

2025年9月26日(金)

Presidential Lecture

2025年9月26日(金) 14:50 ~ 15:40  Session Room 1 (Main Hall A)

[Presidential Lecture 1] Piano Theory: Re-tuning the Mind Through Neurobiological Harmony and Cultural Resonance

Moderator: Mario Braakman (Tilburg University)

[PL-1]

Piano Theory: Re-tuning the Mind Through Neurobiological Harmony and Cultural Resonance

*Itsuo Asai¹ (1. Heart Clinic Medical Corporation (Japan))

Educational Lecture

2025年9月26日(金) 15:50 ~ 16:40  Session Room 1 (Main Hall A)

[Educational Lecture 3] On the Heterogeneity of Depression: How the Japanese cultural environment has affected psychopathology

Moderator: Chee Ng (Melbourne Medical School)

[EL-3]

On the Heterogeneity of Depression:
How the Japanese cultural environment has affected psychopathology

*Shigenobu Kanba Kanba¹ (1. Kyushu University (Japan))

Educational Lecture

2025年9月26日(金) 16:50 ~ 17:40  Session Room 1 (Main Hall A)

[Educational Lecture 4] From the Culture of Symptoms to the Universals of Care: Why I Shifted from Cultural Psychiatry to Global Mental Health.

Moderator: Vincenzo Di Nicola

[EL-4]

From the Culture of Symptoms to the Universals of Care: Why I Evolved From Cultural Psychiatry to Global Mental Health and the Study of Universals of Care

*Arthur Kleinman¹ (1. Harvard University and Harvard Medical School (United States of America))

Educational Workshop

■ 2025年9月26日(金) 13:10 ~ 14:40  Session Room 1 (Main Hall A)

[Educational Workshop 1] "POLARIZATION - A SYMPTOM OF SOCIAL ILLNESS" Overcoming Polarization - Tools for Health Professionals and Educators

Moderator: Marcos de Noronha (World Association of Cultural Psychiatry), Vincenzo Di Nicola

[EW-1]

"POLARIZATION – A SYMPTOM OF SOCIAL ILLNESS"

Overcoming Polarization – Tools for Health Professionals and Educators

*Marcos de Noronha², *Vincenzo Di Nicola³, Itsuo Asai¹ (1. Heart Clinic Medical Corporation (Japan), 2. World Association of Cultural Psychiatry (Brazil), 3. University of Montreal (Canada))

Luncheon Seminar

■ 2025年9月26日(金) 12:20 ~ 13:00  Session Room 1 (Main Hall A)

Luncheon Seminar 2

[LS-02]

Multi-Dimensional Understandings and Interventions for Hikikomori: From Pharmacotherapy to Psychodynamic Psychotherapy

*Takahiro A. Kato¹ (1. Department of Psychiatry, Hokkaido University Graduate School of Medicine (Japan))

Symposium | Academia : [Symposium 23] The Future of Psychiatry and Its Journals: Insights from Editors-in-Chief

2025年9月26日(金) 9:00 ~ 10:30 Session Room 1 (Main Hall A)

[Symposium 23] The Future of Psychiatry and Its Journals: Insights from Editors-in-Chief

Moderator: Yong Chon Park (Emeritus professor at HanYang University), Itsuo Asai (Heart Clinic Medical Corporation)

[SY-23]

The Future of Psychiatry and Its Journals: Insights from Editors-in-Chief

Itsuo Asai⁵, Kimberly Yonkers¹, Chee Ng², G. Eric Jarvis³, Tadafumi Kato⁴ (1. UMass Chan Medical School (United States of America), 2. University of Melbourne (Australia), 3. McGill University (Canada), 4. Juntendo Medical School (Japan), 5. Heart Clinic Medical Corporation (Japan))

[SY-23-01]

Grow Your Academic Profile Through Publishing

*Kimberly A Yonkers¹ (1. UMass Memorial Health and UMass Chan Medical School (United States of America))

[SY-23-02]

Asia-Pacific Psychiatry: Partnerships in promoting research publication in the region

*Chee Ng¹ (1. University of Melbourne (Australia))

[SY-23-03]

Transcultural Psychiatry: A journal's past, present and future

*George Eric Jarvis¹ (1. McGill University (Canada))

[SY-23-04]

The Role of Society Journals in Academic Publishing: The Mission of Psychiatry and Clinical Neurosciences

*Tadafumi Kato¹ (1. Department of Psychiatry and Behavioral Science, Juntendo University Graduate School of Medicine (Japan))

Symposium | Nurodevelopmental disorder : [Symposium 24] "WACP Plenary Symposium" Neuro-developmental Disorder symposium

2025年9月26日(金) 9:00 ~ 10:30 Session Room 2 (Main Hall B)

[Symposium 24] "WACP Plenary Symposium" Neuro-developmental Disorder symposium

Moderator: Pietro De Rossi (Unit of Child and Adolescent Psychiatry, Ospedale Pediatrico Bambino Gesù)

[SY-24]

Neuro-developmental Disorder symposium

Itsuo Asai¹, Kenji Tsuchiya^{2,3}, Yoko Kamio⁴, John Chee Meng Wong⁵, Ahsan Nazeer⁶ (1. Heart Clinic Medical Corporation (Japan), 2. Hamamatsu University (Japan), 3. Osaka University (Japan), 4. Ochanomizu University (Japan), 5. National University of Singapore (Singapore), 6. Sidra Medecine (Indonesia))

[SY-24-01]

The earliest presentations of neurodevelopmental disorders

*Kenji J. Tsuchiya^{1,2} (1. Hamamatsu University School of Medicine, Research Center for Child Mental Development (Japan), 2. The University of Osaka, United Graduate School of Child Development (Japan))

[SY-24-02]

“Optimal outcome” for individuals with neurodevelopmental disorders reconsidered

*Yoko Kamio¹ (1. Ochanomizu University (Japan))

[SY-24-03]

Academic and social emotional challenges associated with adolescents with neurodevelopmental disorders in a national high school curriculum

*John Chee Meng Wong^{1,2} (1. National University of Singapore, Mind Science Centre (Singapore), 2. National University Hospital, Department of Psychological Medicine (Singapore))

[SY-24-04]

Autism Spectrum Disorder-A Concept in Evolution

*Ahsan Nazeer¹ (1. Weill Cornell, NY, USA/ Sidra Medicine, Qatar (Qatar))

Symposium | CFI : [Symposium 25] Cultural Dimensions of Mental Health and Support Method: Refugees, Migrants and Psychotherapy

■ 2025年9月26日(金) 9:00 ~ 10:30 会場 Session Room 3 (Large Hall A)

[Symposium 25] Cultural Dimensions of Mental Health and Support Method: Refugees, Migrants and Psychotherapy

Moderator: Meryam Schouler-Ocak (Charité University), Farooq Naeem (University of Toronto)

[SY-25]

Cultural Dimensions of Mental Health and Support Method: Refugees, Migrants and Psychotherapy

Meryam Schouler-Ocak¹, Constantine D. Della², Farooq Naeem³, Alma Jimenez⁴, Yuto Kano⁵ (1. Charité University (Germany), 2. University of the Philippines (Philippines), 3. University of Toronto (Canada), 4. World Federation for Psychotherapy (Philippines), 5. Keio University (Japan))

[SY-25-01]

Overview of data and facts as well as understanding and explanation of mental health of migrants and refugees

*Meryam Schouler-Ocak¹ (1. Psychiatric University Clinic of Charité at St. Hedwig Hospital (Germany))

[SY-25-02]

Cultural Dimensions of Mental Health and Support Method: Refugees, Migrants and Psychotherapy

*Constantine David Della¹ (1. University of the Philippines Manila (Philippines))

Symposium | Forensic Psychiatry : [Symposium 26] Balancing Legal Obligations and Medical Ethics: Implementing Rights-Based Mental Health Care under the CRPD

2025年9月26日(金) 9:00 ~ 10:30 Session Room 4 (Large Hall B)

[Symposium 26] Balancing Legal Obligations and Medical Ethics: Implementing Rights-Based Mental Health Care under the CRPD

Moderator: Samuel F. Law (University of Toronto), Shinsuke Kondo (University of Tokyo)

[SY-26]

Balancing Legal Obligations and Medical Ethics: Implementing Rights-Based Mental Health Care under the CRPD

Samuel Law¹, Chonnakarn Jatchavala², Shinsuke Kondo³, Shaohua Lu⁴ (1. University of Toronto (Canada), 2. Prince of Songkla University (Thailand), 3. University of Tokyo (Japan), 4. University of British Columbia (Canada))

[SY-26-01]

Service users' perspectives on supported decision making in psychiatric settings – A scoping review

*Samuel F. Law¹, Waverly Chan², Deandra Osayande¹ (1. University of Toronto (Canada), 2. McMaster University (Canada))

[SY-26-02]

Comparative Analysis of the Thai Mental Healthcare Act and WHO Mental Health Legislation Standards based on the UNCRPD

*Chonnakarn Jatchavala¹, Nutt Sukavejworakit² (1. Department of Psychiatry, Faculty of Medicine, Prince of Songkla University, Songkhla, Thailand (Thailand), 2. School of Law, University of Phayao (Thailand))

[SY-26-03]

Cross-national comparison of involuntary hospitalization: Ideas for reforming Japan's mental health system

*Shinsuke Kondo¹ (1. University of Tokyo (Japan))

[SY-26-04]

Forensic Implications of the Convention on the Rights of Persons with Disabilities - a Canadian Perspective

*Shaohua Lu¹ (1. University of British Columbia (Canada))

Symposium | Schizophrenia : [Symposium 27] Case Conference: Approaches to Treatment-Resistant Schizophrenia in Patients Who Have Committed Criminal Acts

2025年9月26日(金) 9:00 ~ 10:30 Session Room 5 (Conference Room A)

[Symposium 27] Case Conference: Approaches to Treatment-Resistant Schizophrenia in Patients Who Have Committed Criminal Acts

Moderator: Chommakorn Thanetnit (Department of Psychiatry, Thammasat University Hospital)

[SY-27]

Case Conference: Approaches to Treatment-Resistant Schizophrenia in Patients Who Have Committed Serious Criminal Acts

Kenichi Kimura^{1,2,3}, Chommakorn Thanetnit⁴, Wonseok Lee⁶, Emily Ohki^{3,5} (1. Forensic Psychiatry Center, Hokkaido University Hospital (Japan), 2. Hokkaido Prefectural Koyogaoka Hospital (Japan), 3. Japan Young Psychiatrists Organization (Japan), 4. Department of Psychiatry, Thammasat University Hospital (Thailand), 5. Tokyo Metropolitan Matsuzawa Hospital (Japan), 6. Department of Psychiatry, Jeju National University Hospital (Korea))

[SY-27-01]

Case Conference: Approaches to Treatment-Resistant Schizophrenia in Patients Who Have Committed Serious Criminal Acts

*Kenichi Kimura^{1,2,3}, Chommakorn Thanetnit⁴, Emily Ohki^{5,3}, Wonseok Lee⁶ (1. Forensic Psychiatry Center, Hokkaido University Hospital (Japan), 2. Hokkaido Prefectural Koyogaoka Hospital (Japan), 3. Japan Young Psychiatrists Organization (Japan), 4. Department of Psychiatry, Thammasat University Hospital (Thailand), 5. Tokyo Metropolitan Matsuzawa Hospital (Japan), 6. Department of Psychiatry, Jeju National University Hospital (Korea))

[SY-27-02]

Case Conference: Approaches to Treatment-Resistant Schizophrenia in Patients Who Have Committed Criminal Acts

*Chommakorn Thanetnit¹ (1. Srithanya Hospital, Department of Mental Health, Ministry of Public Health, Nonthaburi (Thailand))

[SY-27-03]

Case Conference: Approaches to Treatment-Resistant Schizophrenia in Patients Who Have Committed Criminal Acts

*Emily Ohki¹ (1. Tokyo Metropolitan Matsuzawa Hospital (Japan))

Symposium | Schizophrenia : [Symposium 28] Neurophysiological studies from a perspective of predictive coding in psychiatry

2025年9月26日(金) 9:00 ~ 10:30 Session Room 6 (Conference Room B)

[Symposium 28] Neurophysiological studies from a perspective of predictive coding in psychiatry

Moderator: Kenji Kiriha (Center for Coproduction of Inclusion, Diversity and Equity, The University of Tokyo)

[SY-28]

Neurophysiological studies from a perspective of predictive coding in psychiatry

Kenji Kiriha¹, Minah Kim², Daisuke Koshiyama³, Zenas C. Chao⁴, Takanori Uka⁵ (1. Center for Coproduction of Inclusion, Diversity and Equity, The University of Tokyo (Japan), 2. Department of Neuropsychiatry, Seoul National University Hospital (Korea), 3. Department of Neuropsychiatry, Graduate School of Medicine, The University of Tokyo (Japan), 4. International Research Center for Neurointelligence (WPI-IRCN), UTIAS, The University of Tokyo (Japan), 5. Department of Integrative Physiology, Graduate School of Medicine, University of Yamanashi (Japan))

[SY-28-01]

Revealing predictive coding impairments in schizophrenia through mismatch negativity: from neurophysiology to clinical implications

*Minah Kim¹ (1. Seoul National University College of Medicine (Korea))

[SY-28-02]

Predictive coding studies using mismatch negativity in schizophrenia

*Daisuke Koshiyama¹, Reiji Shioda¹, Taiki Kishigami¹, Kenji Kiriha¹, Kiyoto Kasai¹ (1. The University of Tokyo (Japan))

[SY-28-03]

Hierarchical Predictive Coding in Autism Spectrum Disorder

*Zenas C Chao¹ (1. The University of Tokyo (Japan))

[SY-28-04]

Propagation of prediction signals in the front-temporal network during tone omission

*Takanori Uka¹ (1. Department of Integrative Physiology, Graduate School of Medicine, University of Yamanashi (Japan))

Symposium | AI&IT : [Symposium 29] Trends in mental health in Japan from the perspective of social changes

2025年9月26日(金) 9:00 ~ 10:30 Session Room 7 (Conference Room C)

[Symposium 29] Trends in mental health in Japan from the perspective of social changes

Moderator: Masato Masuda (Department of Psychiatry, Faculty of Medicine, Fukuoka University), Rika Tanaka (Studio Rika Clinic)

[SY-29]

Trends in mental health in Japan from the perspective of social changes

Yuichiro Tokunaga¹, Shunya Kurokawa², Hiroe Ohnita³, Mayumi Shimamatsu¹, Enka Tomono⁴ (1. Shiranui Hospital (Japan), 2. Project assistant doctor, Department of Neuropsychiatry, Keio University School of Medicine (Japan), 3. Kyushu Branch, Japan EAP Systems (Japan), 4. Kyushu Women's University Graduate School, Professor (Japan))

[SY-29-01]

Telepsychiatry and Occupational Mental Health in Japan: Opportunities and Challenges

*Shunya Kurokawa¹ (1. Department of Neuropsychiatry, Keio University School of Medicine (Japan))

[SY-29-02]

Characteristics of Mental Health Support by Japanese EAP

*Hiroe Onita¹ (1. Satoko Nakama Japan EAP systems (Japan))

[SY-29-03]

Mindfulness and Stress Care Unit of Shiranui Hospital : From History to the Future

*Mayumi Shimamatsu¹ (1. Shiranui Hospital (Japan))

[SY-29-04]

Clinical Education and Mental Health—Problematic Internet Use, school absenteeism, and developmental disabilities in children

*EN KA TOMONO¹ (1. Kyushu Women's University Graduate School (Japan))

Symposium | Suicide prevention : [Symposium 30] Culturally grounded suicide prevention measures**■ 2025年9月26日(金) 10:40 ~ 12:10  Session Room 1 (Main Hall A)****[Symposium 30] Culturally grounded suicide prevention measures**

Moderator: Yoshinori Cho (National Center of Neurology and Psychiatry)

[SY-30]**Culturally grounded suicide prevention measures**

Laurence Kirmayer¹, Kang-Seob Oh², Hirofumi Oyama³, Harry Minas⁴ (1. McGill University (Canada), 2. Sung Kkyun Kwan University (Korea), 3. Aomori University of Health and Welfare (Japan), 4. The University of Melbourne (Australia))

[SY-30-01]**Culturally Grounded Mental Health Promotion and Suicide Prevention: Lessons from Work with Indigenous Youth**

*Laurence J Kirmayer¹ (1. McGill University (Canada))

[SY-30-02]**Late-life suicide and suicide prevention strategies in South Korea**

*KANG SEOB OH¹ (1. SUNGKYUNKWAN UNIVERSITY SCHOOL OF MEDICINE (Korea))

[SY-30-03]**Multilayered Approaches to Suicide Prevention Among Older Adults in Community Settings in Asia**

*Hirofumi Oyama¹, Tomoe Sakashita¹ (1. Aomori University of Health and Welfare (Japan))

[SY-30-04]**Developing a suicide prevention strategy for the Vietnamese community in Victoria, Australia**

*Harry Minas¹ (1. University of Melbourne (Australia))

Symposium | Community care : [Symposium 31] A Comparison and integration of clinical perspectives from psychiatric multidisciplinary outreach in Canada and Japan

2025年9月26日(金) 10:40 ~ 12:10 Session Room 2 (Main Hall B)

[Symposium 31] A Comparison and integration of clinical perspectives from psychiatric multidisciplinary outreach in Canada and Japan

Moderator: Lisa Andermann (Department of Psychiatry, University of Toronto), Fumie Hisanaga (National Institute of Mental Health, National Center of Neurology and Psychiatry)

Discussant: Miyuki Shiida (Social Welfare Corporation Machi ni Kurasukai (Community Living Association) "Team KUINA")

[SY-31]

A Comparison and integration of clinical perspectives from psychiatric multidisciplinary outreach in Canada and Japan

Masaaki Nishio¹, Lisa Andermann², Azaad Kassam³, Kenichiro Taniguchi⁴, Miyuki Shiida⁵, Maria A.Y. Choi⁶ (1. Tohoku Fukushi University Sendan Hospital (Japan), 2. University of Toronto (Canada), 3. University of Ottawa (Canada), 4. Saga Ebisu Mental Clinic (Japan), 5. Social Welfare Corporation Machi ni Kurasukai (Community Living Association) "Team KUINA" (Japan), 6. Court Support Program & Seniors Wellness Centre (Canada))

[SY-31-01]

A Culturally Responsive Psychosocial Approach to Enhancing Quality of Life in Ethnocultural Communities: Experience from the Mount Sinai Hospital Assertive Community Treatment Team

*Lisa Andermann¹, *Maria A.Y. Choi² (1. University of Toronto (Canada), 2. Court Support Program & Seniors Wellness Centre (Canada))

[SY-31-02]

Assertive Community Treatment in Ottawa, Canada

*Azaad Kassam¹ (1. University of Ottawa (Canada))

[SY-31-03]

Co-Producing Community Mental Health with SAGA-ACT, People with Lived Experience, and Their Families

*Kenichiro taniguchi¹ (1. Saga Ebisu Mental Clinic (Japan))

[SY-31-04]

The integration of various family support services in ACT

*Masaaki Nishio¹ (1. Tohoku Fukushi University Sendan Hospital (Japan))

Symposium | AI&IT : [Symposium 32] Current Topics of Asian Psychiatry: Asian Federation of Psychiatric Associations(AFPA)

■ 2025年9月26日(金) 10:40 ~ 12:10  Session Room 3 (Large Hall A)

[Symposium 32] Current Topics of Asian Psychiatry: Asian Federation of Psychiatric Associations(AFPA)

Moderator: Takahiro A. Kato (Department of Psychiatry, Hokkaido University Graduate School of Medicine), Gundugurti Prasad Rao (Asha Schizophrenia Clinic)

[SY-32]

Current Topics of Asian Psychiatry: Asian Federation of Psychiatric Associations(AFPA)

Takahiro A. Kato¹, Naotaka Shinfuku², Andi Tanra³, Gundugurti Prasad Rao⁴, Afzal Javed⁵, Norman Sartorius⁶ (1. Hokkaido University (Japan), 2. Kobe University School of Medicine (Japan), 3. Asian Federation of Asian Psychiatric Association (Indonesia), 4. Asha Schizophrenia Clinic (India), 5. Pakistan Psychiatric Research Centre (Pakistan), 6. Association for the Improvement of Mental Health Programmes (Switzerland))

[SY-32-01]

Origin and the early history of AFPA

*Naotaka Shinfuku¹ (1. Kobe University School of Medicine (Japan))

Symposium | Immigrant, Refugee : [Symposium 33] Mental Health Support for Latin American Migrants.

■ 2025年9月26日(金) 10:40 ~ 12:10  Session Room 4 (Large Hall B)

[Symposium 33] Mental Health Support for Latin American Migrants.

Moderator: Yu Abe (Yotsuya Yui Clinic), Masaharu Uemoto (Kobe City College Nursing)

[SY-33]

Mental Health Support for Latin American Migrants

Sergio Villasenor¹, Jose Lopez Rodas², Nancy Liscano³, Yu Abe⁴ (1. Guadalajara University (Mexico), 2. Cayetano Heredia Peruvian University (Peru), 3. Viktor Franklin Institute (UK), 4. Yotsuya Yui Clinic (Japan))

[SY-33-01]

The Wall : Latin American migrations.

*Sergio Javier Villaseñor-Bayardo¹ (1. Universidad de Guadalajara. México (Mexico))

[SY-33-02]

Migration and Megaprojects: Emerging Challenges for Mental Health in Peru

*Jose Lopez Rodas^{1,2} (1. Cayetano Heredia Peruvian University (Peru), 2. Atenea International Network (Peru))

[SY-33-03]

Family Reunification, Mental Health and Ulysses Syndrome in Latin American families in London

*Nancy Liscano Parra¹ (1. University of Barcelona (Spain))

[SY-33-04]

Mental Health Support for Latin American Migrants.

*Yu Abe¹ (1. Yotsuya Yui Clinic (Japan))

Symposium | Art : [Symposium 34] Reclaiming the Healing Power of Art: Narratives, Identities, and Resilience in Global Psychiatry

2025年9月26日(金) 10:40 ~ 12:10 Session Room 5 (Conference Room A)

[Symposium 34] Reclaiming the Healing Power of Art: Narratives, Identities, and Resilience in Global Psychiatry

Moderator: Itsuo Asai (Heart Clinic Medical Corporation)

[SY-34]

Experience-Based Medicine and the Healing Power of Art: Narratives and Resilience in Global Psychiatry

Itsuo Asai¹, Ayaka Shima, Yayoi Imamura², Alberto Velasco³, Jaswant Guzder^{4,5} (1. Heart Clinic Medical Corporation (Japan), 2. Kyorin University School of Medicine, (Japan), 3. Sainte-Anne Hospital Center, GHU Paris Psychiatrie & Neurosciences (France), 4. University of British Columbia (Canada), 5. MacGill University (Canada))

[SY-34-01]

The In-between Language - Exploring Second Language Acquisition through Arts Therapeutic Processes -

*Ayaka Shima¹ (1. MuzureHippo councelling room (Japan))

[SY-34-02]

Manga and Clinical Psychiatry in Japan

*Yayoi Imamura¹ (1. Kyorin University (Japan))

[SY-34-03]

Experience-Based Medicine: A Bridge Between Scientific Knowledge and Lived Experience.

*Alberto Velasco¹ (1. GHU Paris, psychiatrie et neurosciences (France))

[SY-34-04]

Contributions of the Jamaican Psychiatrist Dr Frederick Hickling to clinical creative arts innovation in teaching, therapeutics, resilience promotion and deinstitutionalization

*Jaswant Guzder¹ (1. McGill University (Canada))

Symposium | Addiction : [Symposium 35] Behavioral addiction with a focus on internet and social media news-finding across cultures

2025年9月26日(金) 10:40 ~ 12:10  Session Room 6 (Conference Room B)

[Symposium 35] Behavioral addiction with a focus on internet and social media news- finding across cultures

Moderator: Susumu Higuchi (National Hospital Organization Kurihama Medical and Addiction Center), Hidehiko Takahashi (Department of Psychiatry and Behavioral Sciences, Graduate School of Medical and Dental Sciences Tokyo Medical and Dental University)

[SY-35]

Behavioral addiction with a focus on internet and social media news- finding across cultures

Hidehiko Takahashi¹, Aaron Mross², Nanase Kobayashi³, Katja Koelkebeck⁴, Hironobu Fujiwara⁵, Nanase Kobayashi⁶ (1. Department of Psychiatry and Behavioral Sciences, Graduate School of Medical and Dental Sciences Tokyo Medical and Dental University (Japan), 2. M.Sc., LVR-University-Hospital Essen, Medical Faculty, Department of Psychiatry and Psychotherapy Essen, Essen, (Germany), 3. M.D., Ph.D., Joint Research Department of Cyberpsychiatry, Graduate School of Medical and Dental Sciences, Institute of Science Tokyo (from October 2024 Institute of Science Tokyo) (Japan), 4. M.D., LVR-University-Hospital Essen, Medical Faculty, Department of Psychiatry and Psychotherapy Essen, Essen, (Germany), 5. M.D. Ph. D., Department of Psychiatry, Graduate School of Medicine, Kyoto University (Japan), 6. Institute of Science Tokyo (Japan))

[SY-35-01]

Internet Use Issues Among Japanese Youth: The Potential for Online Countermeasures

*Nanase Kobayashi¹ (1. Institute of science Tokyo (Japan))

Symposium | Treatment of Dissociative Disorders and Family Systems : [Symposium 36] Exploring clinical cases on dissociative spectrum disorders: a transcultural psychiatry perspective on family system and implications on cultural background

2025年9月26日(金) 10:40 ~ 12:10 Session Room 7 (Conference Room C)

[Symposium 36] Exploring clinical cases on dissociative spectrum disorders: a transcultural psychiatry perspective on family system and implications on cultural background

Moderator: Camilla Callegari (Department of Medicine and Surgery, Division of Psychiatry, University of Insubria, Varese, Italy)

[SY-36-01]

Exploring clinical cases on dissociative spectrum disorders: a transcultural psychiatry perspective on family system and implications on cultural background

*Michele Mattia¹, *Ivano Caselli², *Camilla Callegari², *Barbetta Pietro³ (1. CMTF Centro Milanese di Terapia della Famiglia, Università degli Studi dell'Insubria (Switzerland), 2. Department of Medicine and Surgery, Division of Psychiatry, University of Insubria, Varese, Italy (Italy), 3. 4 Director of ISST – International School of Systemic Therapy; Professor of Psy-chodynamic Theories Bergamo University (Italy))

[SY-36-02]

Hidden dissociation in an affluent migration context: a clinical case discussion

*Michele Mattia¹ (1. Milanese Family Therapy Centre (CMTF), Swiss Office, Lugano)

[SY-36-03]

The black women: a clinical case of a young patient of Latin American descent presenting psychotic

*Ivano Caselli¹, *Michele Mattia³, *Camilla Callegari¹, *Pietro Barbetta² (1. University of Insubria (Italy), 2. University of Bergamo (Italy), 3. Milanese Family Therapy Centre (CMTF), Swiss Office (Switzerland))

[SY-36-04]

Transcultural perspectives on behavioral disturbances and dissociative manifestations in a sub-Saharan woman: the impact of migration

*CAMILLA MARIA TERESA CALLEGARI¹, *Michele Mattia³, *Ivano Caselli¹, *Pietro Barbetta² (1. University of Insubria (Italy), 2. University of Bergamo (Italy), 3. Milanese Family Therapy Centre (CMTF), Swiss Office (Switzerland))

Symposium | CFI : [Symposium 37] Cultural Formulation Interview Symposium 1**■ 2025年9月26日(金) 13:10 ~ 14:40**  Session Room 2 (Main Hall B)**[Symposium 37] Cultural Formulation Interview Symposium 1**

Moderator: G. Eric Jarvis (McGill University)

[SY-37]**Cultural Formulation Interview Symposium 1**

Lukas Claus⁴, Laurence J. Kirmayer³, Roberto Lewis-Fernández^{1,2}, Hans Rohlof⁵ (1. Columbia University (United States of America), 2. New York State Psychiatric Institute (United States of America), 3. McGill University (Canada), 4. University of Antwerp (Belgium), 5. Private Practice Rohlof (Netherlands))

[SY-37-01]**A sampling of recent and ongoing research on the Cultural Formulation Interview**

*Roberto Lewis-Fernandez¹ (1. Columbia/NYS Psychiatric Institute (United States of America))

[SY-37-02]**Cultural Formulation Interview: history and present**

*Hans Rohlof¹ (1. Private Practice Rohlof (Netherlands))

[SY-37-03]**Use of the CFI with asylum seekers: learnings from their experience**

*Lukas Claus^{2,1}, Seline van den Ameele^{2,3}, Bernard Sabbe² (1. Vrije Universiteit Brussel (Brussels, Belgium) (Belgium), 2. CAPRI (Collaborative Antwerp Psychiatric Research Institute), Universiteit Antwerpen (Antwerp, Belgium) (Belgium), 3. Department of Psychiatry and Medical Psychology, Brugmann University Hospital, Brussels, Belgium (Belgium))

[SY-37-04]**Integrating Social Determinants of Health in Cultural Formulation**

*Laurence J Kirmayer¹ (1. McGill University (Canada))

Symposium | CFI : [Symposium 38] Cultural Competence - essential skills for mental professionals

■ 2025年9月26日(金) 13:10 ~ 14:40  Session Room 3 (Large Hall A)

[Symposium 38] Cultural Competence - essential skills for mental professionals

Moderator: Itsuo Asai (Heart Clinic Medical Corporation)

[SY-38]

Cultural Competence – essential skills for mental professionals

Itsuo Asai¹, Kenneth Fung², Jaswant Guzder³, Byamah Brian Mutamba⁴, Shuichi Katsuragawa⁵ (1. Heart Clinic Medical Corporation (Japan), 2. University of Toronto (United States of America), 3. MacGill University (Australia), 4. Butabika Hospital (Uganda), 5. Toho University School of Medicine (Japan))

[SY-38-01]

Promoting Mental Health Equity through Cultural Competence

*Kenneth Po-Lun Fung¹ (1. University of Toronto (Canada))

[SY-38-02]

Use of Interpreters in Culturally Competent Care : a therapeutic predicament

*Jaswant Guzder^{1,2} (1. University of British Columbia (Canada), 2. McGill University (Canada))

[SY-38-03]

Developing culturally appropriate messages for mental health promotion; the role of alternate care providers'

*Byamah Brian Mutamba^{1,2} (1. Butabika National Mental Hospital (Uganda), 2. YouBelong Uganda (Uganda))

[SY-38-04]

Cultural competence: the changing social perceptions from stigmatization to understanding of mental health issues in Japan in recent years

*Shuichi Katsuragawa¹ (1. Department of Psychiatry, Toho University Sakura Medical Center (Japan))

Symposium | Forensic Psychiatry : [Symposium 39] Beyond Barriers: The Current State and Future Challenges of Mental Health Stigma Across Countries

2025年9月26日(金) 13:10 ~ 14:40 Session Room 4 (Large Hall B)

[Symposium 39] Beyond Barriers: The Current State and Future Challenges of Mental Health Stigma Across Countries

Moderator: Muhammad Hanif Abd Latif (Psychiatry Department, Faculty of Medicine, Universiti Kebangsaan Malaysia), Ryo Mizui (Miyagawa Medical Juvenile Training School)

[SY-39]

Beyond Barriers: The Current State and Future Challenges of Mental Health Stigma Across Countries

Tsuyoshi Ono^{7,2}, Junko Kitaoka^{1,2}, Marie Kitano³, Nur Iwana Abdul Taib⁵, Muhammad Hanif Abd Latif⁴, Ryo Mizui^{6,2} (1. Tarumi Hospital (Japan), 2. Japan Young Psychiatrists Organization (Japan), 3. Department of Psychiatry, Monash Health (Australia), 4. Psychiatry Department, Faculty of Medicine, Universiti Kebangsaan Malaysia (Malaysia), 5. Department of Psychological Medicine, Faculty of Medicine and Health Sciences, Universiti Malaysia Sarawak (Malaysia), 6. Miyagawa Medical Juvenile Training School (Japan), 7. Medical Juveniles Correction and Education Center in East Japan (Japan))

[SY-39-01]

Supporting the Reintegration of Juvenile Offenders with Psychiatric Disorders: Overcoming Double Stigma and Systemic Barriers

*Tsuyoshi Ono^{1,8}, *Nur Abdul Taib Iwana², *Marie Kitano^{3,4}, *Junko Kitaoka^{5,8}, Ryo Mizui⁶, Hanif Latif⁷ (1. Medical Juveniles Correction and Education Center in East Japan (Japan), 2. Department of Psychological Medicine, Faculty of Medicine and Health Sciences, Universiti Malaysia Sarawak, Malaysia (Malaysia), 3. Department of Psychiatry, Monash Health (Australia), 4. The University of Melbourne, Australia (Australia), 5. Tarumi Hospital (Japan), 6. Miyagawa Medical Juvenile Training School (Japan), 7. Department of Psychiatry, Faculty of Medicine, Universiti Kebangsaan Malaysia (Malaysia), 8. Japan Young Psychiatrists Association (Japan))

[SY-39-02]

Stigma in Mental Health Care in Japan

*Junko Kitaoka^{1,8}, Marie Kitano^{2,3}, Muhammad Hanif Abd Latif⁴, Nur Iwana Abdul Taib⁵, Ryo Mizui^{6,8}, Tsuyoshi Ono^{7,8} (1. Tarumi Hospital (Japan), 2. Department of Psychiatry, Monash Health (Australia), 3. The University of Melbourne (Australia), 4. Psychiatry Department, Faculty of Medicine, Universiti Kebangsaan Malaysia (Malaysia), 5. Department of Psychological Medicine, Faculty of Medicine and Health Sciences, Universiti Malaysia Sarawak (Malaysia), 6. Miyagawa Medical Juvenile Training School (Japan), 7. Medical Juveniles Correction and Education Center in East Japan (Japan), 8. Japan Young Psychiatrists Organization (Japan))

[SY-39-03]

Mental Health Stigma in Australia: Clinical and Cultural Reflections

*Marie Kitano^{1,2}, Muhammad Hanif Abd Latif³, Nur Iwana Abdul Taib⁴, Junko Kitaoka^{5,8}, Ryo Mizui^{6,8}, Tsuyoshi Ono^{7,8} (1. Monash Health (Australia), 2. The University of Melbourne (Australia), 3. Psychiatry Department, Faculty of Medicine, Universiti Kebangsaan Malaysia (Malaysia), 4. Department of Psychological Medicine, Faculty of Medicine and Health Sciences, Universiti Malaysia Sarawak (Malaysia), 5. Tarumi Hospital (Japan), 6. Miyagawa Medical Juvenile Training School (Japan), 7. Medical Juveniles Correction and Education Center in East Japan (Japan), 8. Japan Young Psychiatrists Organization (Japan))

[SY-39-04]

Behind the White Coat: A Cross-Sectional Study on Mental Health Stigma Among Doctors in Malaysia

*NUR IWANA ABDUL TAIB¹ (1. NIAT Department of Psychological Medicine, Faculty of Medicine and Health Sciences, Universiti Malaysia Sarawak (UNIMAS) (Malaysia))

Symposium | Local minority : [Symposium 40] Strategies for Ethnocultural Research in Siberia and the Far East

2025年9月26日(金) 13:10 ~ 14:40 Session Room 5 (Conference Room A)

[Symposium 40] Strategies for Ethnocultural Research in Siberia and the Far East

Moderator: Nikolay Bokhan (Mental Health Research Institute of Tomsk NRMC, Tomsk, Russia), Irina Kupriyanova (Mental Health Research Institute of Tomsk NRMC, Tomsk, Russia)

[SY-40]

Strategies for Ethnocultural Research in Siberia and the Far East

Nikolay Alexandrovich Bokhan¹, Irina Evgenievna Kupriyanova¹, Valentina Fedorovna Lebedeva¹, Anatoly Vasilievich Sakharov³, Natalia Igorevna Kisel¹, Anna Isaevna Mandel¹, Ulyana K. Biche-Ool², Sagat Abylkairovich Altynbekov⁴, Alexander Vladimirovich Didenko⁵ (1. Mental Health Research Institute of Tomsk NRMC (Russia), 2. Republican Addictological Dispensary (Kyzyl, Republic of Tyva (Russia), 3. National Research Center of Narcology - Branch of V.P. Serbsky National Medical Research Center of Psychiatry and Narcology (Russia), 4. S.D. Asfendiyarov Kazakh National Medical University (Kazakhstan), 5. Siberian State Medical University (Russia))

[SY-40-01]

The problem of female alcoholism in ethnic populations of Siberia

*Nikolay Alexandrovich Bokhan^{1,2}, Natalia I. Kisel¹, Anna I. Mandel¹, U. K. Biche-Ool³, Alexander V. Didenko^{1,2} (1. Mental Health Research Institute of Tomsk NRMC (Russia), 2. Siberian State Medical University (Russia), 3. Republican Addictological Dispensary (Russia))

[SY-40-02]

MENTAL HEALTH OF INDIGENOUS PEOPLES OF SIBERIA AND THE FAR EAST: NEW CHALLENGES

*Irina E. Kupriyanova¹ (1. Mental Health Research Institute (Russia))

[SY-40-03]

Clinical and socio-psychological aspects of nonpsychotic mental disorders in Russia and Kazakhstan

*Valentina F. Lebedeva¹, Nikolay A. Bokhan^{1,2}, Sagat A. Altynbekov³ (1. Mental Health Research Institute (Russia), 2. Siberian State University (Russia), 3. Kazakh National Medical University (Kazakhstan))

[SY-40-04]

Influence of ethnocultural factors on clinical and neuropsychological characteristics of intellectual disorders in children of the Trans-Baikal region

*Anatoly Vasilievich Sakharov¹, Yliya Lazo² (1. Serbsky National Medical Research Centre for Psychiatry and Narcology (Russia), 2. Chita State Medical Academy (Russia))

Symposium | Global Mental Health : [Symposium 41] Reimagining Healing: Traditional Wisdom and Cultural Integration in Global Psychology & Psychiatry

2025年9月26日(金) 13:10 ~ 14:40 Session Room 6 (Conference Room B)

[Symposium 41] Reimagining Healing: Traditional Wisdom and Cultural Integration in Global Psychology & Psychiatry

Moderator: Mami Yanai (Integrative Mental Health Centre of Toronto / LOGOEARTH), Hung-Tat (Ted) Lo (University of Toronto, Integrative Mental Health Centre of Toronto)

[SY-41]

Reimagining Healing: Traditional Wisdom and Cultural Integration in Global Psychology & Psychiatry

Hung-Tat (Ted) Lo^{1,3,7}, Mami Yanai^{1,2,5,6}, Roy Moodley³, Meetu Khosla⁴ (1. Integrative Mental Health Centre of Toronto (Canada), 2. LOGOEARTH (Japan), 3. University of Toronto (Canada), 4. University of Delhi (India), 5. Inochi no ie (Japan), 6. International Journal of Traditional Healing & Critical Mental Health (IJTHCMH), Christ University (India), 7. Hong Fook Mental Health Association (Canada))

[SY-41-01]

Bridging Worlds of Healing: Seven Modes of Integrating Traditional Medicine and Modern Psychiatry

*Hung-Tat (Ted) Lo^{1,2,3} (1. University of Toronto (Canada), 2. Integrative Mental Health Centre of Toronto (Canada), 3. Hong Fook Mental Health Association (Canada))

[SY-41-02]

“Delicious Moments Therapy and the Art of Flourishing: Aesthetic Healing in Japanese Tradition”

*Mami Yanai^{1,2,3,4} (1. Integrative Mental Health Centre of Toronto (Canada), 2. LOGOEARTH (Japan), 3. Inochi no ie (Japan), 4. International Journal of Traditional Healing & Critical Mental Health (IJTHCMH), Christ University (India))

[SY-41-03]

Critical Psychology and Psychiatry and the Integration of Cultural Healing Practices: *Toward a Pluralistic Framework for Mental Health*

*Roy Moodley¹ (1. University of Toronto (Canada))

[SY-41-04]

Contribution of Traditional Indian Healing systems to Modern world Psychiatry

*Meetu Khosla¹ (1. Delhi University, Daulat Ram College (India))

Symposium | Suicide prevention : [Symposium 42] Suicide prevention-2

2025年9月26日(金) 13:10 ~ 14:40 Session Room 7 (Conference Room C)

[Symposium 42] Suicide prevention-2

Moderator: Yoshinori Cho (National Center of Neurology and Psychiatry), Shih-Cheng Liao (Department of Psychiatry, College of Medicine, National Taiwan University)

[SY-42-01]

Comprehensive Suicide Prevention Strategies in Japan

*Kouta Suzuki¹ (1. Department of Neuropsychiatry, Keio University School of Medicine (Japan))

[SY-42-02]

Youth and Young Adult suicide prevention policy in South Korea

*Jong Woo Paik¹ (1. Kyung Hee university (Korea))

[SY-42-03]

Risk and Resilience in Youth Suicide Prevention: Insights from Inuit Communities in Nunavik, Canada.

*Lucie Nadeau¹ (1. McGill University (Canada))

Symposium | MDD : [Symposium 43] Time for united action on depression

2025年9月26日(金) 14:50 ~ 16:20 Session Room 2 (Main Hall B)

[Symposium 43] Time for united action on depression

Moderator: Mian Yoon Chong (HMI Medical, Singapore & Regency Specialist Hospital)

[SY-43]

Time for united action on depression

Helen Herrman¹, Toshiaki Furukawa, Daisuke Nishi, Vittorio De Luca (1. Centre for Youth Mental Health, The University of Melbourne (Australia))

[SY-43-01]

Reflecting on The Lancet-WPA Commission on depression

*Helen Herrman¹ (1. The University of Melbourne (Australia))

[SY-43-02]

Personalized & Optimized Therapies (POTs) using the Resilience Training App® for subthreshold depression in the community: a report from the RESiLiENT trial

*Toshi A. Furukawa¹ (1. Kyoto University (Japan))

[SY-43-03]

Epidemiology of depression in Japan

*Daisuke Nishi¹ (1. The University of Tokyo (Japan))

[SY-43-04]

The impact of depression on healthcare systems and professionals: a cultural perspective

*Vittorio De Luca^{1,2,3}, Silvia Gubbini¹ (1. ASL RM5, Monterotondo (RM) (Italy), 2. Istituto Italiano di Igiene Mentale Transculturale (IMT) (Italy), 3. Istituto di Ricerche Europee in Psicoterapia Psicoanalitica (IREP) (Italy))

Symposium | Community care : [Symposium 44] Family and culture

2025年9月26日(金) 14:50 ~ 16:20 Session Room 3 (Large Hall A)

[Symposium 44] Family and culture

Moderator: Sergio Javier Villaseñor-Bayardo (Universidad de Guadalajara), Yoko Kamio (Ochanomizu University)

[SY-44]

Family and Culture: Resilience and Mental Health

Vincenzo F. DiNicola¹, Carlos Zubaran Jr², Sergio J. Villaseñor Bayardo⁷, Kenneth Fung⁵, Ted Lo⁶, Tamaki Saito⁴, Yoko Kamio³ (1. University of Montreal (Canada), 2. Sunnyside Clinic (Australia), 3. Ochanomizu University (Japan), 4. Tsukuba Dialogue House (Japan), 5. Toronto University (Canada), 6. University Health Network (Canada), 7. Universidad de Guadalajara. Mexico. (Mexico))

[SY-44-01]

At the crossroads: the evolving tension in family and custom

*Carlos Zubaran^{1,2,3} (1. Sunnyside Clinic, Sydney, Australia (Australia), 2. School of Medicine & Translational Health Research Institute, Western Sydney University, Australia (Australia), 3. Health Sciences Postgraduate Program, University of Caxias do Sul, Brazil (Brazil))

[SY-44-02]

When Clinics Are Families: Lessons from the Closure of the Asian Initiative in Mental Health

*Hung-Tat (Ted) Lo¹, *Kenneth Po-Lun Fung¹ (1. University of Toronto (Canada))

[SY-44-05]

Dialogical Practice in Japan

*Tamaki Saito¹ (1. Tsukuba Dialogue House)

Symposium | Local minority : [Symposium 45] Bridges of Hope: Uniting for Mental Health Care in East and Southeast Asia

2025年9月26日(金) 14:50 ~ 16:20 Session Room 4 (Large Hall B)

[Symposium 45] Bridges of Hope: Uniting for Mental Health Care in East and Southeast Asia

Moderator: Shailendra Raj ADHIKARI (Beautiful Mind Institute of Psychiatry, Chitwan), Harry Minas (The University of Melbourne)

[SY-45]

Bridges of Hope: Uniting for Mental Health Care in East and Southeast Asia

Chonnakarn Jatchavala¹, Andi Tantra Jayalangkara Tantra², Ai Aoki³, Tsutomu Aoki⁴ (1. Department of Psychiatry, Faculty of Medicine, Prince of Songkla University, Songkhla, Thailand (Thailand), 2. Publication and Research Unit, Public Health Faculty, Hasanuddin University, South Sulawesi, (Indonesia), 3. Department of Healthcare Administration, Graduate School of Medicine, University of Nagoya (Japan), 4. Department of Psychiatry, Asahi General Hospital, Chiba (Japan))

[SY-45-01]

A Scoping Review on the Mental Health Needs of Thai Village Health Volunteers: Seeking International Support

*Chonnakarn Jatchavala¹, Kreuwan Jongbowonwiwat¹ (1. Department of Psychiatry, Faculty of Medicine, Prince of Songkla University, Songkhla, Thailand (Thailand))

[SY-45-02]

Current Mental Health Landscape in Indonesia (2025)

*Andi Jayalangkara Tantra¹ (1. Hasanuddin University (Indonesia))

[SY-45-03]

Child mental health in Mongolia

*Ai Aoki¹, Kenji Nomura², Hidekazu Kato³, Masako Nagata², Gangchimeg Togoobaatar⁴, Khishigsuren Zuunnast⁵ (1. Department of Healthcare Administration, Graduate School of Medicine, Nagoya University (Japan), 2. Psychological Support & Research Center for Human Development, Nagoya University, Japan (Japan), 3. Department of Child and Adolescent Psychiatry, Nagoya University Hospital, Japan (Japan), 4. Department of Global Health Nursing, Faculty of Medicine, University of Tsukuba, Japan, Japan (Japan), 5. Department Mental Health, School of Medicine, Mongolian National University of Medical Sciences, Mongolia (Mongolia))

[SY-45-04]

Mental Health for All: Mental Health Support in Cambodia for twenty-eight years

*Tsutomu Aoki^{1,2}, Akiko Nosaki^{1,3}, Rieko Aoki^{1,4}, Toshiyuki Marutani^{1,5}, Kanae Moriuchi¹, Akira Kubota^{1,5} (1. The Supporters for Mental Health (SUMH) (Japan), 2. Department of Psychiatry, Asahi General Hospital (Japan), 3. Graduate School of Nursing, School of Nursing, Chiba University (Japan), 4. Faculty of Nursing Department of Nursing, Josai International University (Japan), 5. Kinshicho Kubota Clinic (Japan))

Symposium | Trauma : [Symposium 46] The Path to Recovery: Trauma's Impact on mental health and Therapeutic Interventions

2025年9月26日(金) 14:50 ~ 16:20 Session Room 5 (Conference Room A)

[Symposium 46] The Path to Recovery: Trauma's Impact on mental health and Therapeutic Interventions

Moderator: Masahide Koda (Co-learning Community Healthcare Re-innovation Office, Graduate School of Medicine, Dentistry and Pharmaceutical Sciences, Okayama University), Nahoko Harada (Department of Nursing Science, Graduate School of Interdisciplinary Science and Engineering in Health Systems, Okayama University)

[SY-46]

The Path to Recovery: Trauma's Impact on mental health and Therapeutic Interventions

Ushio Miyata^{1,8}, Masahide Koda^{2,8}, Nahoko Harada³, Haruka Tagusari^{4,8}, Era Catur Prasetya⁵, Alicia Landa Herrero⁶, Nisarat Wadchareeudomkarn⁷ (1. minatogawa hospital (Japan), 2. Co-learning Community Healthcare Re-innovation Office, Graduate School of Medicine, Dentistry and Pharmaceutical Sciences, Okayama University (Japan), 3. Department of Nursing Science, Graduate School of Interdisciplinary Science and Engineering in Health Systems, Okayama University (Japan), 4. Kanagawa Psychiatric Center (Japan), 5. University Of Muhammadiyah Surabaya (Indonesia), 6. Hospital Universitario Infanta Sofia (Spain), 7. Sunshine Mind Clinic (Thailand), 8. Japan Young Psychiatrists Organization (Japan))

[SY-46-01]

Addiction in Japan: A Perspective Informed by Adverse Childhood Experiences

*Haruka Tagusari¹, Toko Itabashi¹, Kumi Aoyama¹ (1. Kanagawa Psychiatric Center (Japan))

[SY-46-02]

Relationship between Previous Traumatic Experience, Post-Traumatic Growth, Coping Strategy to Mental Health State on Refugees in Sidoarjo Camp

*Era Catur Prasetya¹ (1. Universitas Muhammadiyah Surabaya / RS Muhammadiyah Lamongan (Indonesia))

[SY-46-03]

The Path to Recovery: Trauma's Impact on Mental Health and Therapeutic Interventions. Current situation of Alcoholic Addiction in Spain, Europe.

*Alicia Landa Herrero¹ (1. Infanta Sofía Hospital, Madrid, Spain. Department of Psychiatry. (Spain))

[SY-46-04]

Impact of Bullying on Children and Adolescents: Trauma or Life Lessons?

*Nisarat Wadchareeudomkarn¹ (1. Vichaiyut Hospital (Thailand))

Symposium | Community care : [Symposium 47] Engaging Culture in the Community**2025年9月26日(金) 14:50 ~ 16:20**  **Session Room 6 (Conference Room B)****[Symposium 47] Engaging Culture in the Community**

Moderator: George Eric Jarvis (McGill University)

[SY-47]**Engaging Culture in the Community**

George Eric Jarvis¹, Jaswant Guzder^{1,3}, Janique Johnson-Lafleur², Lucie Nadeau¹ (1. McGill University (Canada), 2. Sherpa University Institute, CIUSSS West-Montreal (Canada), 3. University of British Columbia (Canada))

[SY-47-01]**Engaging Ethnic and Religious Communities through Cultural Consultation**

*George Eric Jarvis¹ (1. McGill University (Canada))

[SY-47-02]**Benefits of Global Health Involvement in enhancing cultural competency and advocacy in Child Psychiatry Practice**

*Jaswant Guzder¹ (1. University of British Columbia (Canada))

[SY-47-03]**Investigating the strengths and limitations of communities of practice as an intercultural competence training modality**

*Janique Johnson-Lafleur¹, Élise Bourgeois-Guérin², Dominique Gaulin³ (1. SHERPA University Institute and McGill University (Canada), 2. TELUQ University (Canada), 3. Université de Montréal (Canada))

[SY-47-04]**Integrating cultural objects in mental health to navigate between Indigenous and non-Indigenous epistemic worlds and the colonial imprint.**

*Lucie Nadeau^{1,2,3} (1. McGill University (Canada), 2. McGill University Health Center (Canada), 3. Inuulitsivik Health Center (Canada))

Symposium | Trauma : [Symposium 48] Dialogue in PTSD: clinical support and basic science**2025年9月26日(金) 16:30 ~ 18:00**  Session Room 2 (Main Hall B)**[Symposium 48] Dialogue in PTSD: clinical support and basic science**

Moderator: Yoshiharu Kim (National Center of Neurology and Psychiatry), Daniel Shuen Sheng Fung (Institute of Mental Health)

[SY-48]**Dialogue in PTSD: clinical support and basic science**

Yoshiharu Kim¹, Daniel Fung², SeungMin Bae³, Tomoko Inoue⁴ (1. National Center of Neurology and Psychiatry (Japan), 2. Institute of Mental Health (Singapore), 3. Gil Medical Center, Gachon University (Korea), 4. Nagoya City University (Japan))

[SY-48-01]**Clinical and molecular perspective of PTSD treatment: from the viewpoint of fear extinction**

*Yoshiharu Kim¹ (1. National Center of Neurology and Psychiatry (Japan))

[SY-48-02]**Healing Invisible Wounds: Clinical and Trauma-Informed Approaches to Childhood Trauma in Singapore**

*Daniel Shuen Sheng Fung¹, *Daniel Weng Siong Ho¹ (1. Institute of Mental Health (Singapore))

[SY-48-03]**Support Systems for Victims of Sexual Violence in Korea: The Current Reality of Digital Sexual Violence and Its Psychiatric Consequences, including PTSD**

*Seungmin Bae¹ (1. Gachon University Gil Medical Center (Korea))

[SY-48-04]**A longitudinal study of the association of blood unsaturated fatty acids with posttraumatic stress disorder (PTSD)**

*Tomoko Inoue¹ (1. Nagoya City University (Japan))

Symposium | Psychopharmacology : [Symposium 49] Cultural Psychopharmacology: Integrating Genetics, Ethnicity, and Global Perspectives

2025年9月26日(金) 16:30 ~ 18:00 Session Room 3 (Large Hall A)

[Symposium 49] Cultural Psychopharmacology: Integrating Genetics, Ethnicity, and Global Perspectives

Moderator: Kazutaka Shimoda (Tochigi Prefectural Okamotodai Hospital)

[SY-49]

Cultural Psychopharmacology: Integrating Genetics, Ethnicity, and Global Perspectives

Itsuo Asai¹, Mario Braakman², Ahmad Hatim bin Hatim³ (1. Heart Clinic Medical Corporation (Japan), 2. Tilburg University (Netherlands), 3. University of Malaya (Malaysia))

[SY-49-01]

CYP2D6 Genotype, BMI, and Culture: Rethinking Antipsychotic Dosing Across the U.S., China, and Japan

*Itsuo Asai¹ (1. Heart Clinic Medical Corporation (Japan))

[SY-49-02]

Ethnicity and psychopharmacology: an overview

*Mario Hubertus Braakman¹ (1. Tilburg University, the Netherlands (Netherlands))

[SY-49-03]

The Prevalence of Tardive Dyskinesia in Patients with Schizophrenia Treated with Antipsychotics in Malaysia

*Ahmad Hatim Sulaiman¹ (1. Universiti Malaya (Malaysia))

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

2025年9月26日(金) 16:30 ~ 18:00 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))

Symposium | Psychotherapy : [Symposium 51] Morita Therapy: Is It Culture-Bound Psychotherapy or Useful Across Cultures?

2025年9月26日(金) 16:30 ~ 18:00 Session Room 5 (Conference Room A)

[Symposium 51] Morita Therapy: Is It Culture-Bound Psychotherapy or Useful Across Cultures?

Moderator: Masahiro Minami (Simon Fraser University), Shinsuke Kondo (University of Tokyo)

Discussant: Andrea Roberto Polari (University of Melbourne)

[SY-51]

Morita Therapy: Is It Culture-Bound Psychotherapy or Useful Across Cultures?

Kei Nakamura¹, Ayumu Tateno², Mitsuhiro Nakamura^{3,4}, Mikiko Kubota^{5,1}, Masahiro Minami⁶, Andrea Roberto Polari⁷
(1. The Jikei University Center for Morita Therapy (Japan), 2. The Jikei University School of Medicine (Japan), 3. Yokohama Camellia Hospital (Japan), 4. Shinano Mental Clinic (Japan), 5. Hosei University (Japan), 6. Simon Fraser University (Canada), 7. University of Melbourne (Australia))

[SY-51-01]

What kind of psychotherapy is Morita Therapy?

*Ayumu Tateno¹ (1. Department of Psychiatry, The Jikei University School of Medicine (Japan))

[SY-51-02]

A century of Morita therapy: What has and has not changed

*MITSUHIRO NAKAMURA^{1,2} (1. Yokohama Camellia Hospital (Japan), 2. Shinano Mental Clinic (Japan))

[SY-51-03]

On the Therapeutic Effects of Morita Therapy: A Study on the Therapeutic Effects of Outpatient Morita Therapy

*Mikiko Kubota^{1,2} (1. Hosei University, Graduate School of Social Well-being Studies (Japan), 2. The Jikei University, Center for Motirita Therapy (Japan))

[SY-51-04]

Morita Therapy and Mindfulness

*Masahiro Minami¹ (1. Simon Fraser University (Canada))

Symposium | Nurodevelopmental disorder : [Symposium 52] "Empowering Neurodiversity: Advancing Support for Adults with Developmental Disabilities"

2025年9月26日(金) 16:30 ~ 18:00 Session Room 6 (Conference Room B)

[Symposium 52] "Empowering Neurodiversity: Advancing Support for Adults with Developmental Disabilities"

Moderator: Atsushi Kashiwa (Heart Clinic Medical Cooperation)

[SY-52]

"Empowering Neurodiversity: Advancing Support for Adults with Developmental Disabilities"

Atsushi Kashiwa¹, Kazuya Ono², Keiko Takayama³, Keita Suzuki⁴, Ahsan Nazeer⁵ (1. Heart Clinic Medical Corporation (Japan), 2. St. Marianna University School of Medicine (Japan), 3. NPO Edison Club (Japan), 4. Kaien Corporation (Japan), 5. Sidra Medicine (Qatar))

[SY-52-01]

Support for developmental disorders according to individual characteristics in adulthood

*Kazuya Ono¹ (1. St Marianna-university school of medicine (Japan))

[SY-52-02]

Cultural Context and Social Support as Determinants of Quality of Life in Individuals with ADHD in Japan

*Keiko Takayama¹ (1. NPO Edison Club (Japan))

[SY-52-03]

Practical Support Strategies for Adults with Developmental Disabilities: Insights from Kaien's 16 Years of Experience

*Keita Suzuki¹ (1. Kaien Inc. (Japan))

[SY-52-04]

Current Updates and Innovations in ADHD

*Ahsan Nazeer¹ (1. Weill Cornell, NY, USA/ Sidra Medicine, Qatar (Qatar))

Symposium | MDD : [Symposium 53] How does the gut microbiota contribute to elucidating the mental health in children and adolescents?

2025年9月26日(金) 16:30 ~ 18:00 Session Room 7 (Conference Room C)

[Symposium 53] How does the gut microbiota contribute to elucidating the mental health in children and adolescents?

Moderator: Katsunaka Mikami (Department of Psychiatry, Tokai University School of Medicine), Chaiyavat Chaiyasut (Innovation Center for Holistic Health, Nutraceuticals, and Cosmeceuticals, Faculty of Pharmacy, Chiang Mai University)

[SY-53]

How does the gut microbiota contribute to elucidating the mental health in children and adolescents?

Katsunaka Mikami¹, Chaiyavat Chaiyasut², Eiji Miyauchi³, Tomokazu Hata⁴, Natsuru Watanabe¹ (1. Department of Psychiatry, Tokai University School of Medicine (Japan), 2. Innovation Center for Holistic Health, Nutraceuticals, and Cosmeceuticals, Faculty of Pharmacy, Chiang Mai University (Thailand), 3. Institute for Molecular and Cellular Regulation, Gunma University (Japan), 4. Department of Psychosomatic Medicine Graduate School of Medical Sciences, Kyushu University (Japan))

[SY-53-01]

Influences of probiotic supplementation on the mental health of humans

*chaiyavat chaiyasut¹, Sivamaruthi Bhagavathi Sundaram², Kesika Periyanaina², Suchanat Khongtan¹, Pranom Fukngoen² (1. Faculty of Pharmacy, Chiangmai University, Chiangmai, Thailand (Thailand), 2. Office of Research Administration, Chiang Mai University, Chiang Mai 50200, Thailand (Thailand))

[SY-53-02]

Dog ownership, microbiota, and adolescent mental health: insights from human and mouse studies

*Eiji Miyauchi¹ (1. Institute for Molecular and Cellular Regulation, Gunma University (Japan))

[SY-53-03]

Association Between Gut Microbiota and Eating Disorders

*Tomokazu Hata¹ (1. Department of Psychosomatic Medicine, Kyushu University Hospital (Japan))

[SY-53-04]

The Oral-Gut-Brain Axis: Impact of Maternal Oral Dysbiosis on Offspring Gut Colonization and Early-Life Behavior.

