depression (OR = 5.70, 95 percent confidence interval 1.36 to 23.88, p = 0.017), as did depression-related symptoms — including sadness, boredom, and death wish (OR = 8.18, 95 percent confidence interval 1.73 to 38.65, p = 0.008). Cognitive complaints were strongly associated with dementia (OR = 0.06, 95 percent confidence interval 0.01 to 0.27, p < 0.001), while anxiety-related symptoms were not statistically significant in the model (OR = 2.01, 95 percent confidence interval 0.42 to 9.70, p = 0.383). The model showed robust explanatory power (Nagelkerke $R^2 = 0.652$) and excellent discriminative accuracy (AUC = 0.935).

Conclusions: These findings emphasize the diagnostic value of chief complaints in distinguishing late-life depression from dementia. Neurovegetative and depression-related symptoms indicate depression, while cognitive complaints suggest dementia. Incorporating these clinical cues into routine assessments may enhance diagnostic accuracy, especially in resource-limited settings.