*Natsuru Watanabe¹, Katsunaka Mikami¹ (1. Department of Psychiatry, Tokai University School of Medicine (Japan))

Symposium | Influential Scientific Authors : [Symposium 54] Sharing of Impactful Research Findings from Highly Cited Researchers in the field of Psychiatry, Psychology, and Neuroscience in Asia

2025年9月26日(金) 16:30 ~ 18:00 Session Room 8 (Meeting Room 1)

[Symposium 54] Sharing of Impactful Research Findings from Highly Cited Researchers in the field of Psychiatry, Psychology, and Neuroscience in Asia

Moderator: Roger Ho (National University of Singapore), Toshiaki A. Furukawa (Kyoto University)

[SY-54-01]

Sharing of Impactful Research Findings from Highly Cited Researchers in the field of Psychiatry, Psychology, and Neuroscience in Asia

*Roger Ho¹, *Toshiaki A Furukawa², *Brian J Hall³, *Cyrus SH Ho¹ (1. National University of Singapore (Singapore), 2. Kyoto University (Japan), 3. New York University Shanghai (China))

[SY-54-02]

The impact of the COVID-19 pandemic on mental health – a psychoneuroimmunological perspective

*Roger Ho¹ (1. National University of Singapore (Singapore))

[SY-54-03]

My Journey: From Clinical Work to Systematic Reviews, Randomized Trials, and Smartphone Apps

*Toshi A. Furukawa¹ (1. Kyoto University (Japan))

[SY-54-04]

A reflection on my journey to the East and a career to help the underserved

*Brian J Hall¹ (1. New York University (Shanghai) (China))

[SY-54-05]

Precision Psychiatry in Practice: Leveraging fNIRS and Machine Learning for Scalable Diagnostic Biomarkers

*Cyrus Su Hui Ho¹ (1. National University of Singapore (Singapore))

Oral

■ 2025年9月26日(金) 9:00 ~ 10:30  Session Room 8 (Meeting Room 1)

Oral 9

[O-9-01]

Rethinking Psychosis: Inuit Perspectives on Parallel and Plural Realities

*Dominique Gaulin¹ (1. Université de Montréal (Canada))

[O-9-02]

Unrecognized cases of psychosis in disability evaluations

*Brad Booth^{1,2}, Dominique Bourget^{1,2}, Sarah Mamane^{1,2} (1. Univ. Ottawa (Canada), 2. Royal Ottawa Mental Health Centre (Canada))

[O-9-03]

The correlation between recovery in schizophrenia, macroeconomic and socio-cultural indices, a meta-analysis

Donato Zupin^{4,5,6,7}, *Stefano Roberti¹, Giulio Castelpietra³, Luca Pellegrini², Giorgia D'Aulerio², Valerio Camela³, Salma Mohellebi³, Umberto Albert² (1. Università degli Studi di Udine (Italy), 2. Università degli Studi di Trieste (Italy), 3. Centre Neuchâtel de Psychiatrie (Switzerland), 4. ASUGI (Azienda Sanitaria Universitaria Giuliano Isontina) (Italy), 5. Transcultural Psychiatry Section, Italian Society of Psychiatry (Italy), 6. Italian Institute of Transcultural Mental Health (Italy), 7. World Association of Cultural Psychiatry (Italy))

[O-9-04]

Measuring What Matters: Patient Centered Outcome Measures of Goal-Directed Care for People with Serious Mental Illness

*Joshua Breslau¹, Caroline Blaum², Nev Jones³ (1. RAND Corporation (United States of America), 2. National Committee for Quality Assurance (United States of America), 3. University of Pittsburgh (United States of America))

[O-9-05]

Caffeine Consumption and Schizophrenia: A Systematic Review and Meta-analysis of Cognitive, Symptomatic, and Functional Outcomes

*ZHEN ZHOU BENJAMIN WONG¹, *Soh Qi Rui, *Soh Qi Xu (1. Graylands Hospital (Australia))

[O-9-06]

Early psychosis is characterized by white matter abnormalities in fiber structures supporting local connectivity

*YOSHITO SAITO¹, Warda T. Syeda^{1,2}, Cassandra M.J. Wannan^{1,3,4}, Yasmin Gurleyen¹, Marta Rapado-Castro^{1,5}, Maria A. Di Biase^{1,6,7,8}, Remika Mito¹, Christos Pantelis^{1,9,10} (1. Department of Psychiatry, The University of Melbourne (Australia), 2. Melbourne Brain Centre Imaging Unit, Department of Radiology, The University of Melbourne (Australia), 3. Centre for Youth Mental Health, The University of Melbourne (Australia), 4. Orygen (Australia), 5. Department of Child and Adolescent Psychiatry, Hospital General Universitario Gregorio Marañón, Universidad Complutense (Spain), 6. Systems Group, Department of Psychiatry, The University of Melbourne (Australia), 7. Stem Cell Disease Modelling Lab, Department of Anatomy and Physiology, The University of Melbourne (Australia), 8. Department of Psychiatry, Brigham and Women's Hospital, Harvard Medical School (United States of America), 9. Western Centre for Health Research & Education, University of Melbourne & Western Health, Sunshine Hospital (Australia), 10. Monash Institute of Pharmaceutical Sciences (MIPS), Monash University (Australia))

Oral

■ 2025年9月26日(金) 10:40 ~ 12:10  Session Room 8 (Meeting Room 1)

Oral 10

[O-10-01]

Cultural identities and personal subjectivities: Developing Critical Reflexivity to Address Biases and Engage in Culturally Safe Practice with Justice-Involved women

*Dominique Gaulin¹, *Janique Johnson-Lafleur², Elise Bourgeois-Guérin³ (1. Université de Montréal (Canada), 2. McGill University (Canada), 3. Téluq - Université du Québec à Montréal (Canada))

[O-10-02]

Breaking barriers - Advancing mental health support to women in rural regions of Bali

*Cokorda Bagus Jaya Lesmana¹, Cokorda Rai Adi Pramartha¹, Na Liu², Mingyue Guo², Manoj Abraham Thomas², Linh Khanh Chu², Putu Aryani¹ (1. Udayana University (Indonesia), 2. The University of Sydney (Australia))

[O-10-03]

Anxiety, depression, and suicidal ideation among transgender and gender diverse individual with gender-affirming care in South Korea by age group: multicenter cross-sectional study

*Sun Young Lee^{1,2}, Ssirai Kim², Eunsil Lee^{2,3} (1. Seoul National University Hospital (Korea), 2. Korean Initiative for Transgender Health (Korea), 3. Soonchunhyang University Hospital (Korea))

[O-10-04]

Critical Issues in Men's Mental Health: Cross-Cultural Comparisons Between Japan and the West

*Paul Capobianco¹ (1. Nanzan Anthropological Institute (Japan))

[O-10-05]

Engaging in parental alienation when undergoing separation and divorce

*Melina Nicole Kyranides¹, Jessica Hafetz² (1. University of Cyprus (Cyprus), 2. The University of Edinburgh (UK))

Oral

■ 2025年9月26日(金) 13:10 ~ 14:40  Session Room 8 (Meeting Room 1)

Oral 11

[O-11-01]

Quality of life and parenting styles in parents with children with and without ASD in Türkiye.

Merve Yesilkaya¹, *Ernesto Magallón-Neri^{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))

[O-11-02]

Integrating perinatal and infant mental healthcare: building lifelong foundations- What are we doing at Austin Health Perinatal Community Services, Heidelberg, Melbourne

*Hewa Liyana Arachchi Chamali Rangika Wanigasekera^{1,2}, Anne Buist^{1,2}, Michelle McAlary McAlary¹ (1. Austin Health, Melbourne, Australia (Australia), 2. University of Melbourne, Victoria, Australia (Australia))

Oral

■ 2025年9月26日(金) 14:50 ~ 16:20  Session Room 7 (Conference Room C)

Oral 12

[O-12-01]

Asylum seekers should not participate in intervention studies.

*Douwe van der Heide¹ (1. GGZ Centraal (Netherlands))

[O-12-02]

'I felt like a fish in the water': the feasibility of co-adapting a family intervention for asylum seeking families with parents themselves.

*Aseel Fawaz Alzaghouli¹, Rachel Kronick¹ (1. McGill University (Canada))

[O-12-03]

Breaking Barriers: A Mental Health Conference for Spanish-Speaking Communities in the USA.

*Jose Alberto Canaca¹, *Tomoko Hamma¹, *Caroline Bonham¹, *Mauricio Tohen¹, *Deborah Altschul¹ (1. American Psychiatric Association (United States of America))

[O-12-04]

Healing Our First Attachment: Cultural, Psychological, and Ecological Pathways to Reconnect with Nature

*Matthew Jenkins^{1,2}, *Sabine Egger² (1. University of Auckland (New Zealand), 2. Waikato Health NZ (New Zealand))

[O-12-05]

Irregular Migrants in Administrative Detention: Psychiatric Implications and Systemic Disparities - A Cross-National Overview

*Tommaso Cerisola¹ (1. Università degli Studi di Genova (Italy))

[O-12-06]

Cultural Belonging and Migrant Well-Being: Rethinking Urban Spaces for Mental Health

*Gesa Solveig Duden¹ (1. Concordia University, Montréal (Canada))

Oral

2025年9月26日(金) 14:50 ~ 16:20 Session Room 8 (Meeting Room 1)

Oral 13

[O-13-01]

Exploring different needs of intervention in adolescents with different levels of psychological difficulties

*Nabilah Amalina Rozi^{1,2}, Sherly Saragih Turnip¹ (1. Research of Community Mental Health Initiative (RoCMHI), Faculty of Psychology, Universitas Indonesia (Indonesia), 2. Department of Global Public Health, Karolinska Institutet (Sweden))

[O-13-03]

Stressful life events and family adjustment in young people from Colombia.

Sandra Mateus-Gómez¹, Rosa Díaz², Claudia Navarro-Roldan⁴, *Ernesto Magallón-Neri^{1,3} (1. Department of Clinical Psychology and Psychobiology. Faculty of Psychology. University of Barcelona. (Spain), 2. Department of Child and Adolescent Psychiatry and Psychology. Institute of Neurosciences. Hospital Clínic Universitari of Barcelona. (Spain), 3. Institute of Neurosciences, UB. Group of Studies about Measure Invariance and Analysis of Change (GEIMAC) 2021SGR01071. (Spain), 4. Human development, cognition and education research group, Psychology program, University Pedagogical and Technological of Colombia. (Colombia))

[O-13-05]

Anxiety and depression among adolescents

*Cecilia Essau¹, Suwaibah Zakaria², Chuong Hock Ting Ting³, Julia Ai Cheng Lee³, Alvin Lai Oon Ng⁴, Nik Daliana Nik Farid⁵, Noor Azimah Muhammad⁶, Suzaily Wahab⁶, Alejandro de la Torre-Luque⁷ (1. University of Roehampton (UK), 2. Universiti Malaysia Sabah (Malaysia), 3. Universiti Malaysia Sarawak (Malaysia), 4. Sunway University (Malaysia), 5. Universiti Malaya (Malaysia), 6. Universiti Kebangsaan Malaysia (Malaysia), 7. Universidad Complutense de Madrid (Spain))

[O-13-06]

School Bullying Prevention and Intervention Across Cultures: The ICoRIP Study Protocol for Promoting Youth Mental Health in Six Nations

*Ekachaeryanti Zain¹, Atsunori Sugimoto^{2,3}, Emmanuel Aniekan Essien⁴, Gniewko Więckiewicz⁵, Ching-Hua Julie Lee⁶, Rwanda Gaffaz⁷, Joanna Smolarczyk⁵, Victor Pereira-Sánchez⁸, Kiyohiro Yoshinaga³, Masaya Ootake¹, Hiroyuki Kasahara², Faisal Budisasmita Paturungi Parawansa¹, Isa Multazam Noor⁹, Naoki Fukui¹, Yuichiro Watanabe^{1,10}, Jun Egawa¹, Shuken Boku¹ (1. Department of Psychiatry, Niigata University Graduate School of Medical and Dental Sciences (Japan), 2. Department of Community Psychiatric Medicine, Niigata University Graduate School of Medical and Dental Sciences (Japan), 3. Department of Psychiatry, Niigata Psychiatric Center (Japan), 4. Federal Neuropsychiatric Hospital (Nigeria), 5. Department of Psychiatry, Faculty of Medical Sciences in Zabrze, Medical University of Silesia (Poland), 6. Tsaotun Psychiatric Center, Ministry of Health and Welfare (Taiwan), 7. Alrazi Psychiatric Hospital (Libya), 8. Department of Psychiatry, Columbia University (United States of America), 9. Department of Psychiatry, Faculty of Medicine, YARSI University (Indonesia), 10. Department of Psychiatry, Uonuma Kikan Hospital (Japan))

Poster

■ 2025年9月26日(金) 10:00 ~ 11:00  Poster Session (Foyer 1)

Poster 9

[P-9-01]

Relationship between Satisfaction and Psychological Well-Being in Dance Events Using Metaverse.

*KAZUMA TORA¹, Ryo Momosaki² (1. Akiyama Clinic (Japan), 2. Department of Rehabilitation Medicine, Graduate School of Medicine, Mie University (Japan))

[P-9-02]

Interplay between serum IL-1 β and BDNF in modulating antidepressant response: Insights from a prospective clinical study

*Jae-Min KIM¹ (1. Chonnam National University Hospital (Korea))

[P-9-03]

Effects of Methylphenidate on the Cognitive Functions and Electroencephalographic Characteristics of Drug-Naïve Children with Attention-Deficit/Hyperactivity Disorder

*Chi-Yung Shang¹, Hong-Hsiang Liu², Ming-Hsien Hsieh¹, Susan Shur-Fen Gau¹ (1. National Taiwan University Hospital (Taiwan), 2. Fu Jen Catholic University (Taiwan))

[P-9-04]

Dysregulation of the hypothalamic-pituitary-adrenal system in Tuvan alcoholics is associated with a high level of stress in comparison with ethnic Russian patients

*Tamara Vladimirovna Shushpanova¹ (1. LEADING RESEARCHER, MENTAL HEALTH RESEARCH INSTITUTE of TOMSK NATIONAL RESEARCH MEDICAL CENTER of RUSSIAN ACADEMY of SCIENCES (Russia))

[P-9-05]

Isolation in a Fully Connected World: From Dostoevsky to Thunderbolts

*Yulia Furlong¹ (1. University of Western Australia (Australia))

[P-9-06]

Are related the Psychological Inflexibility and their subprocess with Psychopathological symptoms in adolescents with and without psychiatric care?

*Ernesto Magallon-Neri^{1,2}, Sandra Mateus-Gómez¹, Josep Lluís Matalí³, Elena Flores³, Daniel Ilzarbe⁴, Rosa Díaz⁴ (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), 3. Child and Adolescent Psychiatry and Psychology Department of Hospital Sant Joan de Déu, Barcelona (Spain), 4. Department of Child and Adolescent Psychiatry and Psychology. Institute of Neurosciences. Hospital Clínic Universitari of Barcelona (Spain))

Poster

■ 2025年9月26日(金) 11:00 ~ 12:00  Poster Session (Foyer 1)

Poster 10

[P-10-01]

Behavioral Intentions to Negotiate the Division of Domestic Labor: A Qualitative Study in Salahutu District, Maluku for Women- and Children-Friendly Village Initiative

*Laras Zahra Kemalasari Erlambang^{1,2}, Sherly Saragih Turnip^{1,2}, Fitri Fausiah^{1,2} (1. Research of Community Mental Health Initiative (Indonesia), 2. Universitas Indonesia (Indonesia))

[P-10-02]

Gender Differences in The Concept of Mental Health of Indonesia's Police Officers

*Canalya Amira Azhar¹, Sherly Saragih Turnip¹, Fitri Fausiah¹ (1. Universitas Indonesia (Indonesia))

[P-10-03]

Gender Disparity and Mental Health in Policing: Exploring Indonesia's Women Police Officers' Perspectives in a Male-Dominated Field

*Canalya Amira Azhar¹, Sherly Saragih Turnip¹, Fitri Fausiah¹ (1. Universitas Indonesia (Indonesia))

[P-10-04]

Psychosocial Challenges and Support Faced by Individuals with Gender Incongruence and Gender Dysphoria in Japan: A Literature Review and Implications for Cross-National Nursing Education

*Mayu SAKAMOTO¹, Mayuko TSUJIMURA¹, Kazuma HONDA², Namiko KAWAMURA¹ (1. Shiga University of Medical Science (Japan), 2. Broken Hill University (Austria))

[P-10-05]

Psychological Symptoms and Treatment Approaches in Perimenopausal Women: A Global Cultural Perspective

*Mrinalinee Rana

[P-10-06]

Cultural models of masculinity and femininity in Canada and in Brazil: A potential first step towards better understanding gender discrepancies in mental health.

*Mariana Borges da Fonseca^{1,2,4}, Andrew G Ryder^{1,2,3,4} (1. Concordia University (Canada), 2. Centre for Clinical Research in Health, Concordia University (Canada), 3. Culture & Mental Health Research Unit, Jewish General Hospital (Canada), 4. Culture, Health and Personality Lab, Concordia University (Canada))

Poster

2025年9月26日(金) 14:00 ~ 15:10 Poster Session (Foyer 1)

Poster 11

[P-11-01]

Case Report: Obsessive Compulsive Disorder Presenting as Spiritual Possession in a Southeast Asian Context

*Sabrina Goo¹, *Tian Ling Low² (1. Institute of Mental Health (Singapore), 2. Singapore General Hospital (Singapore))

[P-11-02]

Cultural discontinuity, cultural resilience, and mental health in the era of Large Language Models: Civilizational disruption and reconstruction in the context of technological revolution

*Jian-Zhong Yang Yang¹ (1. Department of Psychiatry, the First Affiliated Hospital, Zhejiang University School of Medicine, Hangzhou, China (China))

[P-11-03]

Spirit Possession in Psychiatric Perspective, a case study in Indonesia

*Syarifah Aini¹, Bintang Arroyantri Prananjaya¹, Gilang Perkasa Dokman², Puji Rizky Suryani¹, Diyaz Syauki Ikhsan¹, Suksmi Yitnamurti², Abdullah Sahab¹ (1. Department of Psychiatry, Faculty of Medicine, Universitas Sriwijaya, Palembang (Indonesia), 2. Department of Psychiatry, Faculty of Medicine, Universitas Airlangga, Surabaya (Indonesia))

[P-11-04]

“Between Demon and *Espíritu*: Transcultural Psychiatry in a Purépecha Woman with Severe Mood Disorder, Psychosis, and Catatonia”

*Diana Mireles Ortega¹, *Claudia Alejandra Igual¹, Nicholas Soto Hernández¹, Christian Rosales-Michel¹, Aura Garcia-Aguilar¹, Sergio Armando Covarrubias-Castillo¹, Jose Manuel Hernandez Salas, Humberto Arizpe Mejía¹ (1. Hospital Civil de Guadalajara "Fray Antonio Alcalde" (Mexico))

[P-11-05]

Comparison between psychiatric morbidity in SARS survivors and COVID-19 survivors at 30 months post-outbreak in Hong Kong

*Mei Cheung Wong¹ (1. Dept of Psychiatry, United Christian Hospital, Hong Kong (Hong Kong))

[P-11-06]

TRI HITA KARANA CONCEPT AS A FRAMEWORK FOR SUBSTANCE USE DISORDER TREATMENT TARGETING FOREIGN TRAVELLERS IN BALI

*Savitri Yuanita¹, Cokorda Bagus Jaya Lesmana¹, Luh Nyoman Alit Aryani¹, Hari Nugroho² (1. Department of Psychiatry University of Udayana (Indonesia), 2. Humphrey Fellowship Program in Substance Abuse Education, Prevention, and Treatment at Virginia Commonwealth University (United States of America))

[P-11-07]

Investigating Neurophysiological Correlates of Depression in Children with ADHD: A qEEG Study

*Yeonjung Lee¹ (1. Soonchunhyang university, Seoul hospital (Korea))

Poster

■ 2025年9月26日(金) 16:00 ~ 17:10  Poster Session (Foyer 1)

Poster 12

[P-12-01]

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

*Mylène Boissy¹, 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 Ohno¹, *Yuta Kitahata² (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 Han¹, *Namyoung Lee² (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 Blujs dos Santos Rohde¹, Julia Rosarie Kingston², Hermano Tavares¹ (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 Nudhar¹, Rizma Adlia Syakurah², *Bintang Arroyantri Prananjaya¹, Puji Rizki Suryani¹, Syarifah Aini¹, Diyaz Syauki Ikhsan¹ (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 Appau¹, Mark Boateng¹ (1. Ankaful Psychiatric Hospital (Ghana))

Poster

■ 2025年9月26日(金) 11:00 ~ 11:50  Poster Session (Foyer 2)

Poster 13

[P-13-01]

An Accessible, Affordable and Effective Clinical Nature-Based Intervention Programme for ASD Children and their caregivers

*Tammy Neo¹, *John, Chee Meng Wong^{1,2}, Angelia Sia³, Esther, Yuen Ling Tai¹, Stephanie, Sze-Yin Seow¹, Michelle Lee, Christel Chang, Tiffany Ho¹, Natalie Lei¹, Maria Paula Leon Mora, Kenneth Khoo³, Kian Seng Ding, Maria Koh, *Kee Juan Yeo² (1. National University Hospital, Singapore (Singapore), 2. National University of Singapore (Singapore), 3. National Parks Board of Singapore (Singapore))

[P-13-02]

Self-injury features (addictive features, modalities, and motives) and relationships with psychological factors, distal risk factors in adolescent inpatients aged 13–19: Network analysis and mediation path analysis

*AQian Hu^{1,2}, ZiXin Mao^{4,3}, WanJun Guo^{1,2,3} (1. Affiliated Mental Health Center & Hangzhou Seventh People's Hospital, Zhejiang University School of Medicine (China), 2. Zhejiang university (China), 3. Mental Health Center and Psychiatric Laboratory, West China Hospital, Sichuan University (China), 4. Yichang Mental Health Center (China))

[P-13-03]

Switching at the Peak: The Malaysian Experience. A Case Series on Lemborexant as a Nondependent Agent for Managing Benzodiazepine or Z Drug Dependence in Insomnia.

*Julian Joon Ip Wong¹ (1. Universiti Malaya (Malaysia))

[P-13-04]

Association between anti-infective agent prescription and incidence of neurodevelopmental disorder

*yunhye Oh¹, Vin Ryu¹ (1. Hallym University Sacred Heart Hospital (Korea))

[P-13-05]

Virtual Hospitalization treatment for OCD

*Oded ben arush¹ (1. OCD treatment center clinical director (Israel))

Poster

■ 2025年9月26日(金) 14:00 ~ 15:10  Poster Session (Foyer 2)

Poster 14

[P-14-01]

A Systematic Review of Suicide Intervention Components to Manage Suicide Risk in Emergency Psychiatric Settings

Hoi Ting Leung¹, *Janine H.N. Ang¹ (1. Institute of Mental Health (Singapore))

[P-14-03]

Exploring Cannabis Knowledge and Attitudes among Mental Health Clinic Outpatients: Implications for Education and Intervention Strategies

*Napat Kammarabutr¹, Veevarin Charoenporn¹, Pairath Tapanadechopone¹ (1. Thammasat University Hospital (Thailand))

[P-14-04]

Selective neuroinflammation induced by chronic stress in zebrafish: Differential responses in telencephalon and habenula

*Cheolmin Shin¹ (1. Korea University College of Medicine (Korea))

[P-14-05]

A Questionnaire Survey on the experiences of hotline counselors involved in suicide prevention in Tokyo

*Rieko Shioji¹, Hiromi Imuta¹, Atsuko Tanimura¹, Mayuko Yamashita¹ (1. Faculty of Health Sciences, Tokyo Metropolitan University (Japan))

[P-14-06]

The Incidence Rates, Characteristics, and Related Factors of Student Suicides in Taiwan

*YU-CHUAN HUANG¹, Hsuan Chiu¹, Hui-Xiu Chen¹, *Shu-Sen Chang¹ (1. National Taiwan University (Taiwan))

[P-14-07]

Bupropion for Cocaine Addiction: A Systematic Review and Meta-Analysis of Randomized Controlled Trials

*Prajna Wijaya¹, *Kristiana Siste², Andrea Gonzalez Lezana³, Camila Laiana Magri Mendes⁴, Nazlia Hariza Rahmadani Latulumamina⁵ (1. Faculty of Medicine, Universitas Indonesia (Indonesia), 2. Department of Psychiatry, Faculty of Medicine, Universitas Indonesia – dr. Cipto Mangunkusumo General Hospital, Jakarta, Indonesia (Indonesia), 3. Instituto de Investigaciones Clínicas Mar del Plata, Buenos Aires (Argentine), 4. Faculty of Medicine, Unicesumar (Brazil), 5. Faculty of Medicine, Universitas Pattimura (Indonesia))

Poster

■ 2025年9月26日(金) 10:00 ~ 11:00  Poster Session (Foyer 2)

Poster 15

[P-15-01]

Relationships Between Adult Attention Deficit Hyperactivity Disorder Symptoms and Problem/Pathological Gambling

*Wonseok Lee¹, Moon-Doo Kim^{1,2}, Young-Eun Jung^{1,2} (1. Department of Psychiatry, Jeju National University Hospital (Korea), 2. Department of Psychiatry, School of Medicine, Jeju National University (Korea))

[P-15-02]

Differentiating suicide attempters from suicidal ideators: Differences between major depressive and bipolar disorders

Chanhee Park¹, *Christopher Hyung Keun Park¹ (1. Asan Medical Center (Korea))

[P-15-03]

The Status of Hopelessness and Related Factors in Korean Female Full-Time Homemakers: A Community-Based Cross-Sectional Survey Study

*TAE-YOUNG HWANG¹ (1. NATIONAL FORENSIC HOSPITAL, MINISTRY OF JUSTICE (Korea))

[P-15-04]

Trends in diagnoses in adult developmental disorder outpatient clinics

-Five years on-

*Yoshifumi Nakamura¹, Haruhisha Oota^{1,2}, Motoaki Nakamura², Tsukasa Okimura², Mari Yamada¹, Ayaka Nakai¹, Yasusshi Oda¹, Takashi Nishio¹, Akira Iwanami¹ (1. Showa Medical University Psychiatry Department (Japan), 2. SHOWA Medical University Medical Institute of Developmental Disabilities Research (Japan))

[P-15-05]

Validation of New Stress Scale: Pregnant Women Perspective

*Siti Noor Aisyah Ghani¹, Shalisah Sharip¹ (1. National University of Malaysia (Malaysia))

[P-15-06]

Cross-Cultural Assessment of Self-Stigma in Epilepsy: A Multinational Comparative Study Using the Epilepsy Self-Stigma Scale (ESSS)

*Izumi Kuramochi¹, Go Taniguchi¹, Esra Yildiz⁴, Estefanía Conde-Blanco³, Anne Hagemann², Kheng-Seang Lim⁵, Eiji Nakagawa¹ (1. National Center of Neurology and Psychiatry (Japan), 2. Society for Epilepsy Research, Bielefeld (Germany), 3. Epilepsy Program, Neurology Department, Hospital Clinic Barcelona (Spain), 4. Faculty of Nursing, Ataturk University, Erzurum (Turkey), 5. Division of Neurology, Department of Medicine, Faculty of Medicine, Universiti Malaya (Malaysia))

Poster

■ 2025年9月26日(金) 16:00 ~ 17:10  Poster Session (Foyer 2)

Poster 16

[P-16-01]

Work Passion as a Protective Factor Against Burnout Among Nurses in Thailand

*Vatanya Chiewvattanakul¹, Nattha Saisavoey¹, Sirirat Kooptiwoot¹, Varaporn Sripirom¹ (1. Department of Psychiatry, Faculty of Medicine Siriraj Hospital, Mahidol University (Thailand))

[P-16-02]

Workplace Attachment Style, Burnout Levels, and Sleep Quality in Nurses of Hong Kong

*Sze Man Chan¹, Mark Lawrence WONG² (1. Registered Nurse, Master's Student, City University of Hong Kong (Hong Kong), 2. Clinical Psychologist, Assistant Professor, Department of Social and Behavioural Sciences, City University of Hong Kong (Hong Kong))

[P-16-03]

How does race impact the pathway of sleep disturbance to depression through emotional regulation for a high-risk population?

*Jeremy Gibbs¹, Rachel Fusco¹ (1. University of Georgia (United States of America))

[P-16-04]

Sleep quality affecting burnout syndrome among practical and registered nurses in Siriraj hospital

*Chayangkoon Poomkamjorn¹, Kamonporn Wannarit¹, Panate Pukrittayakamee¹, Ubol Hunkaewchompoo¹ (1. Siriraj hospital, Mahidol university (Thailand))

[P-16-05]

Too Much Screen Time? Binge-Watching Behavior and Its Mental Health Correlates Among Thai University Undergraduates.

*Pongrawee Thiansirikhun¹, Muthita Phanasathit² (1. Department of Psychiatry, Faculty of Medicine, Thammasat University (Thailand), 2. Department of Psychiatry, Center of Excellence of Applied Epidemiology, Faculty of Medicine, Thammasat University. (Thailand))

[P-16-06]

Exploring the "Fidelity" of Recovery Colleges in Japan: Gaps Between Core Values and Practice

*Yui Komine¹, Taisuke Katsuragawa² (1. Graduate School of Human Sciences, Waseda University (Japan), 2. Faculty of Human Sciences, Waseda University (Japan))

[P-16-07]

Investigating the mechanism of action of an intervention based on metacognitive therapy for social dysfunction in high worriers.

*Minori Machida¹, Jun Tayama¹ (1. Waseda University (Japan))

Poster

■ 2025年9月26日(金) 11:00 ~ 12:10  Poster Session (6F Meeting Room 4-6)

Poster 34

[P-34-01]

The Benefits and Future Potential of Generative Artificial Intelligence (GAI) on Mental Health: A Delphi Study

*Nicholas Pang¹, Chit Thet Lal Oo², Walton Wider², Eugene Koh³, Rajkumar K. Vasanthi², Lester N. Udang⁴, Leilei Jiang², Rodrigo Ramalho⁵, Bilge N. Özdemir⁶, Kashmine Mahboob⁷ (1. Universiti Malaysia Sabah (Malaysia), 2. INTI International University (Malaysia), 3. Putra Malaysia University (Malaysia), 4. Shinawatra University (Thailand), 5. The University of Auckland (New Zealand), 6. Ataturk State Hospital (Turkey), 7. Ayub Teaching Hospital (Japan))

[P-34-02]

Parental immigration status and offspring mental health service use for anxiety and depression: A Finnish nationwide register study

*Prakash Khanal^{1,2}, Subina Upadhyaya^{1,2}, Tiia Ståhlberg^{1,2,3}, Emmi Heinonen^{1,2}, Terhi Luntamo^{1,4}, Andre Sourander^{1,2,4} (1. Research Center for Child Psychiatry, University of Turku, Turku (Finland), 2. INVEST Research Flagship Center, University of Turku, Turku (Finland), 3. Department for Adolescent Psychiatry, Turku University Hospital, Turku (Finland), 4. Department for Child Psychiatry, Turku University Hospital, Turku (Finland))

[P-34-03]

Perceived Academic Stress and Adolescent Mental Health in Singapore: The Protective Role of Resilience

*Brenda Lio Liaw Wen¹, John Chee Meng Wong¹, Liang Shen¹, Dennis Kom³, Victoria Fee³, Ruochen Du¹, Qai Ven Yap¹, Natalie Cheok Ling Lei¹, 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))

[P-34-04]

Exploring Bicultural Belonging and Mental Health: A Qualitative Study of Second-Generation Nikkei Brazilians in Japan

*JULIANA MIKA KONNO HORI¹, RIEKO SHIOJI¹, ATSUKO TANIMURA¹ (1. Tokyo Metropolitan University (Japan))

[P-34-05]

The Potential of Naikan Therapy as a Glocal Psychotherapy: A Buddhist Perspective on Its Mechanism and the Value of “SUNAO”

*Miho Takahashi¹ (1. the University of Tokyo (Japan))

[P-34-06]

rTMS in Anorexia Nervosa: Novel adjunct in a complex case

*Rupika Dhurjati¹, Sri Krishna Teja Vemulakonda¹ (1. Sukoon Health (India))

[P-34-07]

Between Sleep and Sorrows: Case Report on Narcolepsy

*NICOLE MARIE BOGNOT MANALASTAS¹, MARK ANTHONY PASCUAL^{1,2} (1. NATIONAL CENTER FOR MENTAL HEALTH (Philippines), 2. PHILIPPINE HEART CENTER (Philippines))

Poster

2025年9月26日(金) 14:00 ~ 15:10  Poster Session (6F Meeting Room 4-6)

Poster 35

[P-35-01]

Affective Responses to Stress and Genetic Variation of rs4570625 in Thai Medical Students

*Pathitta Kittimongkolsuk¹, *Jirapa Puriterangkul¹, Krittisak Anuroj², Sivaporn Wannaiampikul³ (1. Faculty of Medicine, Srinakharinwirot University (Thailand), 2. Department of Psychiatry, Faculty of Medicine, Srinakharinwirot University (Thailand), 3. Department of Biochemistry, Faculty of Medicine, Srinakharinwirot University (Thailand))

[P-35-02]

Exploring the Association Between rs17110690 of the TPH2 Gene and Positive and Negative Affects in Thai Preclinical Medical Students

*Jirapa Puriterangkul¹, *Pathitta Kittimongkolsuk¹, Krittisak Anuroj³, Sivaporn Wannaiampikul² (1. Faculty of Medicine, Srinakharinwirot University (Thailand), 2. Department of Biochemistry, Faculty of Medicine, Srinakharinwirot University (Thailand), 3. Department of Psychiatry, Faculty of Medicine, Srinakharinwirot University (Thailand))

[P-35-03]

Effect of Cinemeducation on Empathy of Thai Clinical-Year Medical Students: A Randomized Controlled Trial

*Pichaya Tantaatipanit¹, Natee Viravan¹, Wuttipat Lammechai^{1,3}, Karan Wongprakarnsanti² (1. Faculty of medicine siriraj hospital, mahidol university (Thailand), 2. Suanprung Psychiatric Hospital, Department of Mental Health, Ministry of Public Health (Thailand), 3. MGH Institute of Health Professions, Boston, Massachusetts (United States of America))

[P-35-04]

Inhibitory Control and Social Anxiety: The Mediating Role of Irritability and the Specific Contribution of Avoidance

*Juyeong Kim¹, Somi Yun¹, Eunjae Lee¹ (1. Hanyang University Guri Hospital (Korea))

[P-35-05]

From Comic Panels to Psychiatric Labels: A Psychiatric Review of The Joker and the Public Perception of Mental Illness

*Tejbir Singh Deol¹, Arun Thakur¹, Saif Toubasey¹, Ella Marie Bauwens¹, Madhusudan Dalvi^{1,2} (1. King's College London (UK), 2. Kent and Medway NHS and Social Care Partnership Trust (UK))

[P-35-06]

Cross-Cultural Adaptation and Validation of the ABLE Scale in Japan: Toward Global Understanding of Epilepsy Stigma

*Takafumi Shiganami¹, Satoshi Saito^{2,3}, Chihiro Nakata², Sayaka Kobayashi¹, Haruo Yoshimasu¹, Mohmad Farooq Shaikh⁴, Go Taniguchi², Izumi Kuramochi^{1,2} (1. Department of Psychiatry, Saitama Medical Center, Saitama Medical University, Saitama, Japan (Japan), 2. Department of Epileptology, National Center Hospital, National Center of Neurology and Psychiatry (Japan), 3. Department of Neurology, Tokyo Women's Medical University School of Medicine (Japan), 4. Department of Pharmacology, Charles Sturt University, Orange, NSW (Australia))

[P-35-07]

Social capital and social support as moderators in the association between perceived discrimination and mental health among Filipino domestic workers in Macao

*Xiaoyu Duan^{1,2}, Timothy S. Sumerlin², Brian J. Hall^{2,3} (1. Department of International Health, Bloomberg School of Public Health, Johns Hopkins University (United States of America), 2. Center for Global Health Equity, NYU Shanghai (China), 3. Department of Health, Behavior and Society, Bloomberg School of Public Health, Johns Hopkins University (United States of America))

Presidential Lecture

2025年9月26日(金) 14:50 ~ 15:40 Session Room 1 (Main Hall A)

[Presidential Lecture 1] Piano Theory: Re-tuning the Mind Through Neurobiological Harmony and Cultural Resonance

Moderator: Mario Braakman (Tilburg University)

[PL-1]

Piano Theory: Re-tuning the Mind Through Neurobiological Harmony and Cultural Resonance

*Itsuo Asai¹ (1. Heart Clinic Medical Corporation (Japan))

Presidential Lecture

2025年9月26日(金) 14:50 ~ 15:40 Session Room 1 (Main Hall A)

[Presidential Lecture 1] Piano Theory: Re-tuning the Mind Through Neurobiological Harmony and Cultural Resonance

Moderator: Mario Braakman (Tilburg University)

[PL-1] Piano Theory: Re-tuning the Mind Through Neurobiological Harmony and Cultural Resonance

*Itsuo Asai¹ (1. Heart Clinic Medical Corporation (Japan))

キーワード : Piano Theory、Neuroplasticity、Brain Mapping、Cultural Psychiatry、Biomarkers

President of PRCP&WACP2025 Joint Congress Tokyo, Heart Clinic Medical Corporation. In a field often split by mind–brain dualisms, Piano Theory provides a unifying metaphor: the brain as an instrument and healing as restoring harmony. Each neurotransmitter receptor is compared to a piano key. At the same time, large-scale brain networks—such as the Default Mode Network (DMN), Central Executive Network (CEN), and Salience Network (SN)—are seen as the functional “chords” that support cognition, emotion, and self-awareness. Psychiatric disorders are viewed as failures in these connections—disruptions in receptor interactions and network synchrony. Piano Theory emphasizes neuroplasticity, BDNF timing, and receptor co-modulation (e.g., 5-HT1A + 5-HT2C; OX1 + OX2) as potential mechanisms for re-tuning the mind. Crucially, the model includes cultural resonance as a flexible layer that influences mental health and recovery. From trauma-informed care and expressive arts to indigenous healing and community psychiatry, cultural patterns shape how individuals understand, tell stories about, and recover from distress. This lecture suggests diagnostic and therapeutic strategies that combine biomarker-driven treatments with culturally sensitive care, including rhythm-based activities, narrative medicine, and multimodal resonance mapping. Recovery is not just about restoring function but also about re-tuning identity. Presented at the joint congress of PRCP and WACP, Piano Theory aims to unify neuroscience with human experience, fostering collaboration among psychiatry, anthropology, and the arts. Ultimately, it encourages us to rethink our approach to mental health: not only through science but also through storytelling, society, and spirituality.

Educational Lecture

2025年9月26日(金) 15:50 ~ 16:40  Session Room 1 (Main Hall A)

[Educational Lecture 3] On the Heterogeneity of Depression: How the Japanese cultural environment has affected psychopathology

Moderator: Chee Ng (Melbourne Medical School)

[EL-3]

On the Heterogeneity of Depression:
How the Japanese cultural environment has affected psychopathology

*Shigenobu Kanba Kanba¹ (1. Kyushu University (Japan))

Educational Lecture

2025年9月26日(金) 15:50 ~ 16:40 Session Room 1 (Main Hall A)

[Educational Lecture 3] On the Heterogeneity of Depression: How the Japanese cultural environment has affected psychopathology

Moderator: Chee Ng (Melbourne Medical School)

[EL-3] On the Heterogeneity of Depression: How the Japanese cultural environment has affected psychopathology

*Shigenobu Kanba Kanba¹ (1. Kyushu University (Japan))

キーワード : depression、culture、psychopathology

Japan has been undergoing a profound period of economic, social, and cultural transformation. In recent times, there has been a noticeable increase in individuals experiencing depression and related states. Traditionally, depression primarily manifested as endogenous with symptoms resembling melancholia, carrying a significant risk of suicide. This condition was often observed among middle-aged and elderly individuals who were respected for their disciplined, responsible, hardworking, and norm-abiding natures. However, the rising number of individuals grappling with depression appears to extend beyond this established demographic. Younger people who struggle to adapt to evolving environments and seek medical assistance for depressive symptoms as a response to their distress are now becoming more prevalent. In a society where the prevailing trend is shifting away from a structured, order-driven orientation towards a more liberated pursuit of personal interests—reflective of capitalist societies since the modern era—establishing a temperament characterized by obsession or melancholy affinity becomes challenging. This is particularly evident among the youth born after the 1960s, raised in the consumer culture of the post-1970s era, who find it hard to conform to traditional normative standards. Another notable development in recent years is the increased awareness surrounding depression and the reduced stigma associated with it. The introduction of new antidepressants has led to heightened awareness of depression within Japanese society, along with a reduction in stigma against psychiatric care as a whole. This has facilitated easier access for those grappling with maladjustment to identify depressive symptoms as expressions of their struggles (drawing from Kleinman A.'s term), and consequently, seek psychiatric assistance. This lecture seeks to analyze the premorbid personality that has emerged within the modern psyche, with the aim of comprehending and addressing depression.

Educational Lecture

2025年9月26日(金) 16:50 ~ 17:40  Session Room 1 (Main Hall A)

[Educational Lecture 4] From the Culture of Symptoms to the Universals of Care: Why I Shifted from Cultural Psychiatry to Global Mental Health.

Moderator: Vincenzo Di Nicola

[EL-4]

From the Culture of Symptoms to the Universals of Care: Why I Evolved From Cultural Psychiatry to Global Mental Health and the Study of Universals of Care

*Arthur Kleinman¹ (1. Harvard University and Harvard Medical School (United States of America))

Educational Lecture

2025年9月26日(金) 16:50 ~ 17:40 Session Room 1 (Main Hall A)

[Educational Lecture 4] From the Culture of Symptoms to the Universals of Care: Why I Shifted from Cultural Psychiatry to Global Mental Health.

Moderator: Vincenzo Di Nicola

[EL-4] From the Culture of Symptoms to the Universals of Care: Why I Evolved From Cultural Psychiatry to Global Mental Health and the Study of Universals of Care

*Arthur Kleinman¹ (1. Harvard University and Harvard Medical School (United States of America))

At the outset of my research career in the late 1960's and early 1970's, I contributed to Cultural Psychiatry such things as the 'category fallacy', the cross-cultural comparison of depressive experience amongst Chinese and Americans, comparative studies of healing systems, and other related subjects. In 1995 I led the team that published the first World Mental Health Report (Oxford University Press). From that time onward I reoriented my work in Medical Anthropology and Psychiatry away from culturally constructed difference, which I felt had been oversold, and toward universals in the experience of mental illness and particularly in care and caregiving. Much of this story is told in my book *The Soul of Care*. Looking back, my contribution has been meant to emphasize that universals are as important as cultural differences in health and mental health, and particularly in care and caregiving. This lecture will address why that is the case and why going forward Cultural Psychiatry needs to be rebalanced much as the biological hegemony of clinical psychiatry also requires rebalancing in a cultural direction.

Educational Workshop

2025年9月26日(金) 13:10 ~ 14:40  Session Room 1 (Main Hall A)

[Educational Workshop 1] "POLARIZATION - A SYMPTOM OF SOCIAL ILLNESS" Overcoming Polarization - Tools for Health Professionals and Educators

Moderator: Marcos de Noronha (World Association of Cultural Psychiatry), Vincenzo Di Nicola

[EW-1]

“POLARIZATION – A SYMPTOM OF SOCIAL ILLNESS”

Overcoming Polarization – Tools for Health Professionals and Educators

*Marcos de Noronha², *Vincenzo Di Nicola³, Itsuo Asai¹ (1. Heart Clinic Medical Corporation (Japan), 2. World Association of Cultural Psychiatry (Brazil), 3. University of Montreal (Canada))

Educational Workshop

2025年9月26日(金) 13:10 ~ 14:40 Session Room 1 (Main Hall A)

[Educational Workshop 1] "POLARIZATION - A SYMPTOM OF SOCIAL ILLNESS" Overcoming Polarization - Tools for Health Professionals and Educators

Moderator: Marcos de Noronha (World Association of Cultural Psychiatry), Vincenzo Di Nicola

[EW-1] "POLARIZATION – A SYMPTOM OF SOCIAL ILLNESS"
Overcoming Polarization – Tools for Health Professionals and Educators

*Marcos de Noronha², *Vincenzo Di Nicola³, Itsuo Asai¹ (1. Heart Clinic Medical Corporation (Japan), 2. World Association of Cultural Psychiatry (Brazil), 3. University of Montreal (Canada))

キーワード : Polarization、SOCIAL ILLNESS、Workshop

Polarization is a global phenomenon exacerbated by mass communication that, while bridging distances, negatively affect human interactions. Despite ancient roots, polarization today stands out as a public health concern. For health professionals and educators, addressing polarization requires preparation, cultural and emotional awareness, and effective techniques for working with individuals and groups.

This workshop employs catharsis as a central tool, creating a space for communication and learning about the effects of pathological polarization, with a focus on the role emotions play in shaping perceptions. The connection between emotions and perception originated in early human societies and is evidenced in anthropological studies, where rituals served as a means of social integration. Among modern psychotherapeutic techniques, psychodrama stands out by systematizing the use of catharsis to uncover behavioral patterns and foster understanding.

Pathological polarization often leads individuals to develop "cognitive immunization," a defensive mechanism that avoids exposure to opposing arguments. However, overcoming this barrier is possible by developing a deep understanding of the "physiology of prejudice," enabling active listening and constructive dialogue. Rituals, including religious ones, and psychotherapeutic techniques can contribute to understanding and overcoming these barriers, helping us address differences that may spark conflict.

The issues that drive polarization include: religion, ideologies, global conflicts, pandemics, and power struggles. However, the roots of prejudice and division among people remain consistent. While there is no universal solution to these challenges in a diverse world, professionals in health and education must understand the origins of polarization and develop emotional and rational tools to act with balance and empathy.

In this workshop, we use psychodramatic techniques, starting with sociometry, to identify participants and their cultural positions, followed by sociodrama to introduce basic concepts of emotion and its representations. Through active participation, we explore ways to listen and engage with others that foster bridges instead of barriers.

Luncheon Seminar

2025年9月26日(金) 12:20 ~ 13:00  Session Room 1 (Main Hall A)

Luncheon Seminar 2

Sponsored by Viatris Pharmaceuticals Japan G.K.

[LS-02]

Multi-Dimensional Understandings and Interventions for Hikikomori: From Pharmacotherapy to Psychodynamic Psychotherapy

*Takahiro A. Kato¹ (1. Department of Psychiatry, Hokkaido University Graduate School of Medicine (Japan))

Luncheon Seminar

2025年9月26日(金) 12:20 ~ 13:00 Session Room 1 (Main Hall A)

Luncheon Seminar 2

[LS-02] Multi-Dimensional Understandings and Interventions for Hikikomori: From Pharmacotherapy to Psychodynamic Psychotherapy

*Takahiro A. Kato¹ (1. Department of Psychiatry, Hokkaido University Graduate School of Medicine (Japan))

Hikikomori is a condition in which a person stays at home almost every day for six months or longer without going to school or work (Saito 1998). This phenomenon, initially recognized in Japan, has now become a global issue, affecting individuals across Asia, Europe, and the Americas (Kato et al. Lancet 2011; Psychiatry and Clinical Neurosciences 2019). I have been leading the world's first hikikomori research clinic at a university hospital, proposing hikikomori as a psychiatric condition of pathological social withdrawal and establishing diagnostic criteria (Kato et al. World Psychiatry 2020). Notably, hikikomori has been included in the DSM-5TR (2022), reflecting its growing recognition in the field of psychiatry. In this seminar, I will present a multi-dimensional assessment system for hikikomori, incorporating the latest evaluation methods (Kato et al. World Psychiatry 2020; Current Opinions in Psychiatry 2024). This system is grounded in a bio-psycho-sociocultural framework, which emphasizes the interplay of biological, psychological, social, and cultural factors in understanding hikikomori.

Based on this comprehensive understanding, I will introduce various therapeutic interventions tailored to the needs of individuals with hikikomori. These include pharmacotherapy for addressing underlying psychiatric conditions, as well as psychodynamic psychotherapy, which explores the unconscious processes and interpersonal dynamics contributing to social withdrawal.

By integrating these approaches, we aim to provide personalized and effective care for individuals with hikikomori. This seminar will also highlight the importance of interdisciplinary collaboration and the need for culturally sensitive interventions to address this complex and evolving phenomenon.

Symposium | Academia : [Symposium 23] The Future of Psychiatry and Its Journals: Insights from Editors-in-Chief

2025年9月26日(金) 9:00 ~ 10:30 Session Room 1 (Main Hall A)

[Symposium 23] The Future of Psychiatry and Its Journals: Insights from Editors-in-Chief

Moderator: Yong Chon Park (Emeritus professor at HanYang University), Itsuo Asai (Heart Clinic Medical Corporation)

[SY-23]

The Future of Psychiatry and Its Journals: Insights from Editors-in-Chief

Itsuo Asai⁵, Kimberly Yonkers¹, Chee Ng², G. Eric Jarvis³, Tadafumi Kato⁴ (1. UMass Chan Medical School (United States of America), 2. University of Melbourne (Australia), 3. McGill University (Canada), 4. Juntendo Medical School (Japan), 5. Heart Clinic Medical Corporation (Japan))

[SY-23-01]

Grow Your Academic Profile Through Publishing

*Kimberly A Yonkers¹ (1. UMass Memorial Health and UMass Chan Medical School (United States of America))

[SY-23-02]

Asia-Pacific Psychiatry: Partnerships in promoting research publication in the region

*Chee Ng¹ (1. University of Melbourne (Australia))

[SY-23-03]

Transcultural Psychiatry: A journal's past, present and future

*George Eric Jarvis¹ (1. McGill University (Canada))

[SY-23-04]

The Role of Society Journals in Academic Publishing: The Mission of Psychiatry and Clinical Neurosciences

*Tadafumi Kato¹ (1. Department of Psychiatry and Behavioral Science, Juntendo University Graduate School of Medicine (Japan))

Symposium | Academia : [Symposium 23] The Future of Psychiatry and Its Journals: Insights from Editors-in-Chief

2025年9月26日(金) 9:00 ~ 10:30 Session Room 1 (Main Hall A)

[Symposium 23] The Future of Psychiatry and Its Journals: Insights from Editors-in-Chief

Moderator: Yong Chon Park (Emeritus professor at HanYang University), Itsuo Asai (Heart Clinic Medical Corporation)

[SY-23] The Future of Psychiatry and Its Journals: Insights from Editors-in-Chief

Itsuo Asai⁵, Kimberly Yonkers¹, Chee Ng², G. Eric Jarvis³, Tadafumi Kato⁴ (1. UMass Chan Medical School (United States of America), 2. University of Melbourne (Australia), 3. McGill University (Canada), 4. Juntendo Medical School (Japan), 5. Heart Clinic Medical Corporation (Japan))

キーワード : Publishing、psychiatry、Periodicals as Topic、Peer Review、Research、Editorial Policies

In this symposium, we will hear from the editors-in-chief of four journals Editors. They will discuss the journals' functions, challenges, and future : Yonkers Kimberly, Professor of Psychiatry at UMass Chan Medical School, former Editor-in-Chief of the online APA journal, Psychiatric Research and Clinical Psychiatry and current Editor-in-Chief of the Journal of Nervous and Mental Disease, will discuss how writing for journals can help authors grow and succeed, inspire colleagues, and invigorate their institutions; Professor Chee Ng of the University of Melbourne, Editor-in-Chief of the Asia-Pacific Psychiatry, the official journal of the PRCP, will discuss how journals can be a tool for collaboration among researchers and psychiatric societies to develop and share innovations in psychiatric advancement and clinical practice. Professor G. Eric Jarvis of McGill University, Editor-in-Chief of Transcultural Psychiatry, the journal of the WACP, will discuss the journal from a historical perspective, the problems it faces today, and its future development. Professor Tadashi Kato of Juntendo Medical School, Editor-in-Chief of Psychiatry and Clinical Neurosciences, the official journal of the Japanese Society of Psychiatry and Neurology, will discuss how to maintain and improve the quality of academic journals in an increasingly diverse world where there are many non-peer-reviewed print publications. We hope that the audience will develop a deeper interest in academic publishing and actively contribute to the journals from a variety of perspectives to enhance the professional, practice and policy development in psychiatry.

Symposium | Academia : [Symposium 23] The Future of Psychiatry and Its Journals: Insights from Editors-in-Chief

2025年9月26日(金) 9:00 ~ 10:30 Session Room 1 (Main Hall A)

[Symposium 23] The Future of Psychiatry and Its Journals: Insights from Editors-in-Chief

Moderator: Yong Chon Park (Emeritus professor at HanYang University), Itsuo Asai (Heart Clinic Medical Corporation)

[SY-23-01] Grow Your Academic Profile Through Publishing

*Kimberly A Yonkers¹ (1. UMass Memorial Health and UMass Chan Medical School (United States of America))

キーワード : Academic psychiatry、Publishing、Faculty development

Academic publishing is a triple win for the author. It shows her personal expertise, it enhances the reputation of her institution of work and it educates her colleagues about medical issues. Unfortunately, most residency training does not provide a curriculum for publishing. There are now several standard formats from the Equator Network (<https://www.equator-network.org/reporting-guidelines/>) that articulate best practices for publishing clinical trials, reviews, research protocols and observational studies. Not only do these formats enhance the quality of study reports, they can help guide writers as they traverse their writing journeys. This talk will discuss strategies to writing, the various formats as well as tips for getting published.

Symposium | Academia : [Symposium 23] The Future of Psychiatry and Its Journals: Insights from Editors-in-Chief

2025年9月26日(金) 9:00 ~ 10:30 Session Room 1 (Main Hall A)

[Symposium 23] The Future of Psychiatry and Its Journals: Insights from Editors-in-Chief

Moderator: Yong Chon Park (Emeritus professor at HanYang University), Itsuo Asai (Heart Clinic Medical Corporation)

[SY-23-02] Asia-Pacific Psychiatry: Partnerships in promoting research publication in the region

*Chee Ng¹ (1. University of Melbourne (Australia))

キーワード : Academic psychiatry、publication、research collaboration

This presentation will focus on the future of academic publishing in psychiatry from the perspective of Asia-Pacific Psychiatry (APPY). As the official journal of the Pacific Rim College of Psychiatrists and the Asian Federation of Psychiatric Associations, APPY is an international psychiatric journal focused on the Asia Pacific Rim region, that highlights the diversity in psychiatric behaviour, treatments and outcomes related to regional differences. In an increasingly open access world where diversifying journal output is necessary for long-term sustainability, it is essential to ensure improvement in academic publishing process and tools via technology development. More importantly, partnership with the research community in promoting research publication in the region becomes highly critical. The discussion will consider how journals can facilitate collaboration among researchers and psychiatric societies to develop and share innovations in psychiatric advancement as well as translation into clinical practice. In addition, the discussion will also explore emerging challenges in the future for the journal.

Symposium | Academia : [Symposium 23] The Future of Psychiatry and Its Journals: Insights from Editors-in-Chief

2025年9月26日(金) 9:00 ~ 10:30 Session Room 1 (Main Hall A)

[Symposium 23] The Future of Psychiatry and Its Journals: Insights from Editors-in-Chief

Moderator: Yong Chon Park (Emeritus professor at HanYang University), Itsuo Asai (Heart Clinic Medical Corporation)

[SY-23-03] Transcultural Psychiatry: A journal's past, present and future

*George Eric Jarvis¹ (1. McGill University (Canada))

キーワード : Transcultural Psychiatry、Journal、Past、Present、Future

Background: Transcultural Psychiatry was founded in 1956 and was initially a newsletter before becoming the Transcultural Psychiatric Research Review until 1997, when it adopted its current name. Editors-in-chief have included Eric D. Wittkower (1956-1981), Raymond Prince (1981-1991), Laurence J. Kirmayer (1991-2023), and G. Eric Jarvis (from 2023).

Objectives: This presentation will review the journal's founding and history, the problems it faces today, and its future priorities.

Methods: Data will be drawn from the Journal's website, archived issues, published accounts, and oral history. Examples of current dilemmas will be taken from submissions, editorial decisions, and anonymized email messages. Future priorities will stem from anticipated publishing and editing trends.

Results: Transcultural Psychiatry was founded during the refugee crisis following WWII and the decolonization of old-world empires. Wittkower was a refugee, having fled Nazi Germany in 1933, and this lent a personal aspect to the journal and its focus. Despite influence by anthropology, the Journal has always retained a focus on clinical concerns. In 1997, under the leadership of Laurence J. Kirmayer, the Journal was revitalized, modernized, and given a new name and publisher. The Journal resists a purely open access model, which would exclude authors from less resourced countries. Going forward, the journal will need to streamline its procedures and incorporate AI into its operations, while maintaining its mission to readers from the Global South.

Conclusions: Transcultural Psychiatry is the first journal of its kind. As a bridge between clinical psychiatry and the social sciences, it occupies a unique niche in the publishing world. Its outreach to the Global South and reputation as a champion of diversity ensures that it will flourish in the years to come.

Symposium | Academia : [Symposium 23] The Future of Psychiatry and Its Journals: Insights from Editors-in-Chief

2025年9月26日(金) 9:00 ~ 10:30 Session Room 1 (Main Hall A)

[Symposium 23] The Future of Psychiatry and Its Journals: Insights from Editors-in-Chief

Moderator: Yong Chon Park (Emeritus professor at HanYang University), Itsuo Asai (Heart Clinic Medical Corporation)

[SY-23-04] The Role of Society Journals in Academic Publishing: The Mission of Psychiatry and Clinical Neurosciences

*Tadafumi Kato¹ (1. Department of Psychiatry and Behavioral Science, Juntendo University Graduate School of Medicine (Japan))

キーワード : Scientific publishing、Journals、Academic Society

Academic journals serve a critical role in upholding the quality of scientific research through rigorous peer review. At the same time, they are central to the evaluation of researchers' achievements, making the roles of editors and reviewers especially significant. Researchers often seek validation and visibility by submitting to high-impact journals. However, the repetitive cycle of rejection and resubmission—often needs unproductive format or style adjustments—raises questions about its true value. In recent years, the rise of open access (OA) journals has transformed the publishing landscape. While OA provides broader accessibility, concerns have emerged regarding the quality of peer review in some journals. A structural issue lies in the financial model of publication fee-based OA journals, which may incentivize volume over quality. Both commercial subscription-based journals and OA journals have their respective strengths and challenges. Against this backdrop, society journals such as Psychiatry and Clinical Neurosciences (PCN) are gaining renewed attention. Operated by the Japanese Society of Psychiatry and Neurology, PCN is committed to maintaining high scientific standards while offering a supportive environment for authors. Through these efforts, PCN achieved a 2024 impact factor of 5.0, placing it in the top quartile (Q1) among 282 journals in the Psychiatry category. This presentation will explore the evolving role of academic journals in scholarly publishing and highlight the initiatives undertaken by Psychiatry and Clinical Neurosciences, the official journal of the Japanese Society of Psychiatry and Neurology.

Symposium | Nurodevelopmental disorder : [Symposium 24] "WACP Plenary Symposium" Neuro-developmental Disorder symposium

2025年9月26日(金) 9:00 ~ 10:30 Session Room 2 (Main Hall B)

[Symposium 24] "WACP Plenary Symposium" Neuro-developmental Disorder symposium

Moderator: Pietro De Rossi (Unit of Child and Adolescent Psychiatry, Ospedale Pediatrico Bambino Gesù)

[SY-24]

Neuro-developmental Disorder symposium

Itsuo Asai¹, Kenji Tsuchiya^{2,3}, Yoko Kamio⁴, John Chee Meng Wong⁵, Ahsan Nazeer⁶ (1. Heart Clinic Medical Corporation (Japan), 2. Hamamatsu University (Japan), 3. Osaka University (Japan), 4. Ochanomizu University (Japan), 5. National University of Singapore (Singapore), 6. Sidra Medecine (Indonesia))

[SY-24-01]

The earliest presentations of neurodevelopmental disorders

*Kenji J. Tsuchiya^{1,2} (1. Hamamatsu University School of Medicine, Research Center for Child Mental Development (Japan), 2. The University of Osaka, United Graduate School of Child Development (Japan))

[SY-24-02]

“Optimal outcome” for individuals with neurodevelopmental disorders reconsidered

*Yoko Kamio¹ (1. Ochanomizu University (Japan))

[SY-24-03]

Academic and social emotional challenges associated with adolescents with neurodevelopmental disorders in a national high school curriculum

*John Chee Meng Wong^{1,2} (1. National University of Singapore, Mind Science Centre (Singapore), 2. National University Hospital, Department of Psychological Medicine (Singapore))

[SY-24-04]

Autism Spectrum Disorder-A Concept in Evolution

*Ahsan Nazeer¹ (1. Weill Cornell, NY, USA/ Sidra Medicine, Qatar (Qatar))

Symposium | Nurodevelopmental disorder : [Symposium 24] "WACP Plenary Symposium" Neuro-developmental Disorder symposium

2025年9月26日(金) 9:00 ~ 10:30 Session Room 2 (Main Hall B)

[Symposium 24] "WACP Plenary Symposium" Neuro-developmental Disorder symposium

Moderator: Pietro De Rossi (Unit of Child and Adolescent Psychiatry, Ospedale Pediatrico Bambino Gesù)

[SY-24] Neuro-developmental Disorder symposium

Itsuo Asai¹, Kenji Tsuchiya^{2,3}, Yoko Kamio⁴, John Chee Meng Wong⁵, Ahsan Nazeer⁶ (1. Heart Clinic Medical Corporation (Japan), 2. Hamamatsu University (Japan), 3. Osaka University (Japan), 4. Ochanomizu University (Japan), 5. National University of Singapore (Singapore), 6. Sidra Medecine (Indonesia))

キーワード : Neurodevelopmental Disorders、Autism Spectrum Disorder、Attention Deficit Disorder with Hyperactivity、Early Intervention (Education)、Adolescent Behavior

This symposium explores the evolving understanding of neurodevelopmental disorders (NDDs), including ADHD and autism, from infancy through adolescence, bridging clinical, educational, and conceptual perspectives. Dr. Kenji Tsuchiya presents findings from a large birth cohort study identifying early neurodevelopmental indicators for ADHD and autism. Suboptimalities in visual reception and receptive language before age 2 predict ADHD traits, while early gross motor and expressive language delays forecast autism traits—suggesting distinctive early pathways from infancy. Dr. Yoko Kamio critically reconsiders the notion of “optimal outcomes” for individuals with ASD, especially in the context of early intervention. Drawing on both parental and professional viewpoints, she highlights the emerging tension between traditional outcome metrics and neurodiversity-informed values, proposing a redefinition of success in ASD care. Dr. John Chee Meng Wong examines academic and socio-emotional challenges faced by adolescents with NDDs within the national high school system. He outlines how executive dysfunction, sensory sensitivities, and rigidity compound school difficulties and emotional dysregulation, and advocates for systemic policy reforms and targeted support for youth, families, and educators. Dr. Ahsan Nazeer traces the historical evolution of autism as a diagnostic concept, from Kanner’s seminal definition to contemporary frameworks, especially in child and adolescent populations. He reflects on how shifting scientific, cultural, and clinical paradigms continue to reshape our understanding of autism. Together, these presentations offer a multidisciplinary synthesis of how NDDs manifest, are interpreted, and supported across developmental stages.

Symposium | Nurodevelopmental disorder : [Symposium 24] "WACP Plenary Symposium" Neuro-developmental Disorder symposium

2025年9月26日(金) 9:00 ~ 10:30 Session Room 2 (Main Hall B)

[Symposium 24] "WACP Plenary Symposium" Neuro-developmental Disorder symposium

Moderator: Pietro De Rossi (Unit of Child and Adolescent Psychiatry, Ospedale Pediatrico Bambino Gesù)

[SY-24-01] The earliest presentations of neurodevelopmental disorders

*Kenji J. Tsuchiya^{1,2} (1. Hamamatsu University School of Medicine, Research Center for Child Mental Development (Japan), 2. The University of Osaka, United Graduate School of Child Development (Japan))

This study sought the earliest neurodevelopmental representations for ADHD and autism phenotypes using a representative birth cohort.

Neurodevelopmental suboptimalities in visual reception before age 1 and in both fine motor and receptive language between ages 1?2 were associated with the ADHD phenotype.

Neurodevelopmental suboptimalities in gross motor before age 1 and in expressive language between ages 1.5 and 3 were associated with the autism phenotype. The earliest representations of ADHD and autism phenotypes can be found before age 1, cascading separate sets of neurodevelopmental suboptimalities.

Symposium | Nurodevelopmental disorder : [Symposium 24] "WACP Plenary Symposium" Neuro-developmental Disorder symposium

2025年9月26日(金) 9:00 ~ 10:30 Session Room 2 (Main Hall B)

[Symposium 24] "WACP Plenary Symposium" Neuro-developmental Disorder symposium

Moderator: Pietro De Rossi (Unit of Child and Adolescent Psychiatry, Ospedale Pediatrico Bambino Gesù)

[SY-24-02] “Optimal outcome” for individuals with neurodevelopmental disorders reconsidered

*Yoko Kamio¹ (1. Ochanomizu University (Japan))

キーワード : optimal outcomes、 autism spectrum disorder、 neurodiversity

Recently as to what constitutes “optimal outcomes” for individuals with ASD, there has been a lot of controversies from a neurodiversity perspective. In this presentation, using early intervention studies of ASD as an example, I will shed light on the differences and similarities in what parents and professionals consider as important outcome measures. When future early intervention studies are planned, “optimal outcomes” should be reconsidered.

Symposium | Nurodevelopmental disorder : [Symposium 24] "WACP Plenary Symposium" Neuro-developmental Disorder symposium

2025年9月26日(金) 9:00 ~ 10:30 Session Room 2 (Main Hall B)

[Symposium 24] "WACP Plenary Symposium" Neuro-developmental Disorder symposium

Moderator: Pietro De Rossi (Unit of Child and Adolescent Psychiatry, Ospedale Pediatrico Bambino Gesù)

[SY-24-03] Academic and social emotional challenges associated with adolescents with neurodevelopmental disorders in a national high school curriculum

*John Chee Meng Wong^{1,2} (1. National University of Singapore, Mind Science Centre (Singapore), 2. National University Hospital, Department of Psychological Medicine (Singapore))

ADHD and Autism in adolescent's present unique learning and social emotional development challenges in high school education. Besides presenting with executive function deficits, behavioural impulsivity, social communication interaction and sensory processing difficulties, rigid thinking, resistance to change, can contribute towards the adolescent's academic under performance, emotional dysregulations and stress. This presentation will discuss systemic and policy approach, intervention programs to support these adolescents, their parents and teachers.

Symposium | Nurodevelopmental disorder : [Symposium 24] "WACP Plenary Symposium" Neuro-developmental Disorder symposium

2025年9月26日(金) 9:00 ~ 10:30 Session Room 2 (Main Hall B)

[Symposium 24] "WACP Plenary Symposium" Neuro-developmental Disorder symposium

Moderator: Pietro De Rossi (Unit of Child and Adolescent Psychiatry, Ospedale Pediatrico Bambino Gesù)

[SY-24-04] Autism Spectrum Disorder-A Concept in Evolution

*Ahsan Nazeer¹ (1. Weill Cornell, NY, USA/ Sidra Medicine, Qatar (Qatar))

キーワード : Autism、Autism Spectrum Disorder、Evolution、Diagnostic Criteria

The comprehension and diagnosis of autism have advanced significantly over the course of history. Initially, autism was conflated with other conditions such as schizophrenia; however, it is now acknowledged as a spectrum disorder with unique characteristics. This progression is characterized by pivotal changes in the definitions, diagnostic criteria, and treatment approaches for autism, with continuous research efforts further refining our understanding.

Symposium | CFI : [Symposium 25] Cultural Dimensions of Mental Health and Support Method: Refugees, Migrants and Psychotherapy

2025年9月26日(金) 9:00 ~ 10:30 Session Room 3 (Large Hall A)

[Symposium 25] Cultural Dimensions of Mental Health and Support Method: Refugees, Migrants and Psychotherapy

Moderator: Meryam Schouler-Ocak (Charité University), Farooq Naeem (University of Toronto)

[SY-25]

Cultural Dimensions of Mental Health and Support Method: Refugees, Migrants and Psychotherapy

Meryam Schouler-Ocak¹, Constantine D. Della², Farooq Naeem³, Alma Jimenez⁴, Yuto Kano⁵ (1. Charité University (Germany), 2. University of the Philippines (Philippines), 3. University of Toronto (Canada), 4. World Federation for Psychotherapy (Philippines), 5. Keio University (Japan))

[SY-25-01]

Overview of data and facts as well as understanding and explanation of mental health of migrants and refugees

*Meryam Schouler-Ocak¹ (1. Psychiatric University Clinic of Charité at St. Hedwig Hospital (Germany))

[SY-25-02]

Cultural Dimensions of Mental Health and Support Method: Refugees, Migrants and Psychotherapy

*Constantine David Della¹ (1. University of the Philippines Manila (Philippines))

Symposium | CFI : [Symposium 25] Cultural Dimensions of Mental Health and Support Method: Refugees, Migrants and Psychotherapy

2025年9月26日(金) 9:00 ~ 10:30 Session Room 3 (Large Hall A)

[Symposium 25] Cultural Dimensions of Mental Health and Support Method: Refugees, Migrants and Psychotherapy

Moderator: Meryam Schouler-Ocak (Charité University), Farooq Naeem (University of Toronto)

[SY-25] Cultural Dimensions of Mental Health and Support Method: Refugees, Migrants and Psychotherapy

Meryam Schouler-Ocak¹, Constantine D. Della², Farooq Naeem³, Alma Jimenez⁴, Yuto Kano⁵ (1. Charité University (Germany), 2. University of the Philippines (Philippines), 3. University of Toronto (Canada), 4. World Federation for Psychotherapy (Philippines), 5. Keio University (Japan))

Human beings are immersed in culture, and we need to recognize the cultural dimensions of mental health and support methods. Refugees and migrants exhibit the most critical influence of culture on mental health. People with a migration or refugee background are often confronted with numerous stress and risk factors before, during, and after migration. The accumulation of these factors exerts a significant impact on their mental health. Also, there are numerous barriers to accessing the healthcare system, such as language and cultural communication problems, discrimination, social exclusion, bureaucratic hurdles, and the Asylum Seekers Benefits Act. As a support method for people, psychotherapy is an indispensable modality, but cultural dimensions exist in psychotherapy, too. Modern psychotherapy and psychiatry were developed in the West and based on the Western cultural model. A lack of understanding of the client's cultural norms can lead to misdiagnosis and possibly cause a severe limitation to the support. This may be particularly true for refugees and migrants who are not from Western culture. This symposium provides a brief overview of statistical data, definitions of health and illness, explanatory models, treatment expectations, and specific disorders in the population with a history of migration or flight. We also discuss cultural competence in psychotherapy, cultural consideration in psychotherapy, cultural aspects of countertransference, and consideration of values and ethics in diagnosis. The first speaker will give an overview of data and facts about the mental health of migrants and refugees. The second speaker will focus on cultural competence in psychotherapy for patients in consultation and liaison psychiatry. The third speaker will discuss cognitive behavioral therapy and Culture. The fourth speaker will analyze the collectivist cultural aspects of countertransference to suicidal patients. The last speaker will discuss how psychiatrists in Japan consider values and ethics in diagnosing Autism.

Symposium | CFI : [Symposium 25] Cultural Dimensions of Mental Health and Support Method: Refugees, Migrants and Psychotherapy

2025年9月26日(金) 9:00 ~ 10:30 Session Room 3 (Large Hall A)

[Symposium 25] Cultural Dimensions of Mental Health and Support Method: Refugees, Migrants and Psychotherapy

Moderator: Meryam Schouler-Ocak (Charité University), Farooq Naeem (University of Toronto)

[SY-25-01] Overview of data and facts as well as understanding and explanation of mental health of migrants and refugees

*Meryam Schouler-Ocak¹ (1. Psychiatric University Clinic of Charité at St. Hedwig Hospital (Germany))

The global population of refugees and asylum seekers is at its highest recorded level. By the end of 2024, the most recent reporting period, 123.2 million people worldwide had been forced to flee their homes due to persecution, conflict, violence, human rights violations, or events seriously disturbing public order. Research on the mental health of displaced populations has yielded highly variable prevalence estimates of mental disorders, a discrepancy often attributed to methodological constraints. Comprehensive reviews indicate that current prevalence estimates encompass not only PTSD but also depression, anxiety, and psychosis. Refugees and asylum seekers show high and persistent rates of PTSD and depression. This underscores the need for continuous, long-term psychological support beyond the initial resettlement phase. This presentation provides an overview of the latest data and findings on the mental health of migrants and refugees and discusses them in light of the ethical principles guiding professionals in the field of mental health care.

Symposium | CFI : [Symposium 25] Cultural Dimensions of Mental Health and Support Method: Refugees, Migrants and Psychotherapy

2025年9月26日(金) 9:00 ~ 10:30 Session Room 3 (Large Hall A)

[Symposium 25] Cultural Dimensions of Mental Health and Support Method: Refugees, Migrants and Psychotherapy

Moderator: Meryam Schouler-Ocak (Charité University), Farooq Naeem (University of Toronto)

[SY-25-02] Cultural Dimensions of Mental Health and Support Method: Refugees, Migrants and Psychotherapy

*Constantine David Della¹ (1. University of the Philippines Manila (Philippines))

キーワード : Culture and psychiatry、Culture and psychotherapy、Culture and mental health

Human beings are immersed in culture, and we need to recognize the cultural dimensions of mental health and support methods. Refugees and migrants exhibit the most critical influence of culture on mental health. People with a migration or refugee background are often confronted with numerous stress and risk factors before, during, and after migration. The accumulation of these factors exerts a significant impact on their mental health. Also, there are numerous barriers to accessing the healthcare system, such as language and cultural communication problems, discrimination, social exclusion, bureaucratic hurdles, and the Asylum Seekers Benefits Act. As a support method for people, psychotherapy is an indispensable modality, but cultural dimensions exist in psychotherapy, too. Modern psychotherapy and psychiatry were developed in the West and based on the Western cultural model. A lack of understanding of the client's cultural norms can lead to misdiagnosis and possibly cause a severe limitation to the support. This may be particularly true for refugees and migrants who are not from Western culture. This symposium provides a brief overview of statistical data, definitions of health and illness, explanatory models, treatment expectations, and specific disorders in the population with a history of migration or flight. We also discuss cultural competence in psychotherapy, cultural consideration in psychotherapy, cultural aspects of countertransference, and consideration of values and ethics in diagnosis. The first speaker will give an overview of data and facts about the mental health of migrants and refugees. The second speaker will focus on cultural competence in psychotherapy for patients in consultation and liaison psychiatry. The third speaker will discuss cognitive behavioral therapy and Culture. The fourth speaker will analyze the collectivist cultural aspects of countertransference to suicidal patients. The last speaker will discuss how psychiatrists in Japan consider values and ethics in diagnosing Autism.

Symposium | Forensic Psychiatry : [Symposium 26] Balancing Legal Obligations and Medical Ethics: Implementing Rights-Based Mental Health Care under the CRPD

2025年9月26日(金) 9:00 ~ 10:30 Session Room 4 (Large Hall B)

[Symposium 26] Balancing Legal Obligations and Medical Ethics: Implementing Rights-Based Mental Health Care under the CRPD

Moderator: Samuel F. Law (University of Toronto), Shinsuke Kondo (University of Tokyo)

[SY-26]

Balancing Legal Obligations and Medical Ethics: Implementing Rights-Based Mental Health Care under the CRPD

Samuel Law¹, Chonnakarn Jatchavala², Shinsuke Kondo³, Shaohua Lu⁴ (1. University of Toronto (Canada), 2. Prince of Songkla University (Thailand), 3. University of Tokyo (Japan), 4. University of British Columbia (Canada))

[SY-26-01]

Service users' perspectives on supported decision making in psychiatric settings – A scoping review

*Samuel F. Law¹, Waverly Chan², Deandra Osayande¹ (1. University of Toronto (Canada), 2. McMaster University (Canada))

[SY-26-02]

Comparative Analysis of the Thai Mental Healthcare Act and WHO Mental Health Legislation Standards based on the UNCRPD

*Chonnakarn Jatchavala¹, Nutt Sukavejworakit² (1. Department of Psychiatry, Faculty of Medicine, Prince of Songkla University, Songkhla, Thailand (Thailand), 2. School of Law, University of Phayao (Thailand))

[SY-26-03]

Cross-national comparison of involuntary hospitalization: Ideas for reforming Japan's mental health system

*Shinsuke Kondo¹ (1. University of Tokyo (Japan))

[SY-26-04]

Forensic Implications of the Convention on the Rights of Persons with Disabilities - a Canadian Perspective

*Shaohua Lu¹ (1. University of British Columbia (Canada))

Symposium | Forensic Psychiatry : [Symposium 26] Balancing Legal Obligations and Medical Ethics: Implementing Rights-Based Mental Health Care under the CRPD

2025年9月26日(金) 9:00 ~ 10:30 Session Room 4 (Large Hall B)

[Symposium 26] Balancing Legal Obligations and Medical Ethics: Implementing Rights-Based Mental Health Care under the CRPD

Moderator: Samuel F. Law (University of Toronto), Shinsuke Kondo (University of Tokyo)

[SY-26] Balancing Legal Obligations and Medical Ethics: Implementing Rights-Based Mental Health Care under the CRPD

Samuel Law¹, Chonnakarn Jatchavala², Shinsuke Kondo³, Shaohua Lu⁴ (1. University of Toronto (Canada), 2. Prince of Songkla University (Thailand), 3. University of Tokyo (Japan), 4. University of British Columbia (Canada))

キーワード : CRPD、rights-based care、involuntary treatment、medical ethics

The historical use of involuntary treatment of persons with mental illness has often resulted in serious human rights violations around the world. In response, the United Nations Convention on the Rights of Persons with Disabilities (CRPD) calls for a shift towards care based on human rights principles. While many countries have ratified the CRPD, there are significant challenges in implementing its mandates. Rights-based paradigms may sometimes result in treatable conditions being left unaddressed by medical systems, with affected individuals instead facing incarceration through judicial systems. In low- and middle-income countries, where mental health services are often insufficient, psychiatrists typically become the primary advocates for the human rights of people with mental disabilities, leading efforts to educate treatment teams and the broader community.

This presentation examines how leading psychiatrists across the Pacific Rim countries interpret and implement the CRPD's call for rights-centred care. Drawing on insights from both high-income and resource-limited settings, the session will explore how psychiatrists navigate the intersection of legal obligations and ethical considerations. Case studies from various countries will illustrate the complexities of reconciling human rights principles with the realities of mental health care.

The presentation will be followed by a general discussion in which participants will be encouraged to participate actively. This interactive dialogue aims to deepen understanding of the challenges and opportunities of implementing CRPD principles and provide valuable perspectives for developing mental health systems worldwide.

Symposium | Forensic Psychiatry : [Symposium 26] Balancing Legal Obligations and Medical Ethics: Implementing Rights-Based Mental Health Care under the CRPD

2025年9月26日(金) 9:00 ~ 10:30 Session Room 4 (Large Hall B)

[Symposium 26] Balancing Legal Obligations and Medical Ethics: Implementing Rights-Based Mental Health Care under the CRPD

Moderator: Samuel F. Law (University of Toronto), Shinsuke Kondo (University of Tokyo)

[SY-26-01] Service users' perspectives on supported decision making in psychiatric settings – A scoping review

*Samuel F. Law¹, Waverly Chan², Deandra Osayande¹ (1. University of Toronto (Canada), 2. McMaster University (Canada))

キーワード : supported decision making、substitute decision making、Convention on rights of people with disability (CRPD)、patient perspectives、autonomy

Background Supported decision-making (SDM) in psychiatric setting is a process that enables individuals to make their own decisions regarding their treatment. The current clinical practice generally promotes SDM as a good practice, but for those who are seriously ill and lack capacity to make treatment decisions, substituted decision making is the norm. The UN Convention for the Rights of Persons with Disabilities (CRPD) focuses on promotion of human rights and dignity, and has mandated for the complete elimination of mental health practices such as involuntary hospitalization, compulsory treatment, and substitute decision making. However, research on SDM in psychiatry is limited, and the CRPD proposed changes using SDM is met with very mixed perceptions and opinions. We performed a scoping review to explore what is currently known about patients' perspectives on SDM in psychiatric settings. **Methods** Following the PRISMA-ScR framework for scoping reviews, a literature search was conducted across 7 databases, including articles published up to March 2025. The articles were first screened by title and abstract, with a focus on SDM and other related interventions such as psychiatric advance directives. A total of 13 articles were chosen for full-text analysis. **Results** This review shows a wide and diverse range of patients' experiences with SDM, including positive and negative views, as well as suggestions for implementation. The recurring themes involved patients' level of insight, increased autonomy, concerns about being ignored, and the role of trust in relationships, among others. **Conclusion** These results highlight the importance of shifting more autonomy and greater support for patients to make their own treatment decisions through the framework of SDM. It also leaves doubt that SDM alone without other forms of decision-making is adequate or desirable. This review could inform current policy, practice and research on regarding the role of SDM in mental health care.

Symposium | Forensic Psychiatry : [Symposium 26] Balancing Legal Obligations and Medical Ethics: Implementing Rights-Based Mental Health Care under the CRPD

2025年9月26日(金) 9:00 ~ 10:30 Session Room 4 (Large Hall B)

[Symposium 26] Balancing Legal Obligations and Medical Ethics: Implementing Rights-Based Mental Health Care under the CRPD

Moderator: Samuel F. Law (University of Toronto), Shinsuke Kondo (University of Tokyo)

[SY-26-02] Comparative Analysis of the Thai Mental Healthcare Act and WHO Mental Health Legislation Standards based on the UNCRPD

*Chonnakarn Jatchaval¹, Nutt Sukavejworakit² (1. Department of Psychiatry, Faculty of Medicine, Prince of Songkla University, Songkhla, Thailand (Thailand), 2. School of Law, University of Phayao (Thailand))

キーワード : UNCRPD Human rights Mental health legislation、Thai Mental Health Act、Human rights、Mental health legislation

Background: The WHO Checklist on Mental Health Legislation provides practical guidance for developing mental health laws that adhere to the principles of the UNCRPD. It emphasizes a legal structure that safeguards the rights of individuals with mental health conditions while also improving the quality and accessibility of care. Thailand ratified the UN Convention on the Rights of Persons with Disabilities (UNCRPD) in 2008, and its Mental Health Act was most recently revised in 2019. However, no study has yet assessed how well the Act aligns with the WHO Checklist (WHO-RB).

Method: The Thai Mental Health Act 2019 was compared to each item in the WHO-RB. The authors categorize each item as either concordant or not, offering additional details in the text. Any items that were not consistent will be rechecked for concordance with other Thai legislation.

Results: The majority of the Thai Mental Health Act meets the WHO-RB standards. When considering other relevant Thai legislation, a greater number of WHO's standards are addressed in Thai law. However, some human rights aspects based on the UNCRPD still lack detailed provisions for practical and clinical application in Thailand by both healthcare providers and magistracy.

Conclusion: The UNCRPD plays a key role in shaping mental health policy in Thailand by guiding healthcare practices, promoting higher standards of care, and protecting the rights of individuals with mental health conditions. These efforts contribute to a more just and effective mental health system. As the 2019 Thai Mental Health Act is currently undergoing revision, insights from this process could support aligning the updated law with international standards for mental health legislation.

Symposium | Forensic Psychiatry : [Symposium 26] Balancing Legal Obligations and Medical Ethics: Implementing Rights-Based Mental Health Care under the CRPD

2025年9月26日(金) 9:00 ~ 10:30 Session Room 4 (Large Hall B)

[Symposium 26] Balancing Legal Obligations and Medical Ethics: Implementing Rights-Based Mental Health Care under the CRPD

Moderator: Samuel F. Law (University of Toronto), Shinsuke Kondo (University of Tokyo)

[SY-26-03] Cross-national comparison of involuntary hospitalization: Ideas for reforming Japan's mental health system

*Shinsuke Kondo¹ (1. University of Tokyo (Japan))

キーワード : CRPD、Mental Health Act、Involuntary hospitalization、Rights-based vs. capacity based

Japan's Mental Health and Welfare Act legitimizes involuntary hospitalization based on the *parens patriae* principle: when individuals with mental disorders are judged incapable of recognizing their need for treatment, they may be hospitalized without consent to protect their interests. Although the law includes a provision encouraging voluntary admission, the number of coercive admissions has remained high. Following Japan's ratification of the Convention on the Rights of Persons with Disabilities (CRPD) in 2014, which urges the abolition of non-consensual treatment solely on the basis of disability, awareness of this rights-based framework remains low among clinicians.

As part of a research project funded by Japan's Ministry of Health, Labour and Welfare—titled “*Study on Optimizing Inpatient Care Strategies within Community-Based Mental Health Systems*”—our team conducted a comparative legal and clinical survey. We reviewed the mental health laws of several countries and interviewed frontline psychiatrists using case vignettes to explore how involuntary hospitalization is implemented in practice.

This presentation focuses on a comparison between Japan and Canada. Canada was selected among Pacific Rim countries as a case study because of its relatively advanced community-based mental health system. In Canada, physicians—not limited to psychiatrists—can authorize involuntary hospitalization, allowing flexible responses in rural areas. Strict time limits are imposed, with regular renewal and oversight by independent Review Boards. In contrast, Japan requires certification as a Designated Psychiatrist, and its oversight remains weak, partly because its Mental Health Review Boards lack the capacity to function as effective safeguards. Although the 2024 legal amendment introduced time limits for involuntary hospitalization and mandated abuse reporting, its implementation remains doubtful, as the system still contains significant loopholes.

Insights from the Canadian system highlight the importance of enforceable safeguards, independent oversight, and transparency to better align mental health care with human rights principles.

Symposium | Forensic Psychiatry : [Symposium 26] Balancing Legal Obligations and Medical Ethics: Implementing Rights-Based Mental Health Care under the CRPD

2025年9月26日(金) 9:00 ~ 10:30 Session Room 4 (Large Hall B)

[Symposium 26] Balancing Legal Obligations and Medical Ethics: Implementing Rights-Based Mental Health Care under the CRPD

Moderator: Samuel F. Law (University of Toronto), Shinsuke Kondo (University of Tokyo)

[SY-26-04] Forensic Implications of the Convention on the Rights of Persons with Disabilities - a Canadian Perspective

*Shaohua Lu¹ (1. University of British Columbia (Canada))

キーワード : Forensic Psychiatry、Canada、Not Criminally Responsible

The United Nations Convention on the Rights of Persons with Disabilities (CRPD), adopted in 2006, serves as a framework for protecting and promoting the rights of people with disabilities, including those with mental illness. The CRPD asserts that all individuals, regardless of ability, have the right to personal autonomy and decision-making. CRPD potentially conflicts with the underlying principles of “not criminally responsible” (NCR) defence in Canada. When Canada ratified the CRPD in 2010, it included a reservation regarding Article 12, that permits supportive decision-making frameworks for mental health. Proponents of the reservation argue that it acknowledges the complexities involved in mental health care and ensures that individuals receive support without undermining their rights. A rigid interpretation of CRPD may neglect the real-world challenges faced by those with severe mental illnesses, where decision-making capacity can fluctuate. However, Canada’s reservation may legitimize a paternalistic approach, effectively denying certain rights to individuals with mental illness. The reservation could lead to violations of rights under the guise of support, rather than fostering true empowerment and autonomy. Further health care delivery in Canada is under provincial jurisdiction, leading to fragmentation of CRPD implementation. The NCR defence is administered under the Canadian federal criminal code. Critics of NCR argue that such practices infringe upon individual rights and perpetuate stigma against people with mental illness. They contend that NCR is an extension of involuntary treatment and undermines the CRPD’s goals of autonomy and self-determination. This defence can reinforce stereotypes that mental illness is inherently dangerous or irrational. Yet, the NCR defence can be protective when criminal actions are mediated by mental illness. This presentation provides an overview of the debate regarding this topic. It will also discuss current gaps in the literature and best practices concerning the CRPD.

Symposium | Schizophrenia : [Symposium 27] Case Conference: Approaches to Treatment-Resistant Schizophrenia in Patients Who Have Committed Criminal Acts

2025年9月26日(金) 9:00 ~ 10:30 Session Room 5 (Conference Room A)

[Symposium 27] Case Conference: Approaches to Treatment-Resistant Schizophrenia in Patients Who Have Committed Criminal Acts

Moderator: Chommakorn Thanetnit (Department of Psychiatry, Thammasat University Hospital)

[SY-27]

Case Conference: Approaches to Treatment-Resistant Schizophrenia in Patients Who Have Committed Serious Criminal Acts

Kenichi Kimura^{1,2,3}, Chommakorn Thanetnit⁴, Wonseok Lee⁶, Emily Ohki^{3,5} (1. Forensic Psychiatry Center, Hokkaido University Hospital (Japan), 2. Hokkaido Prefectural Koyogaoka Hospital (Japan), 3. Japan Young Psychiatrists Organization (Japan), 4. Department of Psychiatry, Thammasat University Hospital (Thailand), 5. Tokyo Metropolitan Matsuzawa Hospital (Japan), 6. Department of Psychiatry, Jeju National University Hospital (Korea))

[SY-27-01]

Case Conference: Approaches to Treatment-Resistant Schizophrenia in Patients Who Have Committed Serious Criminal Acts

*Kenichi Kimura^{1,2,3}, Chommakorn Thanetnit⁴, Emily Ohki^{5,3}, Wonseok Lee⁶ (1. Forensic Psychiatry Center, Hokkaido University Hospital (Japan), 2. Hokkaido Prefectural Koyogaoka Hospital (Japan), 3. Japan Young Psychiatrists Organization (Japan), 4. Department of Psychiatry, Thammasat University Hospital (Thailand), 5. Tokyo Metropolitan Matsuzawa Hospital (Japan), 6. Department of Psychiatry, Jeju National University Hospital (Korea))

[SY-27-02]

Case Conference: Approaches to Treatment-Resistant Schizophrenia in Patients Who Have Committed Criminal Acts

*Chommakorn Thanetnit¹ (1. Srithanya Hospital, Department of Mental Health, Ministry of Public Health, Nonthaburi (Thailand))

[SY-27-03]

Case Conference: Approaches to Treatment-Resistant Schizophrenia in Patients Who Have Committed Criminal Acts

*Emily Ohki¹ (1. Tokyo Metropolitan Matsuzawa Hospital (Japan))

Symposium | Schizophrenia : [Symposium 27] Case Conference: Approaches to Treatment-Resistant Schizophrenia in Patients Who Have Committed Criminal Acts

2025年9月26日(金) 9:00 ~ 10:30 Session Room 5 (Conference Room A)

[Symposium 27] Case Conference: Approaches to Treatment-Resistant Schizophrenia in Patients Who Have Committed Criminal Acts

Moderator: Chommakorn Thanetnit (Department of Psychiatry, Thammasat University Hospital)

[SY-27] Case Conference: Approaches to Treatment-Resistant Schizophrenia in Patients Who Have Committed Serious Criminal Acts

Kenichi Kimura^{1,2,3}, Chommakorn Thanetnit⁴, Wonseok Lee⁶, Emily Ohki^{3,5} (1. Forensic Psychiatry Center, Hokkaido University Hospital (Japan), 2. Hokkaido Prefectural Koyogaoka Hospital (Japan), 3. Japan Young Psychiatrists Organization (Japan), 4. Department of Psychiatry, Thammasat University Hospital (Thailand), 5. Tokyo Metropolitan Matsuzawa Hospital (Japan), 6. Department of Psychiatry, Jeju National University Hospital (Korea))

キーワード : Forensic psychiatry、Treatment-resistant schizophrenia、Criminal behavior、Court-ordered psychiatric treatment、Law and psychiatry

This case conference aims to explore comprehensive strategies for managing treatment-resistant schizophrenia in patients with a history of serious criminal behavior. Using a case vignette, we will discuss and compare the biological and psychosocial approaches to treatment across different countries, as well as the legal and institutional frameworks that support the management of such patients.

Discussions will focus on the following key questions:

- ① What is your diagnosis and treatment plan for this patient?
- ② What biological treatments, including pharmacotherapy and neuromodulation, are available in your country for treatment-resistant schizophrenia?
- ③ What psychosocial interventions, including psychotherapy approaches and community-based living facilities, are available in your country for treatment-resistant schizophrenia?
- ④ Does your country have specialized hospitalization or facilities for treating schizophrenia or other mental disorders in patients with serious criminal behavior?

This session seeks to promote a deeper understanding of the challenges and opportunities in treating this unique patient population. By comparing practices and frameworks globally, we hope to facilitate the exchange of knowledge, innovative strategies, and best practices among professionals.

Symposium | Schizophrenia : [Symposium 27] Case Conference: Approaches to Treatment-Resistant Schizophrenia in Patients Who Have Committed Criminal Acts

2025年9月26日(金) 9:00 ~ 10:30 Session Room 5 (Conference Room A)

[Symposium 27] Case Conference: Approaches to Treatment-Resistant Schizophrenia in Patients Who Have Committed Criminal Acts

Moderator: Chommakorn Thanetnit (Department of Psychiatry, Thammasat University Hospital)

[SY-27-01] Case Conference: Approaches to Treatment-Resistant Schizophrenia in Patients Who Have Committed Serious Criminal Acts

*Kenichi Kimura^{1,2,3}, Chommakorn Thanetnit⁴, Emily Ohki^{5,3}, Wonseok Lee⁶ (1. Forensic Psychiatry Center, Hokkaido University Hospital (Japan), 2. Hokkaido Prefectural Koyogaoka Hospital (Japan), 3. Japan Young Psychiatrists Organization (Japan), 4. Department of Psychiatry, Thammasat University Hospital (Thailand), 5. Tokyo Metropolitan Matsuzawa Hospital (Japan), 6. Department of Psychiatry, Jeju National University Hospital (Korea))

キーワード : Forensic psychiatry、Treatment-resistant schizophrenia、Criminal behavior、Court-ordered psychiatric treatment、Law and psychiatry

This case conference aims to explore comprehensive strategies for managing treatment-resistant schizophrenia in patients with a history of serious criminal behavior. Using a case vignette, we will discuss and compare the biological and psychosocial approaches to treatment across different countries, as well as the legal and institutional frameworks that support the management of such patients.

Discussions will focus on the following key questions:

- ① What is your diagnosis and treatment plan for this patient?
- ② What biological treatments, including pharmacotherapy and neuromodulation, are available in your country for treatment-resistant schizophrenia?
- ③ What psychosocial interventions, including psychotherapy approaches and community-based living facilities, are available in your country for treatment-resistant schizophrenia?
- ④ Does your country have specialized hospitalization or facilities for treating schizophrenia or other mental disorders in patients with serious criminal behavior?

This session seeks to promote a deeper understanding of the challenges and opportunities in treating this unique patient population. By comparing practices and frameworks globally, we hope to facilitate the exchange of knowledge, innovative strategies, and best practices among professionals.

Symposium | Schizophrenia : [Symposium 27] Case Conference: Approaches to Treatment-Resistant Schizophrenia in Patients Who Have Committed Criminal Acts

2025年9月26日(金) 9:00 ~ 10:30 Session Room 5 (Conference Room A)

[Symposium 27] Case Conference: Approaches to Treatment-Resistant Schizophrenia in Patients Who Have Committed Criminal Acts

Moderator: Chommakorn Thanetnit (Department of Psychiatry, Thammasat University Hospital)

[SY-27-02] Case Conference: Approaches to Treatment-Resistant Schizophrenia in Patients Who Have Committed Criminal Acts

*Chommakorn Thanetnit¹ (1. Srithanya Hospital, Department of Mental Health, Ministry of Public Health, Nonthaburi (Thailand))

キーワード : Forensics psychiatry、Treatment-resistant schizophrenia、Criminal behavior

This case conference aims to explore comprehensive strategies for managing treatment-resistant schizophrenia in patients with a history of criminal behavior. Using a case vignette, we will discuss and compare the biological and psychosocial approaches to treatment across different countries, as well as the legal and institutional frameworks that guide management in different countries, with examples of forensics psychiatry systems from Japan, South Korea, and Thailand.

Discussions will focus on the following key questions:

1. What is the diagnosis and treatment plan?
2. Which biological treatments, including pharmacotherapy and neuromodulation, are available in each country?
3. Which psychosocial interventions, such as psychotherapy and community-based facilities, are used?
4. Are there specialized hospitals or facilities for patients with schizophrenia and severe criminal behavior?

In addition to Japan and South Korea, the session will review Thailand's forensic psychiatry system, where court-ordered assessments and specialized hospitals play a significant role in balancing treatment with public safety.

By comparing practices and frameworks globally, we hope to facilitate the exchange of knowledge, innovative strategies, and best practices among professionals.

Symposium | Schizophrenia : [Symposium 27] Case Conference: Approaches to Treatment-Resistant Schizophrenia in Patients Who Have Committed Criminal Acts

2025年9月26日(金) 9:00 ~ 10:30 Session Room 5 (Conference Room A)

[Symposium 27] Case Conference: Approaches to Treatment-Resistant Schizophrenia in Patients Who Have Committed Criminal Acts

Moderator: Chommakorn Thanetnit (Department of Psychiatry, Thammasat University Hospital)

[SY-27-03] Case Conference: Approaches to Treatment-Resistant Schizophrenia in Patients Who Have Committed Criminal Acts

*Emily Ohki¹ (1. Tokyo Metropolitan Matsuzawa Hospital (Japan))

キーワード : Forensic psychiatry、Treatment-Resistant Schizophrenia、International comparison

This case conference aims to explore comprehensive strategies for managing treatment-resistant schizophrenia in patients with a history of criminal behavior. Using a case vignette, we will discuss and compare the biological and psychosocial approaches to treatment across different countries, as well as the legal and institutional frameworks that support the management of such patients.

Discussions will focus on the following key questions: 1. What is your diagnosis and treatment plan for this patient? 2. What biological treatments, including pharmacotherapy and neuromodulation, are available in your country for treatment-resistant schizophrenia? 3. What psychosocial interventions, including psychotherapy approaches and community-based living facilities, are available in your country for treatment-resistant schizophrenia? 4. Does your country have specialized hospitalization or facilities for treating schizophrenia or other mental disorders in patients with severe criminal behavior?

The presenter from a specialized forensic psychiatry facility in Japan will discuss the forensic mental health system and its actual practice in Japan

By comparing practices and frameworks globally, we hope to facilitate the exchange of knowledge, innovative strategies, and best practices among professionals.

Symposium | Schizophrenia : [Symposium 28] Neurophysiological studies from a perspective of predictive coding in psychiatry

2025年9月26日(金) 9:00 ~ 10:30 Session Room 6 (Conference Room B)

[Symposium 28] Neurophysiological studies from a perspective of predictive coding in psychiatry

Moderator: Kenji Kirihara (Center for Coproduction of Inclusion, Diversity and Equity, The University of Tokyo)

[SY-28]

Neurophysiological studies from a perspective of predictive coding in psychiatry

Kenji Kirihara¹, Minah Kim², Daisuke Koshiyama³, Zenas C. Chao⁴, Takanori Uka⁵ (1. Center for Coproduction of Inclusion, Diversity and Equity, The University of Tokyo (Japan), 2. Department of Neuropsychiatry, Seoul National University Hospital (Korea), 3. Department of Neuropsychiatry, Graduate School of Medicine, The University of Tokyo (Japan), 4. International Research Center for Neurointelligence (WPI-IRCN), UTIAS, The University of Tokyo (Japan), 5. Department of Integrative Physiology, Graduate School of Medicine, University of Yamanashi (Japan))

[SY-28-01]

Revealing predictive coding impairments in schizophrenia through mismatch negativity: from neurophysiology to clinical implications

*Minah Kim¹ (1. Seoul National University College of Medicine (Korea))

[SY-28-02]

Predictive coding studies using mismatch negativity in schizophrenia

*Daisuke Koshiyama¹, Reiji Shioda¹, Taiki Kishigami¹, Kenji Kirihara¹, Kiyoto Kasai¹ (1. The University of Tokyo (Japan))

[SY-28-03]

Hierarchical Predictive Coding in Autism Spectrum Disorder

*Zenas C Chao¹ (1. The University of Tokyo (Japan))

[SY-28-04]

Propagation of prediction signals in the front-temporal network during tone omission

*Takanori Uka¹ (1. Department of Integrative Physiology, Graduate School of Medicine, University of Yamanashi (Japan))

Symposium | Schizophrenia : [Symposium 28] Neurophysiological studies from a perspective of predictive coding in psychiatry

2025年9月26日(金) 9:00 ~ 10:30 Session Room 6 (Conference Room B)

[Symposium 28] Neurophysiological studies from a perspective of predictive coding in psychiatry

Moderator: Kenji Kirihara (Center for Coproduction of Inclusion, Diversity and Equity, The University of Tokyo)

[SY-28] Neurophysiological studies from a perspective of predictive coding in psychiatry

Kenji Kirihara¹, Minah Kim², Daisuke Koshiyama³, Zenas C. Chao⁴, Takanori Uka⁵ (1. Center for Coproduction of Inclusion, Diversity and Equity, The University of Tokyo (Japan), 2. Department of Neuropsychiatry, Seoul National University Hospital (Korea), 3. Department of Neuropsychiatry, Graduate School of Medicine, The University of Tokyo (Japan), 4. International Research Center for Neurointelligence (WPI-IRCN), UTIAS, The University of Tokyo (Japan), 5. Department of Integrative Physiology, Graduate School of Medicine, University of Yamanashi (Japan))

キーワード : predictive coding、 electroencephalography、 electrocorticography、 mismatch negativity

Recently, a predictive coding theory is thought to provide a useful framework for understanding various symptoms of psychiatric disorders. In the predictive coding theory, the brain generates a model of the world and updates the model by calculating the differences between prediction based on the model and sensory inputs from the world. Alterations in these processes generate a maladaptive model and make a false inference that leads to various symptoms in psychiatric disorders.

In this symposium, 4 speakers will show recent neurophysiological studies that investigate neurobiological mechanisms underlying altered predictive coding in psychiatric disorders. These speakers will show neurophysiological studies of predictive coding using electrocorticography (ECoG) of non-human primates and electroencephalography (EEG) of humans with and without psychiatric disorders. EEG studies of patients with psychiatric disorders are important for clarifying how predictive coding is altered in psychiatric disorders. EEG studies of healthy humans are important for clarifying how predictive coding is presented in human brains. ECoG studies of non-human primates are important for clarifying neurobiological mechanisms underlying predictive coding.

Combining ECoG studies of non-human primates and EEG studies of humans with and without psychiatric disorders will lead to translational studies that are useful for understanding psychiatric disorders and developing better treatment. This symposium will provide the opportunity to show Asian network of neurophysiological studies based on the concept of predictive coding in psychiatry.

Symposium | Schizophrenia : [Symposium 28] Neurophysiological studies from a perspective of predictive coding in psychiatry

2025年9月26日(金) 9:00 ~ 10:30 Session Room 6 (Conference Room B)

[Symposium 28] Neurophysiological studies from a perspective of predictive coding in psychiatry

Moderator: Kenji Kirihara (Center for Coproduction of Inclusion, Diversity and Equity, The University of Tokyo)

[SY-28-01] Revealing predictive coding impairments in schizophrenia through mismatch negativity: from neurophysiology to clinical implications

*Minah Kim¹ (1. Seoul National University College of Medicine (Korea))

キーワード : mismatch negativity、schizophrenia and early psychosis、 clinical implication

Mismatch negativity (MMN) is an event-related potential component that reflects the brain's automatic detection of unexpected changes in auditory stimuli. It is widely recognized as a neural index of the predictive coding system, which continuously generates and updates internal models to anticipate sensory input. Within this framework, MMN is thought to be elicited by the detection of a mismatch between predicted and actual auditory input—signaling a prediction error. Consequently, impaired MMN in individuals with schizophrenia has been interpreted as evidence of disrupted predictive coding, contributing to their difficulties in interpreting and adapting to sensory environments. Such MMN impairments have been consistently observed not only in individuals with chronic schizophrenia but also in those at earlier stages of illness, including patients with first-episode psychosis (FEP) and individuals at clinical high risk (CHR) for psychosis. These findings suggest that MMN could serve as a transdiagnostic and stage-sensitive biomarker of neurophysiological dysfunction in psychotic disorders. In this talk, we will review recent electrophysiological research employing MMN paradigms to explore predictive coding deficits in schizophrenia and related conditions. Special emphasis will be placed on how MMN alterations are associated with clinical trajectories, functional outcomes, and symptom dimensions. We will also discuss the potential utility of MMN as a biomarker for early detection and prognosis, and its integration into translational research aiming to guide individualized treatment strategies in psychosis.

Symposium | Schizophrenia : [Symposium 28] Neurophysiological studies from a perspective of predictive coding in psychiatry

2025年9月26日(金) 9:00 ~ 10:30 Session Room 6 (Conference Room B)

[Symposium 28] Neurophysiological studies from a perspective of predictive coding in psychiatry

Moderator: Kenji Kirihsara (Center for Coproduction of Inclusion, Diversity and Equity, The University of Tokyo)

[SY-28-02] Predictive coding studies using mismatch negativity in schizophrenia

*Daisuke Koshiyama¹, Reiji Shioda¹, Taiki Kishigami¹, Kenji Kirihsara¹, Kiyoto Kasai¹ (1. The University of Tokyo (Japan))

キーワード : predictive coding、mismatch negativity、schizophrenia

The predictive coding hypothesis postulates that the brain creates a model based on bottom-up sensory input from the environment, uses that model to predict the next sensory input in a top-down system, and then updates that model by calculating the prediction error between the actual sensory input and the prediction. Recent studies suggest altered predictive coding in patients with schizophrenia. Mismatch negativity (MMN) is thought to be a useful biological indicator that reflect prediction error. Auditory MMN has been repeatedly reported to be reduced in amplitude in patients with schizophrenia and is a biological index of electroencephalography (EEG) reflecting glutamatergic neuronal dysfunction, a leading pathological hypothesis for schizophrenia. We found that MMN amplitude is already reduced before the onset of schizophrenia and is associated with overall levels of social adjustment. We also found that MMN is hierarchically related to social adjustment level via negative symptoms and cognitive dysfunction. In order to investigate whether reduced MMN amplitude reflect altered predictive coding or altered adaptation, we deconstructed MMN into the adaptation component and the deviance detection component. We found that the deviance detection component, but not adaptation component was impaired in patients with schizophrenia. The results indicated that auditory MMN impairment in patients with schizophrenia reflects altered predictive coding in schizophrenia. We also estimated the sources of MMN reduction in patients with schizophrenia using EEG, identified the sources in the frontal and temporal cortices, and provided spatial information of neural networks underlying MMN. These studies bridge animal and clinical studies and greatly contribute to establish MMN as a biological index reflecting predictive coding to understand the pathophysiology and develop novel therapeutics of schizophrenia.

Symposium | Schizophrenia : [Symposium 28] Neurophysiological studies from a perspective of predictive coding in psychiatry

2025年9月26日(金) 9:00 ~ 10:30 Session Room 6 (Conference Room B)

[Symposium 28] Neurophysiological studies from a perspective of predictive coding in psychiatry

Moderator: Kenji Kirihara (Center for Coproduction of Inclusion, Diversity and Equity, The University of Tokyo)

[SY-28-03] Hierarchical Predictive Coding in Autism Spectrum Disorder

*Zenas C Chao¹ (1. The University of Tokyo (Japan))

キーワード : Autism spectrum disorder、Predictive coding、Hierarchy、Marmoset model、Human patient

Autism spectrum disorder (ASD) is characterized by atypical sensory experiences, which are often linked to irregularities in predictive coding. Predictive coding theory proposes that the brain constructs hierarchical sensory models through reciprocal interactions of predictions and prediction errors. While irregularities in predictive coding have been proposed to underlie sensory hypersensitivity and cognitive inflexibility in ASD, it remains unclear how these disturbances manifest across different functional hierarchies in the brain. To address this question, we examined a marmoset model of ASD induced by prenatal valproic acid (VPA) treatment. High-density electrocorticography (ECoG) was recorded during an auditory task that engaged two layers of temporal prediction. We then applied a quantitative modeling approach to evaluate the integrity of predictive coding across distinct hierarchies. Our results demonstrate persistent patterns of sensory hypersensitivity and unstable predictions across two cortical hierarchies in VPA-treated animals, accompanied by specific spatio-spectro-temporal neural signatures. Importantly, although imprecise predictions occurred regularly, they manifested in diverse ways, with some neural populations underestimating and others overestimating sensory regularities. This heterogeneity was further reflected in human ASD patients performing a comparable two-level prediction behavioral task. These findings suggest that ASD is not marked by a single deficit in predictive coding, but by diverse and hierarchy-dependent irregularities that may contribute to the wide variability of symptoms observed in patients. For clinicians, this work highlights the possibility of developing multi-level neural biomarkers of predictive coding that could be applied across species. Such biomarkers may help identify subgroups within ASD, link neural irregularities to individual differences in sensory and cognitive symptoms, and eventually guide more targeted interventions.

Symposium | Schizophrenia : [Symposium 28] Neurophysiological studies from a perspective of predictive coding in psychiatry

2025年9月26日(金) 9:00 ~ 10:30 Session Room 6 (Conference Room B)

[Symposium 28] Neurophysiological studies from a perspective of predictive coding in psychiatry

Moderator: Kenji Kirihara (Center for Coproduction of Inclusion, Diversity and Equity, The University of Tokyo)

[SY-28-04] Propagation of prediction signals in the front-temporal network during tone omission

*Takanori Uka¹ (1. Department of Integrative Physiology, Graduate School of Medicine, University of Yamanashi (Japan))

キーワード : prediction、cerebral cortex、macaque monkey

Proactive sensory processing based on prediction is a fundamental ability for humans to respond appropriately to external events. Our brain forms predictions based on sensory context, and produces prediction error signals from comparisons with the actual sensory events, suggesting a mutually active exchange of information between prefrontal areas that generate predictions, and sensory areas that represent sensory information. To elucidate the neural network involved in prediction and prediction error, we investigated functional coupling between prefrontal and temporal cortices from 256 electrocorticogram (ECoG) electrodes implanted in two macaque monkeys using an omission paradigm, which examined responses to omission events embedded in repetitive tone stimuli. Monkeys were presented with tone stimuli under two conditions: one where the timing of omission could be predicted, and one where it could not. We found differences in ERP before omission onset mainly at frontal pole, DLPFC and peri-arcuate area electrodes, whereas differences after omission onset were mainly observed at VLPFC and peri-arcuate area electrodes. θ and α -band phase synchrony between STG and each prefrontal cortices increased for predicted tone omission compared to unpredicted tone omission before omission onset, whereas α and β -band phase synchrony increased after omission onset. Phase directionality analysis suggest that information involved in omission prediction may be propagated between front-temporal cortices, with bottom-up signals conveyed through θ -band and top-down signals through α and β -bands. Considering their time course, θ -band phase synchrony may be involved in generating prediction itself, and β -band in generating prediction error, and α -band in both during tone omission.

Symposium | AI&IT : [Symposium 29] Trends in mental health in Japan from the perspective of social changes

2025年9月26日(金) 9:00 ~ 10:30 Session Room 7 (Conference Room C)

[Symposium 29] Trends in mental health in Japan from the perspective of social changes

Moderator: Masato Masuda (Department of Psychiatry, Faculty of Medicine, Fukuoka University), Rika Tanaka (Studio Rika Clinic)

[SY-29]

Trends in mental health in Japan from the perspective of social changes

Yuichiro Tokunaga¹, Shunya Kurokawa², Hiroe Ohnita³, Mayumi Shimamatsu¹, Enka Tomono⁴ (1. Shiranui Hospital (Japan), 2. Project assistant doctor, Department of Neuropsychiatry, Keio University School of Medicine (Japan), 3. Kyushu Branch, Japan EAP Systems (Japan), 4. Kyushu Women's University Graduate School, Professor (Japan))

[SY-29-01]

Telepsychiatry and Occupational Mental Health in Japan: Opportunities and Challenges

*Shunya Kurokawa¹ (1. Department of Neuropsychiatry, Keio University School of Medicine (Japan))

[SY-29-02]

Characteristics of Mental Health Support by Japanese EAP

*Hiroe Onita¹ (1. Satoko Nakama Japan EAP systems (Japan))

[SY-29-03]

Mindfulness and Stress Care Unit of Shiranui Hospital : From History to the Future

*Mayumi Shimamatsu¹ (1. Shiranui Hospital (Japan))

[SY-29-04]

Clinical Education and Mental Health—Problematic Internet Use, school absenteeism, and developmental disabilities in children

*EN KA TOMONO¹ (1. Kyushu Women's University Graduate School (Japan))

Symposium | AI&IT : [Symposium 29] Trends in mental health in Japan from the perspective of social changes

2025年9月26日(金) 9:00 ~ 10:30 Session Room 7 (Conference Room C)

[Symposium 29] Trends in mental health in Japan from the perspective of social changes

Moderator: Masato Masuda (Department of Psychiatry, Faculty of Medicine, Fukuoka University), Rika Tanaka (Studio Rika Clinic)

[SY-29] Trends in mental health in Japan from the perspective of social changes

Yuichiro Tokunaga¹, Shunya Kurokawa², Hiroe Ohnita³, Mayumi Shimamatsu¹, Enka Tomono⁴ (1. Shiranui Hospital (Japan), 2. Project assistant doctor, Department of Neuropsychiatry, Keio University School of Medicine (Japan), 3. Kyushu Branch, Japan EAP Systems (Japan), 4. Kyushu Women's University Graduate School, Professor (Japan))

キーワード : Changes in mental illness、Women's mental health、Depression treatment for workers

As a result of changes in the global social structure, the circumstances surrounding mental health care are also changing significantly. There has also been a decline in the prevalence of schizophrenia (Lancet, 2009), with the WHO predicting that depression will become the most common of all illnesses by 2030. On the other hand, due to the coronavirus pandemic, many countries are starting to offer medical online treatment.

Japan's industrial structure also changed from 1945, when there were many primary industries, to tertiary industries, including the introduction of IT, in 1989. At the same time, average life expectancy has increased by 20 years over the past 40 years. Expectations for future changes are large, with demographic forecasts predicting that by 2100 Japan's population will drop from 120 million to 70 million and India's 1.5 billion. It is expected to become the most populous country in the world.

These changes are also reflected in psychiatric care in Japan. At this symposium, we expect several speakers to give presentations mainly on changes in mental health care in Japan. The contents include online medical treatment, women's mental health, EAP and corporate support, and inpatient treatment in a ward specializing in depression.

Symposium | AI&IT : [Symposium 29] Trends in mental health in Japan from the perspective of social changes

2025年9月26日(金) 9:00 ~ 10:30 Session Room 7 (Conference Room C)

[Symposium 29] Trends in mental health in Japan from the perspective of social changes

Moderator: Masato Masuda (Department of Psychiatry, Faculty of Medicine, Fukuoka University), Rika Tanaka (Studio Rika Clinic)

[SY-29-01] Telepsychiatry and Occupational Mental Health in Japan: Opportunities and Challenges

*Shunya Kurokawa¹ (1. Department of Neuropsychiatry, Keio University School of Medicine (Japan))

キーワード : Occupational Mental Health、telepsychiatry、technology、AI

In Japan, despite the global acceleration of telemedicine, online psychiatric care continues to face significant barriers. One of the primary challenges is the lower reimbursement rate for telepsychiatry compared to face-to-face consultations, a disparity that persists even after deregulation prompted by the COVID-19 pandemic (Kinoshita & Kishimoto, 2022). This reimbursement gap has notably delayed the widespread adoption of telepsychiatry, setting Japan apart from most other developed nations. Recent evidence, however, demonstrates strong clinical support for telepsychiatry. A multicenter randomized controlled trial conducted across Japan showed that live two-way video consultations are non-inferior to in-person psychiatric treatment for common mental health conditions, including depression, anxiety, and obsessive-compulsive disorder. Importantly, patient satisfaction, clinical outcomes, and treatment retention were equivalent between online and face-to-face formats, with telepsychiatry providing additional convenience and accessibility benefits (Kishimoto et al., 2024). The integration of telepsychiatry with occupational health services presents significant potential. For instance, small businesses employing fewer than 50 workers—typically below the threshold required to appoint occupational physicians under Japanese law—can benefit from remote mental health consultations. Moreover, technological innovations, including artificial intelligence-driven administrative tools, can enhance operational efficiency by streamlining documentation and follow-up processes. Nonetheless, the rapid growth of telemedicine also brings emerging ethical and practical concerns. Increasingly prevalent commercial services advertise immediate issuance of medical leave certificates via online consultations, while "job resignation assistance" services gain popularity. These trends underscore the importance of establishing clear guidelines and regulations to safeguard the integrity of psychiatric practice. This presentation will explore these opportunities and challenges, outlining potential pathways to effectively integrate telepsychiatry within occupational mental health frameworks in Japan.

Symposium | AI&IT : [Symposium 29] Trends in mental health in Japan from the perspective of social changes

2025年9月26日(金) 9:00 ~ 10:30 Session Room 7 (Conference Room C)

[Symposium 29] Trends in mental health in Japan from the perspective of social changes

Moderator: Masato Masuda (Department of Psychiatry, Faculty of Medicine, Fukuoka University), Rika Tanaka (Studio Rika Clinic)

[SY-29-02] Characteristics of Mental Health Support by Japanese EAP

*Hiroe Onita¹ (1. Satoko Nakama Japan EAP systems (Japan))

キーワード : return to the work support、readiness to return to work、cause of absence

One of the most distinctive features of EAP in Japan is the need for return-to-work support. Because most Japanese companies have longer period of leave due to personal illness than other countries. Therefore we need to add the adjust their life rhythm and support to utilize interpersonal skills and work on specific issues.

Symposium | AI&IT : [Symposium 29] Trends in mental health in Japan from the perspective of social changes

2025年9月26日(金) 9:00 ~ 10:30  Session Room 7 (Conference Room C)

[Symposium 29] Trends in mental health in Japan from the perspective of social changes

Moderator: Masato Masuda (Department of Psychiatry, Faculty of Medicine, Fukuoka University), Rika Tanaka (Studio Rika Clinic)

[SY-29-03] Mindfulness and Stress Care Unit of Shiranui Hospital : From History to the Future

*Mayumi Shimamatsu¹ (1. Shiranui Hospital (Japan))

キーワード : depression、mindfulness、anxiety sensitivity、low self-esteem、psychological defenses

Since 1989, the fully open “Ocean Ward” at Shiranui Hospital has admitted 6,544 patients with mood disorders. Through years of clinical development, the ward has pursued a unique therapeutic model based on supportive and insight-oriented therapy, positioning mindfulness as a core treatment modality. The ward’s design incorporates natural sensory stimuli—ocean tides, wind, and light—to activate the five senses and promote healing. Patients with depression often experience cognitive rigidity and low self-esteem. Mindfulness helps enhance present-moment awareness, emotional regulation, and cognitive flexibility. In 2023, mean HAM-D scores improved from 24.7 at admission to 10.4 after one month, and 7.7 at discharge. These findings are consistent with data presented at the 2022 APA Annual Meeting. Introducing mindfulness, particularly in treatment-resistant depression or those with traumatic experiences must be approached with caution. Careful attention is required not to prematurely dismantle avoidance or denial mechanisms that may serve as psychological defenses against traumatic memories. The establishment of trust and psychological resilience is essential to ensure emotional safety and therapeutic efficacy. A multidisciplinary team—including nurses, occupational therapists, aromatherapists, psychologists, and mental health social workers—provides comprehensive and individualized care. Psychological assessments of over 200 participants were analyzed before and after mindfulness-based group therapy. As a result, a strong correlation was found between improvements in FFMQ scores and reductions in trait anxiety measured by the STAI, based on Pearson’s analysis. This suggests that greater mindfulness acquisition is associated with lower anxiety sensitivity. As psychiatric care trends toward shorter hospitalizations amidst growing socio-economic challenges, the ward aims to enhance not only inpatient recovery but also post-discharge continuity of care. Integration of long-term support systems and communities is key to responding to changing patient needs.

Symposium | AI&IT : [Symposium 29] Trends in mental health in Japan from the perspective of social changes

2025年9月26日(金) 9:00 ~ 10:30 Session Room 7 (Conference Room C)

[Symposium 29] Trends in mental health in Japan from the perspective of social changes

Moderator: Masato Masuda (Department of Psychiatry, Faculty of Medicine, Fukuoka University), Rika Tanaka (Studio Rika Clinic)

[SY-29-04] Clinical Education and Mental Health—Problematic Internet Use, school absenteeism, and developmental disabilities in children

*EN KA TOMONO¹ (1. Kyushu Women's University Graduate School (Japan))

キーワード : Clinical Education、Problematic Internet Use、school absenteeism、developmental disabilities

The Certified Psychologist Act was enacted in 2017 in response to the changes in mental healthcare in Japan, creating the first national certification for psychologists in Japan. They provide psychological support and other services in five fields, including medical health, education, and industrial work.

The digitalization of education fields is rapidly progressing and has both positive and negative aspects. In this symposium, I introduce some of the research conducted by the research team of which I am a member. Our team is currently investigating the effects of problematic Internet use such as Internet and smartphone addiction and long screen times on children's mental and physical development (e.g., eyes, sleep, and brain) and the mechanisms underlying educational and social problems.

Education has become more diverse with the spread of online education and increased educational support through free schools. And, the number of school absenteeism children and those with developmental disabilities have markedly increased, which can be described as educational and clinical problems. The number of school absenteeism children reached a record high of approximately about 350,000 in FY2023. The number of children with developmental disabilities enrolled in special education classes doubled in 10 years, from 164,000 in 2012 to 353,000 in 2022. Discomfort with these three clinical issues in education is becoming more prevalent. Therefore, we would like to reflect on the current situation and what is happening from the perspectives of the mind, relationships, and attachment.

Symposium | Suicide prevention : [Symposium 30] Culturally grounded suicide prevention measures

2025年9月26日(金) 10:40 ~ 12:10 Session Room 1 (Main Hall A)

[Symposium 30] Culturally grounded suicide prevention measures

Moderator: Yoshinori Cho (National Center of Neurology and Psychiatry)

[SY-30]

Culturally grounded suicide prevention measures

Laurence Kirmayer¹, Kang-Seob Oh², Hirofumi Oyama³, Harry Minas⁴ (1. McGill University (Canada), 2. Sung Kkyun Kwan University (Korea), 3. Aomori University of Health and Welfare (Japan), 4. The University of Melbourne (Australia))

[SY-30-01]

Culturally Grounded Mental Health Promotion and Suicide Prevention: Lessons from Work with Indigenous Youth

*Laurence J Kirmayer¹ (1. McGill University (Canada))

[SY-30-02]

Late-life suicide and suicide prevention strategies in South Korea

*KANG SEOB OH¹ (1. SUNGKYUNKWAN UNIVERSITY SCHOOL OF MEDICINE (Korea))

[SY-30-03]

Multilayered Approaches to Suicide Prevention Among Older Adults in Community Settings in Asia

*Hirofumi Oyama¹, Tomoe Sakashita¹ (1. Aomori University of Health and Welfare (Japan))

[SY-30-04]

Developing a suicide prevention strategy for the Vietnamese community in Victoria, Australia

*Harry Minas¹ (1. University of Melbourne (Australia))

Symposium | Suicide prevention : [Symposium 30] Culturally grounded suicide prevention measures

2025年9月26日(金) 10:40 ~ 12:10 Session Room 1 (Main Hall A)

[Symposium 30] Culturally grounded suicide prevention measures

Moderator: Yoshinori Cho (National Center of Neurology and Psychiatry)

[SY-30] Culturally grounded suicide prevention measures

Laurence Kirmayer¹, Kang-Seob Oh², Hirofumi Oyama³, Harry Minas⁴ (1. McGill University (Canada), 2. Sung Kkyun Kwan University (Korea), 3. Aomori University of Health and Welfare (Japan), 4. The University of Melbourne (Australia))

Yoshinori Cho, who is the Director General of the National Institute of Mental Health in Japan and the President of the Japanese Association for Suicide Prevention, organized this symposium on Suicide Prevention. Under the theme of "Culturally grounded suicide prevention measures," this symposium provides a forum to consider suicidal behavior and suicide prevention from cultural perspectives, to discuss culturally rooted suicide prevention measures, and also to look at the universality that is common across cultures. Laurence Kirmayer will speak on culturally grounded mental health promotion and suicide prevention. Kang Seob Oh will speak on late-life suicide and suicide prevention strategies in Korea. Hirofumi Oyama will speak on multilayered approaches to suicide prevention for older adults in Asia with insights from Europe. Multilayered suicide prevention has been shown to reduce suicide rates among older adults in local communities in Asia and other countries, reinforced by seamless integration and robust linkages across universal, selective, and indicated interventions. These linkages have included formal cross-level connections, such as professional referrals, and informal ones, like specialist advice and self-referrals." Harry Minas will present "A suicide prevention strategy for the Vietnamese community in Victoria, Australia."

Symposium | Suicide prevention : [Symposium 30] Culturally grounded suicide prevention measures

2025年9月26日(金) 10:40 ~ 12:10 Session Room 1 (Main Hall A)

[Symposium 30] Culturally grounded suicide prevention measures

Moderator: Yoshinori Cho (National Center of Neurology and Psychiatry)

[SY-30-01] Culturally Grounded Mental Health Promotion and Suicide Prevention: Lessons from Work with Indigenous Youth*Laurence J Kirmayer¹ (1. McGill University (Canada))

キーワード : suicide prevention、 Indigenous mental health、 cultural adaptation

Cross-cultural research points to the possibility of developing a typology of social predicaments affecting specific sociodemographic groups and populations. This typology could be elaborated and applied in clinical and public health practice through an ecosocial approach that considers the ways that suicide is embodied and enacted in social systemic contexts. This presentation will discuss how this framework approaches the dilemma of suicide among Indigenous youth. It will outline an approach to culturally grounded mental health promotion that takes into account historical, transgenerational, and contemporary contexts and seeks to build on the strength and resilience of Indigenous communities and youth. The examples come from Canada but have broader application for Indigenous peoples in many countries as well as for youth from other marginalized communities that have faced historical loss and devaluation and must meet the challenges of globalization and ongoing culture change.

Symposium | Suicide prevention : [Symposium 30] Culturally grounded suicide prevention measures

2025年9月26日(金) 10:40 ~ 12:10 Session Room 1 (Main Hall A)

[Symposium 30] Culturally grounded suicide prevention measures

Moderator: Yoshinori Cho (National Center of Neurology and Psychiatry)

[SY-30-02] Late-life suicide and suicide prevention strategies in South Korea

*KANG SEOB OH¹ (1. SUNGKYUNKWAN UNIVERSITY SCHOOL OF MEDICINE (Korea))

キーワード : suicide prevention、elderly stress、suicide

In this presentation, the presenter will introduce the rate of elderly suicide rate and the characteristics of elderly suicide in south Korea. For last several decades, the elder suicide is a big social problem in south Korea. The presenter will also show the stressful events in elderly people in south Korea.

Finally, the presenter will introduce some prevention strategies for elderly suicide in south Korea.

Symposium | Suicide prevention : [Symposium 30] Culturally grounded suicide prevention measures

2025年9月26日(金) 10:40 ~ 12:10 Session Room 1 (Main Hall A)

[Symposium 30] Culturally grounded suicide prevention measures

Moderator: Yoshinori Cho (National Center of Neurology and Psychiatry)

[SY-30-03] Multilayered Approaches to Suicide Prevention Among Older Adults in Community Settings in Asia*Hirofumi Oyama¹, Tomoe Sakashita¹ (1. Aomori University of Health and Welfare (Japan))

キーワード : suicide prevention、suicide rate、elderly、multilayered、linkage

Multilayered approaches to suicide prevention combine selected elements of universal, selective, and indicated interventions. These approaches may effectively reduce suicide rates among older adults when intervention levels are systematically linked, enabling lower-level actions to facilitate higher-level interventions. Suicide among older adults is a critical public health issue, with the highest rates often associated with mental health conditions such as depression and previous suicide attempts. However, the adoption of interventions to address this issue remains underexplored, especially regarding cultural and regional factors. This study examined the impacts of multilayered approaches on suicide rates by focusing on intervention types, the nature of inter-level linkages, and their applicability in community settings. A literature review identified three systematic reviews and extracted nine controlled studies suitable for evaluating multilayered programs. These included seven non-randomized controlled studies from rural Japan (2–10 years) and two cohort studies: one from urban Hong Kong (2 years), and one from semi-urban Padua, Italy (11 years). Five multilayered programs with various linkages were identified: two (Hong Kong and Italy) linked selective and indicated interventions, one (Yuri, Japan) linked universal and selective interventions, and two in northern Japan linked all three layers. Linkages were either formal (e.g., professional referrals, as in rural Japan) or informal (e.g., advice or self-referrals, as in urban Hong Kong, semi-urban Italy, and rural Japan). Some studies reported that service users developed relationships with providers during the course of the programs, facilitating transitions across intervention levels. All five programs demonstrated reductions in suicide rate among women; two also among men, both linking all three intervention levels. Building strong connections between intervention levels—particularly between selective and indicated interventions—is critical and can be achieved through either formal or informal means. The feasibility and acceptance of these programs likely depend on cultural and regional contexts in Asia.

Symposium | Suicide prevention : [Symposium 30] Culturally grounded suicide prevention measures

2025年9月26日(金) 10:40 ~ 12:10 Session Room 1 (Main Hall A)

[Symposium 30] Culturally grounded suicide prevention measures

Moderator: Yoshinori Cho (National Center of Neurology and Psychiatry)

[SY-30-04] Developing a suicide prevention strategy for the Vietnamese community in Victoria, Australia*Harry Minas¹ (1. University of Melbourne (Australia))

At the end of 2024 there were more than 300 million international migrants - voluntary migrants (skills, family reunion, labour migrants and international students, etc.), and forcibly displaced persons (refugees, asylum seekers). In Australia migrants and their Australian-born children constitute close to 50% of the total population.

Although global attention to suicide and development of suicide prevention strategies and programs has increased greatly in the past few decades there has not been a commensurate focus on suicide among migrants and refugees, many of whom have been, and frequently continue to be, exposed to multiple forms of adversity that are known to increase suicide risk.

Suicide risk and protective factors, rates and methods vary widely across countries and across migrant and refugee groups in migration host countries. Suicide prevention programs that have been developed almost universally focus on national majority/dominant populations. Policy commitments to respond to linguistic and cultural diversity are generally not accompanied by sufficient research or resources that would enable development and implementation of suicide prevention programs that are appropriate – and potentially effective - for disparate migrant and refugee communities. Where such programs have been developed very few have been rigorously evaluated, and evidence for effectiveness is sparse.

This presentation will focus on the development of a suicide prevention strategy for Vietnamese communities in Victoria, Australia, and will outline the following components of the project:

1. Systematic review of suicide in Vietnamese immigrant communities
2. Preparation of a Vietnamese community mental health and suicide community profile
3. Cultural adaptation for the Vietnamese community of the Victorian Suicide Prevention Strategy
4. Development of an online gatekeeper suicide prevention training program
5. A proposed suicide prevention strategy that would promote community control of suicide prevention activities (in collaboration with mainstream organisations and services)

Symposium | Community care : [Symposium 31] A Comparison and integration of clinical perspectives from psychiatric multidisciplinary outreach in Canada and Japan

2025年9月26日(金) 10:40 ~ 12:10 Session Room 2 (Main Hall B)

[Symposium 31] A Comparison and integration of clinical perspectives from psychiatric multidisciplinary outreach in Canada and Japan

Moderator: Lisa Andermann (Department of Psychiatry, University of Toronto), Fumie Hisanaga (National Institute of Mental Health, National Center of Neurology and Psychiatry)

Discussant: Miyuki Shiida (Social Welfare Corporation Machi ni Kurasukai (Community Living Association) "Team KUINA")

[SY-31]

A Comparison and integration of clinical perspectives from psychiatric multidisciplinary outreach in Canada and Japan

Masaaki Nishio¹, Lisa Andermann², Azaad Kassam³, Kenichiro Taniguchi⁴, Miyuki Shiida⁵, Maria A.Y. Choi⁶ (1. Tohoku Fukushi University Sendan Hospital (Japan), 2. University of Toronto (Canada), 3. University of Ottawa (Canada), 4. Saga Ebisu Mental Clinic (Japan), 5. Social Welfare Corporation Machi ni Kurasukai (Community Living Association) "Team KUINA" (Japan), 6. Court Support Program & Seniors Wellness Centre (Canada))

[SY-31-01]

A Culturally Responsive Psychosocial Approach to Enhancing Quality of Life in Ethnocultural Communities: Experience from the Mount Sinai Hospital Assertive Community Treatment Team

*Lisa Andermann¹, *Maria A.Y. Choi² (1. University of Toronto (Canada), 2. Court Support Program & Seniors Wellness Centre (Canada))

[SY-31-02]

Assertive Community Treatment in Ottawa, Canada

*Azaad Kassam¹ (1. University of Ottawa (Canada))

[SY-31-03]

Co-Producing Community Mental Health with SAGA-ACT, People with Lived Experience, and Their Families

*Kenichiro taniguchi¹ (1. Saga Ebisu Mental Clinic (Japan))

[SY-31-04]

The integration of various family support services in ACT

*Masaaki Nishio¹ (1. Tohoku Fukushi University Sendan Hospital (Japan))

Symposium | Community care : [Symposium 31] A Comparison and integration of clinical perspectives from psychiatric multidisciplinary outreach in Canada and Japan

2025年9月26日(金) 10:40 ~ 12:10 Session Room 2 (Main Hall B)

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[SY-31] A Comparison and integration of clinical perspectives from psychiatric multidisciplinary outreach in Canada and Japan

Masaaki Nishio¹, Lisa Andermann², Azaad Kassam³, Kenichiro Taniguchi⁴, Miyuki Shiida⁵, Maria A.Y. Choi⁶ (1. Tohoku Fukushi University Sendan Hospital (Japan), 2. University of Toronto (Canada), 3. University of Ottawa (Canada), 4. Saga Ebisu Mental Clinic (Japan), 5. Social Welfare Corporation Machi ni Kurasukai (Community Living Association) "Team KUINA" (Japan), 6. Court Support Program & Seniors Wellness Centre (Canada))

キーワード : Assertive Community Treatment、Psychosocial Intervention、Cultural Comparison、culturally diverse、pandemic

In the context of multidisciplinary outreach support, such as ACT, it is important to consider the provision of individualised flexibility in the care process for each user. On the other hand, in order to realise individual personal recovery, it is necessary to establish a system that can effectively provide psychosocial support such as family support, family psychoeducation, vocational rehabilitation and peer support within the outreach process. In addition, in order to realise a community-based society, it would be desirable for the outreach teams themselves and the relevant local organisations to which they belong to provide anti-stigma activities tailored to the actual conditions in their respective areas. From the Japanese side, this symposium will report comprehensively on the significance and challenges of family support for outreach support users from the clinical practice of combining family intervention for single families by hospital-affiliated ACT teams and family psychoeducation programmes at hospitals. In addition, the actual practice, effectiveness and challenges of the linked peer support activities as well as the practice of ACT in psychiatric clinics will be reported. The Canadian side will present the structure and implementation of ACT to support the mental and physical wellness of clients, both culturally diverse and tested during the pandemic. Furthermore, designated speaker with clinical experience in both Canada and Japan will also provide commentary. As described above, using the clinical practices reported from Canada and Japan as a starting point, we will compare and discuss important clinical elements between the two countries, and identify initiatives that are common across countries and cultures, as well as initiatives that are unique to each culture. It is hoped that initiatives from different cultures can be blended to create new support skills (programmes).

Symposium | Community care : [Symposium 31] A Comparison and integration of clinical perspectives from psychiatric multidisciplinary outreach in Canada and Japan

2025年9月26日(金) 10:40 ~ 12:10 Session Room 2 (Main Hall B)

[Symposium 31] A Comparison and integration of clinical perspectives from psychiatric multidisciplinary outreach in Canada and Japan

Moderator: Lisa Andermann (Department of Psychiatry, University of Toronto), Fumie Hisanaga (National Institute of Mental Health, National Center of Neurology and Psychiatry)

Discussant: Miyuki Shiida (Social Welfare Corporation Machi ni Kurasukai (Community Living Association) "Team KUINA")

[SY-31-01] A Culturally Responsive Psychosocial Approach to Enhancing Quality of Life in Ethnocultural Communities: Experience from the Mount Sinai Hospital Assertive Community Treatment Team

*Lisa Andermann¹, *Maria A.Y. Choi² (1. University of Toronto (Canada), 2. Court Support Program & Seniors Wellness Centre (Canada))

キーワード : Assertive community treatment、Ethnocultural matching、cultural psychiatry、Recovery、Quality of Life

Established in 1999, the Mount Sinai Hospital Assertive Community Treatment Team (MSH ACTT) has been providing interdisciplinary and culturally responsive mental health care in Toronto for the past 26 years. The team consisting of psychiatrists, social workers, nurses, occupational therapists, mental health clinicians and peer support workers integrates ethnocultural perspectives to meet the diverse needs of clients with severe mental illness (mainly schizophrenia and schizoaffective disorder) and their families. Our team offers individualized language and culturally matched support for Asian and South Asian families in the greater Toronto metropolitan area to better connect with psychiatric treatment as well as psychosocial supports including housing, managing finances, vocational support, emotional regulation, enhancing self-esteem, and improving daily functioning.

MSH ACTT fosters a sense of belonging and empowerment, engaging clients in meaningful activities that align with their interests. Through personalized support and wellness group activities, clients develop coping strategies, enhanced social connections, and achieve greater independence, ultimately improving their quality of life. The culturally familiar environment and wellness groups help reduce stigma, while the family-as-unit-of-care model strengthens family involvement and eases concerns about seeking mental health services. This approach extends beyond clinical symptom management, promoting holistic recovery through community integration, self-determination, and personal growth.

By prioritizing culturally and linguistically appropriate mental health services in improving long-term outcomes for marginalized populations, our ethnocultural ACT model demonstrates that these tailored interventions can enhance client stability and quality of life.

Symposium | Community care : [Symposium 31] A Comparison and integration of clinical perspectives from psychiatric multidisciplinary outreach in Canada and Japan

2025年9月26日(金) 10:40 ~ 12:10 Session Room 2 (Main Hall B)

[Symposium 31] A Comparison and integration of clinical perspectives from psychiatric multidisciplinary outreach in Canada and Japan

Moderator: Lisa Andermann (Department of Psychiatry, University of Toronto), Fumie Hisanaga (National Institute of Mental Health, National Center of Neurology and Psychiatry)

Discussant: Miyuki Shiida (Social Welfare Corporation Machi ni Kurasukai (Community Living Association) "Team KUINA")

[SY-31-02] Assertive Community Treatment in Ottawa, Canada

*Azaad Kassam¹ (1. University of Ottawa (Canada))

キーワード : Assertive Community Treatment、Recovery、Quality of Life、Mental Health

This presentation will give an overview of the services provided by an Assertive Community Treatment Team based in Ottawa, Canada. The ACT Team is a multidisciplinary team that provides comprehensive, intensive, and holistic community-based mental health services to individuals with severe mental illness. The team takes a proactive and flexible role, delivers services directly in the community, addressing various needs such as medication and symptom management, housing, addictions, physical wellbeing, and daily living skills. ACTT's goal is to enhance client's overall functioning, enhance stability in their daily lives, and reduce the need for hospitalization by providing ongoing, personalized support.

Symposium | Community care : [Symposium 31] A Comparison and integration of clinical perspectives from psychiatric multidisciplinary outreach in Canada and Japan

2025年9月26日(金) 10:40 ~ 12:10 Session Room 2 (Main Hall B)

[Symposium 31] A Comparison and integration of clinical perspectives from psychiatric multidisciplinary outreach in Canada and Japan

Moderator: Lisa Andermann (Department of Psychiatry, University of Toronto), Fumie Hisanaga (National Institute of Mental Health, National Center of Neurology and Psychiatry)

Discussant: Miyuki Shiida (Social Welfare Corporation Machi ni Kurasukai (Community Living Association) "Team KUINA")

[SY-31-03] Co-Producing Community Mental Health with SAGA-ACT, People with Lived Experience, and Their Families

*Kenichiro taniguchi¹ (1. Saga Ebisu Mental Clinic (Japan))

キーワード : Community mental health、Co-production、People with Lived Experience、Assertive Community Treatment、Recovery College

Since April 2015, SAGA-ACT has provided Assertive Community Treatment (ACT) in Saga City, a regional city in northern Kyushu, Japan. The team includes psychiatrists, nurses, occupational therapists, psychiatric social workers, and administrative staff, serving a catchment area of about 400,000 people. Saga Prefecture has 490 psychiatric beds per 100,000 people, nearly twice the national average, reflecting a delay in deinstitutionalization and a persistence of stigma.

To address these challenges, SAGA-ACT engages in co-produced community activities with people with lived experience and their families, aiming to build mutual respect, enhance mental health literacy, and reduce stigma.

SAGA Ginnan no Kai co-produces psychoeducation and family dialogue programs with public officials and professionals.

Rashisa SAGA runs a Recovery College planned and delivered by service users and staff.

TOMY'S ACTION CLUB organizes mental health seminars and film events in collaboration with national peers online.

All of these activities provide opportunities for the general public to consider mental health issues as their own concern by jointly creating mental health awareness activities, which tend to be closed, through relationships that transcend positions. Although the current state of community mental health in Japan differs greatly from that in Europe and the United States, we would like to continue these activities to create a system that does not rely excessively on hospitalization.

Symposium | Community care : [Symposium 31] A Comparison and integration of clinical perspectives from psychiatric multidisciplinary outreach in Canada and Japan

2025年9月26日(金) 10:40 ~ 12:10 Session Room 2 (Main Hall B)

[Symposium 31] A Comparison and integration of clinical perspectives from psychiatric multidisciplinary outreach in Canada and Japan

Moderator: Lisa Andermann (Department of Psychiatry, University of Toronto), Fumie Hisanaga (National Institute of Mental Health, National Center of Neurology and Psychiatry)

Discussant: Miyuki Shiida (Social Welfare Corporation Machi ni Kurasukai (Community Living Association) "Team KUINA")

[SY-31-04] The integration of various family support services in ACT

*Masaaki Nishio¹ (1. Tohoku Fukushi University Sendan Hospital (Japan))

キーワード : Assertive Community Treatment、Family Psychoeducation、Cultural Comparison

Family support is important in the treatment of mental illness, and ACT (Assertive Community Treatment), which supports patients' community life, has a family support function in itself. There are various types of family support, but the "Konodai Model" of family psychoeducation conducted in a group setting is known as a model with established evidence in Japan. As an intervention model for single families, the "Meriden version of Home Visiting Family Support (Family Work)" is becoming increasingly popular in Japan. The speaker belongs to the Tohoku Fukushi University Sendan Hospital, a single psychiatric hospital with 144 beds, but since its establishment, it has been practicing community life support for registered patients by establishing its own ACT team. Some of the registered patients had participated in either or both the "Konodai Model" family psychoeducation organized by the hospital's Psychoeducation Committee and the "Meriden Version of Home Visiting Family Support (Family Work)". Based on the progress of these cases and interviews with the families, we discussed the characteristics of both group family psychoeducation and single family intervention, as well as the synergistic effects that can be generated when the two are combined. There are various forms of family support. In community care for mental illness, it is important to combine the various types of family support so that their strengths can be utilized.

Symposium | AI&IT : [Symposium 32] Current Topics of Asian Psychiatry: Asian Federation of Psychiatric Associations(AFPA)

2025年9月26日(金) 10:40 ~ 12:10 Session Room 3 (Large Hall A)

[Symposium 32] Current Topics of Asian Psychiatry: Asian Federation of Psychiatric Associations(AFPA)

Moderator: Takahiro A. Kato (Department of Psychiatry, Hokkaido University Graduate School of Medicine), Gundugurti Prasad Rao (Asha Schizophrenia Clinic)

[SY-32]

Current Topics of Asian Psychiatry: Asian Federation of Psychiatric Associations(AFPA)

Takahiro A. Kato¹, Naotaka Shinfuku², Andi Tantra³, Gundugurti Prasad Rao⁴, Afzal Javed⁵, Norman Sartorius⁶ (1. Hokkaido University (Japan), 2. Kobe University School of Medicine (Japan), 3. Asian Federation of Asian Psychiatric Association (Indonesia), 4. Asha Schizophrenia Clinic (India), 5. Pakistan Psychiatric Research Centre (Pakistan), 6. Association for the Improvement of Mental Health Programmes (Switzerland))

[SY-32-01]

Origin and the early history of AFPA

*Naotaka Shinfuku¹ (1. Kobe University School of Medicine (Japan))

Symposium | AI&IT : [Symposium 32] Current Topics of Asian Psychiatry: Asian Federation of Psychiatric Associations(AFPA)

2025年9月26日(金) 10:40 ~ 12:10 Session Room 3 (Large Hall A)

[Symposium 32] Current Topics of Asian Psychiatry: Asian Federation of Psychiatric Associations(AFPA)

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[SY-32] Current Topics of Asian Psychiatry: Asian Federation of Psychiatric Associations(AFPA)

Takahiro A. Kato¹, Naotaka Shinfuku², Andi Tantra³, Gundugurti Prasad Rao⁴, Afzal Javed⁵, Norman Sartorius⁶ (1. Hokkaido University (Japan), 2. Kobe University School of Medicine (Japan), 3. Asian Federation of Asian Psychiatric Association (Indonesia), 4. Asha Schizophrenia Clinic (India), 5. Pakistan Psychiatric Research Centre (Pakistan), 6. Association for the Improvement of Mental Health Programmes (Switzerland))

キーワード : Asian psychiatry、culture、REAP

The Asian Federation of Psychiatric Associations (AFPA) has been a driving force in advancing mental health care and psychiatric research across Asia since its establishment in 2002. As a regional organization, AFPA unites psychiatric associations from diverse Asian countries, fostering collaboration and mutual support to address the unique challenges faced by the region. Over the past two decades, AFPA has played a pivotal role in improving mental health care through its wide range of activities. These include organizing congresses, workshops, and training programs that provide platforms for knowledge exchange and professional development. AFPA has also been instrumental in promoting culturally sensitive interventions, reducing stigma surrounding mental health, and advocating for policy reforms to enhance access to care. AFPA's efforts have focused on addressing disparities in mental health resources, supporting community-based care models, and responding to the mental health impact of disasters and crises in the region. The federation has also prioritized the development of young psychiatrists and researchers, fostering the next generation of leaders in mental health care. Looking ahead, AFPA envisions strengthening regional collaboration, integrating mental health care into primary health systems, and addressing emerging challenges such as urbanization, aging populations, and digital mental health interventions. Additionally, AFPA recognizes the growing impact of climate change on mental health, including the psychological effects of natural disasters, displacement, and environmental stressors. The federation aims to develop strategies to mitigate these impacts and build resilience in affected communities. Attendees are encouraged to explore AFPA's official website for detailed information on its history, activities, and resources. AFPA remains committed to uniting efforts across Asia to improve mental health care and ensure a brighter, more sustainable future for the region.

Symposium | AI&IT : [Symposium 32] Current Topics of Asian Psychiatry: Asian Federation of Psychiatric Associations(AFPA)

2025年9月26日(金) 10:40 ~ 12:10 Session Room 3 (Large Hall A)

[Symposium 32] Current Topics of Asian Psychiatry: Asian Federation of Psychiatric Associations(AFPA)

Moderator: Takahiro A. Kato (Department of Psychiatry, Hokkaido University Graduate School of Medicine), Gundugurti Prasad Rao (Asha Schizophrenia Clinic)

[SY-32-01] Origin and the early history of AFPA

*Naotaka Shinfuku¹ (1. Kobe University School of Medicine (Japan))

キーワード : AFPA、Asian Psychiatry、Mental health in Asia

In August 2002, the Japanese Society of Psychiatry and Neurology (JSPN) celebrated its 100th anniversary and hosted the 12th World Congress of the World Psychiatric Association (WPA) in Yokohama, marking the first time this event was held in Asia. At the WPA World Congress in Yokohama, many leading Asian psychiatrists and WPA board members exchanged views on forming a network of Asian psychiatrists. During this meeting, the name "Asian Federation of Psychiatric Associations (AFPA)" was proposed and adopted. In February 2007, AFPA was established in Lahore, Pakistan, with the support of leading international and national psychiatric societies. This included, among others, the World Psychiatric Association (WPA), World Federation of Mental Health (WFMH), World Association for Psychosocial Rehabilitation (WAPR), American Psychiatric Association (APA), Royal College of Psychiatrists (RCP), and Indian Psychiatric Association (IPA). AFPA was welcomed in Asia, emphasizing harmony, friendship, and consensus as guiding principles. In August 2007, the First World Congress of Asian Psychiatry (1st WCAP) was held from August 2 to 5 in Goa, India. The Indian Society of Biological Psychiatry and the SAARC Psychiatric Federation hosted the congress. More than 300 psychiatrists and mental health professionals attended, primarily from countries in South Asia. Since then, AFPA organized World Congress of Asian Psychiatry every 2 years in five regions of Asia and become a common platform to achieve the excellence of Asian Psychiatry.

Symposium | Immigrant, Refugee : [Symposium 33] Mental Health Support for Latin American Migrants.

2025年9月26日(金) 10:40 ~ 12:10 Session Room 4 (Large Hall B)

[Symposium 33] Mental Health Support for Latin American Migrants.

Moderator: Yu Abe (Yotsuya Yui Clinic), Masaharu Uemoto (Kobe City College Nursing)

[SY-33]

Mental Health Support for Latin American Migrants

Sergio Villasenor¹, Jose Lopez Rodas², Nancy Liscano³, Yu Abe⁴ (1. Guadalajara University (Mexico), 2. Cayetano Heredia Peruvian University (Peru), 3. Viktor Franklin Institute (UK), 4. Yotsuya Yui Clinic (Japan))

[SY-33-01]

The Wall : Latin American migrations.

*Sergio Javier Villaseñor-Bayardo¹ (1. Universidad de Guadalajara. México (Mexico))

[SY-33-02]

Migration and Megaprojects: Emerging Challenges for Mental Health in Peru

*Jose Lopez Rodas^{1,2} (1. Cayetano Heredia Peruvian University (Peru), 2. Atenea International Network (Peru))

[SY-33-03]

Family Reunification, Mental Health and Ulysses Syndrome in Latin American families in London

*Nancy Liscano Parra¹ (1. University of Barcelona (Spain))

[SY-33-04]

Mental Health Support for Latin American Migrants.

*Yu Abe¹ (1. Yotsuya Yui Clinic (Japan))

Symposium | Immigrant, Refugee : [Symposium 33] Mental Health Support for Latin American Migrants.

2025年9月26日(金) 10:40 ~ 12:10 Session Room 4 (Large Hall B)

[Symposium 33] Mental Health Support for Latin American Migrants.

Moderator: Yu Abe (Yotsuya Yui Clinic), Masaharu Uemoto (Kobe City College Nursing)

[SY-33] Mental Health Support for Latin American Migrants

Sergio Villasenor¹, Jose Lopez Rodas², Nancy Liscano³, Yu Abe⁴ (1. Guadalajara University (Mexico), 2. Cayetano Heredia Peruvian University (Peru), 3. Viktor Franklin Institute (UK), 4. Yotsuya Yui Clinic (Japan))

The international mental health support network, *The Red Athena*, which brings together multidisciplinary mental health professionals from Spanish-speaking countries to discuss and support mental health, has now been active for 16 years. In 2024, the general assembly was held in Mexico City, and this year, it is scheduled to take place in San Francisco. This international congress in Tokyo focuses on the mental health of Latin American migrants and the support they need.

Achotegui, in his concept of *Ulysses Syndrome*, argues that migration is an inherent aspect of human nature and that psychological crises inevitably accompany it. However, these crises do not necessarily indicate mental disorders such as depression or PTSD but rather fall within the scope of mental health challenges.

Latin American migrants are dispersed across the world but the approach to mental health support differs from country to country. Representatives from the UK, Mexico, Peru, and Japan will present their migration situations and the current state of their mental health, engaging in discussions to explore ways to support their mental well-being.

Symposium | Immigrant, Refugee : [Symposium 33] Mental Health Support for Latin American Migrants.

2025年9月26日(金) 10:40 ~ 12:10 Session Room 4 (Large Hall B)

[Symposium 33] Mental Health Support for Latin American Migrants.

Moderator: Yu Abe (Yotsuya Yui Clinic), Masaharu Uemoto (Kobe City College Nursing)

[SY-33-01] The Wall : Latin American migrations.

*Sergio Javier Villaseñor-Bayardo¹ (1. Universidad de Guadalajara. México (Mexico))

キーワード : Migration、Latin America、Mexican、Walls、culture

Purpose.- Expose how pointless is building walls in order to prevent immigration and create consciousness on the importance of Latin American immigration to the U.S. The most common characteristics of the Hispanic population in the U.S. are low income, low education level, high unemployment rates, the second largest community (after African Americans) of people in prison, and the largest number households. Even more remarkable, from a socio-cultural vantage standpoint, the pace and level of assimilation to the so-called American lifestyle (culture in its many forms, economic and civic life) is the slowest among Mexicans and other Latin Americans. This trend persists even though immigrants who arrived in the past 25 years have assimilated faster than their counterparts of a century ago, according to a report by the conservative Manhattan Institute for Policy Research. In summary, Latino immigration to North America is a massive picture that has been present in the world scene for over a century.

Symposium | Immigrant, Refugee : [Symposium 33] Mental Health Support for Latin American Migrants.

2025年9月26日(金) 10:40 ~ 12:10 Session Room 4 (Large Hall B)

[Symposium 33] Mental Health Support for Latin American Migrants.

Moderator: Yu Abe (Yotsuya Yui Clinic), Masaharu Uemoto (Kobe City College Nursing)

[SY-33-02] Migration and Megaprojects: Emerging Challenges for Mental Health in Peru

* Jose Lopez Rodas^{1,2} (1. Cayetano Heredia Peruvian University (Peru), 2. Atenea International Network (Peru))

Migration in Peru, marked by historical flows and contemporary crises, is experiencing a new turning point with the development of megaprojects such as the Chancay Megaport (2024), which will generate greater demographic and profound sociocultural impacts.

Megaprojects generate: Rapid and uncontrolled migration. Pressure on local services and networks. Inequality, cultural conflicts, and community fragmentation.

In transformation scenarios, uprooting, precariousness, and the loss of ties generate risks to mental health that are not yet a priority on the public agenda.

A Mental Health Plan is proposed for the province of Huaral and neighboring provinces, which includes: Intercultural education and community strengthening. Promoting emotional well-being through local networks. Youth inclusion with technology and entrepreneurship

This approach can be replicated in the Corio Megaport Project and the Majes Siguas II Agroindustrial Project, as well as in other investment areas, in line with the Global Compact for Migration (2018) and international mental health frameworks.

The challenge is to integrate mental health as a cross-cutting pillar of sustainable development, fostering intersectoral partnerships between civil society, sectors such as education, municipal and regional governments, and between countries.

Symposium | Immigrant, Refugee : [Symposium 33] Mental Health Support for Latin American Migrants.

2025年9月26日(金) 10:40 ~ 12:10 Session Room 4 (Large Hall B)

[Symposium 33] Mental Health Support for Latin American Migrants.

Moderator: Yu Abe (Yotsuya Yui Clinic), Masaharu Uemoto (Kobe City College Nursing)

[SY-33-03] Family Reunification, Mental Health and Ulysses Syndrome in Latin American families in London*Nancy Liscano Parra¹ (1. University of Barcelona (Spain))

キーワード : International migration、Ulysses Syndrome、Family reunification、Mental Health

Background: Migration alters the family unit, affects mental health and enhances Ulysses syndrome, and moreover, the experience in relationships and attachment styles can severe the expression of the syndrome in Latin American migrants.

Objective: To analyse the effect of a regrouped vs. grouped family on Ulysses syndrome and anxiety and depression in Latin American migrants from London, as well as to differentiate family attachment and couple experience based on the expression of Ulysses syndrome.

Method: non-experimental, comparative, non-random. 93 Latin American immigrants were evaluated (regrouped 40, grouped 53), who voluntarily answered the interview seven Migration Duels (Achotegui, 2002), Hamilton scales of anxiety and depression, experience in Relationships and Attachment. The IBM-SPSS statistic® was used.

Results: Migrants with a grouped vs. regrouped family, aged 41.6 ± 12.9 years and 19.5 ± 8.6 years in a migration situation, showed no differences ($p>0.05$) in female gender), age, or migration time. 59.1% were diagnosed with Ulysses syndrome, with vulnerability factors (65.2%) and stressors (59.0%). In complicated to extreme levels, grief by language (mother tongue) (64%), by family (57.3%) and by social status (50.6%) stood out. In mourning for the land (22.5%) and for physical risk (32.6%) there was less affectation. The irrigation relationship between clustering vs regrouping and Ulysses syndrome gave $OR=1.655$ (95%CI=0.687; 3.987), which suggests the tendency for regrouping to be an irrigation factor. In anxiety, depression, relationships and attachment style, there were no significant.

Conclusion: although there were mental health conditions, there were no differences between grouped and regrouped, deepening the expression of Ulysses syndrome. Early reception and ease of grouped migration would prevent the syndrome and mental health effects.

Symposium | Immigrant, Refugee : [Symposium 33] Mental Health Support for Latin American Migrants.

2025年9月26日(金) 10:40 ~ 12:10 Session Room 4 (Large Hall B)

[Symposium 33] Mental Health Support for Latin American Migrants.

Moderator: Yu Abe (Yotsuya Yui Clinic), Masaharu Uemoto (Kobe City College Nursing)

[SY-33-04] Mental Health Support for Latin American Migrants.

*Yu Abe¹ (1. Yotsuya Yui Clinic (Japan))

キーワード : migrants, mental health support, Latin American, Japan

At a multicultural clinic in central Tokyo, the number of foreign first-time patients has exceeded 4,000 over the past 19 years, with more than 300 foreign patients visiting for their first consultation in the year 2024. To accept foreign patients who speak different languages, it is essential that not only psychiatrists but also licensed clinical psychologists and administrative staff are multilingual and that online video phone interpretation services are available.

In the year 2024, the majority of foreign first-time patients came from the United States, followed by English-speaking countries including Europe and Asia, as well as Spanish and Portuguese-speaking regions in Latin America, primarily Brazil and Peru, and Korean speakers. Focusing on Latin American patients, the main referral sources include the clinic's website, friends and acquaintances, and other medical institutions. In terms of triggers for the onset of mental disorders, the order is family, workplace, multicultural environments, interpersonal relationships, and school.

The diagnoses for first-time patients predominantly include depression, anxiety disorders, adjustment disorders, and bipolar disorder, with a notable increase in cases of developmental disorders (ASD, ADHD). To effectively treat these foreign patients, it is necessary to understand the cultural and social backgrounds of their countries of origin and to provide care that aligns with their cultural and social contexts.

Symposium | Art : [Symposium 34] Reclaiming the Healing Power of Art: Narratives, Identities, and Resilience in Global Psychiatry

2025年9月26日(金) 10:40 ~ 12:10 Session Room 5 (Conference Room A)

[Symposium 34] Reclaiming the Healing Power of Art: Narratives, Identities, and Resilience in Global Psychiatry

Moderator: Itsuo Asai (Heart Clinic Medical Corporation)

[SY-34]

Experience-Based Medicine and the Healing Power of Art: Narratives and Resilience in Global Psychiatry

Itsuo Asai¹, Ayaka Shima, Yayoi Imamura², Alberto Velasco³, Jaswant Guzder^{4,5} (1. Heart Clinic Medical Corporation (Japan), 2. Kyorin University School of Medicine, (Japan), 3. Sainte-Anne Hospital Center, GHU Paris Psychiatrie & Neurosciences (France), 4. University of British Columbia (Canada), 5. MacGill University (Canada))

[SY-34-01]

The In-between Language - Exploring Second Language Acquisition through Arts Therapeutic Processes -

*Ayaka Shima¹ (1. MuzureHippo councelling room (Japan))

[SY-34-02]

Manga and Clinical Psychiatry in Japan

*Yayoi Imamura¹ (1. Kyorin University (Japan))

[SY-34-03]

Experience-Based Medicine: A Bridge Between Scientific Knowledge and Lived Experience.

*Alberto Velasco¹ (1. GHU Paris, psychiatrie et neurosciences (France))

[SY-34-04]

Contributions of the Jamaican Psychiatrist Dr Frederick Hickling to clinical creative arts innovation in teaching, therapeutics, resilience promotion and deinstitutionalization

*Jaswant Guzder¹ (1. McGill University (Canada))

Symposium | Art : [Symposium 34] Reclaiming the Healing Power of Art: Narratives, Identities, and Resilience in Global Psychiatry

2025年9月26日(金) 10:40 ~ 12:10 Session Room 5 (Conference Room A)

[Symposium 34] Reclaiming the Healing Power of Art: Narratives, Identities, and Resilience in Global Psychiatry

Moderator: Itsuo Asai (Heart Clinic Medical Corporation)

[SY-34] Experience-Based Medicine and the Healing Power of Art: Narratives and Resilience in Global Psychiatry

Itsuo Asai¹, Ayaka Shima, Yayoi Imamura², Alberto Velasco³, Jaswant Guzder^{4,5} (1. Heart Clinic Medical Corporation (Japan), 2. Kyorin University School of Medicine, (Japan), 3. Sainte-Anne Hospital Center, GHU Paris Psychiatrie & Neurosciences (France), 4. University of British Columbia (Canada), 5. MacGill University (Canada))

キーワード : Art Therapy、Narrative Medicine、Cultural Psychiatry、Experience Based Medicine、Indigenous Mental Health

This symposium explores the transformative role of arts-based and narrative practices in psychiatry through a structured arc of healing extending from the individual self to the wider community. Drawing on clinical, narrative, and cultural psychiatry, the session illustrates how diverse artistic modalities foster agency, insight, and resilience across human experience.

The opening presentation by Ms. Ayaka Shima (Japan) offers an autoethnographic exploration of artmaking as a therapeutic process for the therapist herself. Through visual expression, she narrates a cross-cultural journey of self-awareness, linguistic dislocation, and emotional integration.

Dr. Yayoi Imamura (Japan) then explores the realm of individual meaning-making through her pathographic analysis of ONE PIECE, a globally influential manga. Her interpretation reveals how characters mirror neurodevelopmental struggles and trauma, positioning manga as a vehicle for psychiatric empathy and symbolic healing.

Next, Dr. Jaswant Guzder (Canada) shifts the focus to the community, reflecting on decades of visual narrative work in Indigenous mental health. Her presentation affirms the importance of culturally rooted, trauma-informed art interventions and highlights how community-based projects foster resilience and cultural continuity.

Finally, Dr. Alberto Velasco (France) broadens the discussion with “Experience-Based Medicine: A Bridge Between Scientific Knowledge and Lived Experience.” This talk situates cultural psychiatry as a field uniquely poised to integrate scientific, experiential, and cultural knowledge. Dr. Velasco underscores how Experience-Based Medicine (ExBM) values patients’ subjective experiences as evidence, complementing Evidence-Based Medicine (EBM). He will discuss anthropological and psychiatric dimensions of ExBM, participatory methods, and how qualitative approaches can inform care and policy.

Together, these contributions advocate for a model of Experience-Based Medicine grounded in narrative, cultural meaning, and creative expression—an approach essential for reimagining

mental health care in a pluralistic world. At the same time, the symposium acknowledges that future work must further explore how Evidence-Based and Experience-Based models can collaborate to strengthen psychiatric care.

Symposium | Art : [Symposium 34] Reclaiming the Healing Power of Art: Narratives, Identities, and Resilience in Global Psychiatry

2025年9月26日(金) 10:40 ~ 12:10 Session Room 5 (Conference Room A)

[Symposium 34] Reclaiming the Healing Power of Art: Narratives, Identities, and Resilience in Global Psychiatry

Moderator: Itsuo Asai (Heart Clinic Medical Corporation)

[SY-34-01] The In-between Language - Exploring Second Language Acquisition through Arts Therapeutic Processes -

*Ayaka Shima¹ (1. MuzureHippo councelling room (Japan))

キーワード : English-as second-language、Arts-based autoethnography、Creative Arts Therapy、Authentic self

This research is auto-ethnographic and uses a form of heuristic phenomenological inquiry to explore how an arts-based research journey has helped me, as an English-as second-language speaker, to find emotional and empathic connections to English within myself and encourages the awareness of my language-influenced identities between different cultures. The research uses arts therapeutic process to identify the cognitive, psychological, and emotive barriers of my expression of English, to release the stress I experience when using English as well as to feel the nuances of the English language more deeply and to stimulate growth and transformation within me as an English-as-a second-language speaker. This project explores a range of creative modalities and non verbal expressions in order to express intangible emotions and feelings from my experiences of speaking English as a second language.

This autoethnographic research examines my emotions, feelings and experiences as an English-as-a-second-language speaker through layers of expressing, reflecting and analyzing. The non-linguistic creative experience of this self-focused study can potentially enhance my cultural competence as an arts therapy trainee working in a foreign culture. The research could potentially provide insightful, authentic and powerful research materials for other arts therapists to understand the issues around speaking English as a second language, and for others who also experience issues from speaking English as a second language to apply arts therapeutic process in their learning journey.

Symposium | Art : [Symposium 34] Reclaiming the Healing Power of Art: Narratives, Identities, and Resilience in Global Psychiatry

2025年9月26日(金) 10:40 ~ 12:10 Session Room 5 (Conference Room A)

[Symposium 34] Reclaiming the Healing Power of Art: Narratives, Identities, and Resilience in Global Psychiatry

Moderator: Itsuo Asai (Heart Clinic Medical Corporation)

[SY-34-02] Manga and Clinical Psychiatry in Japan

*Yayoi Imamura¹ (1. Kyorin University (Japan))

キーワード : Manga、Salutography、Medical Education

Manga is one of Japanese representative pop cultures; most popular works, such as 'ONE PIECE' are accepted trans-culturally. In light of Manga's potency to spreads across the countries, we will discuss social psychiatry and psychopathology through Manga for all people.

Symposium | Art : [Symposium 34] Reclaiming the Healing Power of Art: Narratives, Identities, and Resilience in Global Psychiatry

2025年9月26日(金) 10:40 ~ 12:10 Session Room 5 (Conference Room A)

[Symposium 34] Reclaiming the Healing Power of Art: Narratives, Identities, and Resilience in Global Psychiatry

Moderator: Itsuo Asai (Heart Clinic Medical Corporation)

[SY-34-03] Experience-Based Medicine: A Bridge Between Scientific Knowledge and Lived Experience.

*Alberto Velasco¹ (1. GHU Paris, psychiatrie et neurosciences (France))

Experience-Based-Medicine (ExBM) values the patient's subjective experience as an essential source of medical knowledge. In cultural psychiatry, this approach is particularly relevant since it considers the social, symbolic and cultural dimensions of mental suffering.

Anthropology demonstrates that illness and healing are experiences shaped by cultural context, in which narratives, rituals or art meanings play a central role. Adopting an emic perspective allows us to listen to patients' speech within their own frame of reference. In psychiatry, this translates into a more empathic approach to care, in which the cultural point of view becomes an important tool while listening patients' narrative preserves, indeed, its own importance. Artistic interventions in psychiatry settings can foster new forms of expression, social connection and self-awareness. In this way, lived experience permits more integrative practices, as exemplified by community psychiatry. From the scientific point of view, ExBM complements evidence-based medicine (EBM) by resorting to qualitative and participatory methods. It proposes to highlight the outcomes that really matter to patients. By integrating personal narratives and clinical approaches, it advocates a transdisciplinary view of care. Ultimately, cultural psychiatry is called to become a space where different types of knowledge - scientific, experiential and cultural - coexist and mutually reinforce each other.

Plan :

Introduction

- Brief definition of Experience-Based Medicine (EBM)
- Its relevance in cultural psychiatry
- Goal: how anthropology, psychiatry, and science intersect through patient experience

II. Anthropological Aspects

- Illness and healing as culturally shaped experiences
- The value of narratives, rituals, and cultural meaning-making
- Example: traditional community practices integrated into mental health care
- Emphasis on emic perspectives (insider views)

III. Psychiatric Dimensions

- Incorporating lived experience into diagnosis, care and evaluation of cultural devices
- The importance of subjectivity, empathy, and cultural formulation interviews
- Case example: community-based psychiatry, patients experience,
- Reflecting diverse worldviews in treatment planning

IV. Scientific Perspective

- Experience-Based ≠ Evidence-Based, but complementary
- Use of qualitative methods, participatory research, and neuroscience of experience
- Measuring outcomes that matter to patients
- The challenge of integrating personal narratives into clinical trials or policy

V. Conclusion

- Key message: experience is a valid form of evidence
- Need for transdisciplinary collaboration
- Final thought: cultural psychiatry must lead in validating diverse ways of knowing

Symposium | Art : [Symposium 34] Reclaiming the Healing Power of Art: Narratives, Identities, and Resilience in Global Psychiatry

2025年9月26日(金) 10:40 ~ 12:10 Session Room 5 (Conference Room A)

[Symposium 34] Reclaiming the Healing Power of Art: Narratives, Identities, and Resilience in Global Psychiatry

Moderator: Itsuo Asai (Heart Clinic Medical Corporation)

[SY-34-04] Contributions of the Jamaican Psychiatrist Dr Frederick Hickling to clinical creative arts innovation in teaching, therapeutics, resilience promotion and deinstitutionalization

*Jaswant Guzder¹ (1. McGill University (Canada))

キーワード : creative arts therapeutic innovations、resilience promotion、deinstitutionalization

The session will honour the legacy of Dr Frederick Hickling an emeritus professor at University of the West Indies who engaged with innovative application of creative arts in psychiatry inspired in his efforts to address the post slavery legacy of colonialism including deinstitutionalization of the Jamaican asylum, a psycho-historiography methodology and the Dream a World (a community school based resilience promotion project). Dr Hickling was mentored by the late chancellor of UWI Rex Nettleford who established the National Dance Theater in Jamaica and toured with him as his stage manager while a medical student. His legacy as clinician researcher, innovator, artist and writer reflected his life passion for developing community psychiatric services embedded in his knowledge of Afro-Caribbean post slavery trauma. His last book (Decolonization of Psychiatry in Jamaica: Madificent Irrations). outlines the methodology of psycho-historiography with patient scripted and performed works at the Garden Theatre created on the asylum grounds of Bellevue Hospital. His integration of creative arts with trauma informed resilience and reparation approaches was an important contribution to global health addressing the complex agendas of cultural genocide, histories and creative arts responded to child, youth and adults with severe mental health disorders and risk.

Symposium | Addiction : [Symposium 35] Behavioral addiction with a focus on internet and social media news-finding across cultures

2025年9月26日(金) 10:40 ~ 12:10 Session Room 6 (Conference Room B)

[Symposium 35] Behavioral addiction with a focus on internet and social media news- finding across cultures

Moderator: Susumu Higuchi (National Hospital Organization Kurihama Medical and Addiction Center), Hidehiko Takahashi (Department of Psychiatry and Behavioral Sciences, Graduate School of Medical and Dental Sciences Tokyo Medical and Dental University)

[SY-35]

Behavioral addiction with a focus on internet and social media news- finding across cultures

Hidehiko Takahashi¹, Aaron Mross², Nanase Kobayashi³, Katja Koelkebeck⁴, Hironobu Fujiwara⁵, Nanase Kobayashi⁶ (1. Department of Psychiatry and Behavioral Sciences, Graduate School of Medical and Dental Sciences Tokyo Medical and Dental University (Japan), 2. M.Sc., LVR-University-Hospital Essen, Medical Faculty, Department of Psychiatry and Psychotherapy Essen, Essen, (Germany), 3. M.D., Ph.D., Joint Research Department of Cyberpsychiatry, Graduate School of Medical and Dental Sciences, Institute of Science Tokyo (from October 2024 Institute of Science Tokyo) (Japan), 4. M.D., LVR-University-Hospital Essen, Medical Faculty, Department of Psychiatry and Psychotherapy Essen, Essen, (Germany), 5. M.D. Ph. D., Department of Psychiatry, Graduate School of Medicine, Kyoto University (Japan), 6. Institute of Science Tokyo (Japan))

[SY-35-01]

Internet Use Issues Among Japanese Youth: The Potential for Online Countermeasures

*Nanase Kobayashi¹ (1. Institute of science Tokyo (Japan))

Symposium | Addiction : [Symposium 35] Behavioral addiction with a focus on internet and social media news-finding across cultures

2025年9月26日(金) 10:40 ~ 12:10 Session Room 6 (Conference Room B)

[Symposium 35] Behavioral addiction with a focus on internet and social media news- finding across cultures

Moderator: Susumu Higuchi (National Hospital Organization Kurihama Medical and Addiction Center), Hidehiko Takahashi (Department of Psychiatry and Behavioral Sciences, Graduate School of Medical and Dental Sciences Tokyo Medical and Dental University)

[SY-35] Behavioral addiction with a focus on internet and social media news-finding across cultures

Hidehiko Takahashi¹, Aaron Mross², Nanase Kobayashi³, Katja Koelkebeck⁴, Hironobu Fujiwara⁵, Nanase Kobayashi⁶ (1. Department of Psychiatry and Behavioral Sciences, Graduate School of Medical and Dental Sciences Tokyo Medical and Dental University (Japan), 2. M.Sc., LVR-University-Hospital Essen, Medical Faculty, Department of Psychiatry and Psychotherapy Essen, Essen, (Germany), 3. M.D., Ph.D., Joint Research Department of Cyberpsychiatry, Graduate School of Medical and Dental Sciences, Institute of Science Tokyo (from October 2024 Institute of Science Tokyo) (Japan), 4. M.D., LVR-University-Hospital Essen, Medical Faculty, Department of Psychiatry and Psychotherapy Essen, Essen, (Germany), 5. M.D. Ph. D., Department of Psychiatry, Graduate School of Medicine, Kyoto University (Japan), 6. Institute of Science Tokyo (Japan))

キーワード : Behavioral addiction、Internet、Social medica、Culture

In our symposium, we will focus on (cross-cultural) investigations of behavioural addictions, which have become the focus of recent research activities. Four speakers will elucidate different aspects with a broader methodology.

Aaron Mross is a clinical psychologist from Essen, Germany, who investigated information about mental health on social media. He will talk about the data quality of health information on TikTok and will also present data assessed in Germany and Japan. He will be followed by Nanase Kobayashi, psychiatrist from the Institute of Science, Tokyo, who will talk on early prevention measures in young people in Japan that excessively consume the internet based on surveys. She will also target the potential of AI psychological interventions.

Katja Koelkebeck, psychiatrist in Essen and Bielefeld, Germany, will present data that have been collected in Germany and Japan in an effort to identify brain regions involved in internet gaming and will show structural imaging data related to addiction networks.

Finally, Hironobu Fujiwara, psychiatrist at Kyoto University, Japan, will introduce MRI and questionnaire surveys from the perspective of the internet use's (IU) harms and benefits, exploring neural correlates of clinical and subclinical-level IU. The focus will be set on the IU of medical residents and the potential nature of IU in cross-addiction. All in all, we hope to present a comprehensive picture of the topic and recent research directions.

Symposium | Addiction : [Symposium 35] Behavioral addiction with a focus on internet and social media news-finding across cultures

2025年9月26日(金) 10:40 ~ 12:10 Session Room 6 (Conference Room B)

[Symposium 35] Behavioral addiction with a focus on internet and social media news- finding across cultures

Moderator: Susumu Higuchi (National Hospital Organization Kurihama Medical and Addiction Center), Hidehiko Takahashi (Department of Psychiatry and Behavioral Sciences, Graduate School of Medical and Dental Sciences Tokyo Medical and Dental University)

[SY-35-01] Internet Use Issues Among Japanese Youth: The Potential for Online Countermeasures

*Nanase Kobayashi¹ (1. Institute of science Tokyo (Japan))

キーワード : Gaming disorder、Problematic Internet use、AI-based intervention、Cognitive-behavioral therapy、Problematic Smartphone use

While the Internet offers learning and creativity, prolonged use harms health, study, and family life. Treatment demands much time and staff. This presentation explores online tools for early detection and intervention in problematic Internet use among young people.

Symposium | Treatment of Dissociative Disorders and Family Systems : [Symposium 36] Exploring clinical cases on dissociative spectrum disorders: a transcultural psychiatry perspective on family system and implications on cultural background

2025年9月26日(金) 10:40 ~ 12:10 Session Room 7 (Conference Room C)

[Symposium 36] Exploring clinical cases on dissociative spectrum disorders: a transcultural psychiatry perspective on family system and implications on cultural background

Moderator: Camilla Callegari (Department of Medicine and Surgery, Division of Psychiatry, University of Insubria, Varese, Italy)

[SY-36-01]

Exploring clinical cases on dissociative spectrum disorders: a transcultural psychiatry perspective on family system and implications on cultural background

*Michele Mattia¹, *Ivano Caselli², *Camilla Callegari², *Barbetta Pietro³ (1. CMTF Centro Milanese di Terapia della Famiglia, Università degli Studi dell'Insubria (Switzerland), 2. Department of Medicine and Surgery, Division of Psychiatry, University of Insubria, Varese, Italy (Italy), 3. 4 Director of ISST – International School of Systemic Therapy; Professor of Psy-chodynamic Theories Bergamo University (Italy))

[SY-36-02]

Hidden dissociation in an affluent migration context: a clinical case discussion

*Michele Mattia¹ (1. Milanese Family Therapy Centre (CMTF), Swiss Office, Lugano)

[SY-36-03]

The black women: a clinical case of a young patient of Latin American descent presenting psychotic

*Ivano Caselli¹, *Michele Mattia³, *Camilla Callegari¹, *Pietro Barbetta² (1. University of Insubria (Italy), 2. University of Bergamo (Italy), 3. Milanese Family Therapy Centre (CMTF), Swiss Office (Switzerland))

[SY-36-04]

Transcultural perspectives on behavioral disturbances and dissociative manifestations in a sub-Saharan woman: the impact of migration

*CAMILLA MARIA TERESA CALLEGARI¹, *Michele Mattia³, *Ivano Caselli¹, *Pietro Barbetta² (1. University of Insubria (Italy), 2. University of Bergamo (Italy), 3. Milanese Family Therapy Centre (CMTF), Swiss Office (Switzerland))

Symposium | Treatment of Dissociative Disorders and Family Systems : [Symposium 36] Exploring clinical cases on dissociative spectrum disorders: a transcultural psychiatry perspective on family system and implications on cultural background

2025年9月26日(金) 10:40 ~ 12:10 Session Room 7 (Conference Room C)

[Symposium 36] Exploring clinical cases on dissociative spectrum disorders: a transcultural psychiatry perspective on family system and implications on cultural background

Moderator: Camilla Callegari (Department of Medicine and Surgery, Division of Psychiatry, University of Insubria, Varese, Italy)

[SY-36-01] Exploring clinical cases on dissociative spectrum disorders: a transcultural psychiatry perspective on family system and implications on cultural background

*Michele Mattia¹, *Ivano Caselli², *Camilla Callegari², *Barbetta Pietro³ (1. CMTF Centro Milanese di Terapia della Famiglia, Università degli Studi dell'Insubria (Switzerland), 2. Department of Medicine and Surgery, Division of Psychiatry, University of Insubria, Varese, Italy (Italy), 3. 4 Director of ISST – International School of Systemic Therapy; Professor of Psy-chodynamic Theories Bergamo University (Italy))

キーワード : dissociation; dissociative disorders; transcultural psychiatry; family system、cultural background; relational trauma; migration.

Relational trauma refers to the long-lasting impact of abuse, neglect, or abandonment within key relationships during childhood, often linked to issues like attachment problems and distrust from narcissistic caregivers. These wounds can persist into adulthood, influencing mental health issues such as personality disorders, complex post-traumatic stress disorder, depression, and anxiety. Also, migrations, which represent a growing, complex social phenomenon in the West, expose migrants to challenging journeys that destabilize their sense of identity and contribute to dissociative symptoms. The influence of culture and society of origin can affect the development and treatment of resulting psychopathologies. The symposium will delve into a series of clinical cases related to dissociative spectrum disorders, with a particular focus on the role of the family system as a catalyst for dissociative defenses, examined through a transcultural psychiatric lens. The discussions will highlight how these manifestations are often overlooked and underdiagnosed in clinical practice, despite their frequent roots in early relational trauma or repeated traumatic experiences. The cases to be presented frequently exhibit a "hidden" nature, complicating diagnosis and treatment. The authors will also explore the critical roles of both psychotherapeutic and pharmacological interventions, as well as rehabilitative approaches, in managing these complex cases. This comprehensive exploration aims to enhance understanding of the intricate interplay between migration trauma, cultural background, familial dynamics, and dissociative pathology, ultimately improving recognition and treatment in clinical settings. A cultural perspective on these disorders can help clinicians and researchers to recognize the implicit biases and limitations in current psychiatric theories and practices, leading to more effective approaches for the diverse populations served by psychiatric services globally.

Symposium | Treatment of Dissociative Disorders and Family Systems : [Symposium 36] Exploring clinical cases on dissociative spectrum disorders: a transcultural psychiatry perspective on family system and implications on cultural background

2025年9月26日(金) 10:40 ~ 12:10 Session Room 7 (Conference Room C)

[Symposium 36] Exploring clinical cases on dissociative spectrum disorders: a transcultural psychiatry perspective on family system and implications on cultural background

Moderator: Camilla Callegari (Department of Medicine and Surgery, Division of Psychiatry, University of Insubria, Varese, Italy)

[SY-36-02] Hidden dissociation in an affluent migration context: a clinical case discussion

*Michele Mattia¹ (1. Milanese Family Therapy Centre (CMTF), Swiss Office, Lugano)

The presentation will focus on a clinical case involving an adult patient from the Romansh-speaking part of Switzerland. Switzerland is composed of four regions, each with its own language and culture: German, French, Italian, and Romansh. The initial diagnoses were schizoid personality disorder, alcohol dependence syndrome, and recurrent depressive syndrome. Throughout the course of weekly personal psychotherapy, it was only after she began to build therapeutic trust that underlying family trauma and significant relational trauma within her current family began to surface. She is married and has two children. Her husband holds a significant role in the Ticino health care system. As therapy progressed, it became evident that the husband exhibited severe narcissism, creating a panopticon-like environment that entrapped the patient. The incorporation of couples' treatment progressively enabled the patient to navigate the delicate complexities of her relationship and family dynamics. The author aims to highlight how numerous cases of dissociation are often concealed within seemingly unsuspecting cultural, family, and societal systems.

Symposium | Treatment of Dissociative Disorders and Family Systems : [Symposium 36] Exploring clinical cases on dissociative spectrum disorders: a transcultural psychiatry perspective on family system and implications on cultural background

2025年9月26日(金) 10:40 ~ 12:10 Session Room 7 (Conference Room C)

[Symposium 36] Exploring clinical cases on dissociative spectrum disorders: a transcultural psychiatry perspective on family system and implications on cultural background

Moderator: Camilla Callegari (Department of Medicine and Surgery, Division of Psychiatry, University of Insubria, Varese, Italy)

[SY-36-03] *The black women: a clinical case of a young patient of Latin American descent presenting psychotic*

*Ivano Caselli¹, *Michele Mattia³, *Camilla Callegari¹, *Pietro Barbetta² (1. University of Insubria (Italy), 2. University of Bergamo (Italy), 3. Milanese Family Therapy Centre (CMTF), Swiss Office (Switzerland))

キーワード : dissociation、transcultural psychiatry、family system、relational trauma

This presentation will focus on a clinical case involving a young female patient of Latin American origin diagnosed with persistent delusional disorder within learning disorder and borderline personality disorder who lives with her parents and younger sister. The family history is significant for psychiatric disorders, and the patient's complex clinical presentation includes dissociative symptoms with intricate perceptual disturbances (both visual and auditory). The pleomorphic symptomatology appears to be influenced by the family's cultural background and traumatic contextual events. The patient receives therapeutic-rehabilitative educational support and is under continuous psychological and psychiatric care, including pharmacological intervention. The author aims to highlight the role of the family system in promoting dissociative defenses through a transcultural psychiatric perspective.

Symposium | Treatment of Dissociative Disorders and Family Systems : [Symposium 36] Exploring clinical cases on dissociative spectrum disorders: a transcultural psychiatry perspective on family system and implications on cultural background

2025年9月26日(金) 10:40 ~ 12:10 Session Room 7 (Conference Room C)

[Symposium 36] Exploring clinical cases on dissociative spectrum disorders: a transcultural psychiatry perspective on family system and implications on cultural background

Moderator: Camilla Callegari (Department of Medicine and Surgery, Division of Psychiatry, University of Insubria, Varese, Italy)

[SY-36-04] Transcultural perspectives on behavioral disturbances and dissociative manifestations in a sub-Saharan woman: the impact of migration

*CAMILLA MARIA TERESA CALLEGARI¹, *Michele Mattia³, *Ivano Caselli¹, *Pietro Barbetta² (1. University of Insubria (Italy), 2. University of Bergamo (Italy), 3. Milanese Family Therapy Centre (CMTF), Swiss Office (Switzerland))

キーワード : dissociation、transcultural psychiatry、family system、migration

The presentation delves into the case of a young sub-Saharan woman who migrated from a French-speaking country in West Africa to a small town in Northern Italy. She exhibited severe behavioral disturbances, dissociative manifestations, trance during religious rituals, and substance-induced psychosis. The authors analyze her symptomatology through a transcultural lens, highlighting the significant impact of the migration process. Cultural divergence, language barriers, and stigma have complicated her clinical evaluation and management. The discussion will explore how cultural displacement and the challenges of adapting to a new environment can contribute to the development and exacerbation of mental health issues. By examining this case, the session aims to underscore the importance of culturally sensitive approaches in understanding and addressing the psychological well-being of migrants.

Symposium | CFI : [Symposium 37] Cultural Formulation Interview Symposium 1

2025年9月26日(金) 13:10 ~ 14:40 Session Room 2 (Main Hall B)

[Symposium 37] Cultural Formulation Interview Symposium 1

Moderator: G. Eric Jarvis (McGill University)

[SY-37]

Cultural Formulation Interview Symposium 1

Lukas Claus⁴, Laurence J. Kirmayer³, Roberto Lewis-Fernández^{1,2}, Hans Rohlof⁵ (1. Columbia University (United States of America), 2. New York State Psychiatric Institute (United States of America), 3. McGill University (Canada), 4. University of Antwerp (Belgium), 5. Private Practice Rohlof (Netherlands))

[SY-37-01]

A sampling of recent and ongoing research on the Cultural Formulation Interview

*Roberto Lewis-Fernandez¹ (1. Columbia/NYS Psychiatric Institute (United States of America))

[SY-37-02]

Cultural Formulation Interview: history and present

*Hans Rohlof¹ (1. Private Practice Rohlof (Netherlands))

[SY-37-03]

Use of the CFI with asylum seekers: learnings from their experience

*Lukas Claus^{2,1}, Seline van den Ameele^{2,3}, Bernard Sabbe² (1. Vrije Universiteit Brussel (Brussels, Belgium) (Belgium), 2. CAPRI (Collaborative Antwerp Psychiatric Research Institute), Universiteit Antwerpen (Antwerp, Belgium) (Belgium), 3. Department of Psychiatry and Medical Psychology, Brugmann University Hospital, Brussels, Belgium (Belgium))

[SY-37-04]

Integrating Social Determinants of Health in Cultural Formulation

*Laurence J Kirmayer¹ (1. McGill University (Canada))

Symposium | CFI : [Symposium 37] Cultural Formulation Interview Symposium 1

2025年9月26日(金) 13:10 ~ 14:40 Session Room 2 (Main Hall B)

[Symposium 37] Cultural Formulation Interview Symposium 1

Moderator: G. Eric Jarvis (McGill University)

[SY-37] Cultural Formulation Interview Symposium 1

Lukas Claus⁴, Laurence J. Kirmayer³, Roberto Lewis-Fernández^{1,2}, Hans Rohlof⁵ (1. Columbia University (United States of America), 2. New York State Psychiatric Institute (United States of America), 3. McGill University (Canada), 4. University of Antwerp (Belgium), 5. Private Practice Rohlof (Netherlands))

Mental health assessment and treatment planning need to be adapted to the cultural and social diversity of people accessing care. If cultural factors are not properly assessed, patients may be misdiagnosed or the severity of their condition may be misjudged. The lack of clinicians' cultural sensitivity can create communication barriers leading to the breakdown of patients' trust in the therapeutic process and hesitancy to communicate important information. Likewise, valid treatment planning and implementation requires information on patients' expectation of care and barriers to service use. The introduction of the Cultural Formulation Interview (CFI) in DSM-5 in 2013 was a breakthrough for improving cultural sensitivity in mental health care. The CFI is an interview protocol that helps obtain culture-relevant information and improve rapport in psychiatric assessment based on a person-centered, non-stereotyping approach. This symposium will present up-to-date research on the uses of the CFI, including the performance of several of its components; its use with specific subgroups, e.g., asylum seekers; strategies to complement the CFI with systematic evaluation of social determinants of health; and ways to incorporate the information obtained from the CFI into an ecologically valid cultural formulation, diagnostic assessment, and treatment plan. Contributors will discuss research questions, innovative clinical applications, and challenges in training and implementation.

Symposium | CFI : [Symposium 37] Cultural Formulation Interview Symposium 1

2025年9月26日(金) 13:10 ~ 14:40 Session Room 2 (Main Hall B)

[Symposium 37] Cultural Formulation Interview Symposium 1

Moderator: G. Eric Jarvis (McGill University)

[SY-37-01] A sampling of recent and ongoing research on the Cultural Formulation Interview

*Roberto Lewis-Fernandez¹ (1. Columbia/NYS Psychiatric Institute (United States of America))

キーワード : cultural assessment、social determinants of health、individual cultural identity、person-centered evaluation

Without a person-centered assessment of the relevant cultural aspects of the person's identity, illness representations, treatment expectations, and social-structural impacts on vulnerabilities and resources, mental health practice often lacks the information to provide effective treatment. The Cultural Formulation Interview (CFI) is a protocol that guides clinicians in eliciting information from people seeking health care about their and their families/friends' views of their situation, cultural identity, past experiences of help seeking, and expectations for future care. It can be used as a culturally sensitive method to engage care recipients in mental health services and orient a more comprehensive evaluation and treatment plan. This presentation will review some recently published studies on the CFI that address multiple person-centered uses of this tool: how it elicits more granular descriptions of the person's cultural identity than demographically organized self-report checklists; how it can obtain information on the person's social-structural stressors, supports, and determinants of health; and how it guides conversations on the person's level of trust in the clinical relationship in the early stages of treatment. Other studies planned or currently underway will also be described: on the impact of the CFI vs. usual care in reducing the misdiagnosis of schizophrenia and enhancing treatment engagement and response in individuals being evaluated for a psychotic disorder in a community mental health clinic; on its role orienting the evaluation and psychotherapy of US veterans with PTSD; and on the value of CFI use in helping neurology clinicians understand the impact of culture on someone's clinical presentation, diagnosis, and treatment.

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[Symposium 37] Cultural Formulation Interview Symposium 1

Moderator: G. Eric Jarvis (McGill University)

[SY-37-02] Cultural Formulation Interview: history and present

*Hans Rohlof¹ (1. Private Practice Rohlof (Netherlands))

キーワード : Culture、Assessment、Cultural Formulation Interview

The Cultural Formulation Interview (CFI) was constructed about 20 years ago. Precursors of this interview, on the base of the Outline for Cultural Formulation (OCF) were already used in different clinical programs in the Netherlands and other countries. Clinical experience showed that patients liked these interviews about their mental state, and the context in which it developed. Although quite long, these older interviews are still used, among others in forensic reports. Till now, the CFI has been used in many clinical situations, and was studied on its effect in diagnostics and treatment. Especially, in transcultural situations like the assessment of refugees and migrants, it has shown its value. Research has also shown that in specific clinical situations there is a place for the CFI, as for instance in patients with eating disorders or bipolar illness. More research is underway. The further development of the CFI is promising.

Symposium | CFI : [Symposium 37] Cultural Formulation Interview Symposium 1

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[Symposium 37] Cultural Formulation Interview Symposium 1

Moderator: G. Eric Jarvis (McGill University)

[SY-37-03] Use of the CFI with asylum seekers: learnings from their experience

*Lukas Claus^{2,1}, Seline van den Ameele^{2,3}, Bernard Sabbe² (1. Vrije Universiteit Brussel (Brussels, Belgium) (Belgium), 2. CAPRI (Collaborative Antwerp Psychiatric Research Institute), Universiteit Antwerpen (Antwerp, Belgium) (Belgium), 3. Department of Psychiatry and Medical Psychology, Brugmann University Hospital, Brussels, Belgium (Belgium))

キーワード : Cultural Formulation Interview、Asylum Seekers、Mental Health

Asylum seekers experience significant mental health difficulties, yet they often face barriers to appropriate psychiatric assessment and care. Given their diverse backgrounds, a comprehensive evaluation that considers cultural and contextual factors is essential. The Cultural Formulation Interview (CFI) has been proposed to enhance cultural sensitivity in mental health care, but its application in asylum seekers remains largely unexplored.

Therefore, we conducted a study on the use of the CFI in asylum seekers, focusing on different aspects: its contribution to illness narratives, its impact on clinical outcomes, and the asylum seekers' experience of the instrument.

First, this presentation will explore the nuanced experiences of asylum seekers with the CFI. On the one hand, it will illustrate, with concrete examples, the advantages of the CFI approach, such as promoting meaningful encounters, generating new insights, and strengthening the patient-clinician relationship. On the other hand, it will outline the barriers encountered during its administration, including the complexity and number of questions, uncertainty regarding its benefits, and emotional distress linked to recalling past traumatic experiences. Additionally, the notable impact of the CFI on diagnostic categorization will be addressed.

The presentation will further elaborate on the CFI's potential to provide asylum seekers the space to articulate their suffering, and for the clinician to create a safe framework to do so, enabling an authentic encounter. Concrete attention points for CFI administration with asylum seekers will be discussed. Finally, the presentation will translate the learnings into perspectives for future research and potential adaptations of the CFI.

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[Symposium 37] Cultural Formulation Interview Symposium 1

Moderator: G. Eric Jarvis (McGill University)

[SY-37-04] Integrating Social Determinants of Health in Cultural Formulation

*Laurence J Kirmayer¹ (1. McGill University (Canada))

キーワード : Cultural formulation、Social determinants of mental health、Structural competency、Ecosystems view

There is growing recognition of the importance of social determinants of mental health in clinical assessment and treatment planning. The DSM-5 Cultural Formulation Interview (CFI) was designed to collect information on sociocultural context and experience from the perspective of patients and their entourage. The CFI was motivated by work in medical anthropology on the importance of cultural variations in illness meaning. Recent work in structural competence has emphasized the need for more systematic attention to social structural factors in mental health services. This presentation will review methods for eliciting information on social structural determinants of health in clinical assessment. There is evidence that the CFI can obtain some information on social determinants but it does not canvas these in a systematic way. The impact of structural determinants depends in part on cultural meaning and there is a need to examine how culture and social structure interact. This presentation will discuss frameworks and strategies to augment or supplement the CFI to collect information on social determinants of mental health and illustrate the use of a cultural-ecosocial approach to integrative case formulation.

Symposium | CFI : [Symposium 38] Cultural Competence - essential skills for mental professionals

2025年9月26日(金) 13:10 ~ 14:40 Session Room 3 (Large Hall A)

[Symposium 38] Cultural Competence - essential skills for mental professionals

Moderator: Itsuo Asai (Heart Clinic Medical Corporation)

[SY-38]

Cultural Competence – essential skills for mental professionals

Itsuo Asai¹, Kenneth Fung², Jaswant Guzder³, Byamah Brian Mutamba⁴, Syuichi Katsuragawa⁵ (1. Heart Clinic Medical Corporation (Japan), 2. University of Toronto (United States of America), 3. MacGill University (Australia), 4. Butabika Hospital (Uganda), 5. Toho University School of Medicine (Japan))

[SY-38-01]

Promoting Mental Health Equity through Cultural Competence

*Kenneth Po-Lun Fung¹ (1. University of Toronto (Canada))

[SY-38-02]

Use of Interpreters in Culturally Competent Care : a therapeutic predicament

*Jaswant Guzder^{1,2} (1. University of British Columbia (Canada), 2. McGill University (Canada))

[SY-38-03]

Developing culturally appropriate messages for mental health promotion; the role of alternate care providers'

*Byamah Brian Mutamba^{1,2} (1. Butabika National Mental Hospital (Uganda), 2. YouBelong Uganda (Uganda))

[SY-38-04]

Cultural competence: the changing social perceptions from stigmatization to understanding of mental health issues in Japan in recent years

*Shuichi Katsuragawa¹ (1. Department of Psychiatry, Toho University Sakura Medical Center (Japan))

Symposium | CFI : [Symposium 38] Cultural Competence - essential skills for mental professionals

2025年9月26日(金) 13:10 ~ 14:40 Session Room 3 (Large Hall A)

[Symposium 38] Cultural Competence - essential skills for mental professionals

Moderator: Itsuo Asai (Heart Clinic Medical Corporation)

[SY-38] Cultural Competence – essential skills for mental professionals

Itsuo Asai¹, Kenneth Fung², Jaswant Guzder³, Byamah Brian Mutamba⁴, Syuichi Katsuragawa⁵ (1. Heart Clinic Medical Corporation (Japan), 2. University of Toronto (United States of America), 3. MacGill University (Australia), 4. Butabika Hospital (Uganda), 5. Toho University School of Medicine (Japan))

キーワード : Cultural Competency、Mental Health Services、Transcultural Psychiatry、Health Equity、Health Communication

Training in cultural competence, an essential skill and system for mental health practitioners, is not always included in the training content of mental health professionals in many countries. Do you all know what it is? Broadly speaking, cultural competence refers to the ability to interact appropriately with, understand and work effectively with people from different cultural backgrounds. This symposium will explore what cultural competence is and how it needs to be addressed in the future. We hope that your understanding of cultural competence will be useful in your clinical and research work. First, Professor Kenneth Fung from the University of Toronto, Canada, one of the countries with the most advanced research and social systems for transcultural psychiatry, will give a presentation entitled 'Promoting Mental Health Equity through Cultural Competence', defining it and explaining what hinders its realization. Barriers to its implementation, its adaptation to clinical situations and an overview of social structural issues will be presented. Next, Professor Jaswant Gazder from MacGill University, Canada, will discuss 'Interpreters in culturally competent care: Canadian Clinical Contexts' and the development of interpreters' cultural understanding skills to overcome language barriers. Thirdly, Dr Byamah Mutamba from Uganda will discuss 'Developing culturally appropriate messages for mental health promotion; the role of alternate care providers' from Africa, where psychiatric resources are extremely scarce. His presentation on 'Alternative care providers' will give concrete examples of how to gain understanding of mental disorders among local healers. Finally, Professor Katsuragawa from Toho University School of Medicine, Japan, will present 'Cultural competence: the changing social perceptions from stigmatization to understanding of mental health issues in Japan in recent years'. The ability to interact with, understand and respond appropriately to the conflicts and relationships between patients and the cultures of the society to which they belong and the cultures of their counterparts.

Symposium | CFI : [Symposium 38] Cultural Competence - essential skills for mental professionals

2025年9月26日(金) 13:10 ~ 14:40 Session Room 3 (Large Hall A)

[Symposium 38] Cultural Competence - essential skills for mental professionals

Moderator: Itsuo Asai (Heart Clinic Medical Corporation)

[SY-38-01] Promoting Mental Health Equity through Cultural Competence

*Kenneth Po-Lun Fung¹ (1. University of Toronto (Canada))

キーワード : Cultural Competence、Structural Competence、Cultural Safety、Cultural Humility

Mental health disparities persist across diverse communities due to systemic inequities, cultural barriers, and inadequate access to culturally responsive care. Cultural competence is a critical framework that encompasses and extends beyond cultural humility, cultural safety, and structural competence to ensure equitable mental health services. This presentation explores the foundational concepts of cultural competence, including its role in mental health assessment, treatment, and systemic implementation. It addresses common misconceptions, emphasizing that cultural competence is not about expertise in other cultures but about the ability to engage cross-culturally with sensitivity and effectiveness. The session outlines key strategies for culturally competent assessment using the DSM-5-TR's Outline for Cultural Formulation and Cultural Contextual Formulation. In treatment, cultural adaptations of psychotherapeutic approaches, such as Acceptance and Commitment Therapy (ACT), can demonstrate the significance of integrating cultural perspectives into care. Systemic barriers, including language accessibility, cultural stigma, and structural discrimination, are discussed alongside organizational strategies and policy recommendations aimed at fostering culturally responsive mental health systems. By implementing standardized training, increasing linguistic inclusivity, and integrating traditional healing practices, healthcare organizations can promote equity in mental health services. Ultimately, cultural competence is an evolving and necessary approach to achieving mental health equity. It requires a commitment to lifelong learning, advocacy for inclusive policies, and sustainable investment in culturally responsive interventions. This presentation aims to provide a comprehensive understanding of cultural competence and inspire actionable steps towards reducing mental health disparities.

Learning Objectives:

1. Define cultural competence and related concepts, including cultural humility, cultural safety, and structural competence, and explain their relevance to mental health care.
2. Identify barriers to culturally competent mental health care and discuss strategies to integrate cultural considerations into clinical practice.
3. Explore the role of systemic and structural approaches in addressing mental health disparities through culturally responsive policies and interventions.

Symposium | CFI : [Symposium 38] Cultural Competence - essential skills for mental professionals

2025年9月26日(金) 13:10 ~ 14:40 Session Room 3 (Large Hall A)

[Symposium 38] Cultural Competence - essential skills for mental professionals

Moderator: Itsuo Asai (Heart Clinic Medical Corporation)

[SY-38-02] Use of Interpreters in Culturally Competent Care : a therapeutic predicament

*Jaswant Guzder^{1,2} (1. University of British Columbia (Canada), 2. McGill University (Canada))

キーワード : use of interpreters in consultation、cultural competency and language translation、psychotherapeutic issues related to language hybridity and translation

symposium :Cultural Competence: essential skills for mental health professionals

title of talk : Use of Interpreters in culturally competent care

In training situations and in the clinic, the use of interpreters is a skill that is essential to therapeutic alliance. Currently in the McGill Cultural Consultation Service we have used in person interpreters. However in many regions the clinician may have access to only telephone, computer generated or might even eventually revert to AI technology. Clinical case examples will be given to underline the clinical interactions, predicaments and challenges that illustrate cultural competency skills in the interpreter, clinician and patient consultation situations.

Symposium | CFI : [Symposium 38] Cultural Competence - essential skills for mental professionals

2025年9月26日(金) 13:10 ~ 14:40 Session Room 3 (Large Hall A)

[Symposium 38] Cultural Competence - essential skills for mental professionals

Moderator: Itsuo Asai (Heart Clinic Medical Corporation)

[SY-38-03] Developing culturally appropriate messages for mental health promotion; the role of alternate care providers'

*Byamah Brian Mutamba^{1,2} (1. Butabika National Mental Hospital (Uganda), 2. YouBelong Uganda (Uganda))

キーワード : Alternate care providers、Community mental health、Primary health care、Awareness、health promotion

Health seeking for mental health care at primary health care facilities remains poor with majority of those affected opting for alternate care; traditional and /faith healing. To increase awareness about mental health services at primary health care facilities ,and improve health seeking behaviour, the YouBelong Uganda team engaged various stakeholders including alternate care providers.

We describe a collaborative process involving the Ministry of Health in Uganda, the YouBelong Uganda team and alternate (mental health) care providers to develop culturally appropriate information, communication and education materials to support this initiative

Symposium | CFI : [Symposium 38] Cultural Competence - essential skills for mental professionals

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[Symposium 38] Cultural Competence - essential skills for mental professionals

Moderator: Itsuo Asai (Heart Clinic Medical Corporation)

[SY-38-04] Cultural competence: the changing social perceptions from stigmatization to understanding of mental health issues in Japan in recent years

*Shuichi Katsuragawa¹ (1. Department of Psychiatry, Toho University Sakura Medical Center (Japan))

キーワード : cultural competence、social perception、acculturation、worker's compensation、foreign workers

The speaker is interested in the change in public perception of mental health issues in Japan, a country that has undergone acculturation over time, and will discuss the changing of social perception showing the two examples. First, Japan is known for having one of the highest numbers of suicide in the world: for 10 years since 1997, the number of suicides exceeded 30,000 in every year, and the government has been working to reduce the number through suicide prevention measures. Mental health measures have been positioned as an important national project, and educational activities on depression have become popular. Depression among workers has been regarded as a private illness, which means there are no relationship between its occurrence and work environment. Therefore the rate of worker's compensation applications had not been high. In these days, the number of recognitions for worker's compensation, including suicides, has been increasing year by year, as the problems such as long working hours and harassment in the workplace have become more visible. The second is the increase in the number of foreign workers. Compared to other countries, Japan has a declining birth rate and increase of aging population, and the decision to accept foreign workers was made with the goal of securing the labor force. Today, we see workers of foreign origin working alongside Japanese in every workplace, but there still seem to be many issues regarding mutual communication. Although foreign workers are also residents of Japan, it has been pointed out that the clients have not received the necessary improvements in the areas of housing, public services, medical care, and education. In particular, in the field of psychiatric care, there are only limited number of facilities that can treat foreigners, and urgent measures are needed to address this issue. Japan, supported by inbound demand, welcomes many foreign tourists, but it should be known that mental health problems are not limited to Japanese people in the transition to multicultural society, and I would like to emphasize the need to enhance the ability to understand cultures.

Symposium | Forensic Psychiatry : [Symposium 39] Beyond Barriers: The Current State and Future Challenges of Mental Health Stigma Across Countries

2025年9月26日(金) 13:10 ~ 14:40 Session Room 4 (Large Hall B)

[Symposium 39] Beyond Barriers: The Current State and Future Challenges of Mental Health Stigma Across Countries

Moderator: Muhammad Hanif Abd Latif (Psychiatry Department, Faculty of Medicine, Universiti Kebangsaan Malaysia), Ryo Mizui (Miyagawa Medical Juvenile Training School)

[SY-39]

Beyond Barriers: The Current State and Future Challenges of Mental Health Stigma Across Countries

Tsuyoshi Ono^{7,2}, Junko Kitaoka^{1,2}, Marie Kitano³, Nur Iwana Abdul Taib⁵, Muhammad Hanif Abd Latif⁴, Ryo Mizui^{6,2} (1. Tarumi Hospital (Japan), 2. Japan Young Psychiatrists Organization (Japan), 3. Department of Psychiatry, Monash Health (Australia), 4. Psychiatry Department, Faculty of Medicine, Universiti Kebangsaan Malaysia (Malaysia), 5. Department of Psychological Medicine, Faculty of Medicine and Health Sciences, Universiti Malaysia Sarawak (Malaysia), 6. Miyagawa Medical Juvenile Training School (Japan), 7. Medical Juveniles Correction and Education Center in East Japan (Japan))

[SY-39-01]

Supporting the Reintegration of Juvenile Offenders with Psychiatric Disorders: Overcoming Double Stigma and Systemic Barriers

*Tsuyoshi Ono^{1,8}, *Nur Abdul Taib Iwana², *Marie Kitano^{3,4}, *Junko Kitaoka^{5,8}, Ryo Mizui⁶, Hanif Latif⁷ (1. Medical Juveniles Correction and Education Center in East Japan (Japan), 2. Department of Psychological Medicine, Faculty of Medicine and Health Sciences, Universiti Malaysia Sarawak, Malaysia (Malaysia), 3. Department of Psychiatry, Monash Health (Australia), 4. The University of Melbourne, Australia (Australia), 5. Tarumi Hospital (Japan), 6. Miyagawa Medical Juvenile Training School (Japan), 7. Department of Psychiatry, Faculty of Medicine, Universiti Kebangsaan Malaysia (Malaysia), 8. Japan Young Psychiatrists Association (Japan))

[SY-39-02]

Stigma in Mental Health Care in Japan

*Junko Kitaoka^{1,8}, Marie Kitano^{2,3}, Muhammad Hanif Abd Latif⁴, Nur Iwana Abdul Taib⁵, Ryo Mizui^{6,8}, Tsuyoshi Ono^{7,8} (1. Tarumi Hospital (Japan), 2. Department of Psychiatry, Monash Health (Australia), 3. The University of Melbourne (Australia), 4. Psychiatry Department, Faculty of Medicine, Universiti Kebangsaan Malaysia (Malaysia), 5. Department of Psychological Medicine, Faculty of Medicine and Health Sciences, Universiti Malaysia Sarawak (Malaysia), 6. Miyagawa Medical Juvenile Training School (Japan), 7. Medical Juveniles Correction and Education Center in East Japan (Japan), 8. Japan Young Psychiatrists Organization (Japan))

[SY-39-03]

Mental Health Stigma in Australia: Clinical and Cultural Reflections

*Marie Kitano^{1,2}, Muhammad Hanif Abd Latif³, Nur Iwana Abdul Taib⁴, Junko Kitaoka^{5,8}, Ryo Mizui^{6,8}, Tsuyoshi Ono^{7,8} (1. Monash Health (Australia), 2. The University of Melbourne (Australia), 3. Psychiatry Department, Faculty of Medicine, Universiti Kebangsaan Malaysia (Malaysia), 4. Department of Psychological Medicine, Faculty of Medicine and Health Sciences, Universiti Malaysia Sarawak (Malaysia), 5. Tarumi Hospital (Japan), 6. Miyagawa Medical Juvenile Training School (Japan), 7. Medical Juveniles Correction and Education Center in East Japan (Japan), 8. Japan Young Psychiatrists Organization (Japan))

[SY-39-04]

Behind the White Coat: A Cross-Sectional Study on Mental Health Stigma Among Doctors in Malaysia

*NUR IWANA ABDUL TAIB¹ (1. NIAT Department of Psychological Medicine, Faculty of Medicine and Health Sciences, Universiti Malaysia Sarawak (UNIMAS) (Malaysia))

Symposium | Forensic Psychiatry : [Symposium 39] Beyond Barriers: The Current State and Future Challenges of Mental Health Stigma Across Countries

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[Symposium 39] Beyond Barriers: The Current State and Future Challenges of Mental Health Stigma Across Countries

Moderator: Muhammad Hanif Abd Latif (Psychiatry Department, Faculty of Medicine, Universiti Kebangsaan Malaysia), Ryo Mizui (Miyagawa Medical Juvenile Training School)

[SY-39] Beyond Barriers: The Current State and Future Challenges of Mental Health Stigma Across Countries

Tsuyoshi Ono^{7,2}, Junko Kitaoka^{1,2}, Marie Kitano³, Nur Iwana Abdul Taib⁵, Muhammad Hanif Abd Latif⁴, Ryo Mizui^{6,2} (1. Tarumi Hospital (Japan), 2. Japan Young Psychiatrists Organization (Japan), 3. Department of Psychiatry, Monash Health (Australia), 4. Psychiatry Department, Faculty of Medicine, Universiti Kebangsaan Malaysia (Malaysia), 5. Department of Psychological Medicine, Faculty of Medicine and Health Sciences, Universiti Malaysia Sarawak (Malaysia), 6. Miyagawa Medical Juvenile Training School (Japan), 7. Medical Juveniles Correction and Education Center in East Japan (Japan))
 キーワード : Stigma、Mental Health、Culture、Young Doctors

Stigma surrounding mental health care remains a significant and persistent issue worldwide, having a profound impact on patients' mental health and social lives. Prejudices and misconceptions about individuals with mental health issues not only discourage patients from seeking the necessary treatment but also undermine the effectiveness of the treatment itself, increase feelings of social isolation, and severely diminish the quality of life for those affected. Furthermore, the existence of stigma can sometimes render mental health a taboo subject, which, in turn, may hinder the development and implementation of essential support systems and infrastructures designed to address mental health needs. This symposium will provide an in-depth exploration of the current state of stigma in mental health care, through the perspectives of young doctors in psychiatry from three distinct countries—Australia, Malaysia, and Japan—each with its own unique cultural background. We will examine the differences in the recognition and understanding of stigma in these countries, how stigma manifests and its far-reaching effects, as well as the specific policies and initiatives each nation has introduced to reduce stigma, with a particular focus on cultural nuances. By participating in this symposium, attendees will gain valuable insights into the current landscape of mental health stigma in each country. Through the sharing of experiences and research findings from these diverse nations, the symposium aims to identify actionable strategies and approaches that can be applied globally to improve mental health care, reduce stigma, and foster a more supportive and inclusive environment for those affected by mental health challenges.

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[Symposium 39] Beyond Barriers: The Current State and Future Challenges of Mental Health Stigma Across Countries

Moderator: Muhammad Hanif Abd Latif (Psychiatry Department, Faculty of Medicine, Universiti Kebangsaan Malaysia), Ryo Mizui (Miyagawa Medical Juvenile Training School)

[SY-39-01] Supporting the Reintegration of Juvenile Offenders with Psychiatric Disorders: Overcoming Double Stigma and Systemic Barriers

*Tsuyoshi Ono^{1,8}, *Nur Abdul Taib Iwana², *Marie Kitano^{3,4}, *Junko Kitaoka^{5,8}, Ryo Mizui⁶, Hanif Latif⁷
 (1. Medical Juveniles Correction and Education Center in East Japan (Japan), 2. Department of Psychological Medicine, Faculty of Medicine and Health Sciences, Universiti Malaysia Sarawak, Malaysia (Malaysia), 3. Department of Psychiatry, Monash Health (Australia), 4. The University of Melbourne, Australia (Australia), 5. Tarumi Hospital (Japan), 6. Miyagawa Medical Juvenile Training School (Japan), 7. Department of Psychiatry, Faculty of Medicine, Universiti Kebangsaan Malaysia (Malaysia), 8. Japan Young Psychiatrists Association (Japan))

キーワード : juvenile offenders, mental illness, stigma

Many youths hospitalized at our juvenile medical center face significant challenges in finding a place to return upon discharge. Families often refuse to accept them back, and local hospitals or care facilities are reluctant to take them in. As a result, it is not uncommon for youths to be discharged to institutions far from their hometowns. This difficulty stems from their dual status as both juvenile offenders and individuals with psychiatric disorders, making their care complex and stigmatized. These youths are subjected to a “double stigma”—as delinquents and as people with mental illness—which contributes to systemic avoidance of responsibility among support institutions. While concerns about risk and instability may be justified in some cases, excessive overestimation of danger often leads to rejection of necessary medical or welfare support. This perpetuates a cycle where the lack of appropriate support increases the likelihood of recidivism or behavioral problems. Despite efforts to reduce stigma—such as pre-discharge case conferences and information-sharing—our institution faces limitations in follow-up and outreach post-discharge. Consequently, local providers may perceive that the burden has been unfairly shifted to them, reinforcing mistrust and stigma toward youth from correctional settings. This study examined the post-discharge placements of hospitalized juveniles and analyzed the characteristics and psychosocial factors of those who faced particular difficulty in finding placements. We also reviewed current practices in discharge planning and support, and discussed future directions for improving community collaboration. We emphasize the importance of juvenile facility staff engaging more actively with community providers through outreach and ongoing communication, to bridge institutional gaps and reduce stigma toward these vulnerable youths.

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Moderator: Muhammad Hanif Abd Latif (Psychiatry Department, Faculty of Medicine, Universiti Kebangsaan Malaysia), Ryo Mizui (Miyagawa Medical Juvenile Training School)

[SY-39-02] Stigma in Mental Health Care in Japan

*Junko Kitaoka^{1,8}, Marie Kitano^{2,3}, Muhammad Hanif Abd Latif⁴, Nur Iwana Abdul Taib⁵, Ryo Mizui^{6,8}, Tsuyoshi Ono^{7,8} (1. Tarumi Hospital (Japan), 2. Department of Psychiatry, Monash Health (Australia), 3. The University of Melbourne (Australia), 4. Psychiatry Department, Faculty of Medicine, Universiti Kebangsaan Malaysia (Malaysia), 5. Department of Psychological Medicine, Faculty of Medicine and Health Sciences, Universiti Malaysia Sarawak (Malaysia), 6. Miyagawa Medical Juvenile Training School (Japan), 7. Medical Juveniles Correction and Education Center in East Japan (Japan), 8. Japan Young Psychiatrists Organization (Japan))

キーワード : Stigma、Mental Health、Culture

Stigma toward mental illness remains a major issue in Japan. Japanese cultural values such as perseverance, social harmony, and the importance of saving face may discourage individuals with mental health challenges from seeking professional help, potentially leading to internalized stigma.

In this presentation, we report findings from a preliminary survey titled “Research on How Cultural Aspects Influence Psychiatrists’ Stigma Toward Mental Illness.”

We focus on responses from Japanese psychiatrists and examine the current state of stigma in mental health care, the influence of cultural and familial values on help-seeking behavior, and how stigma among healthcare professionals may affect the quality of care and clinical outcomes.

We also explore what Japanese psychiatrists consider to be effective stigma-reduction strategies and review existing initiatives. In addition, we identify cultural and institutional barriers that may hinder the implementation or success of these efforts.

Based on these findings, we discuss the importance of developing culturally grounded and sustainable approaches to stigma reduction in the Japanese context.

Finally, we place Japan’s challenges within a broader international framework, aiming to highlight shared global issues and promote cross-cultural collaboration and mutual learning to improve mental health care and reduce stigma worldwide.

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Moderator: Muhammad Hanif Abd Latif (Psychiatry Department, Faculty of Medicine, Universiti Kebangsaan Malaysia), Ryo Mizui (Miyagawa Medical Juvenile Training School)

[SY-39-03] Mental Health Stigma in Australia: Clinical and Cultural Reflections

*Marie Kitano^{1,2}, Muhammad Hanif Abd Latif³, Nur Iwana Abdul Taib⁴, Junko Kitaoka^{5,8}, Ryo Mizui^{6,8}, Tsuyoshi Ono^{7,8} (1. Monash Health (Australia), 2. The University of Melbourne (Australia), 3. Psychiatry Department, Faculty of Medicine, Universiti Kebangsaan Malaysia (Malaysia), 4. Department of Psychological Medicine, Faculty of Medicine and Health Sciences, Universiti Malaysia Sarawak (Malaysia), 5. Tarumi Hospital (Japan), 6. Miyagawa Medical Juvenile Training School (Japan), 7. Medical Juveniles Correction and Education Center in East Japan (Japan), 8. Japan Young Psychiatrists Organization (Japan))

キーワード : Mental Health Stigma、Cultural Psychiatry、Early-Career Psychiatrists

Stigma surrounding mental illness remains a significant barrier to the delivery of quality care, not only within the general public but also among healthcare professionals. This presentation is part of a cross-national study conducted in collaboration with researchers from Japan, Malaysia, and Australia, examining attitudes toward mental health stigma among psychiatry trainees and psychiatrists. Focusing on the Australian context, this presentation will explore how clinicians' views may shape clinical decision-making, communication, and therapeutic engagement.

Australia is often considered to have relatively low levels of public stigma compared to many other countries. This is frequently attributed to widespread mental health education, access to public resources, and comparatively high mental health literacy. However, growing awareness has introduced new and more nuanced challenges. While overt stigma may be less common, more subtle forms of misunderstanding and bias continue to influence both clinical environments and broader societal attitudes. Additionally, there are unique challenges associated with anti-stigma efforts themselves. These issues highlight the need to reflect on how stigma operates in everyday practice and within the professional culture of psychiatry.

This presentation draws on survey findings and clinical experience to examine how societal perceptions, professional identity, and daily clinical practice are interconnected in the Australian context. By considering these insights alongside cultural and systemic factors, the presentation aims to contribute to a deeper understanding of how stigma functions within mental health care.

Symposium | Forensic Psychiatry : [Symposium 39] Beyond Barriers: The Current State and Future Challenges of Mental Health Stigma Across Countries

2025年9月26日(金) 13:10 ~ 14:40 Session Room 4 (Large Hall B)

[Symposium 39] Beyond Barriers: The Current State and Future Challenges of Mental Health Stigma Across Countries

Moderator: Muhammad Hanif Abd Latif (Psychiatry Department, Faculty of Medicine, Universiti Kebangsaan Malaysia), Ryo Mizui (Miyagawa Medical Juvenile Training School)

[SY-39-04] Behind the White Coat: A Cross-Sectional Study on Mental Health Stigma Among Doctors in Malaysia

*NUR IWANA ABDUL TAIB¹ (1. NIAT Department of Psychological Medicine, Faculty of Medicine and Health Sciences, Universiti Malaysia Sarawak (UNIMAS) (Malaysia))

キーワード : stigma、mental health、malaysia

Stigma against mental illness remains a formidable barrier to mental healthcare across the globe, influencing not only help-seeking behavior and treatment adherence but also social acceptance and recovery outcomes. In Malaysia, mental health stigma is uniquely shaped by a confluence of cultural norms, religious beliefs, and systemic healthcare dynamics. Stigma remains pervasive even among mental health professionals despite public awareness has increased in recent years. This study aims to explore how cultural and religious factors influence psychiatrists' attitudes toward mental illness, and to identify the underlying mechanisms that reinforce or reduce stigma within clinical settings. The research adopts a cross-sectional design and is currently in progress. Data are being collected anonymously through an online questionnaire distributed to physicians with at least one year of clinical experience in psychiatry. The instrument captures various dimensions of stigma, including stereotypes, prejudice, and discriminatory attitudes, as well as perceptions of societal and institutional stigma. Additional variables explore beliefs about the impact of mental illness on family reputation, treatment avoidance, and stigma within the medical profession. Particular attention is given to the association of cultural and religious beliefs in these views. Although findings are not yet available, the study's conceptual framework and methodological approach offer valuable insights into how stigma manifests in professional mental health practice in Malaysia. The presentation will also explore anticipated challenges in reducing stigma, such as limitations in training, policy gaps, and culturally ingrained misconceptions. By contextualizing stigma within Malaysia's sociocultural landscape, this research contributes to the broader global effort to develop effective, culturally responsive stigma-reduction strategies in psychiatry and mental healthcare.

Symposium | Local minority : [Symposium 40] Strategies for Ethnocultural Research in Siberia and the Far East

2025年9月26日(金) 13:10 ~ 14:40 Session Room 5 (Conference Room A)

[Symposium 40] Strategies for Ethnocultural Research in Siberia and the Far East

Moderator: Nikolay Bokhan (Mental Health Research Institute of Tomsk NRMC, Tomsk, Russia), Irina Kupriyanova (Mental Health Research Institute of Tomsk NRMC, Tomsk, Russia)

[SY-40]

Strategies for Ethnocultural Research in Siberia and the Far East

Nikolay Alexandrovich Bokhan¹, Irina Evgenevna Kupriyanova¹, Valentina Fedorovna Lebedeva¹, Anatoly Vasilievich Sakharov³, Natalia Igorevna Kisel¹, Anna Isaevna Mandel¹, Ulyana K. Biche-Ool², Sagat Abylkairovich Altynbekov⁴, Alexander Vladimirovich Didenko⁵ (1. Mental Health Research Institute of Tomsk NRMC (Russia), 2. Republican Addictological Dispensary (Kyzyl, Republic of Tyva (Russia), 3. National Research Center of Narcology - Branch of V.P. Serbsky National Medical Research Center of Psychiatry and Narcology (Russia), 4. S.D. Asfendiyarov Kazakh National Medical University (Kazakhstan), 5. Siberian State Medical University (Russia))

[SY-40-01]

The problem of female alcoholism in ethnic populations of Siberia

*Nikolay Alexandrovich Bokhan^{1,2}, Natalia I. Kisel¹, Anna I. Mandel¹, U. K. Biche-Ool³, Alexander V. Didenko^{1,2} (1. Mental Health Research Institute of Tomsk NRMC (Russia), 2. Siberian State Medical University (Russia), 3. Republican Addictological Dispensary (Russia))

[SY-40-02]

MENTAL HEALTH OF INDIGENOUS PEOPLES OF SIBERIA AND THE FAR EAST: NEW CHALLENGES

*Irina E. Kupriyanova¹ (1. Mental Health Research Institute (Russia))

[SY-40-03]

Clinical and socio-psychological aspects of nonpsychotic mental disorders in Russia and Kazakhstan

*Valentina F. Lebedeva¹, Nikolay A. Bokhan^{1,2}, Sagat A. Altynbekov³ (1. Mental Health Research Institute (Russia), 2. Siberian State University (Russia), 3. Kazakh National Medical University (Kazakhstan))

[SY-40-04]

Influence of ethnocultural factors on clinical and neuropsychological characteristics of intellectual disorders in children of the Trans-Baikal region

*Anatoly Vasilevich Sakharov¹, Yliya Lazo² (1. Serbsky National Medical Research Centre for Psychiatry and Narcology (Russia), 2. Chita State Medical Academy (Russia))

Symposium | Local minority : [Symposium 40] Strategies for Ethnocultural Research in Siberia and the Far East

2025年9月26日(金) 13:10 ~ 14:40 Session Room 5 (Conference Room A)

[Symposium 40] Strategies for Ethnocultural Research in Siberia and the Far East

Moderator: Nikolay Bokhan (Mental Health Research Institute of Tomsk NRMC, Tomsk, Russia), Irina Kupriyanova (Mental Health Research Institute of Tomsk NRMC, Tomsk, Russia)

[SY-40] Strategies for Ethnocultural Research in Siberia and the Far East

Nikolay Alexandrovich Bokhan¹, Irina Evgenevna Kupriyanova¹, Valentina Fedorovna Lebedeva¹, Anatoly Vasilievich Sakharov³, Natalia Igorevna Kisel¹, Anna Isaevna Mandel¹, Ulyana K. Biche-Ool², Sagat Abylkairovich Altynbekov⁴, Alexander Vladimirovich Didenko⁵ (1. Mental Health Research Institute of Tomsk NRMC (Russia), 2. Republican Addictological Dispensary (Kyzyl, Republic of Tyva (Russia), 3. National Research Center of Narcology - Branch of V.P. Serbsky National Medical Research Center of Psychiatry and Narcology (Russia), 4. S.D. Asfendiyarov Kazakh National Medical University (Kazakhstan), 5. Siberian State Medical University (Russia))

キーワード : Cultural psychiatry、Mental disorders、Addictive disorders、Ethnicity

Ethnocultural studies employ a wide range of methods and approaches aimed at studying cultural, social and ethnic aspects of the lives of various groups. They are extremely important for Siberia and the Russian Far East with their multiple ethnicities. The symposium is devoted to clinical, dynamic, social and psychological aspects of the development of alcohol dependence in various ethnic groups (Russians, Buryats and Tuvans). The study of schizophrenia spectrum disorders is discussed showing that the ethnocultural features of mental patients are a factor which influences the prevalence of mental disorders. Differences in family relationships are observed in the compared ethnic groups. The data on nonpsychotic mental disorders in Siberia and Kazakhstan are compared. The disadaptation mechanisms of the development of neurotic and affective pathology in rural schoolchildren of Buryatia are discussed. The risks of intellectual disabilities in children of Transbaikalia are presented: alcohol abuse on the part of parents, low educational level of parents, pathology of pregnancy and childbirth, presence of other children with mental retardation in the family, and ethnocultural factor. However, subsequent assessment of observation of children of the ethnocultural region with intellectual disabilities establishes positive dynamics of the detected during adolescence disorders in most examined persons. Based on the results of many years of work, differentiated rehabilitation programs have been developed. The modern strategy involves differentiated programs of psycho-preventive and rehabilitation activities, and the importance of cultural preferences and traditions when choosing treatment methods. This may include the use of local practices and methods. At the same time, it is extremely important to introduce modern methods of diagnosis and treatment, introduce an interdisciplinary approach, improve the quality of medical care, develop telepsychiatry for remote areas, and introduce new forms of specialized assistance to the population with account for cultural differences in approaches to mental health.

Symposium | Local minority : [Symposium 40] Strategies for Ethnocultural Research in Siberia and the Far East

2025年9月26日(金) 13:10 ~ 14:40 Session Room 5 (Conference Room A)

[Symposium 40] Strategies for Ethnocultural Research in Siberia and the Far East

Moderator: Nikolay Bokhan (Mental Health Research Institute of Tomsk NRMC, Tomsk, Russia), Irina Kupriyanova (Mental Health Research Institute of Tomsk NRMC, Tomsk, Russia)

[SY-40-01] The problem of female alcoholism in ethnic populations of Siberia

*Nikolay Alexandrovich Bokhan^{1,2}, Natalia I. Kisel¹, Anna I. Mandel¹, U. K. Biche-Ool³, Alexander V. Didenko^{1,2} (1. Mental Health Research Institute of Tomsk NRMC (Russia), 2. Siberian State Medical University (Russia), 3. Republican Addictological Dispensary (Russia))

キーワード : Tuva、women、alcoholism、Russian female patients

Background. The prevalence and structure of alcohol abuse and its negative consequences in different ethnocultural groups vary depending on the ethnic composition of the population, socio-psychological factors, and cultural features. **Objective:** to analyze the prevalence and formation of alcohol dependence in women of Tuvan and Russian ethnicity. **Material and Methods.** Clinical-psychopathological, clinical-catastomestic, and mathematical-statistical methods were used. Alcohol dependence was diagnosed according to ICD-10. The study sample included two groups of women suffering from alcoholism. Group 1 - 78 female patients from the Republican Narcological Dispensary of the Republic of Tyva. Group 2 included 66 female patients from the Addictive States Department of the Mental Health Research Institute of Tomsk National Research Medical Center. **Results.** According to official statistics of the Republic of Tuva, there has been an annual increase in the number of women under dispensary care. The development of the main symptoms of alcohol dependence in group 1 was accelerated. Alcohol psychoses among the women of group 1 were statistically significantly more common ($p<0.05$) than in women of group 2: 38.6% versus 6.0%. The development of psychotic alcoholism in group 1 occurred at a younger age than in group 2: on average 39.9 ± 9.5 years versus 49.1 ± 4.2 years. In group 1, women had a higher frequency of relapses of alcoholic psychosis (from 2 to 9 in each case) compared to women of group 2: 16.7% versus 1.2%. **Conclusion.** It was revealed that in women of Tuvan ethnicity, the development of alcohol dependence was characterized by a higher progression: more frequent severe forms of alcoholic amnesia, low alcohol tolerance, a high prevalence of alcoholic psychoses, relapsing in 16.7% of women, negative social consequences of alcohol abuse in the form of deprivation of parental rights in a third of Tuvan women (32%), which generally indicated the malignant course of alcohol dependence in women of Tuvan ethnicity.

Symposium | Local minority : [Symposium 40] Strategies for Ethnocultural Research in Siberia and the Far East

2025年9月26日(金) 13:10 ~ 14:40 Session Room 5 (Conference Room A)

[Symposium 40] Strategies for Ethnocultural Research in Siberia and the Far East

Moderator: Nikolay Bokhan (Mental Health Research Institute of Tomsk NRMC, Tomsk, Russia), Irina Kupriyanova (Mental Health Research Institute of Tomsk NRMC, Tomsk, Russia)

[SY-40-02] MENTAL HEALTH OF INDIGENOUS PEOPLES OF SIBERIA AND THE FAR EAST: NEW CHALLENGES

*Irina E. Kupriyanova¹ (1. Mental Health Research Institute (Russia))

キーワード : Transcultural psychiatry、indigenous people、mental health

Global processes of modern society determine fundamentally new trends in the consideration of biopsychosocial problems of mental health of representatives of different ethnic groups. The comprehensive expeditions of the Mental Health Research Institute to various regions of Siberia and the Far East allowed collecting the material on the state of mental health of the population. The study of schizophrenia spectrum disorders showed that ethnocultural background of mental patients acts as a factor influencing the prevalence of psychiatric disorders in an ethno-dispersed population. The ethnocultural factor determines specific clinical and phenotypic features of schizophrenia in Tuvans and manifests by a larger number of hallucinatory disorders during the manifestation of psychosis compared to the group of Russian patients. The study of clinical and dynamic features of alcoholism development among the indigenous population of the Republic of Sakha (Yakutia) showed the importance of the ethnocultural approach. Yakuts are characterized by early development of alcohol dependence syndrome. In the group of Yakuts, alcoholic hallucinosis (65.7%) and alcoholic delirium (30.0%) are more often diagnosed, mainly in abortive and hypnagogic forms. Insignificance of vegetative manifestations during delirium is noted. In psychotic experiences among Yakuts, gelozoistic ones prevail, reflecting religion, folk superstitions, and life style. The state of mental health of Buryats and Russians, pupils of rural schools was studied. Borderline neuropsychiatric disorders in pupils were identified depending on socio-psychological and ethnocultural features. A model for providing preventive care taking into account ethnicity was developed. The modern strategy can include the use of local practices and methods of traditional medicine. At the same time, it is extremely important to introduce modern methods of diagnosis and treatment, improve the quality of medical care, develop telepsychiatry for remote areas, introduce new forms of specialized care for the population in order to avoid stigmatization and discrimination.

Symposium | Local minority : [Symposium 40] Strategies for Ethnocultural Research in Siberia and the Far East

2025年9月26日(金) 13:10 ~ 14:40 Session Room 5 (Conference Room A)

[Symposium 40] Strategies for Ethnocultural Research in Siberia and the Far East

Moderator: Nikolay Bokhan (Mental Health Research Institute of Tomsk NRMC, Tomsk, Russia), Irina Kupriyanova (Mental Health Research Institute of Tomsk NRMC, Tomsk, Russia)

[SY-40-03] Clinical and socio-psychological aspects of nonpsychotic mental disorders in Russia and Kazakhstan

*Valentina F. Lebedeva¹, Nikolay A. Bokhan^{1,2}, Sagat A. Altynbekov³ (1. Mental Health Research Institute (Russia), 2. Siberian State University (Russia), 3. Kazakh National Medical University (Kazakhstan))

キーワード : Russia、Kazakhstan、nonpsychotic mental disorders

During four years, the increase in anxiety disorders, depression, and cognitive and psychosomatic disorders in Russians and Kazakhs is immediately associated with the growth of mental disorders due to experienced coronavirus infection. The aim of the joint research was a comprehensive clinical and dynamic study of neurotic, stress-related and somatoform disorders in patients of the general health care with the development of treatment programs and an assessment of their effectiveness. The study included 3050 patients with mental disorders in the general health care. Comorbidity of mental disorders with somatic pathology was revealed in 82% of cases. Patients were divided into three groups: Group I - patients with acutely developed somatogenically caused psychotic disorders (risk group); Group II - patients requiring observation by a psychotherapist upon request; Group III - patients requiring systematic therapy and mandatory observation by a psychotherapist. In individuals of Kazakh nationality, disorders of the third group predominated – 52.1%, milder ones accounted for 39.5% (group II), 17.4% - psychotic somatogenic disorders (group I), while in Russians number of patients with disorders of group III and II was equal. The number of patients with disorders of the first group was a minimum of 4.7%. Cardiovascular diseases were a reliably more frequent ($p<0.05$) comorbid somatic pathology; they were found in 75.1% of patients with mental disorders, and those patients were classified as a risk group for mental disorders. The prevalence of anxiety and panic disorders in individuals with cardiovascular diseases, both among Russians and Kazakhs, was revealed. Patients of Kazakh nationality significantly more seldom seek outpatient somatic care for neurotic disorders and are referred to a psychiatrist later. The prevalence of neurotic disorders in Kazakhstan is almost 3 times lower than in Russia, and the medical psychiatric personnel is 2 times fewer.

Symposium | Local minority : [Symposium 40] Strategies for Ethnocultural Research in Siberia and the Far East

2025年9月26日(金) 13:10 ~ 14:40 Session Room 5 (Conference Room A)

[Symposium 40] Strategies for Ethnocultural Research in Siberia and the Far East

Moderator: Nikolay Bokhan (Mental Health Research Institute of Tomsk NRMC, Tomsk, Russia), Irina Kupriyanova (Mental Health Research Institute of Tomsk NRMC, Tomsk, Russia)

[SY-40-04] Influence of ethnocultural factors on clinical and neuropsychological characteristics of intellectual disorders in children of the Trans-Baikal region

*Anatoly Vasilevich Sakharov¹, Yliya Lazo² (1. Serbsky National Medical Research Centre for Psychiatry and Narcology (Russia), 2. Chita State Medical Academy (Russia))

キーワード : children, mental retardation, intelligence, epidemiology, catamnesis

The Aginsky Buryat Okrug is located in the Transbaikal Territory, where 62.5% of the population are Buryats. The incidence of mental retardation in the Buryat district has been unstable over the past 10 years, but the proportion of mental retardation in the overall structure of disorders in children has increased. This became the subject of the study. Children aged 6-7 years were examined using a continuous method. Intellectual developmental disorders were diagnosed more often in children from the ethnocultural region than in Slavic children ($p<0.001$). Mental retardation in Buryat children had a number of clinical features: diffuse neurological microsymptoms in the form of anisoreflexia, neurosis-like symptoms in the form of general motor retardation and stuttering, and psychopathic disorders in the form of inhibition. According to the Wechsler test, the disorders were confirmed, but the Buryat children had a low verbal score ($p<0.05$), which is explained by communication difficulties when using two languages and it limits the use of the Russian-language version of the Wechsler test. During neuropsychological examination, children of the Buryat ethnic group more often had difficulties in performing tests for oral praxis, reciprocal coordination, somatognosis, and logical-grammatical representations ($p<0.02$). This indicates immaturity of the parietal cortex and general cerebral immaturity. According to three different methods of factor analysis, it was established that the development of intellectual disorders in children of the Trans-Baikal region is influenced by alcohol abuse by parents, low educational level of parents, pathology of pregnancy and childbirth, male gender, presence of other children with mental retardation in the family, and the ethnocultural factor. However, subsequent assessment of the follow-up of children of the ethnocultural region with intellectual disabilities established positive dynamics of the identified disorders in adolescence.

Symposium | Global Mental Health : [Symposium 41] Reimagining Healing: Traditional Wisdom and Cultural Integration in Global Psychology & Psychiatry

2025年9月26日(金) 13:10 ~ 14:40 Session Room 6 (Conference Room B)

[Symposium 41] Reimagining Healing: Traditional Wisdom and Cultural Integration in Global Psychology & Psychiatry

Moderator: Mami Yanai (Integrative Mental Health Centre of Toronto / LOGOEARTH), Hung-Tat (Ted) Lo (University of Toronto, Integrative Mental Health Centre of Toronto)

[SY-41]

Reimagining Healing: Traditional Wisdom and Cultural Integration in Global Psychology & Psychiatry

Hung-Tat (Ted) Lo^{1,3,7}, Mami Yanai^{1,2,5,6}, Roy Moodley³, Meetu Khosla⁴ (1. Integrative Mental Health Centre of Toronto (Canada), 2. LOGOEARTH (Japan), 3. University of Toronto (Canada), 4. University of Delhi (India), 5. Inochi no ie (Japan), 6. International Journal of Traditional Healing & Critical Mental Health (IJTHCMH), Christ University (India), 7. Hong Fook Mental Health Association (Canada))

[SY-41-01]

Bridging Worlds of Healing: Seven Modes of Integrating Traditional Medicine and Modern Psychiatry

*Hung-Tat (Ted) Lo^{1,2,3} (1. University of Toronto (Canada), 2. Integrative Mental Health Centre of Toronto (Canada), 3. Hong Fook Mental Health Association (Canada))

[SY-41-02]

“Delicious Moments Therapy and the Art of Flourishing: Aesthetic Healing in Japanese Tradition”

*Mami Yanai^{1,2,3,4} (1. Integrative Mental Health Centre of Toronto (Canada), 2. LOGOEARTH (Japan), 3. Inochi no ie (Japan), 4. International Journal of Traditional Healing & Critical Mental Health (IJTHCMH), Christ University (India))

[SY-41-03]

Critical Psychology and Psychiatry and the Integration of Cultural Healing Practices: *Toward a Pluralistic Framework for Mental Health*

*Roy Moodley¹ (1. University of Toronto (Canada))

[SY-41-04]

Contribution of Traditional Indian Healing systems to Modern world Psychiatry

*Meetu Khosla¹ (1. Delhi University, Daulat Ram College (India))

Symposium | Global Mental Health : [Symposium 41] Reimagining Healing: Traditional Wisdom and Cultural Integration in Global Psychology & Psychiatry

2025年9月26日(金) 13:10 ~ 14:40 Session Room 6 (Conference Room B)

[Symposium 41] Reimagining Healing: Traditional Wisdom and Cultural Integration in Global Psychology & Psychiatry

Moderator: Mami Yanai (Integrative Mental Health Centre of Toronto / LOGOEARTH), Hung-Tat (Ted) Lo (University of Toronto, Integrative Mental Health Centre of Toronto)

[SY-41] Reimagining Healing: Traditional Wisdom and Cultural Integration in Global Psychology & Psychiatry

Hung-Tat (Ted) Lo^{1,3,7}, Mami Yanai^{1,2,5,6}, Roy Moodley³, Meetu Khosla⁴ (1. Integrative Mental Health Centre of Toronto (Canada), 2. LOGOEARTH (Japan), 3. University of Toronto (Canada), 4. University of Delhi (India), 5. Inochi no ie (Japan), 6. International Journal of Traditional Healing & Critical Mental Health (IJTHCMH), Christ University (India), 7. Hong Fook Mental Health Association (Canada))

キーワード : Traditional Healing Practices、Global Mental Health、Cultural Psychiatry、Indigenous Knowledge Systems、Flourishing and Well-being

Cultural psychiatry began in the 19th century with curious psychiatrists examining so-called “exotic” cultures. In the 21st century, however, the world has become deeply interconnected —practices in one culture increasingly influence others. To truly understand and advance global psychiatry, we must engage with the rich healing traditions that have developed across diverse societies for thousands of years.

This symposium brings together voices from Canada, India, and Japan to explore how traditional wisdom can meaningfully inform and transform contemporary mental health practices. Rooted in embodied, spiritual, and relational knowledge systems, each presentation offers a culturally grounded approach to healing as a process of both personal integration and collective flourishing.

We begin with a critical examination of Euro-American psychiatry, highlighting the limitations of the biomedical model and advocating for a pluralistic, justice-oriented framework that centers lived experience, cultural humility, and holistic care.

Drawing from Indian psychology and indigenous healing practices, the next presentation shares empirical insights from tribal communities in Northeast India, emphasizing spiritual rituals, emotional regulation, and holistic well-being.

From Japan, an experiential approach to healing is introduced through aesthetic, somatic, and symbolic practices grounded in traditional philosophy. *Delicious Moments Therapy (DLM)* and its broader framework, *Delicious Life Design (DLD)*, illustrate how culturally rooted modalities grounded in emotional literacy and aesthetic ritual can support grief work, resilience, and human flourishing.

Finally, a reflection on five decades of psychiatric practice in Canada, and involvement with multiple cultural groups around the world, the speaker offers seven modes of integrating traditional medicine with contemporary psychiatry—ranging from systemic collaboration to

ethno-specific services.

This symposium invites dialogue—not hierarchy—between traditional and contemporary approaches. Together, we envision a model of global psychiatry that honors ancestral wisdom, promotes cultural inclusion, and supports the healing of individuals and communities alike.

Symposium | Global Mental Health : [Symposium 41] Reimagining Healing: Traditional Wisdom and Cultural Integration in Global Psychology & Psychiatry

2025年9月26日(金) 13:10 ~ 14:40 Session Room 6 (Conference Room B)

[Symposium 41] Reimagining Healing: Traditional Wisdom and Cultural Integration in Global Psychology & Psychiatry

Moderator: Mami Yanai (Integrative Mental Health Centre of Toronto / LOGOEARTH), Hung-Tat (Ted) Lo (University of Toronto, Integrative Mental Health Centre of Toronto)

[SY-41-01] Bridging Worlds of Healing: Seven Modes of Integrating Traditional Medicine and Modern Psychiatry

*Hung-Tat (Ted) Lo^{1,2,3} (1. University of Toronto (Canada), 2. Integrative Mental Health Centre of Toronto (Canada), 3. Hong Fook Mental Health Association (Canada))

キーワード : Cultural Psychiatry、Traditional Healing Systems、Biopsychosocial-Spiritual Model (BPSS)、Integrative Mental Health、Transdisciplinary Dialogue

This presentation reflects on five decades of psychiatric practice in Canada, interwoven with cross-cultural engagement in traditional healing systems. Using the biopsychosocial-spiritual (BPSS) model, it critiques the limits of conventional psychiatry and highlights diverse global approaches that integrate spiritual, cultural, and community-based dimensions of healing.

Drawing on field observations and professional experience, the presentation identifies **seven modes of integration** between traditional medicine and contemporary psychiatry:

- 1. Systemic Integration** – In countries like China, Traditional Chinese Medicine and Western biomedicine coexist in universities and hospitals under a formal dual system.
- 2. Collaboration** – In Ethiopia, Orthodox Christian rituals (holy water, prayer) support mental health alongside clinical services.
- 3. Task-Shifting** – In India, Vikram Patel's *Sangath* model trains lay workers to deliver adapted therapy. In Zimbabwe, the *Friendship Bench* engages 'grandmothers' to offer counseling on "Friendship Benches"—now replicated internationally.
- 4. Incorporation** – In Brazil, Alaska, and New Zealand, traditional ceremonies, storytelling, and spiritual practices are integrated into mainstream care by culturally trained providers. Traditional healing spaces are provided for contact with nature and for ceremonies for aboriginal patients.
- 5. Alternative Therapies** – The West has seen rapid growth in complementary methods such as mindfulness, acupuncture, yoga, often by individual practitioners and psychedelic-assisted therapy is being actively studied.
- 6. Ethno-Specific Services** – Community organizations like Hong Fook Mental Health Association in Canada, and hospital provision of ethno-specific clinics, respond to culturally distinct needs of minority populations.

7. Educational Bridging Initiatives – FACT (Friends of Alternative and Complementary Therapies), founded in Toronto, organized film festivals, interdisciplinary hospital rounds, and healing banquets to promote education and dialogue across traditions.

Through these modes, this presentation advocates for culturally responsive, spiritually inclusive, and community-driven models of care—vital for addressing the unmet needs of our increasingly diverse societies, and furthering the development of a richer and more holistic healthcare system.

Symposium | Global Mental Health : [Symposium 41] Reimagining Healing: Traditional Wisdom and Cultural Integration in Global Psychology & Psychiatry

2025年9月26日(金) 13:10 ~ 14:40 Session Room 6 (Conference Room B)

[Symposium 41] Reimagining Healing: Traditional Wisdom and Cultural Integration in Global Psychology & Psychiatry

Moderator: Mami Yanai (Integrative Mental Health Centre of Toronto / LOGOEARTH), Hung-Tat (Ted) Lo (University of Toronto, Integrative Mental Health Centre of Toronto)

[SY-41-02] “Delicious Moments Therapy and the Art of Flourishing: Aesthetic Healing in Japanese Tradition”

*Mami Yanai^{1,2,3,4} (1. Integrative Mental Health Centre of Toronto (Canada), 2. LOGOEARTH (Japan), 3. Inochi no ie (Japan), 4. International Journal of Traditional Healing & Critical Mental Health (IJTHCMH), Christ University (India))

キーワード : Delicious Moments Therapy (DLM)、Delicious Life Design (DLD)、Japanese aesthetics, integrative psychotherapy、mind-body medicine

This presentation introduces **Delicious Moments Therapy (DLM)**, a therapeutic modality rooted in Japanese aesthetic philosophy, naturopathic principles, and integrative mind-body medicine. Developed through clinical practice and grief education, DLM offers an experiential approach to healing that emphasizes emotional literacy, somatic presence, and symbolic ritual—inviting individuals to taste and transform life’s most difficult moments.

Drawing on cultural concepts such as *wabi-sabi* (the beauty of imperfection), *ma* (sacred space and pause), and *daigomi* (the richness of depth), DLM responds to the limitations of conventional psychiatric models by re-centering embodiment, relational care, and the healing power of beauty and mindful attention.

Extending from this modality, **Delicious Life Design (DLD)** offers a broader framework for flourishing. It outlines seven stages—Explore, Experience, Embrace, Enrich, Express, Embody, and Emerge—that support individuals in moving from trauma to integration, and from survival to soulful living.

Through clinical reflections, ritual examples, and embodied storytelling, this presentation illustrates how culturally grounded aesthetic practices can complement psychiatric care. By bridging tradition and innovation, DLM and DLD contribute to a more inclusive, poetic, and life-affirming model of global mental health.

Practical recommendations for integration within diverse therapeutic settings will also be discussed.

Symposium | Global Mental Health : [Symposium 41] Reimagining Healing: Traditional Wisdom and Cultural Integration in Global Psychology & Psychiatry

2025年9月26日(金) 13:10 ~ 14:40 Session Room 6 (Conference Room B)

[Symposium 41] Reimagining Healing: Traditional Wisdom and Cultural Integration in Global Psychology & Psychiatry

Moderator: Mami Yanai (Integrative Mental Health Centre of Toronto / LOGOEARTH), Hung-Tat (Ted) Lo (University of Toronto, Integrative Mental Health Centre of Toronto)

[SY-41-03] Critical Psychology and Psychiatry and the Integration of Cultural Healing Practices: *Toward a Pluralistic Framework for Mental Health*

*Roy Moodley¹ (1. University of Toronto (Canada))

キーワード : critical psychology and psychiatry、cultural healing practices、decolonial mental health

This paper presents a critical examination of Euro-American psychology and psychiatry, interrogating the dominant biomedical model in mental health for its reductionist assumptions, universalizing tendencies, and frequent disregard for socio-cultural determinants of distress. Advocating for a more holistic and culturally sensitive approach, the paper situates psychological suffering within the lived experiences of culturally diverse communities, emphasizing the need for contextually grounded understandings of mental health. Drawing on interdisciplinary insights from transcultural psychiatry, cross-cultural psychology, and postcolonial studies, the paper highlights how culturally rooted healing practices offer alternative ontologies of suffering and recovery—challenging Western-centric conceptions of pathology. In contrast to the individualistic focus of mainstream psychology, many Global South healing traditions prioritize interconnectedness, collective healing, and meaning-making, addressing trauma, identity, and belonging in ways often overlooked by conventional psychological and psychiatric frameworks. The paper concludes by proposing a pluralistic model for mental health practice—one that integrates diverse epistemologies, fosters epistemic justice, and promotes cultural humility. Ultimately, it calls for decolonial reforms in psychological and psychiatric practice, urging a shift toward an inclusive, ecologically situated approach to healing.

Symposium | Global Mental Health : [Symposium 41] Reimagining Healing: Traditional Wisdom and Cultural Integration in Global Psychology & Psychiatry

2025年9月26日(金) 13:10 ~ 14:40 Session Room 6 (Conference Room B)

[Symposium 41] Reimagining Healing: Traditional Wisdom and Cultural Integration in Global Psychology & Psychiatry

Moderator: Mami Yanai (Integrative Mental Health Centre of Toronto / LOGOEARTH), Hung-Tat (Ted) Lo (University of Toronto, Integrative Mental Health Centre of Toronto)

[SY-41-04] Contribution of Traditional Indian Healing systems to Modern world Psychiatry

*Meetu Khosla¹ (1. Delhi University, Daulat Ram College (India))

キーワード : Traditional Healing、Health、Well-being

Background: Traditional Indian knowledge is deeply embedded in ancient Indian scriptures that offer insights into human functioning, which are immensely valuable for modern world psychiatry. The traditional Indian healing systems are a great source of wisdom that provides a profound pathway to understand human behavior and mental health issues. **Objectives:** To explore how traditional knowledge classifies psychiatric disorders, their etiology and course, transcultural variations in clinical features, and psychotherapeutic approaches to deal with them effectively. **Method:** In-depth semi structured interviews, dialogic conversations, were conducted audio-visually with 25 indigenous healers from Meitei, Bodo, and Nyshi tribes in North-East India. In-person visits and observations of healer's habitat, rituals, ceremonies were photographed along with their narratives and stories. The interviews were transcribed into English language. Inductive semantic thematic analysis was carried out after familiarizing with the data and various codes were developed. **Results:** Prominent themes that emerged were: collective experiences, socio-cultural values, traditional beliefs, spiritual practices & rituals, socialization norms, life-style behaviors, self-awareness, emotion regulation, conflict resolution, personal development and holistic well-being. **Discussion:** There was emphasis on karma yoga, possession by evil spirits, social discord, and nature wrath in etiology of mental disorders. The healers performed rituals, prayers, spiritual ceremonies, obstinances and sacrifices to reduce anxiety, psychosis, depression and psychosomatic disorders. Naturalistic healing techniques as mantras, yagnas, yoga, meditation, thought purification, and ayurveda helped in treat the symptoms, empowering the mind, promoting mental peace and health. Indigenous healing systems have valuable applications for psychiatry in fostering individualistic and holistic interventions to restore, sustain and enhance mental health and wellbeing. Interdisciplinary collaboration, cultural inclusivity, incorporating indigenous perspective and interpretations of mental health with Western approaches will help to address the global challenges in mental illness.

Symposium | Suicide prevention : [Symposium 42] Suicide prevention-2

2025年9月26日(金) 13:10 ~ 14:40 Session Room 7 (Conference Room C)

[Symposium 42] Suicide prevention-2

Moderator: Yoshinori Cho (National Center of Neurology and Psychiatry), Shih-Cheng Liao (Department of Psychiatry, College of Medicine, National Taiwan University)

[SY-42-01]

Comprehensive Suicide Prevention Strategies in Japan

*Kouta Suzuki¹ (1. Department of Neuropsychiatry, Keio University School of Medicine (Japan))

[SY-42-02]

Youth and Young Adult suicide prevention policy in South Korea

*Jong Woo Paik¹ (1. Kyung Hee university (Korea))

[SY-42-03]

Risk and Resilience in Youth Suicide Prevention: Insights from Inuit Communities in Nunavik, Canada.

*Lucie Nadeau¹ (1. McGill University (Canada))

Symposium | Suicide prevention : [Symposium 42] Suicide prevention-2

2025年9月26日(金) 13:10 ~ 14:40 Session Room 7 (Conference Room C)

[Symposium 42] Suicide prevention-2

Moderator: Yoshinori Cho (National Center of Neurology and Psychiatry), Shih-Cheng Liao (Department of Psychiatry, College of Medicine, National Taiwan University)

[SY-42-01] Comprehensive Suicide Prevention Strategies in Japan

*Kouta Suzuki¹ (1. Department of Neuropsychiatry, Keio University School of Medicine (Japan))

キーワード : Suicide Prevention、Child Suicide、General Principles of Suicide Countermeasures

In Japan, suicide is driven not only by individual mental health issues but also by societal factors such as overwork, financial hardship, caregiving burdens, bullying, and social isolation. To address this, the *Basic Act on Suicide Countermeasures* was enacted in 2006, reframing suicide as a societal issue rather than a personal one. Since then, the number of suicides has declined significantly—from 32,155 in 2006 to 20,169 in 2019. However, more than 20,000 people still die by suicide each year. The 2021 revision of the *General Principles of Suicide Countermeasures Policy* identified four priority areas: (1) children and youth, (2) women, (3) regional initiatives, and (4) cross-sectoral strategies. Successful implementation of these strategies requires collaboration across the health, welfare, education, and labor sectors, supported by integrated medical, economic, and social approaches. A particularly serious concern in recent years is the rise in suicides among children. In 2022, child suicides reached a record high of 514 cases. Suicides among junior and high school students sharply increased in 2020, and since then, the number of high school student suicides has remained above 300 annually. Suicides among junior high school students have also consistently exceeded 140 each year, indicating a sustained high level. In response to this urgent issue, an emergency action plan was launched in 2023 under the leadership of the *Children and Families Agency*. As part of the initiative, a support website titled “*You Are Not Alone*” was established, offering chatbot-guided assistance and information on available consultation services. In addition, support for private organizations providing phone- and SNS-based counseling has been strengthened to meet increasing demand. Building a society where no one is driven to take their own life requires stronger collaboration among medical professionals, local communities, and government agencies—anchored in clearly defined roles and sustained, coordinated efforts.

Symposium | Suicide prevention : [Symposium 42] Suicide prevention-2

2025年9月26日(金) 13:10 ~ 14:40 Session Room 7 (Conference Room C)

[Symposium 42] Suicide prevention-2

Moderator: Yoshinori Cho (National Center of Neurology and Psychiatry), Shih-Cheng Liao (Department of Psychiatry, College of Medicine, National Taiwan University)

[SY-42-02] Youth and Young Adult suicide prevention policy in South Korea

*Jong Woo Paik¹ (1. Kyung Hee university (Korea))

キーワード : Youth and Young Adult suicide、suicide prevention、South Korea

South Korea maintains the highest suicide rate among OECD countries. Although rates declined after the 2011 *Suicide Prevention Act*, they have risen again, with youth suicides increasing post-COVID-19. Pandemic-related isolation worsened mental health risks, as seen in a 2023 live-streamed student suicide and online crimes targeting vulnerable youth. In response, the Ministry of Education launched a suicide prevention division in 2024. This presentation reviews Korea's current mental health screenings, services, and suicide prevention strategies.

Symposium | Suicide prevention : [Symposium 42] Suicide prevention-2

2025年9月26日(金) 13:10 ~ 14:40 Session Room 7 (Conference Room C)

[Symposium 42] Suicide prevention-2

Moderator: Yoshinori Cho (National Center of Neurology and Psychiatry), Shih-Cheng Liao (Department of Psychiatry, College of Medicine, National Taiwan University)

[SY-42-03] Risk and Resilience in Youth Suicide Prevention: Insights from Inuit Communities in Nunavik, Canada.

*Lucie Nadeau¹ (1. McGill University (Canada))

キーワード : Indigenous youth、suicide prevention、risk and resilience、Inuit、Canada

Background: Suicidality must be understood within the complex and dynamic contexts in which it arises, including historical and socio-political dimensions. In child and adolescent psychiatry, the context involves family systems, as well as other key environments such as schools, communities and social medias. Both protective and risk factors around suicidality are embedded within this complexity. Inuit communities of Canada face some of the highest youth suicide rates in the world. This situation requires a nuanced understanding in order to strengthen protective factors while mitigating risks. **Objective:** This presentation will first review the literature on youth suicide prevention in Indigenous communities. It will then examine how these communities have developed local initiatives to counter suicide, and offer insight into the interplay of protective and risk factors, as well as into individual, familial and collective levers of intervention to support youth mental health and holistic wellbeing.

Methods: Drawing on both research and clinical experience in the Inuit communities of Nunavik, Canada, this presentation will reflect on the contextual dynamics of suicidality and propose approaches to suicide prevention. **Findings:** The colonial heritage significantly contributes to the vulnerability of Indigenous youth to suicidality. Silencing issues, microaggressions, complex grieving, traumatic events, adverse social determinants of health, and lack of decision-making power are part of the risk factors in communities with high suicidal rates. However, various forms of resilience are providing protection, such as strong family support, peer relationships, meaningful community ties, and cultural connectedness. Social medias act both as protective and risk factors. Effective prevention efforts mobilize not only formal services but also grassroots community initiatives, and built on trust and cultural safety. **Conclusion:** In Indigenous communities facing high suicidal rates, there is a danger of focusing solely on vulnerability and overlooking the environment's protective potential. A balanced approach is essential for fostering youth well-being.

Symposium | MDD : [Symposium 43] Time for united action on depression

2025年9月26日(金) 14:50 ~ 16:20 Session Room 2 (Main Hall B)

[Symposium 43] Time for united action on depression

Moderator: Mian Yoon Chong (HMI Medical, Singapore & Regency Specialist Hospital)

[SY-43]

Time for united action on depression

Helen Herrman¹, Toshiaki Furukawa, Daisuke Nishi, Vittorio De Luca (1. Centre for Youth Mental Health, The University of Melbourne (Australia))

[SY-43-01]

Reflecting on The Lancet-WPA Commission on depression

*Helen Herrman¹ (1. The University of Melbourne (Australia))

[SY-43-02]

Personalized & Optimized Therapies (POTs) using the Resilience Training App[®] for subthreshold depression in the community: a report from the RESiLIENT trial

*Toshi A. Furukawa¹ (1. Kyoto University (Japan))

[SY-43-03]

Epidemiology of depression in Japan

*Daisuke Nishi¹ (1. The University of Tokyo (Japan))

[SY-43-04]

The impact of depression on healthcare systems and professionals: a cultural perspective

*Vittorio De Luca^{1,2,3}, Silvia Gubbini¹ (1. ASL RM5, Monterotondo (RM) (Italy), 2. Istituto Italiano di Igiene Mentale Transculturale (IMT) (Italy), 3. Istituto di Ricerche Europee in Psicoterapia Psicoanalitica (IREP) (Italy))

Symposium | MDD : [Symposium 43] Time for united action on depression

2025年9月26日(金) 14:50 ~ 16:20 Session Room 2 (Main Hall B)

[Symposium 43] Time for united action on depression

Moderator: Mian Yoon Chong (HMI Medical, Singapore & Regency Specialist Hospital)

[SY-43] Time for united action on depression

Helen Herrman¹, Toshiaki Furukawa, Daisuke Nishi, Vittorio De Luca (1. Centre for Youth Mental Health, The University of Melbourne (Australia))

Depression is a neglected global health crisis. Although its most frequent onset occurs in young and middle-aged people, it affects people and their families across the life course. Poor understanding of the condition and lack of psychosocial and financial resources hold back its prevention, diagnosis and treatment and the economic prosperity of nations

The Lancet-World Psychiatric Association Commission: “Time for united action on depression” builds on growing attention to global mental health and recommends actions to tackle inequities and the widespread neglect in diagnosis, treatment, and prevention, including prioritising a staged approach to care and early intervention, and delivering collaborative care in resource-limited and other settings.

The commission calls for a whole-of-society approach to preventing depression to achieve benefits similar to those in other fields such as heart disease and cancer, ensuring a holistic pursuit of the UN Sustainable Development Goals.

The first speaker will outline the Commission’s findings. The second speaker will focus on the prevention of depression, now recognized as crucial to tackling the global burden of disease. The third speaker will present his work on the epidemiology of depression, including insights from the Japanese survey for the World Mental Health Survey. The final speaker will bring a further cultural perspective and comment on the need to integrate care while addressing the impact of depression on healthcare systems and professionals.

Symposium | MDD : [Symposium 43] Time for united action on depression

2025年9月26日(金) 14:50 ~ 16:20 Session Room 2 (Main Hall B)

[Symposium 43] Time for united action on depression

Moderator: Mian Yoon Chong (HMI Medical, Singapore & Regency Specialist Hospital)

[SY-43-01] Reflecting on The Lancet-WPA Commission on depression*Helen Herrman¹ (1. The University of Melbourne (Australia))

The Commission aligns knowledge from many fields to advance understanding of the nature and causes of depression. It synthesises the robust evidence on what can be done to prevent and care for people living with depression even in the least resourced contexts. It recommends actions to promote public understanding, prevention and care globally: by communities; health practitioners; researchers; and decision-makers. There are ambitious recommendations to tackle inequities and widespread neglect in diagnosis, treatment, and prevention. It calls for a whole-of-society approach to preventing depression to achieve benefits similar to those in other fields such as heart disease and support sustainable development. It prioritises a staged approach to care, early intervention and delivering collaborative care. The session will reflect on the key messages and recommendations and whether the evidence and experience truly create an opportunity for united action to transform mental health globally.

Symposium | MDD : [Symposium 43] Time for united action on depression

2025年9月26日(金) 14:50 ~ 16:20 Session Room 2 (Main Hall B)

[Symposium 43] Time for united action on depression

Moderator: Mian Yoon Chong (HMI Medical, Singapore & Regency Specialist Hospital)

[SY-43-02] Personalized & Optimized Therapies (POTs) using the Resilience Training App® for subthreshold depression in the community: a report from the RESiLIENT trial

*Toshi A. Furukawa¹ (1. Kyoto University (Japan))

キーワード : Depression、Prevention、Cognitive-Behavioural Therapy、Smartphone、Precision medicine

In 1984, a report by the US National Institute of Mental Health concluded that preventing depression was impossible. However, research over the past 30 years has shown that depression prevention is, in fact, achievable. Despite this progress, health losses due to common mental disorders have continued to rise, and depression remains the leading cause of disability related to mental health worldwide. Simply put, we have failed in our professional mission to provide people with the mental health support they deserve.

A shift in this trajectory now seems finally within reach, driven by the widespread adoption of internet technologies and rapid advancements in artificial intelligence (AI).

Over the past decade, we have been developing a smartphone CBT (cognitive behavioral therapy) app called the Resilience Training App®. We recently completed the largest individually randomized trial to date, aimed at treating subthreshold depression and promoting mental well-being in the general population (total n=5361). The app delivers five CBT-based skills: behavioral activation, cognitive restructuring, problem-solving, assertiveness training, and behavior therapy for insomnia. These skills, both individually and in combination, demonstrated varying levels of efficacy in reducing depression symptoms, with effect sizes ranging from -0.67 (95% CI: -0.81 to -0.53) to -0.16 (95% CI: -0.30 to -0.02). The interventions also showed differential effects on anxiety, insomnia, and mental well-being. These benefits were sustained for at least 26 weeks.

Building on these findings, we developed the AI-based Personalized & Optimized Therapy (POT) algorithm to match interventions with individuals' characteristics. When individuals received their POT, the overall effect size for the population increased by 35% compared to the conventional approach of providing everyone with the group average best intervention. Scaling up the implementation of this app and its POT algorithm is both timely and crucial in the global fight against depression.

Symposium | MDD : [Symposium 43] Time for united action on depression

2025年9月26日(金) 14:50 ~ 16:20 Session Room 2 (Main Hall B)

[Symposium 43] Time for united action on depression

Moderator: Mian Yoon Chong (HMI Medical, Singapore & Regency Specialist Hospital)

[SY-43-03] Epidemiology of depression in Japan

*Daisuke Nishi¹ (1. The University of Tokyo (Japan))

キーワード : Depression、Epidemiology、Japan

Depression is a serious disease with a high prevalence. Because the rate of people with mental disorders seeking medical care is low, epidemiological studies targeting local residents are essential for clarifying the prevalence of mental disorders, including depression. This presentation will introduce the World Mental Health Survey Japan Survey (WMHJ), a representative regional mental health epidemiological study in Japan, and the Comprehensive Survey of Living Conditions. WMHJ is the largest epidemiological study in Japan on common mental disorders, conducted through face-to-face interviews using the psychiatric diagnostic interview (CIDI). WMHJ1 was conducted from 2002 to 2006, and WMHJ2 from 2013 to 2015. These findings indicated that the prevalence rate of depression in Japan was around 2.5% and remained relatively stable from the 2000s to the 2010s. The Comprehensive Survey of Living Conditions is a core statistical survey conducted by the government. Although it is inferior to WMHJ because it does not include diagnostic information, it measures K6, which assesses psychological distress, every three years, and has the advantages of a large sample size. According to the survey, the percentage of people experiencing psychological distress is approximately 25% and has not changed significantly, but the percentage of people using mental health services has increased considerably. Therefore, the recent increase in the number of depression patients in Japan is likely explained more by an increase in the proportion of individuals meeting depression diagnostic criteria seeking treatment rather than an actual increase in the number of individuals meeting those criteria. Depression, as well as mental distress at levels not meeting depression diagnostic criteria, has been shown in previous studies to shorten healthy life expectancy. Therefore, reducing not only the treatment gap but also the prevention gap and quality gap is strongly desired moving forward.

Symposium | MDD : [Symposium 43] Time for united action on depression

2025年9月26日(金) 14:50 ~ 16:20 Session Room 2 (Main Hall B)

[Symposium 43] Time for united action on depression

Moderator: Mian Yoon Chong (HMI Medical, Singapore & Regency Specialist Hospital)

[SY-43-04] The impact of depression on healthcare systems and professionals: a cultural perspective

*Vittorio De Luca^{1,2,3}, Silvia Gubbini¹ (1. ASL RM5, Monterotondo (RM) (Italy), 2. Istituto Italiano di Igiene Mentale Transculturale (IMT) (Italy), 3. Istituto di Ricerche Europee in Psicoterapia Psicoanalitica (IREP) (Italy))

キーワード : Depression、Mental health of MH professionals、Healthcare systems

Depression is the leading cause for seeking care at public specialized psychiatric centres in Italy, as well as one of the main reasons for psychiatric admission to emergency departments and acute psychiatric units. It is also a major cause of access to rehabilitative treatments in post-acute facilities. Despite the availability of treatments with proven short- and long-term efficacy, depression carries a high risk of recurrence, chronicity, and premature mortality, whether by suicide or medical conditions more prevalent than in the general population. Beyond its significant impact on public health and collective wellbeing, depression represents a personal and systemic challenge for healthcare professionals, particularly those in mental health services. These workers face an elevated risk of psychological distress, clinically relevant mental health conditions, major depressive episodes, and suicide. The authors examine the burden of depression within the work of mental health professionals, its influence on career decisions, and its consequences for their mental health. The presentation also explores cultural factors involved in care processes during a historical phase in which service cultures are strained by rising conflict and social inequality, requiring adaptation within the public health system.

Symposium | Community care : [Symposium 44] Family and culture

2025年9月26日(金) 14:50 ~ 16:20 Session Room 3 (Large Hall A)

[Symposium 44] Family and culture

Moderator: Sergio Javier Villaseñor-Bayardo (Universidad de Guadalajara), Yoko Kamio (Ochanomizu University)

[SY-44]

Family and Culture: Resilience and Mental Health

Vincenzo F. DiNicola¹, Carlos Zubaran Jr², Sergio J. Villaseñor Bayardo⁷, Kenneth Fung⁵, Ted Lo⁶, Tamaki Saito⁴, Yoko Kamio³ (1. University of Montreal (Canada), 2. Sunnyside Clinic (Australia), 3. Ochanomizu University (Japan), 4. Tsukuba Dialogue House (Japan), 5. Toronto University (Canada), 6. University Health Network (Canada), 7. Universidad de Guadalajara. Mexico. (Mexico))

[SY-44-01]

At the crossroads: the evolving tension in family and custom

*Carlos Zubaran^{1,2,3} (1. Sunnyside Clinic, Sydney, Australia (Australia), 2. School of Medicine & Translational Health Research Institute, Western Sydney University, Australia (Australia), 3. Health Sciences Postgraduate Program, University of Caxias do Sul, Brazil (Brazil))

[SY-44-02]

When Clinics Are Families: Lessons from the Closure of the Asian Initiative in Mental Health

*Hung-Tat (Ted) Lo¹, *Kenneth Po-Lun Fung¹ (1. University of Toronto (Canada))

[SY-44-05]

Dialogical Practice in Japan

*Tamaki Saito¹ (1. Tsukuba Dialogue House)

Symposium | Community care : [Symposium 44] Family and culture

2025年9月26日(金) 14:50 ~ 16:20 Session Room 3 (Large Hall A)

[Symposium 44] Family and culture

Moderator: Sergio Javier Villaseñor-Bayardo (Universidad de Guadalajara), Yoko Kamio (Ochanomizu University)

[SY-44] Family and Culture: Resilience and Mental Health

Vincenzo F. DiNicola¹, Carlos Zubaran Jr², Sergio J. Villaseñor Bayardo⁷, Kenneth Fung⁵, Ted Lo⁶, Tamaki Saito⁴, Yoko Kamio³ (1. University of Montreal (Canada), 2. Sunnyside Clinic (Australia), 3. Ochanomizu University (Japan), 4. Tsukuba Dialogue House (Japan), 5. Toronto University (Canada), 6. University Health Network (Canada), 7. Universidad de Guadalajara. Mexico. (Mexico))

キーワード : xxxxx、xxxxxx、xxxxxxxx

Family and culture have always been integral to human existence. This symposium explores the diverse connections between family relationships, cultural values, and mental health. Carlos Zubaran examines how social unrest, deprivation, and war disturb family life and harm well-being. Families often face a crossroads: some seek comfort in nostalgic memories, while others pursue change and redemption. He emphasizes how these directions influence resilience and mental health. Sergio J. Villaseñor-Bayardo discusses the cultural aspects of family life in Mexico and beyond. Drawing on historical, religious, and indigenous views, he demonstrates how families serve as mediators of cultural values, spiritual practices, and community resilience, shaping both the understanding of illness and pathways to healing. Kenneth Fung and Ted Lo present “When Clinics Are Families: Lessons from the Closure of the Asian Initiative in Mental Health.” For more than twenty years, AIM in Toronto offered culturally responsive care and a sense of belonging for patients, families, and the wider community. Its closure highlighted the symbolic and practical importance of “family” in mental health care and raised concerns about depersonalized service models that diminish meaning, equity, and resilience. Vincenzo F. DiNicola discusses “A Stranger in the Family: Culture, Families, and Therapy.” He introduces a cultural family therapy model for working with diversity, especially with immigrants, refugees, and minorities in mainstream societies. Tamaki Saito reports on Dialogical Practice in Japan. Adapted from the Finnish Open Dialogue approach to psychosis, it involves clients and families in dialogue sessions. While still limited in medical settings, its reach is expanding, including prisons and randomized controlled trials. Overall, these presentations show how family—both lived experience and guiding metaphor—shapes resilience, continuity, and cultural meaning in mental health.

Symposium | Community care : [Symposium 44] Family and culture

2025年9月26日(金) 14:50 ~ 16:20 Session Room 3 (Large Hall A)

[Symposium 44] Family and culture

Moderator: Sergio Javier Villaseñor-Bayardo (Universidad de Guadalajara), Yoko Kamio (Ochanomizu University)

[SY-44-01] At the crossroads: the evolving tension in family and custom

*Carlos Zubaran^{1,2,3} (1. Sunnyside Clinic, Sydney, Australia (Australia), 2. School of Medicine & Translational Health Research Institute, Western Sydney University, Australia (Australia), 3. Health Sciences Postgraduate Program, University of Caxias do Sul, Brazil (Brazil))

キーワード : Cultural Psychiatry、Culture、Family

The publication of *Centuries of Childhood*, the seminal study by Philippe Aries in 1960, established history of the family life as a special area of scholarship and inquiry. Over the subsequent decades, the notion of family has shifted from a static unit in its separate domestic milieu to the family's dynamic interactions with the world and its processes, including migration, industrialization, and urbanization. More recently, historical research has begun to rethink the internal dynamics of the family, and its collective strategies based on ethnographies, autobiographies, and oral historical accounts. Family development theorists such as White and Klein (2008) have examined family changes over time, following challenges and stress, with an emphasis on life transitions and family dynamics. Over the last decades, family therapy has become an increasingly popular mode of treatment of family dysfunctions: family therapists have assisted families to fulfil their developmental cycles and foster resilience and healthy familial response to stress. The current period of global uncertainty, with political, socio-economic, and environmental crises, has been referred to as "polycrisis", a term that has captured the tension of our current times. Migrant families are at particular risk during periods of crisis, given the tendency of societal debate to give rise to xenophobia and prejudice. The use of social media has served as a vector for disseminating hostility and misinformation. In fact, in recent years there has been evidence of soaring rates of mental disorders in youth, which led leading professional associations to declare an emergency in child and adolescent mental health. In light of the critical juncture of current times, commentators and scholars have noted a pervasive and intense feeling of nostalgia, with migrant families longing for social ties left in countries who have already changed, and natives yearning for the good life of an autochthonous idealised past.

Symposium | Community care : [Symposium 44] Family and culture

2025年9月26日(金) 14:50 ~ 16:20 Session Room 3 (Large Hall A)

[Symposium 44] Family and culture

Moderator: Sergio Javier Villaseñor-Bayardo (Universidad de Guadalajara), Yoko Kamio (Ochanomizu University)

[SY-44-02] When Clinics Are Families: Lessons from the Closure of the Asian Initiative in Mental Health

*Hung-Tat (Ted) Lo¹, *Kenneth Po-Lun Fung¹ (1. University of Toronto (Canada))

The closure of the Asian Initiative in Mental Health (AIM) at University Health Network has left not only a structural gap in culturally responsive care, but revealed the profound meaning of “family” in mental health services. For over two decades, AIM was more than a clinic—it was a community hub where patients, families, clinicians, and the wider Chinese Canadian community experienced a sense of belonging, continuity, and cultural resonance. In many Asian cultures, mental health care involves not just individual intrapsychic issues, but often involves family relationships issues and sometimes directly involve multiple family members, emphasizing the importance of relational healing. At the clinical level, AIM fostered intergenerational and family informed approaches. At the organizational level, AIM also functioned like a family, fostering collegial bonds and collective mission. Its abrupt dissolution has been experienced as a devastating loss by patients (who felt they lost a “home”), staff (who lost professional kinship), and the Chinese community (who perceived the erasure of a program “for our own people”). The anti-Asian racism is impactful and reverberated for the entire extended community. This contrasts sharply with the trend in large institutions toward assembly-line models of care where staff are interchangeable in the name of perceived corporate efficiency, relational continuity is undervalued, and cultural meaning is disregarded with anti-DEI rationale. Drawing on organizational culture frameworks such as the Competing Values Framework, this presentation will explore why many groups—across clinical and organizational cultural contexts—prefer family-like, clan-based models of care and leadership. It will invite dialogue about how the dismantling of “family” in health systems contributes to burnout, values erosion, and inequities, and how reclaiming family as a guiding metaphor can strengthen individual care, organizational culture, and community resilience.

Symposium | Community care : [Symposium 44] Family and culture

2025年9月26日(金) 14:50 ~ 16:20 Session Room 3 (Large Hall A)

[Symposium 44] Family and culture

Moderator: Sergio Javier Villaseñor-Bayardo (Universidad de Guadalajara), Yoko Kamio (Ochanomizu University)

[SY-44-05] Dialogical Practice in Japan*Tamaki Saito¹ (1. Tsukuba Dialogue House)

In recent years, "Open Dialogue," a dialogical approach to psychosis originating from Finland, has been gaining attention in Japan. While its implementation in medical settings remains limited, its application is expanding, as evidenced by mandatory training in prisons nationwide. We have been practicing Open Dialogue at our clinic "Tsukuba Dialogue House". This approach involves inviting clients and their networks (such as family and friends) to participate in dialogical sessions conducted by a treatment team of at least two members. Its effectiveness has already been confirmed for conditions such as schizophrenia and depression, and randomized controlled trials (RCTs) are currently underway. In this symposium, the significance of introducing Open Dialogue into Japan's mental health care system will be discussed.

Symposium | Local minority : [Symposium 45] Bridges of Hope: Uniting for Mental Health Care in East and Southeast Asia

2025年9月26日(金) 14:50 ~ 16:20 Session Room 4 (Large Hall B)

[Symposium 45] Bridges of Hope: Uniting for Mental Health Care in East and Southeast Asia

Moderator: Shailendra Raj ADHIKARI (Beautiful Mind Institute of Psychiatry, Chitwan), Harry Minas (The University of Melbourne)

[SY-45]

Bridges of Hope: Uniting for Mental Health Care in East and Southeast Asia

Chonnakarn Jatchavala¹, Andi Tantra Jayalangkara Tantra², Ai Aoki³, Tsutomu Aoki⁴ (1. Department of Psychiatry, Faculty of Medicine, Prince of Songkla University, Songkhla, Thailand (Thailand), 2. Publication and Research Unit, Public Health Faculty, Hasanuddin University, South Sulawesi, (Indonesia), 3. Department of Healthcare Administration, Graduate School of Medicine, University of Nagoya (Japan), 4. Department of Psychiatry, Asahi General Hospital, Chiba (Japan))

[SY-45-01]

A Scoping Review on the Mental Health Needs of Thai Village Health Volunteers: Seeking International Support

*Chonnakarn Jatchavala¹, Kreuwan Jongbowonwiwat¹ (1. Department of Psychiatry, Faculty of Medicine, Prince of Songkla University, Songkhla, Thailand (Thailand))

[SY-45-02]

Current Mental Health Landscape in Indonesia (2025)

*Andi Jayalangkara Tantra¹ (1. Hasanuddin University (Indonesia))

[SY-45-03]

Child mental health in Mongolia

*Ai Aoki¹, Kenji Nomura², Hidekazu Kato³, Masako Nagata², Gangchimeg Togoobaatar⁴, Khishigsuren Zuunnast⁵ (1. Department of Healthcare Administration, Graduate School of Medicine, Nagoya University (Japan), 2. Psychological Support & Research Center for Human Development, Nagoya University, Japan (Japan), 3. Department of Child and Adolescent Psychiatry, Nagoya University Hospital, Japan (Japan), 4. Department of Global Health Nursing, Faculty of Medicine, University of Tsukuba, Japan, Japan (Japan), 5. Department Mental Health, School of Medicine, Mongolian National University of Medical Sciences, Mongolia (Mongolia))

[SY-45-04]

Mental Health for All: Mental Health Support in Cambodia for twenty-eight years

*Tsutomu Aoki^{1,2}, Akiko Nosaki^{1,3}, Rieko Aoki^{1,4}, Toshiyuki Marutani^{1,5}, Kanae Moriuchi¹, Akira Kubota^{1,5} (1. The Supporters for Mental Health (SUMH) (Japan), 2. Department of Psychiatry, Asahi General Hospital (Japan), 3. Graduate School of Nursing, School of Nursing, Chiba University (Japan), 4. Faculty of Nursing Department of Nursing, Josai International University (Japan), 5. Kinshicho Kubota Clinic (Japan))

Symposium | Local minority : [Symposium 45] Bridges of Hope: Uniting for Mental Health Care in East and Southeast Asia

2025年9月26日(金) 14:50 ~ 16:20 Session Room 4 (Large Hall B)

[Symposium 45] Bridges of Hope: Uniting for Mental Health Care in East and Southeast Asia

Moderator: Shailendra Raj ADHIKARI (Beautiful Mind Institute of Psychiatry, Chitwan), Harry Minas (The University of Melbourne)

[SY-45] Bridges of Hope: Uniting for Mental Health Care in East and Southeast Asia

Chonnakarn Jatchavala¹, Andi Tantra Jayalangkara Tantra², Ai Aoki³, Tsutomu Aoki⁴ (1. Department of Psychiatry, Faculty of Medicine, Prince of Songkla University, Songkhla, Thailand (Thailand), 2. Publication and Research Unit, Public Health Faculty, Hasanuddin University, South Sulawesi, (Indonesia), 3. Department of Healthcare Administration, Graduate School of Medicine, University of Nagoya (Japan), 4. Department of Psychiatry, Asahi General Hospital, Chiba (Japan))

キーワード : Mental health service、community-based healthcare、International collaboration

East and Southeast Asian countries predominantly fall within the low- and middle-income categories. In many nations, including Laos and Thailand, village health volunteers (VHVs) are the cornerstone of primary healthcare, mainly where healthcare professionals are in short supply. In 2019, before the onset of the COVID-19 pandemic, Thailand implemented a policy promoting a recovery-oriented approach to mental health care. VHVs, recognized as community-based healthcare leaders and termed "unsung heroes" by the World Health Organization, played crucial roles in supporting COVID-19 patients and assisting individuals with psychiatric conditions, particularly regarding medication adherence during the pandemic. However, following the pandemic, the overall workload for Thai VHVs has increased, revealing a lack of adequate training in mental health care, especially concerning substance abuse. Additionally, stigma continues to impede both Thai VHVs and other primary healthcare providers in addressing mental health issues. In contrast, Japan is a high-income country known for its exceptional medical care and educational standards. Numerous Japanese non-governmental organizations (NGOs) and academic institutions, such as Cambodia, assist other region's low- and middle-income countries. Supporters for Mental Health (SUMH), Japan's first international mental health NGO, has delivered mental health support in Cambodia since 1996. SUMH continues to promote a 'Community Mental Health Service Model,' emphasizing psychoeducation during outpatient and home visits to patients and their families. This presentation reflects on SUMH's 28-year journey and discusses the ongoing advancements in mental health care in Cambodia. Additionally, the symposium will address child and adolescent psychiatry in Mongolia, another low- and middle-income country in East Asia, where Japanese psychiatrist teams have contributed to developing local psychiatric services for young people. The discussions will involve psychiatrists from East and Southeast Asia, focusing on the existing mental health systems, challenges faced, and strategies for strengthening these systems, mainly through international collaboration.

Symposium | Local minority : [Symposium 45] Bridges of Hope: Uniting for Mental Health Care in East and Southeast Asia

2025年9月26日(金) 14:50 ~ 16:20 Session Room 4 (Large Hall B)

[Symposium 45] Bridges of Hope: Uniting for Mental Health Care in East and Southeast Asia

Moderator: Shailendra Raj ADHIKARI (Beautiful Mind Institute of Psychiatry, Chitwan), Harry Minas (The University of Melbourne)

[SY-45-01] A Scoping Review on the Mental Health Needs of Thai Village Health Volunteers: Seeking International Support

*Chonnakarn Jatchavala¹, Kreuwan Jongbowonwiwat¹ (1. Department of Psychiatry, Faculty of Medicine, Prince of Songkla University, Songkhla, Thailand (Thailand))

キーワード : Village Health Volunteers、Mental Health、Primary Healthcare、Community-Based Training、International Collaboration

Background: Village health volunteers (VHVs) play a crucial role in primary healthcare across many low- and middle-income countries in Southeast Asia, such as Thailand and Laos, where there is a shortage of healthcare professionals. Earlier research on their roles has been more general and has not explicitly addressed their mental health practices. In 2019, Thailand implemented a policy promoting a recovery-oriented approach to mental health care. Nevertheless, the support they require from academic institutions and international partnerships has not been thoroughly investigated.

Method: The Scopus and PubMed databases were explored for published studies related to "Village Health Volunteer," "Thailand," and "Mental Health," focusing on research themes, clinical practices, and policies or interventions in mental health following the pandemic (2023-2025). The authors examined their responsibilities and assessed the support needed from both international and national academic institutions and professional organizations.

Results: Most studies indicated that Thai Village Health Volunteers (VHVs) expressed concerns about the lack of community-based training for mental health practices, particularly regarding severe mental illnesses, such as the rehabilitation of schizophrenia patients. Some online screening tools and brief interventions, particularly for alcohol addiction, have been developed by higher education institutions. While health literacy was encouraged among the VHVs, no studies have reported on their mental health literacy.

Conclusion: The establishment of Thai Village Health Volunteers by the government during the Cold War illustrates a complex relationship between health and politics, aimed at promoting community health initiatives and countering communist influences. As a result, a conflict of paradigms has arisen regarding international collaboration for the practical implementation of VHVs, particularly in mental health care. Nevertheless, during this time, VHVs have become a cornerstone of the Thai health system, and they require additional support in training for severe mental illnesses and addiction from both national and international academic institutions and organizations.

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Moderator: Shailendra Raj ADHIKARI (Beautiful Mind Institute of Psychiatry, Chitwan), Harry Minas (The University of Melbourne)

[SY-45-02] Current Mental Health Landscape in Indonesia (2025)

*Andi Jayalangkara Tantra¹ (1. Hasanuddin University (Indonesia))

キーワード : Mental health Indonesia、Stigma、Primary Care Services

National Prevalence: According to the 2023 National Health Survey (SKI), approximately 2% of Indonesians aged over 15 are experiencing mental health issues, with depression, anxiety, and schizophrenia being the most prevalent disorders.

Youth Mental Health: The highest prevalence of depression symptoms is observed among young individuals aged 15–24, particularly females, those with lower education levels, the unemployed, and workers in non-specialized roles.

Treatment Gap: Despite the prevalence, only 10.4% of young people with depression seek treatment, indicating a significant treatment gap.

Community Health Centers (Puskesmas): As of late 2024, only 40% of Puskesmas provide mental health services, with a target to increase this to 50% by 2025 and 70% by 2026. However, the distribution is uneven, with 60–70% of mental health professionals concentrated in Jakarta.

Psychiatrist Availability: Only 13 out of 38 provinces have a psychiatrist-to-population ratio above the national average, highlighting a significant disparity in access to mental health professionals across the country.

Training Initiatives: The Ministry of Health is intensifying training programs for healthcare workers, aiming to train one million individuals in Psychological First Aid (P3LP) to provide basic mental health support at the community level.

Government Initiatives and Future Plans Free Health Screening Program (PKG): Launched in February 2025, the PKG is Indonesia's largest health initiative, aiming to provide annual free health screenings, including mental health evaluations, to all citizens on their birthdays. The program targets 100 million people in its first year, utilizing over 20,000 health centers and clinics nationwide. Screenings include assessments for depression, anxiety, and other mental health conditions.

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[Symposium 45] Bridges of Hope: Uniting for Mental Health Care in East and Southeast Asia

Moderator: Shailendra Raj ADHIKARI (Beautiful Mind Institute of Psychiatry, Chitwan), Harry Minas (The University of Melbourne)

[SY-45-03] Child mental health in Mongolia

*Ai Aoki¹, Kenji Nomura², Hidekazu Kato³, Masako Nagata², Gangchimeg Togoobaataa⁴, Khishigsuren Zuunnaast⁵ (1. Department of Healthcare Administration, Graduate School of Medicine, Nagoya University (Japan), 2. Psychological Support & Research Center for Human Development, Nagoya University, Japan (Japan), 3. Department of Child and Adolescent Psychiatry, Nagoya University Hospital, Japan (Japan), 4. Department of Global Health Nursing, Faculty of Medicine, University of Tsukuba, Japan, Japan (Japan), 5. Department Mental Health, School of Medicine, Mongolian National University of Medical Sciences, Mongolia (Mongolia))

キーワード : Mongolia、Child and adolescent mental health、Community survey、Capacity building

In Mongolia, as in many other countries, mental disorders have emerged as a significant health concern. The impact of child and adolescent mental health problems is also high. A study conducted at the public elementary schools in the capital city, Ulaanbaatar in 2018 demonstrated that 21% of the children were classified as high-risk of mental health problems. The study demonstrated socioeconomic and lifestyle determinants. Another study among the patients of child and adolescent mental health department at the National Mental Health Center demonstrated the needs of support for families. Recently, attention towards child and adolescent mental health is getting greater rapidly among general population. The trend is partially attributable to the societal and lifestyle change and increased exposure to information on the internet and social media. The changes towards urbanized and nuclear family-based lifestyles are particularly prominent in Ulaanbaatar. In many low- and middle-income countries, child and adolescent mental health services had been underserved. Like many other countries, in Mongolia, despite the increased needs of child mental health services, human resources to provide mental health services for children had been insufficient. To address this issue, Mongolia developed a formal training program for child and adolescent psychiatry, which was collaboratively developed by the Mongolian National University of Medical Sciences and Nagoya University in 2023. The program started with the aim to train 30 child and adolescent psychiatry specialists over 3 years.

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Moderator: Shailendra Raj ADHIKARI (Beautiful Mind Institute of Psychiatry, Chitwan), Harry Minas (The University of Melbourne)

[SY-45-04] Mental Health for All: Mental Health Support in Cambodia for twenty-eight years

*Tsutomu Aoki^{1,2}, Akiko Nosaki^{1,3}, Rieko Aoki^{1,4}, Toshiyuki Marutani^{1,5}, Kanae Moriuchi¹, Akira Kubota^{1,5} (1. The Supporters for Mental Health (SUMH) (Japan), 2. Department of Psychiatry, Asahi General Hospital (Japan), 3. Graduate School of Nursing, School of Nursing, Chiba University (Japan), 4. Faculty of Nursing Department of Nursing, Josai International University (Japan), 5. Kinshicho Kubota Clinic (Japan))

キーワード : Community Mental Health、Global Mental Health、Cambodia、Mental Health Support

It has been twenty-eight years since the Japanese non-profit organization, the Supporters for Mental Health (SUMH), began supporting community mental health activities in Cambodia. SUMH began field research in Siem Reap Province in 1996 and opened a local office in 2001. With the cooperation of Japanese volunteers, SUMH trained six psychosocial rehabilitation practitioners and opened and operated the only mental health rehabilitation center in Cambodia. It has provided day care and group therapy, mental health education for health care workers and other NPO staffs, outreach services, psychoeducation programs, and psychiatric outpatient clinics at two hospitals in rural areas, as well as deploying a vehicle to provide community mental health services. The following achievements have been made:- 62,589 people receiving psychiatric services- 2,364 home-visit support cases:- 5,021 mental health training participants in the community: - Psychiatric education for staffs of all health centers in Siem Reap Province- Numerous cases of release from custody in cages and chains in private homesThese activities were then considered effective in addressing global mental health challenges in the following ways Integrating mental health services into the community Improving access to effective psychotropic medications Developing multidisciplinary mental health professionals Provision of community mental health care and rehabilitation for the chronically mentally ill Strengthen the mental health care capacity of all health professionalsDuring this period, Cambodia has developed economically and has been upgraded from a low-income country to a low- to middle-income country. In terms of mental health activities, a new mental health plan through 2032 was announced in 2023 and psychiatric services are expected to improve.SUMH's experience shows that international mental health activities can achieve significant results when conducted from a multicultural perspective, respecting the culture and history of the partner country.

Symposium | Trauma : [Symposium 46] The Path to Recovery: Trauma's Impact on mental health and Therapeutic Interventions

2025年9月26日(金) 14:50 ~ 16:20 Session Room 5 (Conference Room A)

[Symposium 46] The Path to Recovery: Trauma's Impact on mental health and Therapeutic Interventions

Moderator: Masahide Koda (Co-learning Community Healthcare Re-innovation Office, Graduate School of Medicine, Dentistry and Pharmaceutical Sciences, Okayama University), Nahoko Harada (Department of Nursing Science, Graduate School of Interdisciplinary Science and Engineering in Health Systems, Okayama University)

[SY-46]

The Path to Recovery: Trauma's Impact on mental health and Therapeutic Interventions

Ushio Miyata^{1,8}, Masahide Koda^{2,8}, Nahoko Harada³, Haruka Tagusari^{4,8}, Era Catur Prasetya⁵, Alicia Landa Herrero⁶, Nisarat Wadchareeudomkarn⁷ (1. minatogawa hospital (Japan), 2. Co-learning Community Healthcare Re-innovation Office, Graduate School of Medicine, Dentistry and Pharmaceutical Sciences, Okayama University (Japan), 3. Department of Nursing Science, Graduate School of Interdisciplinary Science and Engineering in Health Systems, Okayama University (Japan), 4. Kanagawa Psychiatric Center (Japan), 5. University Of Muhammadiyah Surabaya (Indonesia), 6. Hospital Universitario Infanta Sofia (Spain), 7. Sunshine Mind Clinic (Thailand), 8. Japan Young Psychiatrists Organization (Japan))

[SY-46-01]

Addiction in Japan: A Perspective Informed by Adverse Childhood Experiences

*Haruka Tagusari¹, Toko Itabashi¹, Kumi Aoyama¹ (1. Kanagawa Psychiatric Center (Japan))

[SY-46-02]

Relationship between Previous Traumatic Experience, Post-Traumatic Growth, Coping Strategy to Mental Health State on Refugees in Sidoarjo Camp

*Era Catur Prasetya¹ (1. Universitas Muhammadiyah Surabaya / RS Muhammadiyah Lamongan (Indonesia))

[SY-46-03]

The Path to Recovery: Trauma's Impact on Mental Health and Therapeutic Interventions. Current situation of Alcoholic Addiction in Spain, Europe.

*Alicia Landa Herrero¹ (1. Infanta Sofía Hospital, Madrid, Spain. Department of Psychiatry. (Spain))

[SY-46-04]

Impact of Bullying on Children and Adolescents: Trauma or Life Lessons?

*Nisarat Wadchareeudomkarn¹ (1. Vichaiyut Hospital (Thailand))

Symposium | Trauma : [Symposium 46] The Path to Recovery: Trauma's Impact on mental health and Therapeutic Interventions

2025年9月26日(金) 14:50 ~ 16:20 Session Room 5 (Conference Room A)

[Symposium 46] The Path to Recovery: Trauma's Impact on mental health and Therapeutic Interventions

Moderator: Masahide Koda (Co-learning Community Healthcare Re-innovation Office, Graduate School of Medicine, Dentistry and Pharmaceutical Sciences, Okayama University), Nahoko Harada (Department of Nursing Science, Graduate School of Interdisciplinary Science and Engineering in Health Systems, Okayama University)

[SY-46] The Path to Recovery: Trauma's Impact on mental health and Therapeutic Interventions

Ushio Miyata^{1,8}, Masahide Koda^{2,8}, Nahoko Harada³, Haruka Tagusari^{4,8}, Era Catur Prasetya⁵, Alicia Landa Herrero⁶, Nisarat Wadchareeudomkarn⁷ (1. minatogawa hospital (Japan), 2. Co-learning Community Healthcare Re-innovation Office, Graduate School of Medicine, Dentistry and Pharmaceutical Sciences, Okayama University (Japan), 3. Department of Nursing Science, Graduate School of Interdisciplinary Science and Engineering in Health Systems, Okayama University (Japan), 4. Kanagawa Psychiatric Center (Japan), 5. University Of Muhammadiyah Surabaya (Indonesia), 6. Hospital Universitario Infanta Sofia (Spain), 7. Sunshine Mind Clinic (Thailand), 8. Japan Young Psychiatrists Organization (Japan))

キーワード : Trauma、Mental Illness、Trauma-Informed Care、Cross-Cultural Mental Health、Cultural Sensitivity

Background: It has been widely known that adverse events such as physical abuse, psychological abuse, sexual abuse, household dysfunction including mental illness, poverty, bullying significantly affect an individual's health and social well-being. Experiencing trauma is associated with various mental illness, worsen its symptoms, and make treatment more difficult. This symposium examines the impact of trauma on mental illness through diverse global case studies, exploring effective ways to address patients while incorporating a trauma-informed approach to care.

Purpose: With a focus on cross-cultural mental health, this symposium seeks to provide a deeper understanding of the link between trauma and mental illness. It will examine shared challenges across cultures and investigate culturally sensitive treatment and support strategies.

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[SY-46-01] Addiction in Japan: A Perspective Informed by Adverse Childhood Experiences

*Haruka Tagusari¹, Toko Itabashi¹, Kumi Aoyama¹ (1. Kanagawa Psychiatric Center (Japan))

キーワード : Addiction、Adverse Childhood Experiences、Trauma

Japan has been considered a relatively “safe” country in terms of substance abuse. Indeed, the prevalence of alcohol dependence is around 1.1%; lifetime cannabis use was 1.5%, and methamphetamine use was 0.5%. However, these statistics do not necessarily indicate that Japan faces fewer issues related to substance abuse. In recent decades, it has been increasingly recognized that addiction is linked to adverse childhood experiences (ACE). Despite this, trauma-informed approaches to addiction care remain underutilized in Japan. People with substance use disorders often face stigma and discrimination, even within medical settings, which significantly hinders access to appropriate treatment. It is estimated that only 5% of individuals with alcohol use disorder receive the care they need. Another growing concern is the abuse of prescription and over-the-counter (OTC) drugs among younger generations, particularly among females. Between 2018 and 2020, the number of ambulance transports for OTC drug overdoses increased by 2.3 times. The number of patients with OTC and prescription drug addiction in psychiatric care facilities increased sixfold from 2012 to 2020. A nationwide study in 2021 revealed that one in every sixty high school students had misused OTC drugs. The ACE survey conducted at Kanagawa psychiatric center suggests that individuals with OTC and prescription addiction tend to behave as a “good one.” Excessive discipline or unreasonable expectations during childhood can lead to overadaptation, where emotions are ignored or suppressed as a coping mechanism. These experiences are frequently concealed within superficially non-problematic environments and may go unnoticed by others and sometimes even by individuals themselves. The need to raise awareness of these subtle adverse experiences is becoming evident. In this symposium, we will examine the current state of addiction in Japan from the perspective of ACE and discuss strategies for addressing these critical challenges.

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[Symposium 46] The Path to Recovery: Trauma's Impact on mental health and Therapeutic Interventions

Moderator: Masahide Koda (Co-learning Community Healthcare Re-innovation Office, Graduate School of Medicine, Dentistry and Pharmaceutical Sciences, Okayama University), Nahoko Harada (Department of Nursing Science, Graduate School of Interdisciplinary Science and Engineering in Health Systems, Okayama University)

[SY-46-02] Relationship between Previous Traumatic Experience, Post-Traumatic Growth, Coping Strategy to Mental Health State on Refugees in Sidoarjo Camp

*Era Catur Prasetya¹ (1. Universitas Muhammadiyah Surabaya / RS Muhammadiyah Lamongan (Indonesia))

キーワード : Post Traumatic Stress Disorder、Post Traumatic Growth、Coping Strategy、Refugee Mental Health

Background: Refugees face a problems of loss of residence, loss of work, education, alienation from the community, and limited access to health services which indirectly cause mental health problems for refugees. This study aimed to analyze the relationship between previous traumatic experience, post traumatic growth and coping strategy to mental disorders among refugees in sidoarjo camp. **Method:** This study was a cross sectional study with total 97 refugees in sidoarjo camp which choosen with simple random sampling. They were asked for fulfilling post traumatic, previos traumatic experience and coping strategis questionnaire. The result was analyze using SPSS. **Result:** This study found that there was no significant relationship between coping strategy ($p= .237$) and post traumatic experience ($p> .05$) with mental disorders and there was no significant relationship between previous traumatic experiences ($p> .05$) with post-traumatic growth. But there is significant relationship between coping strategy ($p< .05$) and post traumatic growth **Discussion:** Need further research on the same topic with qualitative methods to explore results, especially with regard to post-traumatic growth dynamics and flexibility in coping and social support in refugees. In addition, cultural variables in this study can also be related to the cultural context

Symposium | Trauma : [Symposium 46] The Path to Recovery: Trauma's Impact on mental health and Therapeutic Interventions

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[Symposium 46] The Path to Recovery: Trauma's Impact on mental health and Therapeutic Interventions

Moderator: Masahide Koda (Co-learning Community Healthcare Re-innovation Office, Graduate School of Medicine, Dentistry and Pharmaceutical Sciences, Okayama University), Nahoko Harada (Department of Nursing Science, Graduate School of Interdisciplinary Science and Engineering in Health Systems, Okayama University)

[SY-46-03] The Path to Recovery: Trauma's Impact on Mental Health and Therapeutic Interventions. Current situation of Alcoholic Addiction in Spain, Europe.

*Alicia Landa Herrero¹ (1. Infanta Sofía Hospital, Madrid, Spain. Department of Psychiatry. (Spain))

キーワード : Alcohol Use Disorder、Spain、Trauma、Mental illness、Multifamily counseling therapy

Background: During the last few decades, there has been a notable increase in drug addiction in Spain, particularly alcohol use disorder (AUD). A high proportion of individuals with alcohol use disorder present a history of psychological trauma, often stemming from childhood abuse, neglect, or family conflict. Trauma is not only a risk factor for the development of AUD, but also a major obstacle to long-term recovery.

Aims: Focusing on cross-cultural mental health, this symposium examine trauma's clinical role in addiction, with a particular emphasis on alcohol dependence in Spanish culture. Additionally, it will explore culturally sensitive strategies for treatment and support, highlighting multifamily counseling and individual therapy sessions as therapeutic model in the rehabilitation of alcohol – dependent patients.

Methods: This study uses data from the 2024 EUDA (European Union Drugs Agency) report on alcohol use trends in Europe, highlighting the current epidemiological context of alcohol addiction in Spain. Additionally, clinical data was collected from a multifamily therapy program implemented in the province of Teruel. Outcomes were analyzed based on patient progress, relapse rates, and family system engagement.

Results: Trauma-related factors - especially within dysfunctional family systems - consistently appear as primary contributors to alcohol use disorder. Multifamily counseling not only helps identify and process these underlying issues, but also reconstructs the patient's support system. Compared to individual therapy alone, multifamily sessions demonstrate stronger outcomes in emotional regulation, relapse prevention, and long-term sobriety.

Discussion: Multifamily counseling creates a therapeutic space where patients and families can confront shared trauma narratives. Through collective reflection, emotional validation, and skills training, this approach fosters resilience and responsibility. For sustained recovery, treatment must go beyond abstinence and address the root psychological injuries that fuel addiction.

References: Alcohol and Primary Health Care: Training and Patient Materials. Eur Addict Res,

2024; 21(1): 6–18. Gual Solé, A. Assessment & Treatment of Addictions: New Tools for Old Problems. J Clin Med, 2019. Memoria de actividades. ABATTAR, 2024. Mounteney, J. et al. The Drug Situation in Europe: Overview of 2015 Data. 2016.

Symposium | Trauma : [Symposium 46] The Path to Recovery: Trauma's Impact on mental health and Therapeutic Interventions

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Moderator: Masahide Koda (Co-learning Community Healthcare Re-innovation Office, Graduate School of Medicine, Dentistry and Pharmaceutical Sciences, Okayama University), Nahoko Harada (Department of Nursing Science, Graduate School of Interdisciplinary Science and Engineering in Health Systems, Okayama University)

[SY-46-04] Impact of Bullying on Children and Adolescents: Trauma or Life Lessons?

*Nisarat Wadchareeudomkarn¹ (1. Vichaiyut Hospital (Thailand))

キーワード : Bullying、Clinical depression、Thai cultural norms、Generational vulnerabilities、Respect for diversity

Bullying among children in Thailand is a serious growing issue, with the country ranking second globally after Japan. In 2018 the Department of Mental Health estimated 600,000 pupils—about 40% of students—had suffered bullying. A 2021 nationwide survey of 1,000 students aged 10-15 showed 92% had endured physical or psychological abuse; 35% were targeted at least twice a semester and 25% three-to-four times weekly.

Common bullying takes various forms: 62% reported head slaps, 43% ridicule of parents' names, 42% derogatory nicknames, and almost 30% online harassment. Consequences were stress (26%), concentration problems (18%), disengagement from school (16%), social withdrawal (15%) and clinical depression (13%). Sibling bullying is also common and linked to female gender, peer bullying, domestic violence, and depression.

Verbal bullying, deeply rooted and long accepted in Thai cultural norms such as teasing about appearance and gossip, is the most prevalent and often escalates to cyberbullying, social exclusion, and physical attacks. These bullying forms are positively correlated and still dismissed or frequently minimized as “just kidding”.

In my clinical experience, it is vital to recognize the delicate distinction between bullying and constructive feedback, and acknowledge generational vulnerabilities. Building life skills and a growth mindset enable children and society view adversity as invaluable life lessons to thrive and grow. Meanwhile, malicious behaviors must be promptly reported.

Thailand has 14 million people under 18 (20 % of the population) but only 312 child and adolescent psychiatrists—roughly 2.3 per 100,000 children—severely limiting specialist care. To combat bullying effectively, society must foster respect for diversity, while schools, communities, and government collaborate preventive policies and provide support strategies. Expanding mental health resources and training more professionals is also essential for the needs of youth.

Symposium | Community care : [Symposium 47] Engaging Culture in the Community

2025年9月26日(金) 14:50 ~ 16:20 Session Room 6 (Conference Room B)

[Symposium 47] Engaging Culture in the Community

Moderator: George Eric Jarvis (McGill University)

[SY-47]

Engaging Culture in the Community

George Eric Jarvis¹, Jaswant Guzder^{1,3}, Janique Johnson-Lafleur², Lucie Nadeau¹ (1. McGill University (Canada), 2. Sherpa University Institute, CIUSSS West-Montreal (Canada), 3. University of British Columbia (Canada))

[SY-47-01]

Engaging Ethnic and Religious Communities through Cultural Consultation

*George Eric Jarvis¹ (1. McGill University (Canada))

[SY-47-02]

Benefits of Global Health Involvement in enhancing cultural competency and advocacy in Child Psychiatry Practice

*Jaswant Guzder¹ (1. University of British Columbia (Canada))

[SY-47-03]

Investigating the strengths and limitations of communities of practice as an intercultural competence training modality

*Janique Johnson-Lafleur¹, Élise Bourgeois-Guérin², Dominique Gaulin³ (1. SHERPA University Institute and McGill University (Canada), 2. TELUQ University (Canada), 3. Université de Montréal (Canada))

[SY-47-04]

Integrating cultural objects in mental health to navigate between Indigenous and non-Indigenous epistemic worlds and the colonial imprint.

*Lucie Nadeau^{1,2,3} (1. McGill University (Canada), 2. McGill University Health Center (Canada), 3. Inuulitsivik Health Center (Canada))

Symposium | Community care : [Symposium 47] Engaging Culture in the Community

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[Symposium 47] Engaging Culture in the Community

Moderator: George Eric Jarvis (McGill University)

[SY-47] Engaging Culture in the Community

George Eric Jarvis¹, Jaswant Guzder^{1,3}, Janique Johnson-Lafleur², Lucie Nadeau¹ (1. McGill University (Canada), 2. Sherpa University Institute, CIUSSS West-Montreal (Canada), 3. University of British Columbia (Canada))

キーワード : Culture、Community、Assessment、Intervention

Background: It is common to acknowledge the need for cultural assessments and interventions in mental health care, yet many clinicians are unsure about how to proceed.

Objectives: This symposium will address this need by considering examples of how to engage culture in ethnic and religious communities.

Methods: Four clinician-researchers from McGill University will describe how they weave culture into assessment and intervention and how they resolve emergent challenges.

Results: Examples of cultural engagement of communities include: (1) Integrating cultural objects in mental health to navigate moving between Indigenous and non-Indigenous epistemic worlds and the colonial imprint, (2) Reflecting on challenges of child cultural psychiatry and benefits of global health collaborations, (3) Investigating the strengths and limitations of communities of practice as an intercultural competence training modality, and (4) Engaging community leaders through cultural consultation to resolve difficult clinical dilemmas in cross-cultural contexts. Each of these exemplifies the power of communities to improve clinical decision-making.

Conclusions: Culture and community are inextricably intertwined. To address culture in clinical contexts implies an appeal to community and consideration of the nuanced insights it brings to assessment and treatment.

Symposium | Community care : [Symposium 47] Engaging Culture in the Community

2025年9月26日(金) 14:50 ~ 16:20 Session Room 6 (Conference Room B)

[Symposium 47] Engaging Culture in the Community

Moderator: George Eric Jarvis (McGill University)

[SY-47-01] Engaging Ethnic and Religious Communities through Cultural Consultation

*George Eric Jarvis¹ (1. McGill University (Canada))

キーワード : culture、religion、clinic、family、community

Background: The Cultural Consultation Service (CCS) in Montreal, Canada, has been conducting cultural assessments and interventions in mental health care for more than 25 years.

Objectives: This presentation will demonstrate how cultural consultation engages ethnic and religious communities at three levels: the clinic, the family, and the community.

Methods: The CCS case archives, with approximately 1100 in-depth consultations from 1999, will serve as the database from which illustrative cases will be drawn. The cases will be evaluated to describe how culture is woven into assessment and intervention at clinic, family, and community levels.

Results: Engaging clinics, families, and community leaders through cultural consultation provides a feasible and useful method to (1) improve confidence working with diversity (2) expand the clinical work beyond the clinician-patient dyad, (3) reflect on negotiated compromises between clinic and community cultures, and (4) resolve difficult clinical dilemmas in cross-cultural context. Each of these exemplifies the power of cultural consultation to improve clinical decision-making and patient outcomes.

Conclusions: Clinics, families, and communities are inextricably intertwined. Cultural consultation provides a method to work collaboratively, frame uncertainty, and co-construct culturally nuanced interventions.

Symposium | Community care : [Symposium 47] Engaging Culture in the Community

2025年9月26日(金) 14:50 ~ 16:20 Session Room 6 (Conference Room B)

[Symposium 47] Engaging Culture in the Community

Moderator: George Eric Jarvis (McGill University)

[SY-47-02] Benefits of Global Health Involvement in enhancing cultural competency and advocacy in Child Psychiatry Practice

*Jaswant Guzder¹ (1. University of British Columbia (Canada))

キーワード : child psychiatry cultural competency skills、knowledge transfer from global south experience、complexity of settlement challenges for populations with pre migratory trauma

The session will focus on global health knowledge as a factor in expanding clinical competency and advocacy in child psychiatry and cultural consultation skills for service provision to culturally diverse immigrant and refugee children, youth and families. Therapeutic and diagnostic skills are informed not only by individual and systemic narratives but also multiple factors related to culture and ecopsychosocial premigratory lived experience. Clinician global health involvement, knowledge and experience with populations in conflict regions, war zones or other global south setting exposures, may expand knowledge transfer and understanding of diversity issues arising during the post migratory settlement. Issues of institutional support, developmental models, policy changes and lived experience in the premigratory and settlement periods inform diagnostics and resilience promotion interventions particularly of traumatized or distressed of unaccompanied minors. Migration stress can involve ambiguous loss, generational trauma, development difficulties and other realities related to culture of origin and premigration journeys, which compound the challenges of post migration resettlement. Global health knowledge can expand our understanding and awareness of culturally informed care, advocacy and allyship opportunities which inform post migration familial, institutional and community opportunities with implications for policy changes, knowledge transfer, community engagement and teaching cultural competency.

Symposium | Community care : [Symposium 47] Engaging Culture in the Community

2025年9月26日(金) 14:50 ~ 16:20 Session Room 6 (Conference Room B)

[Symposium 47] Engaging Culture in the Community

Moderator: George Eric Jarvis (McGill University)

[SY-47-03] Investigating the strengths and limitations of communities of practice as an intercultural competence training modality

*Janique Johnson-Lafleur¹, Élise Bourgeois-Guérin², Dominique Gaulin³ (1. SHERPA University Institute and McGill University (Canada), 2. TELUQ University (Canada), 3. Université de Montréal (Canada))

キーワード : Cultural psychiatry、Training、Communities of practice

Background: Teaching how to integrate “culture” into mental health care and psychosocial intervention is a complex task. It requires not only the transmission of knowledge, but also the questioning of certain assumptions and dominant paradigms, as well as a transformation in learners’ ways of being and doing. Communities of Practice (CoPs) have been proposed as a promising training modality to address these challenges. **Objectives:** This presentation aims to examine the strengths and limitations of CoPs as a modality for intercultural training.

Methods: Findings from two mixed-methods evaluative studies—one in a healthcare setting and one in a community-based organization—are combined to draw meta-inferences. **Results:** Key strengths identified include collaborative and reflective learning, a sense of group support, resource sharing, and the mitigation of professional burnout. However, several limitations were also observed: certain group dynamics, facilitation challenges, systemic barriers, lack of pedagogical structure, and limited engagement with anthropological knowledge. **Conclusions:** While CoPs offer a valuable space for mutual learning and support, they can also become counterproductive if critical elements—such as skilled facilitation, structural support, and theoretical grounding—are not ensured. These findings invite a more nuanced consideration of how to design and sustain intercultural training initiatives in mental health.

Symposium | Community care : [Symposium 47] Engaging Culture in the Community

2025年9月26日(金) 14:50 ~ 16:20 Session Room 6 (Conference Room B)

[Symposium 47] Engaging Culture in the Community

Moderator: George Eric Jarvis (McGill University)

[SY-47-04] Integrating cultural objects in mental health to navigate between Indigenous and non-Indigenous epistemic worlds and the colonial imprint.

*Lucie Nadeau^{1,2,3} (1. McGill University (Canada), 2. McGill University Health Center (Canada), 3. Inuulitsivik Health Center (Canada))

キーワード : Cultural object、Child psychiatry、Indigenous communities

Background: Providing child mental health care request an understanding of the politico-socio-cultural worlds in which children/youth and their families navigate. Transcultural encounters, where clinicians and families come from different cultural backgrounds, influence the care. In encounters between a clinician from a settler origin and an Indigenous family, the colonial history is yet a superimposed structure inhabiting the clinical space. Cultural objects, may they be physical ones and imagined/abstract ones (e.g. words, stories), are strong tools to navigate between Indigenous and non-Indigenous epistemic worlds and the colonial imprint. **Objective:** The presentation will first define cultural objects and review the literature on their use in mental health care, and then explore different cultural objects which may be introduced in clinical encounters with Indigenous families, and discuss their role and therapeutic signification, and potential challenges and pitfalls of their use. **Methods:** Insights gained through different working settings in Indigenous communities in Quebec, Canada, will serve as material to reflect on the role of cultural objects. The presentation will rely on clinical experience in Inuit communities of Nunavik, and on research projects in Atikamekw and Inuit communities where traditional story telling, images or words served as mediums of culture. **Findings:** The uses of objects evoking culture act as witnesses of the importance of cultural perspectives, as points of entry to promote therapeutic relationships, as transitional tools to engage in emotional work. They also allow conversations to emerge in clinical and interprofessional settings in which Indigenous and non-Indigenous peoples meet. Yet, a reflection on their use is necessary, interrogating how, when and by whom they should be used, taking into account notions of cultural appropriation and transmission, and the colonial imprint in which encounters happen. **Conclusion:** Cultural objects may be powerful tools in child mental health care, and need to be wisely used.

Symposium | Trauma : [Symposium 48] Dialogue in PTSD: clinical support and basic science

2025年9月26日(金) 16:30 ~ 18:00 Session Room 2 (Main Hall B)

[Symposium 48] Dialogue in PTSD: clinical support and basic science

Moderator: Yoshiharu Kim (National Center of Neurology and Psychiatry), Daniel Shuen Sheng Fung (Institute of Mental Health)

[SY-48]

Dialogue in PTSD: clinical support and basic science

Yoshiharu Kim¹, Daniel Fung², SeungMin Bae³, Tomoko Inoue⁴ (1. National Center of Neurology and Psychiatry (Japan), 2. Institute of Mental Health (Singapore), 3. Gil Medical Center, Gachon University (Korea), 4. Nagoya City University (Japan))

[SY-48-01]

Clinical and molecular perspective of PTSD treatment: from the viewpoint of fear extinction

*Yoshiharu Kim¹ (1. National Center of Neurology and Psychiatry (Japan))

[SY-48-02]

Healing Invisible Wounds: Clinical and Trauma-Informed Approaches to Childhood Trauma in Singapore

*Daniel Shuen Sheng Fung¹, *Daniel Weng Siong Ho¹ (1. Institute of Mental Health (Singapore))

[SY-48-03]

Support Systems for Victims of Sexual Violence in Korea: The Current Reality of Digital Sexual Violence and Its Psychiatric Consequences, including PTSD

*Seungmin Bae¹ (1. Gachon University Gil Medical Center (Korea))

[SY-48-04]

A longitudinal study of the association of blood unsaturated fatty acids with posttraumatic stress disorder (PTSD)

*Tomoko Inoue¹ (1. Nagoya City University (Japan))

Symposium | Trauma : [Symposium 48] Dialogue in PTSD: clinical support and basic science

2025年9月26日(金) 16:30 ~ 18:00 Session Room 2 (Main Hall B)

[Symposium 48] Dialogue in PTSD: clinical support and basic science

Moderator: Yoshiharu Kim (National Center of Neurology and Psychiatry), Daniel Shuen Sheng Fung (Institute of Mental Health)

[SY-48] Dialogue in PTSD: clinical support and basic science

Yoshiharu Kim¹, Daniel Fung², SeungMin Bae³, Tomoko Inoue⁴ (1. National Center of Neurology and Psychiatry (Japan), 2. Institute of Mental Health (Singapore), 3. Gil Medical Center, Gachon University (Korea), 4. Nagoya City University (Japan))

キーワード : ptsd、disaster、child、omega-fatty acid、memantine

PTSD is a complex field involving social, psychological, and biological medicine. Effective support and treatment require an integrated understanding of these elements. In Asia, stigma surrounding trauma and administrative misunderstanding have been observed, but recently, many countries have seen significant improvements in trauma literacy within society. In addition, research on the biological basis of trauma and fear memory mechanisms is also actively underway in Asia. As demonstrated by meta-analyses of PTSD onset risk following natural disasters, for disorders associated with social factors such as PTSD, it is more important to provide support tailored to the social circumstances of those affected and to reduce stress rather than simply treating symptoms. On the other hand, for chronic PTSD that has developed, effective treatment based on the underlying pathology is required. As with many diseases, prevention and treatment measures should be promoted through a combination of elucidating the pathogenesis of the disease, developing treatments, and implementing public health measures to reduce risk. PTSD is no exception. The importance of nutritional intervention in the acute phase has been repeatedly pointed out for the prevention of chronic PTSD, and treatment methods based on basic research on fear memory are being developed. On the day of the event, we will discuss comprehensive support for trauma victims through dialogue between clinical and basic research.

Symposium | Trauma : [Symposium 48] Dialogue in PTSD: clinical support and basic science

2025年9月26日(金) 16:30 ~ 18:00 Session Room 2 (Main Hall B)

[Symposium 48] Dialogue in PTSD: clinical support and basic science

Moderator: Yoshiharu Kim (National Center of Neurology and Psychiatry), Daniel Shuen Sheng Fung (Institute of Mental Health)

[SY-48-01] Clinical and molecular perspective of PTSD treatment: from the viewpoint of fear extinction

*Yoshiharu Kim¹ (1. National Center of Neurology and Psychiatry (Japan))

キーワード : PTSD、memantine、exposure therapy、fear extinction

PTSD is a mental disorder that causes destructive and long-term suffering in individuals who were previously healthy. It is estimated that there are 700,000 patients in Japan, but many patients prioritize legal and social assistance and delay seeking medical care due to fear of stigma, with only approximately 7,000 to 15,000 receiving mental health care. Effective treatment is essential for raising social awareness and supporting these individuals. Currently in Japan, sertraline, paroxetine, and prolonged exposure therapy are covered by insurance. Drug therapy is simple but their effect size is less than 0.4. The speaker invited Edna Foa to Japan in 2002 and has been working to promote prolonged exposure therapy since then. This treatment has high effect size, usually greater than 1.5, but can be used for only a small number of patients. Therefore, there is a need to develop a treatment that is both simple and highly effective. Research using rodents on fear memory has provided various useful insights into extinction learning. Exposure therapy is also a type of extinction learning. Based on the results of basic research indicating that memantine is effective for extinction learning, we administered it to 10 human PTSD patients and demonstrated improvement in an open trial. The effect size before and after treatment was 1.35, significantly exceeding the effect sizes of many pharmacological treatments in psychiatry. Memantine is an antagonist at the NMDA receptor and is used in clinical practice as a cognitive enhancer. The effect of memantine in humans may be due to its promotion of learning functions, which facilitates extinction learning. The fact that exposure therapy, which promotes extinction learning, and memantine are effective in PTSD treatment suggests that the core of PTSD lies in a disorder of extinction learning of fear memories.

Symposium | Trauma : [Symposium 48] Dialogue in PTSD: clinical support and basic science

2025年9月26日(金) 16:30 ~ 18:00 Session Room 2 (Main Hall B)

[Symposium 48] Dialogue in PTSD: clinical support and basic science

Moderator: Yoshiharu Kim (National Center of Neurology and Psychiatry), Daniel Shuen Sheng Fung (Institute of Mental Health)

[SY-48-02] Healing Invisible Wounds: Clinical and Trauma-Informed Approaches to Childhood Trauma in Singapore

*Daniel Shuen Sheng Fung¹, *Daniel Weng Siong Ho¹ (1. Institute of Mental Health (Singapore))

キーワード : Childhood trauma、Trauma-informed care、Culturally attuned interventions、Post Traumatic Stress Disorder

Childhood trauma is increasingly recognised as a public mental health concern in urban Southeast Asia. In Singapore, the confluence of high developmental expectations, cultural reticence around emotional expression, and growing awareness of intergenerational trauma creates a distinctive landscape for post-traumatic stress presentations among children and adolescents.

This presentation outlines clinical and trauma-informed approaches adopted by the FRIENDS team (Forensic, Rehabilitation, Intervention, Evaluation, and Network Development Service) at the Institute of Mental Health, Singapore. FRIENDS is a multidisciplinary forensic child and adolescent mental health service that supports youth offenders, children at risk of offending, survivors of abuse, and families involved in complex custody disputes, among others.

Recent innovations include the introduction of Trauma Systems Therapy (TST) (Saxe et al., 2007), integrated with inpatient services to enhance caregiver engagement and multi-agency coordination. Adaptations have been made to suit Singapore's multicultural and multireligious context. In parallel, the PRESENCE framework (Bloom, 2021), a trauma-responsive organisational approach, has been piloted to cultivate safety, emotional regulation, and relational trust not only in clinician-patient interactions but also within care teams and institutions.

These initiatives highlight the importance of culturally attuned, developmentally informed trauma care that accounts for collectivist values, interdependence, and systemic resilience. The presentation will also discuss the broader opportunities and systemic challenges in embedding trauma-informed principles across services, as aligned with Singapore's National Mental Health and Well-being Strategy (MOH, 2023).

By centring the lived experiences of young people and their ecological environments, this presentation advocates for scalable, context-sensitive models of trauma intervention in contemporary Asia.

Symposium | Trauma : [Symposium 48] Dialogue in PTSD: clinical support and basic science

2025年9月26日(金) 16:30 ~ 18:00 Session Room 2 (Main Hall B)

[Symposium 48] Dialogue in PTSD: clinical support and basic science

Moderator: Yoshiharu Kim (National Center of Neurology and Psychiatry), Daniel Shuen Sheng Fung (Institute of Mental Health)

[SY-48-03] Support Systems for Victims of Sexual Violence in Korea: The Current Reality of Digital Sexual Violence and Its Psychiatric Consequences, including PTSD

*Seungmin Bae¹ (1. Gachon University Gil Medical Center (Korea))

キーワード : PTSD、Digital Sexual Violence、Sexual Abuse

Digital sexual violence is a relatively recent concept, but it has become a rapidly growing crime worldwide. In South Korea, where access to the internet is relatively easy and mobile device penetration is high, the rate of increase in digital sexual violence and the evolution of related crimes are occurring at a rapid pace, drawing considerable concern from experts. In South Korea, there are two major national support systems for victims of sexual violence operated by public institutions. The first is the *SUNFLOWER Center*, which specializes in supporting victims of sexual crimes against children, adolescents, and women, and is operated with the support of the Ministry of Gender Equality and Family. The second is the *SMILE Center*, which is operated with the support of the Ministry of Justice, provides psychological support not only for sexual violence victims but also for victims of other serious crimes. This session aims to examine the characteristics of these centers and explore the current state of digital sexual violence, as well as its psychiatric consequences including PTSD, based on the experiences of these centers.

Symposium | Trauma : [Symposium 48] Dialogue in PTSD: clinical support and basic science

2025年9月26日(金) 16:30 ~ 18:00 Session Room 2 (Main Hall B)

[Symposium 48] Dialogue in PTSD: clinical support and basic science

Moderator: Yoshiharu Kim (National Center of Neurology and Psychiatry), Daniel Shuen Sheng Fung (Institute of Mental Health)

[SY-48-04] A longitudinal study of the association of blood unsaturated fatty acids with posttraumatic stress disorder (PTSD)

*Tomoko Inoue¹ (1. Nagoya City University (Japan))

キーワード : PTSD、unsaturated fatty acids、linoleic acid、omega-6

There are no established prevention methods for PTSD, and there is a need for treatment and prevention methods for PTSD. The phospholipid hypothesis, which proposes a correlation between the fatty acid composition of membrane phospholipids and neuropsychiatric function, has been proposed, and relationships between blood unsaturated fatty acids and clinical symptoms of psychiatric disorders have been reported. It is presumed that there is a certain relationship between anxiety, including PTSD, and unsaturated fatty acids, and that adjusting the amount of unsaturated fatty acids in some way can suppress the onset of PTSD. We analyzed the association between blood fatty acid fractions and posttraumatic stress disorder (PTSD) symptoms at 1 month and 3 months after injury in patients admitted to the emergency department due to physical trauma, with the aim of investigating the association between blood fatty acid fractions and PTSD symptoms in people who experienced physical trauma. Blood samples were taken on admission, and PTSD symptoms were assessed using a questionnaire at one and three months after the injury. Multiple regression analysis showed that linoleic acid and total omega-6 were significantly associated with PTSD symptoms at both 1 and 3 months. Our study suggest that there may be a relationship between blood fatty acid fractions and the development of PTSD symptoms in individuals who have experienced physical trauma. A detailed examination of blood fatty acid fractions and PTSD symptoms may lead to the prevention of subsequent progression to PTSD by regulating blood fatty acids through diet in various patients transported to emergency rooms and victims of disasters. To date, there is no preventive method for PTSD, and we hope that the study of blood fatty acids will help develop a preventive method that can be easily and effectively implemented for a large number of subjects.

Symposium | Psychopharmacology : [Symposium 49] Cultural Psychopharmacology: Integrating Genetics, Ethnicity, and Global Perspectives

2025年9月26日(金) 16:30 ~ 18:00 Session Room 3 (Large Hall A)

[Symposium 49] Cultural Psychopharmacology: Integrating Genetics, Ethnicity, and Global Perspectives

Moderator: Kazutaka Shimoda (Tochigi Prefectural Okamotodai Hospital)

[SY-49]

Cultural Psychopharmacology: Integrating Genetics, Ethnicity, and Global Perspectives

Itsuo Asai¹, Mario Braakman², Ahmad Hatim bin Hatim³ (1. Heart Clinic Medical Corporation (Japan), 2. Tilburg University (Netherlands), 3. University of Malaya (Malaysia))

[SY-49-01]

CYP2D6 Genotype, BMI, and Culture: Rethinking Antipsychotic Dosing Across the U.S., China, and Japan

*Itsuo Asai¹ (1. Heart Clinic Medical Corporation (Japan))

[SY-49-02]

Ethnicity and psychopharmacology: an overview

*Mario Hubertus Braakman¹ (1. Tilburg University, the Netherlands (Netherlands))

[SY-49-03]

The Prevalence of Tardive Dyskinesia in Patients with Schizophrenia Treated with Antipsychotics in Malaysia

*Ahmad Hatim Sulaiman¹ (1. Universiti Malaya (Malaysia))

Symposium | Psychopharmacology : [Symposium 49] Cultural Psychopharmacology: Integrating Genetics, Ethnicity, and Global Perspectives

2025年9月26日(金) 16:30 ~ 18:00 Session Room 3 (Large Hall A)

[Symposium 49] Cultural Psychopharmacology: Integrating Genetics, Ethnicity, and Global Perspectives

Moderator: Kazutaka Shimoda (Tochigi Prefectural Okamotodai Hospital)

[SY-49] Cultural Psychopharmacology: Integrating Genetics, Ethnicity, and Global Perspectives

Itsuo Asai¹, Mario Braakman², Ahmad Hatim bin Hatim³ (1. Heart Clinic Medical Corporation (Japan), 2. Tilburg University (Netherlands), 3. University of Malaya (Malaysia))

キーワード : Pharmacogenetics、Psychotropic Drugs、Ethnic Groups、Tardive Dyskinesia、Cross-Cultural Comparison

Cultural psychopharmacology, an emerging field at the intersection of psychiatry, pharmacogenomics, and anthropology, aims to understand how genetic and cultural factors together influence patients' responses to psychotropic medications. This symposium offers an integrated perspective covering historical roots, comparative studies, and clinical results. Prof. Mario Braakman (Tilburg University, Netherlands), with decades of experience in psychiatry and psychopharmacology, will start with a historical and conceptual overview. He will highlight key milestones in recognizing cultural diversity in treatment responses and place cultural psychopharmacology within the broader evolution of biological psychiatry. Dr. Itsuo Asai (Heart Clinic Medical Corporation, Japan) will share comparative findings on CYP2D6 polymorphisms, culturally influenced prescribing practices, and BMI-related dose adjustments in antipsychotics across the U.S., China, and Japan. His analysis emphasizes how genetic metabolism, cultural prescribing norms, and patient body composition interact to shape real-world treatment practices and outcomes.

Prof. Ahmad Hatim Sulaiman from Universiti Malaya, Malaysia, will present his original research on tardive dyskinesia (TD) among schizophrenia patients in Malaysia. His findings show that ethnicity and treatment duration are significant predictors of TD risk, highlighting the need for ethnically sensitive pharmacovigilance in psychopharmacology.

Together, these presentations demonstrate how biology "loads the gun," while culture "pulls the trigger." By integrating genetics, BMI, and cultural context, cultural psychopharmacology seeks to advance safer, more effective, and culturally sensitive psychiatric care worldwide.

Symposium | Psychopharmacology : [Symposium 49] Cultural Psychopharmacology: Integrating Genetics, Ethnicity, and Global Perspectives

2025年9月26日(金) 16:30 ~ 18:00 Session Room 3 (Large Hall A)

[Symposium 49] Cultural Psychopharmacology: Integrating Genetics, Ethnicity, and Global Perspectives

Moderator: Kazutaka Shimoda (Tochigi Prefectural Okamotodai Hospital)

[SY-49-01] CYP2D6 Genotype, BMI, and Culture: Rethinking Antipsychotic Dosing Across the U.S., China, and Japan

*Itsuo Asai¹ (1. Heart Clinic Medical Corporation (Japan))

キーワード : Pharmacogenomics、CYP2D6 polymorphism、Antipsychotic dosing、Cultural psychiatry、Precision medicine

Background:

Antipsychotic dosing typically targets about 78% D2 receptor occupancy to balance effectiveness with side effects. However, average prescribed doses vary widely between countries, making explanations based solely on pharmacokinetics difficult.

Objective:

To investigate how CYP2D6 genotypes, BMI, and cultural prescribing practices together affect antipsychotic dosing in the United States, China, and Japan.

Methods:

Published CYP2D6 metabolizer distributions (Gaedigk et al., CPIC 2017) were combined with average BMI data (WHO Global Database) to estimate the chlorpromazine (CPZ)-equivalent doses required to achieve target D2 occupancy. Calculations included adjustments for enzyme activity and BMI-based volume of distribution models. Actual national averages were derived from large-scale studies involving over 15,000 patients combined (Leucht et al., 2014; Zhang et al., 2013; Inada et al., 2015).

Results:

Predicted mean CPZ equivalents were 400 mg (U.S.), 252 mg (China), and 268 mg (Japan). However, actual averages were significantly higher: 400 mg (U.S.), 452 mg (China, +200 mg vs. predicted), and 675 mg (Japan, +407 mg). Biological factors (CYP2D6 + BMI) explained about 38% of the total dose variation (variance estimate based on comparative multi-factor models), with the remainder shaped by systemic, institutional, and cultural factors.

Conclusion:

Antipsychotic dosing cannot be determined solely by pharmacokinetics. Japan's emphasis on long-term hospitalization and physician autonomy, China's rapid stabilization pressures in urban outpatient settings, and the U.S.'s cautious, litigation-sensitive approach show how local treatment philosophies and healthcare systems take precedence over biological expectations.

These findings highlight the need for developing culturally sensitive and contextually appropriate pharmacogenomic guidelines. Precision psychiatry should go beyond receptor occupancy by integrating systems thinking and local values. Including non-D2 mechanisms and digital phenotyping may further enhance culturally sensitive, patient-centered models of global mental health care.

Symposium | Psychopharmacology : [Symposium 49] Cultural Psychopharmacology: Integrating Genetics, Ethnicity, and Global Perspectives

2025年9月26日(金) 16:30 ~ 18:00 Session Room 3 (Large Hall A)

[Symposium 49] Cultural Psychopharmacology: Integrating Genetics, Ethnicity, and Global Perspectives

Moderator: Kazutaka Shimoda (Tochigi Prefectural Okamotodai Hospital)

[SY-49-02] Ethnicity and psychopharmacology: an overview

*Mario Hubertus Braakman¹ (1. Tilburg University, the Netherlands (Netherlands))

キーワード : Pharmacology、cross-cultural、Psychopharmacology、Ethnicity

This introductory presentation will give the audience a historical overview of 50 years of research in the area of ethnopsychopharmacology. The classic pharmacological studies will be presented and the main phases of the research characteristics in this field. Also the main theoretical concepts and problems will be elicited as well as solutions. We will end with the new challenges that lie ahead.

Symposium | Psychopharmacology : [Symposium 49] Cultural Psychopharmacology: Integrating Genetics, Ethnicity, and Global Perspectives

2025年9月26日(金) 16:30 ~ 18:00 Session Room 3 (Large Hall A)

[Symposium 49] Cultural Psychopharmacology: Integrating Genetics, Ethnicity, and Global Perspectives

Moderator: Kazutaka Shimoda (Tochigi Prefectural Okamotodai Hospital)

[SY-49-03] The Prevalence of Tardive Dyskinesia in Patients with Schizophrenia Treated with Antipsychotics in Malaysia

*Ahmad Hatim Sulaiman¹ (1. Universiti Malaya (Malaysia))

キーワード : Tardive Dyskinesia、Antipsychotics、Schizophrenia、Psychopharmacology

The prevalence of TD varies widely from 20% to 50%, but is often undetected in schizophrenia patients treated with antipsychotics. This study is aimed at investigating the prevalence of TD among schizophrenia patients treated with antipsychotics and identifying the associated factors. This study also examines the association of TD with personal and social functioning performance, illness severity, and ethnicity.

Methods: This was a cross-sectional study conducted at a teaching hospital in Malaysia.

Patients were assessed using the Abnormal Involuntary Movement Scale (AIMS), Personal and Social Performance Scale (PSP), and the Clinical Global Impression Scale (CGI).

Results: Seventy-eight patients were recruited in this study. The prevalence of TD was 35.9%. Older age (OR 4.079, p = 0.006), Chinese ethnicity (OR 4.486, p = 0.020), longer duration of schizophrenia and antipsychotic treatment (OR 5.312, p = 0.001 and OR 5.500, p = 0.002, respectively) were also significantly associated with TD. TD patients notably demonstrated severe impairments in the self-care domain (71.4%). The presence of TD is associated with more severe overall clinical impairment (53.6%).

Conclusion: TD remains a prevalent and concerning side effect of antipsychotic treatment in schizophrenia patients. Genetics and ethnicity may play a role.

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

2025年9月26日(金) 16:30 ~ 18:00 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))

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

2025年9月26日(金) 16:30 ~ 18:00 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))

キーワード : 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.

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

2025年9月26日(金) 16:30 ~ 18:00 Session Room 4 (Large Hall B)

[Symposium 50] Anti-stigma 2

Moderator: Shigeki Seki (Silver Ribbon Japan)

[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))

キーワード : 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

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

2025年9月26日(金) 16:30 ~ 18:00 Session Room 4 (Large Hall B)

[Symposium 50] Anti-stigma 2

Moderator: Shigeki Seki (Silver Ribbon Japan)

[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.

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

2025年9月26日(金) 16:30 ~ 18:00 Session Room 4 (Large Hall B)

[Symposium 50] Anti-stigma 2

Moderator: Shigeki Seki (Silver Ribbon Japan)

[SY-50-03] From Stigma to Safety: Leadership Mechanisms for Normalising Mental Health in the Workplace*Elizabeth Lorraine King¹ (1. WFMH (Australia))

キーワード : 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.

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

2025年9月26日(金) 16:30 ~ 18:00 Session Room 4 (Large Hall B)

[Symposium 50] Anti-stigma 2

Moderator: Shigeki Seki (Silver Ribbon Japan)

[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))

キーワード : 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 menral 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 polciy 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.

Symposium | Psychotherapy : [Symposium 51] Morita Therapy: Is It Culture-Bound Psychotherapy or Useful Across Cultures?

2025年9月26日(金) 16:30 ~ 18:00 Session Room 5 (Conference Room A)

[Symposium 51] Morita Therapy: Is It Culture-Bound Psychotherapy or Useful Across Cultures?

Moderator: Masahiro Minami (Simon Fraser University), Shinsuke Kondo (University of Tokyo)

Discussant: Andrea Roberto Polari (University of Melbourne)

[SY-51]

Morita Therapy: Is It Culture-Bound Psychotherapy or Useful Across Cultures?

Kei Nakamura¹, Ayumu Tateno², Mitsuhiro Nakamura^{3,4}, Mikiko Kubota^{5,1}, Masahiro Minami⁶, Andrea Roberto Polari⁷ (1. The Jikei University Center for Morita Therapy (Japan), 2. The Jikei University School of Medicine (Japan), 3. Yokohama Camellia Hospital (Japan), 4. Shinano Mental Clinic (Japan), 5. Hosei University (Japan), 6. Simon Fraser University (Canada), 7. University of Melbourne (Australia))

[SY-51-01]

What kind of psychotherapy is Morita Therapy?

*Ayumu Tateno¹ (1. Department of Psychiatry, The Jikei University School of Medicine (Japan))

[SY-51-02]

A century of Morita therapy: What has and has not changed

*MITSUHIRO NAKAMURA^{1,2} (1. Yokohama Camellia Hospital (Japan), 2. Shinano Mental Clinic (Japan))

[SY-51-03]

On the Therapeutic Effects of Morita Therapy: A Study on the Therapeutic Effects of Outpatient Morita Therapy

*Mikiko Kubota^{1,2} (1. Hosei University, Graduate School of Social Well-being Studies (Japan), 2. The Jikei University, Center for Morita Therapy (Japan))

[SY-51-04]

Morita Therapy and Mindfulness

*Masahiro Minami¹ (1. Simon Fraser University (Canada))

Symposium | Psychotherapy : [Symposium 51] Morita Therapy: Is It Culture-Bound Psychotherapy or Useful Across Cultures?

2025年9月26日(金) 16:30 ~ 18:00 Session Room 5 (Conference Room A)

[Symposium 51] Morita Therapy: Is It Culture-Bound Psychotherapy or Useful Across Cultures?

Moderator: Masahiro Minami (Simon Fraser University), Shinsuke Kondo (University of Tokyo)

Discussant: Andrea Roberto Polari (University of Melbourne)

[SY-51] Morita Therapy: Is It Culture-Bound Psychotherapy or Useful Across Cultures?

Kei Nakamura¹, Ayumu Tateno², Mitsuhiro Nakamura^{3,4}, Mikiko Kubota^{5,1}, Masahiro Minami⁶, Andrea Roberto Polari⁷ (1. The Jikei University Center for Morita Therapy (Japan), 2. The Jikei University School of Medicine (Japan), 3. Yokohama Camellia Hospital (Japan), 4. Shinano Mental Clinic (Japan), 5. Hosei University (Japan), 6. Simon Fraser University (Canada), 7. University of Melbourne (Australia))

キーワード : Morita therapy、psychotherapy、mindfulness、culture

Morita Therapy, founded in 1919 by Japanese psychiatrist Shoma Morita, is a distinctive approach to treating "neuroses." Its core principle is to break the psychological vicious cycle of anxiety by guiding individuals away from attempting to control their anxiety, instead fostering an "as-is" attitude. This "as-is" approach encourages patients to accept their anxiety and symptoms without forcibly trying to eliminate them, while recognizing the underlying "desire for life"—the inherent drive for growth and improvement—that accompanies anxiety in real-life situations. Originally, Morita Therapy was an in-patient treatment involving periods of isolated bed rest and work therapy. In recent years, however, it has evolved into primarily outpatient practices, which include various formats such as individual therapy, group therapy, and short-term care programs. Morita Therapy is closely associated with Zen Buddhism and differs significantly from Western psychotherapeutic approaches. It emphasizes a unique view of nature, a mind-body monistic perspective, and places the practice of daily life at the center of its treatment.

This symposium will offer an overview of Morita Therapy and its historical development, as well as explore research on its effectiveness in outpatient settings. Additionally, we will examine the differences between Morita Therapy and mindfulness-based approaches that have been integrated into Western psychotherapy and mental health practices. A comparative cultural analysis will highlight these distinctions. Finally, an Australian psychiatrist with a multicultural background will provide designated remarks, offering further insights. Through this symposium, we aim to foster a lively discussion on whether Morita Therapy is inherently suited only for Japanese and East Asian cultures or if it holds value and applicability across diverse cultural contexts.

Symposium | Psychotherapy : [Symposium 51] Morita Therapy: Is It Culture-Bound Psychotherapy or Useful Across Cultures?

2025年9月26日(金) 16:30 ~ 18:00 Session Room 5 (Conference Room A)

[Symposium 51] Morita Therapy: Is It Culture-Bound Psychotherapy or Useful Across Cultures?

Moderator: Masahiro Minami (Simon Fraser University), Shinsuke Kondo (University of Tokyo)

Discussant: Andrea Roberto Polari (University of Melbourn)

[SY-51-01] What kind of psychotherapy is Morita Therapy?

*Ayumu Tateno¹ (1. Department of Psychiatry, The Jikei University School of Medicine (Japan))

キーワード : Morita Therapy、Anxiety、Acceptance reality as it is

Morita Therapy is a Japanese psychotherapy created by Shoma Morita in 1919 based on Eastern psychology. Shoma Morita defined obsessive-compulsive ideation, general nervousness, and seizure neurosis as neuroticism, and Morita Therapy was effective. Morita's definition of nervousness encompassed the state, the psychological mechanisms underlying the symptoms, and the neurotic personality. According to the DSM5, the conditions include Panic Disorder, Agoraphobia Social Anxiety Disorder, Obsessive-Compulsive Disorder, and Illness Anxiety Disorder. Neurotic personality refers to a personality that has both obsessive and self-empowering characteristics, such as meticulousness, perfectionism, and competitive nature, and introversion and fragility, such as introverted, nervous, and passive nature. Morita described the cognitive process as the mental preoccupation mechanism working on the symptoms. The mental preoccupation mechanism can be divided into seisinkogo sayo and ideational contradiction. Seisinkogo sayo is a mechanism in which attention and sensation act in a vicious cycle, causing symptoms to develop. Ideational contradiction refers to an attitude in which the intellect attempts to eliminate feelings that should be present as absent. For patients who are trapped in symptoms based on nervousness, the goal of treatment is not to eliminate anxiety, which should be there, but to let the anxiety be and to use the raw desire behind the anxiety for constructive action. The word that simply expresses this is acceptance reality as it is. The Original Morita Therapy is inpatient treatment, but currently Outpatient Morita Therapy is the mainstream, and guidelines for outpatient Morita Therapy were completed in 2009. At the conference, we plan to discuss how to lead the patients to acceptance reality as it is.

Symposium | Psychotherapy : [Symposium 51] Morita Therapy: Is It Culture-Bound Psychotherapy or Useful Across Cultures?

2025年9月26日(金) 16:30 ~ 18:00 Session Room 5 (Conference Room A)

[Symposium 51] Morita Therapy: Is It Culture-Bound Psychotherapy or Useful Across Cultures?

Moderator: Masahiro Minami (Simon Fraser University), Shinsuke Kondo (University of Tokyo)

Discussant: Andrea Roberto Polari (University of Melbourn)

[SY-51-02] A century of Morita therapy: What has and has not changed

*MITSUHIRO NAKAMURA^{1,2} (1. Yokohama Camellia Hospital (Japan), 2. Shinano Mental Clinic (Japan))
キーワード : Morita therapy、East Asia、Review

In 2023, we conducted a narrative review of English-language literature on Morita Therapy (MT) using clinical epidemiological methodology, with the aim of examining what has changed and what has not over the 100-year history of MT.

(Nakamura, M., Niimura, H., & Kitanishi, K. (2023). A century of Morita therapy: What has and has not changed. *Asia-Pacific Psychiatry*, 15(1), e12511. <https://doi.org/10.1111/appy.12511>)

Classic inpatient MT, as practiced by Shoma Morita, was a highly structured and discipline-oriented treatment conducted in a family-like setting. It consisted of four stages: isolation rest, light monotonous work, labor-intensive work, and social integration. Central to its practice was the fumon (non-inquiry) principle and the theory of toraware (mental preoccupation), built upon concepts such as vicious cycle, contradiction by ideas, and the dynamic interplay of fear and desire. The therapeutic goal was achieving arugamama, or acceptance of reality as it is, through purposeful action.

Although the practice of classical inpatient MT has declined in Japan due to systemic and practical limitations, the theoretical foundation of MT has been refined and integrated into modern outpatient settings. Since the late 20th century, efforts have been made to formalize therapeutic techniques and training systems, leading to broader applicability in treating neurotic, mood, and personality disorders. Furthermore, conceptual comparisons with mindfulness and ACT have highlighted MT's distinctive stance—particularly its focus on harmonizing fear and desire, and its grounding in an Eastern view of nature rather than emphasizing cognitive detachment or objectivity.

This presentation will also report on trends in English-language publications on MT since 2023, examining emerging applications and developments. These efforts underscore the continuing relevance of MT as a culturally grounded yet universally applicable psychotherapy, and the necessity of further clinical epidemiological evaluation to establish its global validity.

Symposium | Psychotherapy : [Symposium 51] Morita Therapy: Is It Culture-Bound Psychotherapy or Useful Across Cultures?

2025年9月26日(金) 16:30 ~ 18:00 Session Room 5 (Conference Room A)

[Symposium 51] Morita Therapy: Is It Culture-Bound Psychotherapy or Useful Across Cultures?

Moderator: Masahiro Minami (Simon Fraser University), Shinsuke Kondo (University of Tokyo)

Discussant: Andrea Roberto Polari (University of Melbourn)

[SY-51-03] On the Therapeutic Effects of Morita Therapy: A Study on the Therapeutic Effects of Outpatient Morita Therapy

*Mikiko Kubota^{1,2} (1. Hosei University, Graduate School of Social Well-being Studies (Japan), 2. The Jikei University, Center for Motirta Therapy (Japan))

キーワード : Outpatient Morita Therapy、 Therapeutic effect、 RCT-based study

Morita therapy is a distinct form of Japanese psychotherapy developed by Shoma Morita in 1919. With over 100 years of history and ongoing practice, its effectiveness has been demonstrated. However, in recent years, the emphasis on evidence-based medicine has led to an increased demand for the demonstration of efficacy in psychotherapy. Demonstrating treatment efficacy remains a critical challenge for Morita therapy. The standard treatment form of Morita therapy is inpatient care, and its therapeutic effects have already been demonstrated and reported by the Japanese Society for Morita Therapy and its journal (Nakamura et al., 2002; Kubota et al., 2003).

Recently, outpatient Morita therapy has become the mainstream form of treatment, and the "*Guidelines for Practicing Outpatient Morita Therapy*" were established in 2009. However, no rigorous and systematic studies examining the therapeutic effects of outpatient Morita therapy have been conducted to date. Amid ongoing discussions about the differences and similarities between Morita therapy and cognitive-behavioral therapy, there is a growing need to empirically demonstrate the therapeutic effects of outpatient Morita therapy. In response, the Japanese Society for Morita Therapy has initiated an RCT-based study on the therapeutic effects of outpatient Morita therapy, reporting on the methodological considerations and preliminary research findings (Kubota et al., 2018; Matsuura et al., 2020).

In this presentation, we will report on the research protocol and the progress of the study to date. Additionally, we will explore therapeutic changes in outpatient Morita therapy based on participants' narratives obtained through semi-structured interviews.

Symposium | Psychotherapy : [Symposium 51] Morita Therapy: Is It Culture-Bound Psychotherapy or Useful Across Cultures?

2025年9月26日(金) 16:30 ~ 18:00 Session Room 5 (Conference Room A)

[Symposium 51] Morita Therapy: Is It Culture-Bound Psychotherapy or Useful Across Cultures?

Moderator: Masahiro Minami (Simon Fraser University), Shinsuke Kondo (University of Tokyo)

Discussant: Andrea Roberto Polari (University of Melbourn)

[SY-51-04] Morita Therapy and Mindfulness

*Masahiro Minami¹ (1. Simon Fraser University (Canada))

キーワード : Morita therapy、Mindfulness、Buddhism

Morita Therapy (MT) was fully formed around 1919 by the late Dr. Shoma Morita. Morita engaged in a comprehensive investigation and study of the diverse psychotherapeutic approaches available at the time to develop his “special” therapeutic approach to *Shinkeishitsu*—a trait Morita himself struggled with for many years. It is also notable that the development of Morita’s special treatment for *Shinkeishitsu* underwent meticulous scrutinization, iteration, experiencing and realization, liberation, and reiteration, culminating in the final form of MT as we know it today. It is, to say the least, a distinct form of psychotherapy—emerging organically through Morita’s own life, his relationships with patients and others, and the inevitable unfolding of life itself. So, too, has the history of mindfulness followed a unique, rich, and contextual evolution.

It is with great appreciation for the distinct yet potentially interrelated contextualities and idiographic natures of these two traditions that this presentation is approached. Rather than offering a simple, dichotomized or dialectical comparison—positioning MT and mindfulness as directly comparable units (e.g., at the level of technique or mechanisms)—this presentation takes an idiographic stance. Each is fully situated within its broader context, and its unique characteristics and signature features are illuminated and honored independently, without presuming a comparative intent from the outset. Only thereafter is a third, comparative dimensional axis introduced—enabling a meaningful, nuanced, and contextualized comparison of their distinct features. This resulting meta-comparative endeavor reveals not merely similarities and differences, but the locales where each approach is situated—not as simply opposing poles, but as parts of a greater whole. In their relational interplay, we find the potential for a collaborative path forward—one that best potentiates the unique gifts of each tradition, in harmony, for the psychological and psychosocial well-being of our fellow human beings.

Symposium | Nurodevelopmental disorder : [Symposium 52] "Empowering Neurodiversity: Advancing Support for Adults with Developmental Disabilities"

2025年9月26日(金) 16:30 ~ 18:00 Session Room 6 (Conference Room B)

[Symposium 52] "Empowering Neurodiversity: Advancing Support for Adults with Developmental Disabilities"

Moderator: Atsushi Kashiwa (Heart Clinic Medical Corporation)

[SY-52]

"Empowering Neurodiversity: Advancing Support for Adults with Developmental Disabilities"

Atsushi Kashiwa¹, Kazuya Ono², Keiko Takayama³, Keita Suzuki⁴, Ahsan Nazeer⁵ (1. Heart Clinic Medical Corporation (Japan), 2. St. Marianna University School of Medicine (Japan), 3. NPO Edison Club (Japan), 4. Kaien Corporation (Japan), 5. Sidra Medicine (Qatar))

[SY-52-01]

Support for developmental disorders according to individual characteristics in adulthood

*Kazuya Ono¹ (1. St Marianna-university school of medicine (Japan))

[SY-52-02]

Cultural Context and Social Support as Determinants of Quality of Life in Individuals with ADHD in Japan

*Keiko Takayama¹ (1. NPO Edison Club (Japan))

[SY-52-03]

Practical Support Strategies for Adults with Developmental Disabilities: Insights from Kaien's 16 Years of Experience

*Keita Suzuki¹ (1. Kaien Inc. (Japan))

[SY-52-04]

Current Updates and Innovations in ADHD

*Ahsan Nazeer¹ (1. Weill Cornell, NY, USA/ Sidra Medicine, Qatar)

Symposium | Nurodevelopmental disorder : [Symposium 52] "Empowering Neurodiversity: Advancing Support for Adults with Developmental Disabilities"

2025年9月26日(金) 16:30 ~ 18:00 Session Room 6 (Conference Room B)

[Symposium 52] "Empowering Neurodiversity: Advancing Support for Adults with Developmental Disabilities"

Moderator: Atsushi Kashiwa (Heart Clinic Medical Corporation)

[SY-52] "Empowering Neurodiversity: Advancing Support for Adults with Developmental Disabilities"

Atsushi Kashiwa¹, Kazuya Ono², Keiko Takayama³, Keita Suzuki⁴, Ahsan Nazeer⁵ (1. Heart Clinic Medical Corporation (Japan), 2. St. Marianna University School of Medicine (Japan), 3. NPO Edison Club (Japan), 4. Kaien Corporation (Japan), 5. Sidra Medicine (Qatar))

キーワード : developmental disorders、autism spectrum disorder、attention deficit hyperactivity disorder

Developmental disorders, traditionally recognized as childhood conditions, have emerged as significant issues in adulthood as society evolves. This symposium aims to explore social and psychological support for adults with developmental disorders through diverse perspectives. In Japan, the Act on Support for Persons with Developmental Disabilities was enacted in 2005, establishing a legal framework for adult support. Two decades later, this symposium brings together speakers from various backgrounds to discuss the current state of affairs:

1. University faculty members will present academic insights and research findings.
2. Self-advocacy groups will share lived experiences and challenges faced by adults with developmental disorders.
3. Support professionals will discuss intervention strategies and support systems.

Additionally, Dr. Nazeer from Qatar will present on "Innovations in ADHD," offering an international perspective on advancements in understanding and managing Attention Deficit Hyperactivity Disorder in adults.

The symposium aims to:

- Evaluate the progress made since the 2005 legislation - Identify gaps in current support systems
- Explore innovative approaches to adult developmental disorder management
- Foster cross-cultural dialogue on best practices

By bringing together diverse stakeholders, this symposium seeks to deepen our understanding of adult developmental disorders and enhance support strategies for affected individuals in an ever-changing society.

Symposium | Nurodevelopmental disorder : [Symposium 52] "Empowering Neurodiversity: Advancing Support for Adults with Developmental Disabilities"

2025年9月26日(金) 16:30 ~ 18:00 Session Room 6 (Conference Room B)

[Symposium 52] "Empowering Neurodiversity: Advancing Support for Adults with Developmental Disabilities"

Moderator: Atsushi Kashiwa (Heart Clinic Medical Corporation)

[SY-52-01] Support for developmental disorders according to individual characteristics in adulthood

*Kazuya Ono¹ (1. St Marianna-university school of medicine (Japan))

キーワード : adult developmental disorders.、Support、personality

There is no established guideline yet on how to think about adult developmental disorders. It has been reported that there are differences in functional levels and pathological conditions between those who have been diagnosed since childhood and those who were first diagnosed in adulthood. However, there is a view that this is because there are cases where the condition may become apparent later in life if the individual is placed in a protective environment, and that the characteristics of developmental disorders were not noticeable during childhood and adolescence. On the other hand, since developmental characteristics change due to the influence of the upbringing environment, which includes factors such as family dynamics, social interactions, and educational experiences, it cannot be denied that characteristics that did not previously lead to disorders may worsen due to an inappropriate environment. In any case, support programs must be individually assessed for the continuing and non-continuing groups, depending on the individual's functional levels and coexisting mental disorders. In addition, since personality is formed based on developmental characteristics, it cannot be denied that some personality disorders may be related to developmental characteristics. Therefore, in the clinical treatment of adult developmental disorders, it is important to evaluate not only the aspects of developmental characteristics but also personality characteristics and to approach psychotherapy accordingly. On the day, I would like to provide an overview of current evidence regarding adult developmental disorders, discuss the diversity of treatment options, and the application of dialectical behavior therapy, a type of cognitive behavioral therapy tailored to personality characteristics, to cases of adult developmental disorders.

Symposium | Nurodevelopmental disorder : [Symposium 52] "Empowering Neurodiversity: Advancing Support for Adults with Developmental Disabilities"

2025年9月26日(金) 16:30 ~ 18:00 Session Room 6 (Conference Room B)

[Symposium 52] "Empowering Neurodiversity: Advancing Support for Adults with Developmental Disabilities"

Moderator: Atsushi Kashiwa (Heart Clinic Medical Corporation)

[SY-52-02] Cultural Context and Social Support as Determinants of Quality of Life in Individuals with ADHD in Japan

*Keiko Takayama¹ (1. NPO Edison Club (Japan))

キーワード : ADHD、family support、psychoeducation

ADHD is a neurodevelopmental disorder often characterized by impairments in executive function. However, daily functioning and mental health outcomes are strongly influenced not only by biological traits but also by cultural background and the characteristics of the surrounding community. The presence or absence of educational, psychological, and social welfare support significantly affects individuals' quality of life (QoL). In the Japanese context, limited public understanding of neurodiversity and strong cultural norms emphasizing conformity often result in the marginalization of those who differ from societal expectations. Differences are frequently perceived as abnormalities, which can lead to diminished self-esteem, social isolation, and secondary psychological difficulties among individuals with ADHD. Over the past 25 years, ongoing efforts within ADHD support networks in Japan have aimed to increase public awareness, reduce stigma, and promote peer-driven programs. These initiatives have demonstrated the critical role that social understanding and contextual support play in improving the well-being of individuals with ADHD. This presentation will examine the cultural and structural challenges surrounding ADHD in Japan and will introduce the 25-year history of EDISON CLUB's efforts to support individuals with ADHD and their families within this context.

Symposium | Nurodevelopmental disorder : [Symposium 52] "Empowering Neurodiversity: Advancing Support for Adults with Developmental Disabilities"

2025年9月26日(金) 16:30 ~ 18:00 Session Room 6 (Conference Room B)

[Symposium 52] "Empowering Neurodiversity: Advancing Support for Adults with Developmental Disabilities"

Moderator: Atsushi Kashiwa (Heart Clinic Medical Corporation)

[SY-52-03] Practical Support Strategies for Adults with Developmental Disabilities: Insights from Kaien's 16 Years of Experience

*Keita Suzuki¹ (1. Kaien Inc. (Japan))

キーワード : Employment Support、Vocational Training、Developmental Disabilities

Drawing upon 16 years of direct support experience, Kaien presents practical insights into empowering adults with developmental disabilities. Rooted in Japan's Act on Support for Persons with Developmental Disabilities, our presentation evaluates progress and proposes future directions for comprehensive adult support.

Navigating employment is a key focus. We explore strategies for leveraging individual strengths, identifying suitable workplaces through resources like our "Minor League" job platform (featuring over 200 unique openings), and implementing effective accommodations for job seekers and employees.

Addressing daily living challenges involves practical approaches to organization, task completion, and tidying. Understanding the complexities of co-occurring mental health conditions (such as depression, anxiety, and addiction) alongside varying cognitive profiles and "peaks and valleys" is crucial for tailored support.

Fostering self-understanding and resilience is paramount. We emphasize developing self-awareness and coping strategies, recognizing that proactive efforts significantly improve quality of life.

Moving beyond diagnosis, our approach highlights the necessity of comprehensive assessments that consider real-world adaptive functioning, not just diagnostic labels or IQ scores. Tailored support systems based on individual needs are essential.

With a proven track record of supporting over 2,000 individuals into meaningful employment, Kaien offers a ground-up perspective aimed at enhancing support strategies and fostering a deeper understanding of adult developmental disorders in our evolving society.

Symposium | Nurodevelopmental disorder : [Symposium 52] "Empowering Neurodiversity: Advancing Support for Adults with Developmental Disabilities"

2025年9月26日(金) 16:30 ~ 18:00 Session Room 6 (Conference Room B)

[Symposium 52] "Empowering Neurodiversity: Advancing Support for Adults with Developmental Disabilities"

Moderator: Atsushi Kashiwa (Heart Clinic Medical Corporation)

[SY-52-04] Current Updates and Innovations in ADHD

*Ahsan Nazeer¹ (1. Weill Cornell, NY, USA/ Sidra Medicine, Qatar (Qatar))

キーワード : ADHD、EndeavorRx、Viloxazine、Child and Adolescent Psychiatry、Adverse Childhood Experiences (ACEs)

Recent advancements in ADHD include new medication options, digital therapies, and deeper insights into the disorder's complexities. These include newer non-stimulant drugs like Viloxazine extended release and the first transdermal amphetamine patch, offering more personalized treatment choices. Digital therapies such as EndeavorRx, a video game-based approach, and the Monarch eTNS System are increasingly popular. Additionally, research is examining how ADHD exists on a spectrum with varying symptom severity along with the role of ACEs.

Symposium | MDD : [Symposium 53] How does the gut microbiota contribute to elucidating the mental health in children and adolescents?

2025年9月26日(金) 16:30 ~ 18:00 Session Room 7 (Conference Room C)

[Symposium 53] How does the gut microbiota contribute to elucidating the mental health in children and adolescents?

Moderator: Katsunaka Mikami (Department of Psychiatry, Tokai University School of Medicine), Chaiyavat Chaiyasut (Innovation Center for Holistic Health, Nutraceuticals, and Cosmeceuticals, Faculty of Pharmacy, Chiang Mai University)

[SY-53]

How does the gut microbiota contribute to elucidating the mental health in children and adolescents?

Katsunaka Mikami¹, Chaiyavat Chaiyasut², Eiji Miyauchi³, Tomokazu Hata⁴, Natsuru Watanabe¹ (1. Department of Psychiatry, Tokai University School of Medicine (Japan), 2. Innovation Center for Holistic Health, Nutraceuticals, and Cosmeceuticals, Faculty of Pharmacy, Chiang Mai University (Thailand), 3. Institute for Molecular and Cellular Regulation, Gunma University (Japan), 4. Department of Psychosomatic Medicine Graduate School of Medical Sciences, Kyushu University (Japan))

[SY-53-01]

Influences of probiotic supplementation on the mental health of humans

*chaiyavat chaiyasut¹, Sivamaruthi Bhagavathi Sundaram², Kesika Periyanaina², Suchanat Khongtan¹, Pranom Fukngoen² (1. Faculty of Pharmacy, Chiangmai University, Chiangmai, Thailand (Thailand), 2. Office of Research Administration, Chiang Mai University, Chiang Mai 50200, Thailand (Thailand))

[SY-53-02]

Dog ownership, microbiota, and adolescent mental health: insights from human and mouse studies

*Eiji Miyauchi¹ (1. Institute for Molecular and Cellular Regulation, Gunma University (Japan))

[SY-53-03]

Association Between Gut Microbiota and Eating Disorders

*Tomokazu Hata¹ (1. Department of Psychosomatic Medicine, Kyushu University Hospital (Japan))

[SY-53-04]

The Oral-Gut-Brain Axis: Impact of Maternal Oral Dysbiosis on Offspring Gut Colonization and Early-Life Behavior.

*Natsuru Watanabe¹, Katsunaka Mikami¹ (1. Department of Psychiatry, Tokai University School of Medicine (Japan))

Symposium | MDD : [Symposium 53] How does the gut microbiota contribute to elucidating the mental health in children and adolescents?

2025年9月26日(金) 16:30 ~ 18:00 Session Room 7 (Conference Room C)

[Symposium 53] How does the gut microbiota contribute to elucidating the mental health in children and adolescents?

Moderator: Katsunaka Mikami (Department of Psychiatry, Tokai University School of Medicine), Chaiyavat Chaiyasut (Innovation Center for Holistic Health, Nutraceuticals, and Cosmeceuticals, Faculty of Pharmacy, Chiang Mai University)

[SY-53] How does the gut microbiota contribute to elucidating the mental health in children and adolescents?

Katsunaka Mikami¹, Chaiyavat Chaiyasut², Eiji Miyauchi³, Tomokazu Hata⁴, Natsume Watanabe¹ (1. Department of Psychiatry, Tokai University School of Medicine (Japan), 2. Innovation Center for Holistic Health, Nutraceuticals, and Cosmeceuticals, Faculty of Pharmacy, Chiang Mai University (Thailand), 3. Institute for Molecular and Cellular Regulation, Gunma University (Japan), 4. Department of Psychosomatic Medicine Graduate School of Medical Sciences, Kyushu University (Japan))

キーワード : microbe-gut-brain axis、mental health、early in life、children、adolescents

It is becoming clear that gut microbiota plays a crucial role in brain development and function. The gut and brain communicate bidirectionally via mechanisms such as hormones, cytokines, the vagus nerve and the central nervous system via spinal afferent fibers. Recently, the gut microbiota has been attracting particular attention in this mechanism. This new system is the recently proposed bidirectional “gut microbiota-gut-brain axis (MGBA)”. It has also become clear that biologically active substances derived from intestinal bacteria affect stress responses, behavior, and mental states. Plasma ACTH and corticosterone levels in response to restraint stress (i.e., activation of the hypothalamic-pituitary-adrenal (HPA) axis) were higher in germ-free (GF) mice than in specific pathogen-free (SPF) mice. The resident microbiota may affect the postnatal development of the HPA stress response in mice. Furthermore, GF mice were shown to be more active, anxious, and aggressive than Ex-GF mice. These results suggest that the intestinal microbiota may strongly affect not only the stress response but also the host's behavior and mental state.

This symposium will focus on the effect of MGBA on the behavior and mental status of children and adolescents and discuss them from the perspectives of basic researchers and clinicians. The speakers will introduce the latest topics in this interesting field of microbial research. From a clinical perspective, the presentation will focus on the pathology of anorexia and stress intervention methods in relation to MGBA. From a basic science, the presentation will focus on mouse aggression and early developmental intervention, as well as the effects of dog ownership and adolescent microbiota on mental health.

Symposium | MDD : [Symposium 53] How does the gut microbiota contribute to elucidating the mental health in children and adolescents?

2025年9月26日(金) 16:30 ~ 18:00 Session Room 7 (Conference Room C)

[Symposium 53] How does the gut microbiota contribute to elucidating the mental health in children and adolescents?

Moderator: Katsunaka Mikami (Department of Psychiatry, Tokai University School of Medicine), Chaiyavat Chaiyasut (Innovation Center for Holistic Health, Nutraceuticals, and Cosmeceuticals, Faculty of Pharmacy, Chiang Mai University)

[SY-53-01] Influences of probiotic supplementation on the mental health of humans

*chaiyavat chaiyasut¹, Sivamaruthi Bhagavathi Sundaram², Kesika Periyanaina², Suchanat Khongtan¹, Pranom Fukngoen² (1. Faculty of Pharmacy, Chiangmai University, Chiangmai, Thailand (Thailand), 2. Office of Research Administration, Chiang Mai University, Chiang Mai 50200, Thailand (Thailand))

キーワード : Probiotics、Prebiotics、Mental health、Stress、Synbiotics

Probiotic consumption is increasing globally due to their well-documented health benefits. Research has shown that probiotics are effective as adjuvant therapeutic agents for various conditions. Mental health issues affect around 20% of people worldwide, underscoring the urgent need for effective treatments and preventative strategies. Good mental health means feeling well emotionally and mentally. It allows one to handle everyday stress, work effectively, and participate in the community. The connection between gut health and mental well-being is gaining increasing attention, as emerging research suggests that the gut microbiome plays a crucial role in regulating mental health. Probiotics may help modulate these processes by supporting healthy gut microbiota and offer promising adjuncts to traditional mental health treatments. We have investigated the effect of synbiotic supplementation (*Lactobacillus paracasei* HII01 and *Bifidobacterium animalis* subsp. *lactis*, 5 g galactooligosaccharides, and 5 g oligofructose) on stress-related parameters in Thai subjects. In the stressed group, administering synbiotics led to a significant reduction in negative scores on the Thai Stress Test and a decrease in tryptophan levels. In the non-stressed group, administration of synbiotics resulted in a notable reduction in tryptophan. At the same time, levels of dehydroepiandrosterone sulfate, tumor necrosis factor-alpha, 5-hydroxyindoleacetic acid, and short-chain fatty acids (SCFAs) increased significantly. In both groups, synbiotic supplementation lowered cortisol and lipopolysaccharide (LPS) levels, while increasing the anti-inflammatory mediator interleukin-10 (IL-10) and immunoglobulin A (IgA). In conclusion, administering synbiotics helped alleviate negative feelings by modulating the hypothalamic-pituitary-adrenal (HPA) axis, enhancing IL-10 and IgA levels, and reducing LPS. In contrast, while synbiotics did not significantly impact stress levels in the non-stressed group, they did promote favorable changes in SCFA profiles, the HPA axis, and tryptophan metabolism. These findings suggest that synbiotics may offer therapeutic potential for stress-related disorders and gut microbiome remodeling, depending on the individual's baseline stress status.

Symposium | MDD : [Symposium 53] How does the gut microbiota contribute to elucidating the mental health in children and adolescents?

2025年9月26日(金) 16:30 ~ 18:00 Session Room 7 (Conference Room C)

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[SY-53-02] Dog ownership, microbiota, and adolescent mental health: insights from human and mouse studies

*Eiji Miyauchi¹ (1. Institute for Molecular and Cellular Regulation, Gunma University (Japan))

キーワード : Dog ownership、Adolescent mental health、Microbiota–brain axis

Adolescence is a critical period for neurodevelopment and social maturation, during which mental health can be shaped by environmental influences. Among these, the presence of companion animals—especially dogs—has been linked to improved emotional well-being. However, the biological basis of this association remains unclear.

In our recent study, we examined whether dog ownership during adolescence could influence mental health via changes in the microbiota. Using data from a longitudinal adolescent cohort in Tokyo, we observed that adolescents living with dogs had lower scores for social and behavioral problems compared to their peers. To further explore this connection, we transplanted microbiota from dog-owning and non-dog-owning adolescents into germ-free mice. Interestingly, mice colonized with microbiota from dog-owning adolescents showed enhanced social behavior, suggesting a functional link between microbiota composition and sociality.

These findings suggest that the positive psychological effects of living with dogs may be mediated, at least in part, by the microbiota. Our work points to a novel “dog–microbiota–brain” axis that may underlie the emotional benefits of dog companionship during adolescence. This axis could have important implications for understanding how everyday environmental exposures influence mental health trajectories, and may offer insights into microbiota-based strategies for supporting adolescent development.

Symposium | MDD : [Symposium 53] How does the gut microbiota contribute to elucidating the mental health in children and adolescents?

2025年9月26日(金) 16:30 ~ 18:00 Session Room 7 (Conference Room C)

[Symposium 53] How does the gut microbiota contribute to elucidating the mental health in children and adolescents?

Moderator: Katsunaka Mikami (Department of Psychiatry, Tokai University School of Medicine), Chaiyavat Chaiyasut (Innovation Center for Holistic Health, Nutraceuticals, and Cosmeceuticals, Faculty of Pharmacy, Chiang Mai University)

[SY-53-03] Association Between Gut Microbiota and Eating Disorders

*Tomokazu Hata¹ (1. Department of Psychosomatic Medicine, Kyushu University Hospital (Japan))

キーワード : gut microbiota、eating disorder、anorexia nervosa、uremic toxin

Anorexia nervosa (AN) is a psychiatric disorder with one of the highest mortality rates, and effective treatment strategies remain under investigation. Various psychotherapeutic approaches, including cognitive behavioral therapy for eating disorders, have been developed to date. In addition, research utilizing genome-wide association studies (GWAS) and neuroimaging has advanced our understanding of the disorder. Our laboratory is currently exploring the therapeutic potential of gut microbiota modulation.

We hypothesize that patients with AN, who often suffer from nutritional imbalances, exhibit dysbiosis of the gut microbiota, and that the gut microbiota–gut–brain axis may play a role in the pathophysiology of the disorder. In fact, the gut microbiota composition in patients with AN differs significantly from that of healthy controls. To investigate this further, we conducted fecal microbiota transplantation (FMT) experiments using germ-free mice, transplanting fecal samples from either AN patients or healthy individuals. Mice that received microbiota from AN patients showed impaired weight gain and increased anxiety-like behaviors.

To identify potential mediators of host alterations caused by dysbiosis, we conducted serum metabolomic analysis. In AN patients, several uremic toxins—metabolites known to be produced by gut bacteria—were detected at higher concentrations compared to healthy controls. Recent studies from other countries have also reported similar findings, with elevated levels of uremic toxins in AN patients. These toxins may serve as key factors in the gut microbiota–gut–brain axis underlying AN. Although a unified consensus has yet to be established, it is hypothesized that therapeutic strategies aimed at reducing uremic toxins and enhancing short-chain fatty acid production could be beneficial in alleviating the symptoms of AN.

In this presentation, we will review recent developments in gut microbiota research, share data from our laboratory, and discuss the therapeutic potential of microbiota-targeted interventions for eating disorders.

Symposium | MDD : [Symposium 53] How does the gut microbiota contribute to elucidating the mental health in children and adolescents?

2025年9月26日(金) 16:30 ~ 18:00 Session Room 7 (Conference Room C)

[Symposium 53] How does the gut microbiota contribute to elucidating the mental health in children and adolescents?

Moderator: Katsunaka Mikami (Department of Psychiatry, Tokai University School of Medicine), Chaiyavat Chaiyasut (Innovation Center for Holistic Health, Nutraceuticals, and Cosmeceuticals, Faculty of Pharmacy, Chiang Mai University)

[SY-53-04] The Oral-Gut-Brain Axis: Impact of Maternal Oral Dysbiosis on Offspring Gut Colonization and Early-Life Behavior.

*Natsuru Watanabe¹, Katsunaka Mikami¹ (1. Department of Psychiatry, Tokai University School of Medicine (Japan))

キーワード : gut microbiome、oral dysbiosis、microbiota-gut-brain axis、maternal transmission、neurodevelopment

Background/aims:

Recent advances in microbiome research have revealed the critical role of early-life gut microbiota in neurodevelopmental health. While the gut microbiome has been extensively studied in this context, emerging evidence suggests that maternal oral microbiota may also significantly shape the initial gut colonization of offspring. Given the known associations between oral dysbiosis and systemic inflammatory diseases, we hypothesized that maternal oral dysbiosis could negatively affect offspring gut microbiota composition and, consequently, early-life behavioral development. This study aimed to explore the effects of maternal oral dysbiosis on offspring gut colonization and anxiety-like behavior during the early postnatal period.

Methods:

Oral dysbiosis was induced in female mice by ligature placement to model experimental periodontitis prior to mating. Offspring born to these dams and control dams were evaluated at 4 weeks of age. Anxiety-like behavior was assessed using the marble burying test. As a positive control for microbiota disruption, offspring of dams treated with cefoperazone, a broad-spectrum antibiotic, were also analyzed. Gut microbiota analysis was conducted to correlate microbial shifts with behavioral outcomes.

Results:

Anxiety-like behavior in offspring was assessed at 4 weeks of age using the marble burying test. Pups born to dams treated with the antibiotic cefoperazone prior to delivery or to dams with ligature-induced periodontitis exhibited a significant decrease in the number of marbles buried compared to offspring of control dams. Importantly, there were no observable deficits in general activity or short-term memory, indicating that the behavioral changes were not due to motor impairment. These findings suggest that early-life disturbances in gut microbiota, driven by maternal microbiota dysbiosis, can influence neurobehavioral development in offspring, particularly with respect to anxiety-related behavior.

Conclusions:

This study reveals two significant findings. Maternal oral dysbiosis can greatly impact the gut microbiota composition of offspring during the early stages of life. Such changes are linked to observable behavioural modifications in offspring, particularly anxiety-like responses during the initial stages of development. These results support the existence of an oral-gut-brain axis, which was previously underappreciated, and emphasise the importance of maternal oral microbiota in determining neurodevelopmental outcomes in offspring. This research provides foundational evidence for the development of science-based public health strategies, including perinatal oral hygiene education.

Symposium | Influential Scientific Authors : [Symposium 54] Sharing of Impactful Research Findings from Highly Cited Researchers in the field of Psychiatry, Psychology, and Neuroscience in Asia

2025年9月26日(金) 16:30 ~ 18:00 Session Room 8 (Meeting Room 1)

[Symposium 54] Sharing of Impactful Research Findings from Highly Cited Researchers in the field of Psychiatry, Psychology, and Neuroscience in Asia

Moderator: Roger Ho (National University of Singapore), Toshiaki A. Furukawa (Kyoto University)

[SY-54-01]

Sharing of Impactful Research Findings from Highly Cited Researchers in the field of Psychiatry, Psychology, and Neuroscience in Asia

*Roger Ho¹, *Toshiaki A Furukawa², *Brian J Hall³, *Cyrus SH Ho¹ (1. National University of Singapore (Singapore), 2. Kyoto University (Japan), 3. New York University Shanghai (China))

[SY-54-02]

The impact of the COVID-19 pandemic on mental health – a psychoneuroimmunological perspective

*Roger Ho¹ (1. National University of Singapore (Singapore))

[SY-54-03]

My Journey: From Clinical Work to Systematic Reviews, Randomized Trials, and Smartphone Apps

*Toshi A. Furukawa¹ (1. Kyoto University (Japan))

[SY-54-04]

A reflection on my journey to the East and a career to help the underserved

*Brian J Hall¹ (1. New York University (Shanghai) (China))

[SY-54-05]

Precision Psychiatry in Practice: Leveraging fNIRS and Machine Learning for Scalable Diagnostic Biomarkers

*Cyrus Su Hui Ho¹ (1. National University of Singapore (Singapore))

Symposium | Influential Scientific Authors : [Symposium 54] Sharing of Impactful Research Findings from Highly Cited Researchers in the field of Psychiatry, Psychology, and Neuroscience in Asia

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Moderator: Roger Ho (National University of Singapore), Toshiaki A. Furukawa (Kyoto University)

[SY-54-01] Sharing of Impactful Research Findings from Highly Cited Researchers in the field of Psychiatry, Psychology, and Neuroscience in Asia

*Roger Ho¹, *Toshiaki A Furukawa², *Brian J Hall³, *Cyrus SH Ho¹ (1. National University of Singapore (Singapore), 2. Kyoto University (Japan), 3. New York University Shanghai (China))

キーワード : Highly Cited Researchers、Asia、Psychiatry、Psychology、Neuroscience

Clarivate Analytics has been recognising outstanding researchers who have demonstrated significant and far-reaching influence in their fields through its annual Highly Cited Researchers list. This compilation highlights global researchers who have exhibited remarkable influence, as evidenced by publications ranked in the top 1 per cent by citations for their respective fields and publication year in the Web of Science over the past decade. Of the world's population of scientists, Highly Cited Researchers are 1 in 1,000. In 2024, there were only three researchers from China, Japan and Singapore who were acknowledged as Highly Cited Researchers in the field of Psychiatry and Psychology in Asia. This symposium provides a platform for three Highly Cited Researchers in the field of Psychiatry and Psychology and one Highly Cited Researcher in the field of Neuroscience to share their impactful research findings. Their contributions span diverse methods and focus, reflecting a relentless pursuit of excellence and groundbreaking discoveries. Professor Toshiaki Furukawa from Kyoto will share his clinical research findings from systematic reviews, randomized clinical trials, and ultimately, technology such as smartphone apps. Professor Brian Hall from Shanghai will share his research findings from digital mental health innovations, research on the mental health of migrants, and cultural factors in mental health. Professor Roger Ho from Singapore will share his research on the impact of the COVID-19 pandemic on mental health in the general population and psychiatric patients, from a psycho-neuro-immunological perspective. Dr Cyrus Ho from Singapore will share his research in neuroscience, focusing on the application of functional near-infrared spectroscopy and artificial intelligence to establish precision psychiatry. This symposium will inspire psychiatry residents and young researchers who are looking for role models who continue to push the frontiers of Psychiatry, Psychology and Neuroscience in the Pacific Rim.

Symposium | Influential Scientific Authors : [Symposium 54] Sharing of Impactful Research Findings from Highly Cited Researchers in the field of Psychiatry, Psychology, and Neuroscience in Asia

2025年9月26日(金) 16:30 ~ 18:00 Session Room 8 (Meeting Room 1)

[Symposium 54] Sharing of Impactful Research Findings from Highly Cited Researchers in the field of Psychiatry, Psychology, and Neuroscience in Asia

Moderator: Roger Ho (National University of Singapore), Toshiaki A. Furukawa (Kyoto University)

[SY-54-02] The impact of the COVID-19 pandemic on mental health – a psychoneuroimmunological perspective

*Roger Ho¹ (1. National University of Singapore (Singapore))

キーワード : COVID-19、Depression、Anxiety、Burnout、Immunological

The COVID-19 pandemic provides a golden opportunity to conduct the psycho-neuro-immunological research. In 2020, Professor Roger Ho led the China team to conduct one of the first COVID-19 mental health studies (53.8% of respondents rated the psychological impact of the outbreak as moderate or severe; 16.5% reported moderate to severe depressive symptoms; 28.8% reported moderate to severe anxiety symptoms; and 8.1% reported moderate to severe stress levels). Then he worked with international collaborators and studied the impact on healthcare workers (5.3% screened positive for moderate to very-severe depression; 8.7% for moderate to extremely-severe anxiety, 2.2% for moderate to extremely-severe stress). Prof Ho conducted comparative studies and found that the use of face masks was a protective factor for mental health in China but not in Western countries. Professor Ho was able to connect US and Chinese researchers to conduct a cross-country comparison despite political differences. His study found that Americans reported more physical symptoms, contact history, and perceived likelihood of contracting COVID-19. Americans also reported more stress and depressive symptoms, while the Chinese reported higher acute-traumatic stress symptoms. For psychiatric patients, more than one-third fulfilled the diagnostic criteria for post-traumatic stress disorder (PTSD), and more than one-quarter suffered from moderately severe to severe insomnia. Psychiatric patients also showed high acceptance and willingness to pay for the COVID-19 vaccine. Similarly, COVID-19 patients reported a higher psychological impact of the outbreak than psychiatric patients and healthy controls, with half of them having clinically significant symptoms of PTSD. Functional neuroimaging studies found that past COVID-19 infection may not affect frontotemporal cortex function. As the COVID-19 pandemic continues, Prof Ho and his research team developed COVID-19 Burnout Views Scale. The relationship among COVID-19 infection, psychiatric symptoms and inflammatory responses will be discussed in this seminar.

Symposium | Influential Scientific Authors : [Symposium 54] Sharing of Impactful Research Findings from Highly Cited Researchers in the field of Psychiatry, Psychology, and Neuroscience in Asia

2025年9月26日(金) 16:30 ~ 18:00 Session Room 8 (Meeting Room 1)

[Symposium 54] Sharing of Impactful Research Findings from Highly Cited Researchers in the field of Psychiatry, Psychology, and Neuroscience in Asia

Moderator: Roger Ho (National University of Singapore), Toshiaki A. Furukawa (Kyoto University)

[SY-54-03] My Journey: From Clinical Work to Systematic Reviews, Randomized Trials, and Smartphone Apps

*Toshi A. Furukawa¹ (1. Kyoto University (Japan))

キーワード : Systematic reviews、Clinical trials、Smartphone CBT

I obtained my MD at the University of Tokyo in 1985. After being Visiting Professor at McMaster University in 1997 and becoming Professor and Chair in the Department of Psychiatry, Nagoya City University in 1998, I moved to Kyoto University in 2010 and retired in 2024. I am currently Program-Specific Professor at Kyoto University Office of Institutional Advancement and Communications.

I wear three hats of clinical epidemiologist, cognitive-behavioral therapist, and psychiatrist. I have been conducting systematic reviews, running randomized trials, performing meta-epidemiological research, and developing smartphone CBT apps in the past three decades. I am author and co-author of over 650 peer-reviewed original articles in English as well as JAMA Users' Guides to the Medical Literature 3rd Ed (McGraw Hill, 2014). I have been nominated Clarivate Highly Cited Researcher for four consecutive years in 2021-2024. My h-index is 105 on Google Scholar and 80 on Web of Science (with 3 Hot Papers and 26 Highly Cited Papers: B-9259-2011) as of April 26, 2025.

In this presentation I will share my early days as a clinical psychiatrist, then some representative systematic reviews and randomized controlled trials that I have conducted, and finally introduce my smartphone CBT app. It is my great honor to share my academic journey with young colleagues. And it will be a great pleasure for me if you can learn from my experiences, both good and bad.

For more details you may enjoy reading: Venkatesan P (2020) Toshi A Furukawa: pursuing humankind's best possible care. *Lancet Psychiatry*, 7, 393.

<https://www.ncbi.nlm.nih.gov/pubmed/32353273> and Furukawa TA (2024) Scientific Autobiography of a Japanese Psychiatrist Turned Cognitive-Behavioral Therapist, Clinical Epidemiologist and Smartphone App Developer. *American Journal of Geriatric Psychiatry*, 32, 1166-1176. <https://www.ncbi.nlm.nih.gov/pubmed/38926055>

Symposium | Influential Scientific Authors : [Symposium 54] Sharing of Impactful Research Findings from Highly Cited Researchers in the field of Psychiatry, Psychology, and Neuroscience in Asia

2025年9月26日(金) 16:30 ~ 18:00 Session Room 8 (Meeting Room 1)

[Symposium 54] Sharing of Impactful Research Findings from Highly Cited Researchers in the field of Psychiatry, Psychology, and Neuroscience in Asia

Moderator: Roger Ho (National University of Singapore), Toshiaki A. Furukawa (Kyoto University)

[SY-54-04] A reflection on my journey to the East and a career to help the underserved

*Brian J Hall¹ (1. New York University (Shanghai) (China))

キーワード : Digital mental health, migrants, China

I received my Ph.D. in Clinical Psychology from Kent State University in 2011 and completed postdoctoral training in Psychiatric Epidemiology and Global Mental Health at the Johns Hopkins Bloomberg School of Public Health. In 2013 I was awarded a Fogarty Global Health Fellowship by the NIH Fogarty International Center, and became the last global health fellow to China where I remained ever since. Since 2020, I have served as Professor of Global Public Health and Founding Director of the Center for Global Health Equity at NYU Shanghai. I also hold affiliated and adjunct professorships at Sun Yat-sen University where my Fogarty was hosted, and at the Shanghai Mental Health Center. I am currently Editor-in-Chief of *Epidemiology and Psychiatric Sciences*. As a global mental health researcher, licensed clinical psychologist, and psychiatric epidemiologist, I wear three hats: conducting large-scale mental health studies, advising WHO and UN agencies, and mentoring early-career scientists. Over the past two decades, my work has centered on the mental health of marginalized populations—including migrants, refugees, and displaced communities—through digital health interventions, longitudinal studies, and mixed-method designs. I have authored over 330 peer-reviewed publications and was named a Clarivate Highly Cited Researcher from 2022 to 2024. In this presentation, I will trace the evolution of my career—from clinical training and early research in trauma to my current work co-developing digital mental health tools and shaping research agendas for the WHO Western Pacific Region. It is a privilege to reflect on these experiences with colleagues, especially younger scholars navigating similar paths. I hope my journey offers insights not just into research success, but into resilience, collaboration, and systems change.

Symposium | Influential Scientific Authors : [Symposium 54] Sharing of Impactful Research Findings from Highly Cited Researchers in the field of Psychiatry, Psychology, and Neuroscience in Asia

2025年9月26日(金) 16:30 ~ 18:00 Session Room 8 (Meeting Room 1)

[Symposium 54] Sharing of Impactful Research Findings from Highly Cited Researchers in the field of Psychiatry, Psychology, and Neuroscience in Asia

Moderator: Roger Ho (National University of Singapore), Toshiaki A. Furukawa (Kyoto University)

[SY-54-05] Precision Psychiatry in Practice: Leveraging fNIRS and Machine Learning for Scalable Diagnostic Biomarkers

*Cyrus Su Hui Ho¹ (1. National University of Singapore (Singapore))

キーワード : Precision Psychiatry、Functional near-infrared spectroscopy、Machine learning、Biomarkers

Psychiatry continues to face a critical gap in the availability of definitive, objective biomarkers for diagnosis, prognosis, and treatment stratification. Functional near-infrared spectroscopy (fNIRS), a portable and non-invasive neuroimaging modality, holds promise in addressing this need, particularly when combined with machine learning techniques. In this presentation, I will share findings from our research leveraging fNIRS to differentiate between major psychiatric conditions, including depression, bipolar disorder, and borderline personality disorder. I will demonstrate how machine learning models can enhance diagnostic accuracy and offer potential for predicting treatment responses. Furthermore, I will explore the integration of fNIRS data with other omics-based biomarkers to further refine diagnostic precision. Crucially, this approach may be particularly valuable in low-resource settings, where access to psychiatric expertise is limited, enabling earlier detection and timely intervention. This work marks a meaningful step toward scalable, data-driven solutions that advance the vision of precision psychiatry.

Oral

2025年9月26日(金) 9:00 ~ 10:30 Session Room 8 (Meeting Room 1)

Oral 9

[O-9-01]

Rethinking Psychosis: Inuit Perspectives on Parallel and Plural Realities*Dominique Gaulin¹ (1. Université de Montréal (Canada))

[O-9-02]

Unrecognized cases of psychosis in disability evaluations*Brad Booth^{1,2}, Dominique Bourget^{1,2}, Sarah Mamane^{1,2} (1. Univ. Ottawa (Canada), 2. Royal Ottawa Mental Health Centre (Canada))

[O-9-03]

The correlation between recovery in schizophrenia, macroeconomic and socio-cultural indices, a meta-analysisDonato Zupin^{4,5,6,7}, *Stefano Roberti¹, Giulio Castelpietra³, Luca Pellegrini², Giorgia D'Aulerio², Valerio Camela³, Salma Mohellebi³, Umberto Albert² (1. Università degli Studi di Udine (Italy), 2. Università degli Studi di Trieste (Italy), 3. Centre Neuchâtel de Psychiatrie (Switzerland), 4. ASUGI (Azienda Sanitaria Universitaria Giuliano Isontina) (Italy), 5. Transcultural Psychiatry Section, Italian Society of Psychiatry (Italy), 6. Italian Institute of Transcultural Mental Health (Italy), 7. World Association of Cultural Psychiatry (Italy))

[O-9-04]

Measuring What Matters: Patient Centered Outcome Measures of Goal-Directed Care for People with Serious Mental Illness*Joshua Breslau¹, Caroline Blaum², Nev Jones³ (1. RAND Corporation (United States of America), 2. National Committee for Quality Assurance (United States of America), 3. University of Pittsburgh (United States of America))

[O-9-05]

Caffeine Consumption and Schizophrenia: A Systematic Review and Meta-analysis of Cognitive, Symptomatic, and Functional Outcomes*ZHEN ZHOU BENJAMIN WONG¹, *Soh Qi Rui, *Soh Qi Xu (1. Graylands Hospital (Australia))

[O-9-06]

Early psychosis is characterized by white matter abnormalities in fiber structures supporting local connectivity*YOSHITO SAITO¹, Warda T. Syeda^{1,2}, Cassandra M.J. Wannan^{1,3,4}, Yasmin Gurleyen¹, Marta Rapado-Castro^{1,5}, Maria A. Di Biase^{1,6,7,8}, Remika Mito¹, Christos Pantelis^{1,9,10} (1. Department of Psychiatry, The University of Melbourne (Australia), 2. Melbourne Brain Centre Imaging Unit, Department of Radiology, The University of Melbourne (Australia), 3. Centre for Youth Mental Health, The University of Melbourne (Australia), 4. Orygen (Australia), 5. Department of Child and Adolescent Psychiatry, Hospital General Universitario Gregorio Marañón, Universidad Complutense (Spain), 6. Systems Group, Department of Psychiatry, The University of Melbourne (Australia), 7. Stem Cell Disease Modelling Lab, Department of Anatomy and Physiology, The University of Melbourne (Australia), 8. Department of Psychiatry, Brigham and Women's Hospital, Harvard Medical School (United States of America), 9. Western Centre for Health Research & Education, University of Melbourne & Western Health, Sunshine Hospital (Australia), 10. Monash Institute of Pharmaceutical Sciences (MIPS), Monash University (Australia))

Oral

2025年9月26日(金) 9:00 ~ 10:30 Session Room 8 (Meeting Room 1)

Oral 9**[O-9-01] Rethinking Psychosis: Inuit Perspectives on Parallel and Plural Realities**

*Dominique Gaulin¹ (1. Université de Montréal (Canada))

キーワード：psychotic phenomena、parallel and plural realities、epistemic injustice、coloniality、recovery

In dominant psychiatric discourse, psychotic phenomena are often framed as pathological disruptions of reality. However, among the Inuit of Nunavik, Quebec, Canada, these experiences are understood in more diverse ways, shaped by spiritual, social, biological and historical contexts. This presentation will explore the findings of an ethnographic study that redefines so-called psychotic experiences as “parallel and plural realities” (RPP). Based on interviews with Inuit in Nunavik, one of the Indigenous nations of Quebec (Canada) affected by these experiences—individuals, families, traditional knowledge holders, and mental health workers—this research highlights four main explanatory frameworks: spiritual interpretations (e.g., spirits, nature, religious forces), psychosocial factors (e.g., trauma, substance use), structural determinants (e.g., colonial history, social inequalities), and biological explanations. The concept of recovery is also explored through Inuit perspectives, emphasizing holistic, relational, and culturally grounded approaches rather than symptom suppression alone. This said, despite efforts toward cultural safety, the prevailing mental health system often dismisses Inuit knowledge, reinforcing epistemic violence and limiting access to care that aligns with local worldviews. This raises critical questions: How can we decolonize mental health practices? How do we make space for multiple ways of understanding distress and healing? This presentation will conclude with reflections on rethinking mental health interventions in Nunavik by integrating Inuit epistemologies and fostering culturally relevant, collaborative approaches. The goal is to move beyond mere recognition of cultural differences and toward systemic change that honors and includes Indigenous knowledge in mental health care

Oral

2025年9月26日(金) 9:00 ~ 10:30 Session Room 8 (Meeting Room 1)

Oral 9**[O-9-02] Unrecognized cases of psychosis in disability evaluations**

*Brad Booth^{1,2}, Dominique Bourget^{1,2}, Sarah Mamane^{1,2} (1. Univ. Ottawa (Canada), 2. Royal Ottawa Mental Health Centre (Canada))

キーワード : Forensic psychiatry、Disability evaluations、Psychotic disorders

Background:

Independent medical evaluations (IMEs) are often sought for determination of eligibility for disability benefits. At times, individuals with obvious or subtle psychosis present in the context of these IMEs. There is little literature on the topic. The current study reviews psychosis and schizophrenia spectrum disorders in IMEs for disability claimants.

Methods:

The authors completed a retrospective chart review of 705 consecutive disability independent medical examinations (IME's) for disability dating back to 2010 drawn from forensic work by BDB. Data was extracted for patients who consented to research where a primary psychotic disorder was likely or suspected. Numerous standardized scales were administered and available for analysis, including validity measures.

Results:

Out of the approximately 705 consecutive IME, 27 (3.8%) were found to have a likely psychotic elements to their presentation, such as a schizophrenia spectrum diagnosis. Of this sample, 23 consented to use of their data in research. Nearly all were diagnosed with a new-onset psychotic disorder. The average patient had 2.5 comorbid DSM diagnoses suggesting high comorbidity. Many endorsed numerous psychosocial stressors.

Discussion:

Experts involved in IME's and other forensic evaluations must be aware of the potential of unrecognized/subtle psychotic signs. In approximately 3.8% of a large disability evaluation sample, psychosis was the likely cause of disability. Many had not been recognized as being psychotic and were not on appropriate treatment. Once the correct diagnosis of psychosis or a schizophrenia spectrum disorder is made, the clinician can comment on the potential for improvement over a predictable course. The expert will be in a position to offer recommendations, such as pharmacological treatment, psychiatric and psychological follow-up, and other relevant advice.

Oral

2025年9月26日(金) 9:00 ~ 10:30 Session Room 8 (Meeting Room 1)

Oral 9

[O-9-03] The correlation between recovery in schizophrenia, macroeconomic and socio-cultural indices, a meta-analysis

Donato Zupin^{4,5,6,7}, *Stefano Roberti¹, Giulio Castelpietra³, Luca Pellegrini², Giorgia D'Aulerio², Valerio Camela³, Salma Mohellebi³, Umberto Albert² (1. Università degli Studi di Udine (Italy), 2. Università degli Studi di Trieste (Italy), 3. Centre Neuchâtel de Psychiatrie (Switzerland), 4. ASUGI (Azienda Sanitaria Universitaria Giuliano Isontina) (Italy), 5. Transcultural Psychiatry Section, Italian Society of Psychiatry (Italy), 6. Italian Institute of Transcultural Mental Health (Italy), 7. World Association of Cultural Psychiatry (Italy))

キーワード : schizophrenia、recovery、remission、socio-cultural indices、macroeconomic indices

One of the most debated results among those that emerged from the studies conducted by the World Health Organization since the late 1960s (IPSS, DOSMed, ISoS) is the apparent better prognosis of schizophrenia in developing countries compared to developed countries. The cause of this result has never been identified with certainty, but among the possible explanations highlighted by the authors, cultural differences between the countries in which the studies were conducted were considered by the WHO as the most probable explanation. However, the lack of standardized systems to measure cultural differences between developing and developed countries makes it difficult to operationalize a systematic comparison.

In order to ensure greater standardization of the variables considered, we used macroeconomic indices of growth and industrialization as proxies for cultural differences between developing and developed countries, hypothesizing that rapid changes in the economy of a nation correlate with cultural changes in developing countries.

We therefore performed a systematic review and meta-analysis to compare the remission rates in schizophrenia (defined according to ICD or DSM criteria) and some of the main indices of wealth and economic, industrial and urban development determined according to internationally validated economic criteria.

The screening of the studies included 8822 articles and led to the inclusion of 22 studies that presented sufficient data to define the remission rate in schizophrenia according to the main definitions used in the literature.

From the initial analysis of the studies, two main significant results emerged: an inverse relationship between the remission rates and the greater per capita wealth of the nations and their urbanization and a significant positive correlation between a greater speed of economic development and a greater prevalence of remission in schizophrenia.

Oral

2025年9月26日(金) 9:00 ~ 10:30 Session Room 8 (Meeting Room 1)

Oral 9

[O-9-04] Measuring What Matters: Patient Centered Outcome Measures of Goal-Directed Care for People with Serious Mental Illness

*Joshua Breslau¹, Caroline Blaum², Nev Jones³ (1. RAND Corporation (United States of America), 2. National Committee for Quality Assurance (United States of America), 3. University of Pittsburgh (United States of America))

キーワード : Outpatient Psychiatry、Quality Measurement、Person-Centered Care

Measurement of the quality of mental health care can help guide improvements in care, but existing measures do not assess how well care addresses needs as perceived by patients. Patient-centered outcomes measures are a potential strategy for filling this gap. This ongoing study is developing quality measures that assess how well care for adults with serious mental illness is helping service users to attain goals that are important to them. The measures use an approach called Goal Attainment Scaling (GAS), which combines personalization of goals with standardization of measurement. In GAS, clinicians work with their clients to identify a goal and create a personalized scale for measuring progress toward that goal. Clinicians are trained to help clients develop attainable goals based on their values and preferences. Progress towards the goal is then assessed at follow-up meetings within 2 to 6 months. GAS has been used in long term care for the elderly and is being adapted for use in serious mental illness care. This paper presents preliminary quantitative and qualitative findings from five integrated behavioral health clinics in Texas and Arizona, where the measures are being implemented. Preliminary findings indicate successful introduction of the measures into practice, with potential limitations in long-term follow-up that should be addressed in future work. Clinic administrators and case managers report effective integration of the measures into routine care and advantages over prior approaches to goal-setting. In particular, the ability to focus on realistic, concrete, measurable progress towards attainable goals is perceived as an advantage over prior approaches, which focused on more general goals without clearly defined criteria for progress. The approach shows promise, but may need additional adaptation to the use in behavioral health care.

Oral

2025年9月26日(金) 9:00 ~ 10:30 Session Room 8 (Meeting Room 1)

Oral 9

[O-9-05] Caffeine Consumption and Schizophrenia: A Systematic Review and Meta-analysis of Cognitive, Symptomatic, and Functional Outcomes

*ZHEN ZHOU BENJAMIN WONG¹, *Soh Qi Rui, *Soh Qi Xu (1. Graylands Hospital (Australia))

キーワード : Schizophrenia、Caffeine、Coffee、Cognitive function、Symptoms

Background: Schizophrenia is a complex mental disorder characterized by cognitive deficits, persistent symptoms, and functional impairment. Caffeine, a commonly consumed psychoactive substance, has plausible effects on cognition and mood. However, its impact on individuals with schizophrenia remains unclear. This review examines whether caffeine consumption affects cognitive symptoms, symptom management, and functional outcomes in individuals with schizophrenia.

Method: A systematic literature search was conducted for articles up to 30 December 2024 across PubMed, Cochrane Library, PsycINFO, Embase, Emcare, Medline. Studies were eligible if they were full-text, English-language articles involving adults with schizophrenia that compared different levels of caffeine intake (e.g., high vs. low or none) and reported on at least one outcome related to cognition, symptoms, or functioning. Cohort, cross-sectional, and clinical trial designs were included. Data were synthesized using a random-effects model, with effect sizes calculated by Hedges' g and heterogeneity assessed by I^2 statistics.

Results: Of 252 articles screened, 11 studies ($n=1,406$) met inclusion criteria. Findings were mixed: some studies reported improvements in cognitive performance and working memory, while others noted inconsistent associations with symptom management—higher caffeine intake was sometimes linked to fewer negative symptoms but more positive ones. Meta-analyses revealed non-significant trends in overall symptom severity (measured with BRPS and NOSIE), and functional outcomes (e.g., hospital stay and global functioning) were similarly variable. Physiologically, caffeine was found to reduce cerebral blood flow, with no statistically significant effects on blood pressure or pulse.

Conclusion: Caffeine may have mixed effects in schizophrenia, with potential positive effects on cognitive and negative symptom whilst possibly worsening positive symptoms. Functional and physiological impacts are unclear, underscoring the need for further research to guide clinical recommendations.

Oral

2025年9月26日(金) 9:00 ~ 10:30 Session Room 8 (Meeting Room 1)

Oral 9

[O-9-06] Early psychosis is characterized by white matter abnormalities in fiber structures supporting local connectivity

*YOSHITO SAITO¹, Warda T. Syeda^{1,2}, Cassandra M.J. Wannan^{1,3,4}, Yasmin Gurleyen¹, Marta Rapado-Castro^{1,5}, Maria A. Di Biase^{1,6,7,8}, Remika Mito¹, Christos Pantelis^{1,9,10} (1. Department of Psychiatry, The University of Melbourne (Australia), 2. Melbourne Brain Centre Imaging Unit, Department of Radiology, The University of Melbourne (Australia), 3. Centre for Youth Mental Health, The University of Melbourne (Australia), 4. Orygen (Australia), 5. Department of Child and Adolescent Psychiatry, Hospital General Universitario Gregorio Marañón, Universidad Complutense (Spain), 6. Systems Group, Department of Psychiatry, The University of Melbourne (Australia), 7. Stem Cell Disease Modelling Lab, Department of Anatomy and Physiology, The University of Melbourne (Australia), 8. Department of Psychiatry, Brigham and Women's Hospital, Harvard Medical School (United States of America), 9. Western Centre for Health Research & Education, University of Melbourne & Western Health, Sunshine Hospital (Australia), 10. Monash Institute of Pharmaceutical Sciences (MIPS), Monash University (Australia))

キーワード : Early psychosis、Superficial white matter、Diffusion-weighted imaging、Cognition、Schizophrenia-spectrum disorders

Background

While long-range white matter (WM) connectivity has been widely studied in schizophrenia-spectrum disorders (SSDs), recent evidence highlights the importance of local network disruptions. Superficial white matter (SWM), located between cortex and WM, comprises short association fibers supporting local connectivity. As SWM matures in the latter stages of development relative to deep WM structures, it may be particularly vulnerable to neurodevelopmental disruptions observed in SSDs. However, its complex fiber architecture and proximity to the cortex pose challenges for conventional diffusion tensor imaging.

Methods To overcome these limitations, we applied an advanced diffusion MRI approach to assess fiber density (FD) in the SWM of 78 individuals with early psychosis (age 22.0 ± 3.0 , 45% female) and 78 controls (age 21.8 ± 3.2 , 45% female).

Results Early psychosis individuals showed widespread reductions in SWM FD, particularly in occipital, temporal, parietal, and insular regions, whereas no significant group differences were detected using fractional anisotropy from tensor imaging. FD reductions were associated with reduced cortical thickness ($p < 0.0005$, $r = 0.32$) and surface area ($p = 0.006$, $r = 0.23$), indicating coordinated cortex-WM alterations. SWM FD was associated with processing speed ($p = 0.0029$) and working memory ($p = 0.048$). Further, SWM mediated the relationship between cortical structure and processing speed in frontal and parietal regions.

Conclusions These findings highlight SWM, supporting local network connectivity, as a tissue compartment showing widespread alterations in SSDs. By implementing an advanced diffusion MRI technique, we were able to assess changes that were specific to the complex WM at the cortical boundary, and to demonstrate functionally important alterations in this difficult-to-characterize tissue compartment.

Oral2025年9月26日(金) 10:40 ~ 12:10  Session Room 8 (Meeting Room 1)**Oral 10**

[O-10-01]

Cultural identities and personal subjectivities: Developing Critical Reflexivity to Address Biases and Engage in Culturally Safe Practice with Justice-Involved women

*Dominique Gaulin¹, *Janique Johnson-Lafleur², Elise Bourgeois-Guérin³ (1. Université de Montréal (Canada), 2. McGill University (Canada), 3. Téluq - Université du Québec à Montréal (Canada))

[O-10-02]

Breaking barriers - Advancing mental health support to women in rural regions of Bali

*Cokorda Bagus Jaya Lesmana¹, Cokorda Rai Adi Pramartha¹, Na Liu², Mingyue Guo², Manoj Abraham Thomas², Linh Khanh Chu², Putu Aryani¹ (1. Udayana University (Indonesia), 2. The University of Sydney (Australia))

[O-10-03]

Anxiety, depression, and suicidal ideation among transgender and gender diverse individual with gender-affirming care in South Korea by age group: multicenter cross-sectional study

*Sun Young Lee^{1,2}, Ssirai Kim², Eunsil Lee^{2,3} (1. Seoul National University Hospital (Korea), 2. Korean Initiative for Transgender Health (Korea), 3. Soonchunhyang University Hospital (Korea))

[O-10-04]

Critical Issues in Men's Mental Health: Cross-Cultural Comparisons Between Japan and the West

*Paul Capobianco¹ (1. Nanzan Anthropological Institute (Japan))

[O-10-05]

Engaging in parental alienation when undergoing separation and divorce

*Melina Nicole Kyranides¹, Jessica Hafetz² (1. University of Cyprus (Cyprus), 2. The University of Edinburgh (UK))

Oral

2025年9月26日(金) 10:40 ~ 12:10 Session Room 8 (Meeting Room 1)

Oral 10

[O-10-01] Cultural identities and personal subjectivities: Developing Critical Reflexivity to Address Biases and Engage in Culturally Safe Practice with Justice-Involved women

*Dominique Gaulin¹, *Janique Johnson-Lafleur², Elise Bourgeois-Guérin³ (1. Université de Montréal (Canada), 2. McGill University (Canada), 3. Téluq - Université du Québec à Montréal (Canada))

キーワード：cultural identities、Community of practice、justice involved women、Reflexivity、positionality

Justice-involved women from racialized communities are disproportionately represented in the Canadian criminal justice system. Indigenous women, in particular, experience systemic violence, intergenerational trauma, and marginalization, shaped by historical and ongoing colonial structures. These realities underscore the importance of culturally safe and reflexive practices that account for cultural identities, personal subjectivities, and social positionalities in community-based and correctional services. However, practitioners often struggle to critically engage with their own identities and positionalities, question ingrained assumptions, and adjust their professional posture when working in intercultural settings. This presentation explores how the Elizabeth Fry Society of Quebec (EFSQ) Community of Practice (CoP) fosters staff awareness of positionality, identity, and power dynamics in their work with justice-involved women. Using a participatory research approach—including ethnographic observation, group discussions, and semi-structured interviews—this study examines both the CoP's implementation process and its impact on practitioners. Preliminary findings suggest that the CoP provides a critical and reflective learning space where staff can gain awareness of their own subjectivities, recognize biases, and navigate the complexities of intercultural interactions. A key component of this process involves analyzing transference and countertransference in intercultural contexts, where practitioners' own experiences, cultural backgrounds, and unconscious biases can shape their perceptions of and interactions with the women they support. By examining the emotional and psychological dynamics at play in intervention, staff members become more aware of the implicit projections and relational patterns that may reinforce or challenge existing power structures. By placing cultural identities, personal subjectivities, and relational dynamics at the center of intervention, this research highlights the transformative potential of critical reflexivity in decolonizing social practices. Findings contribute to the growing, yet still limited, literature on intercultural competency, self-awareness, transference, countertransference, and ethical engagement in Quebec's judicial and social service systems.

Oral

2025年9月26日(金) 10:40 ~ 12:10 Session Room 8 (Meeting Room 1)

Oral 10**[O-10-02] Breaking barriers - Advancing mental health support to women in rural regions of Bali**

*Cokorda Bagus Jaya Lesmana¹, Cokorda Rai Adi Pramartha¹, Na Liu², Mingyue Guo², Manoj Abraham Thomas², Linh Khanh Chu², Putu Aryani¹ (1. Udayana University (Indonesia), 2. The University of Sydney (Australia))

キーワード : mental health、Bali、cultural integration、women's health

Introduction:

In rural Bali, women face significant mental health challenges exacerbated by cultural stigma, scarce healthcare resources, and geographic isolation. These factors contribute to the systematic under-recognition and under-treatment of mental health conditions, resulting in prolonged psychological distress and diminished overall well-being. This study aims to examine the existing barriers to accessing mental health support and to inform the development of effective, culturally sensitive, community-based strategies specifically tailored to the needs of women in rural Balinese communities.

Methods:

This study employed an exploratory qualitative design in Karangasem District, Bali. Between November 2024 and January 2025, semi-structured interviews were conducted with 50 female residents and 4 local health providers. Interview transcripts were analyzed thematically, with particular attention to community language, help-seeking behaviors, and systemic gaps in mental health service provision.

Results:

Findings revealed critically limited mental health literacy. Women frequently used reductive terms like "buduh" (crazy), preventing nuanced understanding of milder conditions such as anxiety or depression. Many hesitated to share or hide psychosocial distresses due to normative gender expectations and fear of social judgment—a pervasive stigma, validated by health workers. Furthermore, a lack of awareness regarding available mental health services significantly hindered timely support.

Discussion:

This study underscores the urgent need for culturally adapted, accessible mental health services reflecting local beliefs and practices. Integrating traditional healing with modern therapies and using digital platforms for health promotion and self-screening, can enhance engagement and early symptom reporting. Addressing these cultural and systemic gaps via community-based initiatives offers a sustainable model for improving women's mental health in rural Bali and similar regions.

Conclusion:

Breaking barriers to mental health support for women in rural Bali requires an integrative approach that bridges cultural sensitivities and systemic service gaps. Scaling the proposed pilot model could serve as a blueprint for addressing similar challenges in other underserved regions.

Oral

2025年9月26日(金) 10:40 ~ 12:10 Session Room 8 (Meeting Room 1)

Oral 10

[O-10-03] Anxiety, depression, and suicidal ideation among transgender and gender diverse individual with gender-affirming care in South Korea by age group: multicenter cross-sectional study

*Sun Young Lee^{1,2}, Ssirai Kim², Eunsil Lee^{2,3} (1. Seoul National University Hospital (Korea), 2. Korean Initiative for Transgender Health (Korea), 3. Soonchunhyang University Hospital (Korea))

キーワード : Transgender and gender-diverse persons、 Depression、 Suicide

Backgrounds

Little is known about mental health of transgender and gender-diverse (TGD) individuals with gender-affirming care (GAC) in South Korea. This study aimed to investigate anxiety, depression, and suicidal ideation of TGD individuals by age group.

Methods

A multicenter prospective survey study was conducted from January to October 2024 at eight medical institutions providing GAC in Korea. The study population was TGD individuals with GAC. Age groups were categorized into 4 groups based on age distribution (18~24, 25~29, 30~39, and over 40). The study outcomes were depression evaluated by patient health questionnaire-9 (PHQ-9), anxiety assessed by generalized anxiety disorder-7 (GAD-7), and life-long and past 12-month self-harm and suicidal ideation, plan, and attempt. Multivariable logistic regression analyses were conducted to evaluate associated factors for study outcome.

Result

Total 844 TGD individual responded including 442 transwomen (52.4%), 258 transmen (30.6%), 100 nonbinary assigned males at birth (AMAB) (11.8%), and 44 nonbinary assigned females at birth (AFAB) (4.6%). The median (interquartile range) age was 28 (24-33) years old. Half were in their 20s (18~24 29.0%, 25~29 30.5%, 30~39 31.8%, and over 40 8.8%). A total of 25.7% reported moderate to severe depression and 17.3% experienced moderate to severe anxiety.

Respondents experienced self-harm (51.9%/13.0%), suicidal ideation (75.4%/30.8%), plan (48.0%/16.1%), and attempt (32.6%/5.2%) in the life-long period and past 12 months, and all decreased with older age group (all p-value<0.01). The younger age group, transwoman and nonbinary AMAB identity was associated with higher risk of depression, anxiety, and past 12-month suicidal ideation in logistic regression model.

Conclusion

Korean TGD individuals experienced various mental health problems including depression, anxiety, and suicidal ideation, plan, and attempts. This was particularly serious in young TGD individuals in their 20s. Mental health support is needed for young TGD individuals in South Korea.

Oral

2025年9月26日(金) 10:40 ~ 12:10 Session Room 8 (Meeting Room 1)

Oral 10**[O-10-04] Critical Issues in Men's Mental Health: Cross-Cultural Comparisons Between Japan and the West**

*Paul Capobianco¹ (1. Nanzan Anthropological Institute (Japan))

キーワード : Cross-Cultural Psychiatry、Men's Mental Health、Masculinity and Mental Health、Japan、Mental Health Disparities

Over the past two decades, research on men's mental health has expanded considerably. Interdisciplinary scholars have increasingly examined persistent disparities affecting men's mental health and well-being and have debated how best to address these challenges in clinical and public health contexts. Many such studies seek to foster men's mental health while avoiding the tendency to blame men for their mental health challenges, a perspective notably absent from much research on the topic. However, the overwhelming majority of this research has been conducted in Western settings, particularly in North America, the UK, and Australia. There are thus significant gaps in our understanding of men's mental health issues in non-Western contexts. To better understand men's mental health from a cross-cultural perspective, this presentation draws on key findings from authoritative reviews of Western literature and compares them with relevant clinical and psychological studies from Japan. Using a selective literature review, the presentation highlights five recurring themes in Western studies: men's disproportionately high suicide rates, reluctance to seek psychological help, higher rates of substance abuse, underdiagnosis of depression, and the role of masculinity in shaping mental health outcomes. The prevalence of these critical issues in the Japanese context suggests their transnational and transcultural relevance. In addition, the review identifies culturally specific mental health issues unique to Japan, further expanding our understanding of how societal norms shape male psychological distress. By contextualizing these issues within both Western and Japanese frameworks, this presentation discusses the implications of these issues for men's mental health research in cross-cultural and global contexts. The presentation concludes by considering how recognizing both these commonalities and culturally distinct issues can inform future public mental health interventions and policy approaches to men's mental health.

Oral

2025年9月26日(金) 10:40 ~ 12:10 Session Room 8 (Meeting Room 1)

Oral 10**[O-10-05] Engaging in parental alienation when undergoing separation and divorce**

*Melina Nicole Kyranides¹, Jessica Hafetz² (1. University of Cyprus (Cyprus), 2. The University of Edinburgh (UK))

キーワード：Parental Alienation、Parent-Child Bond Breaking Behaviors、Relational Aggression、Psychopathic Traits、Narcissistic Traits

Hostile co-parenting can escalate during separation and divorce with significant ramifications on family relationships. The purpose of the present study was to determine how relational aggression targeting the parent-child relationship (i.e., parent-child bond breaking) is associated with relational aggression targeting the co-parent (former romantic partner). The sample consisted of 396 divorced/separated parents who were co-parenting at least one child with their former partner. Participants from Cyprus, Greece and the UK completed measures assessing their engagement in different forms of relational aggression more specifically (a) towards their former romantic partner and (b) targeting the bond their former partner has with their child(ren). Additionally, parents completed self-reports assessing (c) if they experienced relational victimization from their former romantic partner, (d) if they experienced parental alienation from their child(ren), as well as (e) measures assessing maladaptive personality traits (psychopathic and narcissistic traits). Results suggest that parents who reported experiencing elevated levels of romantic relational victimization from their former romantic partners reported more frequent engagement in both forms of relational aggression. Maladaptive personality traits (both psychopathic and narcissistic traits) were linked with romantic relational aggression in the UK and Cyprus while only psychopathic traits were linked to relationally aggressive behaviors targeting the former romantic partner in the sample obtained from Greece. Interestingly only elevated psychopathic traits and if the parent reported experiencing alienation from their child(ren) were associated with elevated levels of parent-child bond-breaking behaviors and this finding was restricted to the Cyprus sample. The positive association among the two forms of relational aggression suggest that parent-child bond-breaking is best understood in the context of wider engagement in relational aggression literature, however each form of relational aggression has its unique distinctions which need to be considered when developing prevention and intervention programs.

Oral2025年9月26日(金) 13:10 ~ 14:40  Session Room 8 (Meeting Room 1)**Oral 11**

[O-11-01]

Quality of life and parenting styles in parents with children with and without ASD in Türkiye.

Merve Yesilkaya¹, *Ernesto Magallon-Neri^{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))

[O-11-02]

Integrating perinatal and infant mental healthcare: building lifelong foundations- What are we doing at Austin Health Perinatal Community Services, Heidelberg, Melbourne

*Hewa Liyana Arachchi Chamali Rangika Wanigasekera^{1,2}, Anne Buist^{1,2}, Michelle McAlary McAlary¹ (1. Austin Health, Melbourne, Australia (Australia), 2. University of Melbourne, Victoria, Australia (Australia))

Oral

2025年9月26日(金) 13:10 ~ 14:40 Session Room 8 (Meeting Room 1)

Oral 11

[O-11-01] Quality of life and parenting styles in parents with children with and without ASD in Türkiye.

Merve Yesilkaya¹, *Ernesto Magallon-Neri^{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))

キーワード : Autism Spectrum Disorder、Parenting styles、Quality of Life

Objective: To examine the differences in quality of Life (QoL) and parenting styles (PS) between two groups of parents one of them with children with autism spectrum disorder (ASD) and other without any psychiatric disorder in their children in a western region of Türkiye. **Method:** in a sample of parents (n= 128; 82% women; 75 Clinical and 53 Controls) the following tests were applied: the World Health Organization Quality of Life BREF (WHOQOL BREF) and the Alabama Parenting Questionnaire. **Results:** Multiple significant differences were identified, in QoL all the domains were affected, the principal a social relationship was poorer in parents with ASD children ($t = -3,8$; $p = .001$; Cohen's $d = .71$), followed by poorer psychological health ($t = -2,55$; $p = .012$; Cohen's $d = .46$), whereas only the parenting style of involvement was different between groups ($t = -2,21$; $p = .029$; Cohen's $d = .37$). Also, parental involvement was positively related to the parent's environment QoL, $r = .27$, $p = .022$, with parents' physical ($r = .32$, $p = .023$) and psychological ($r = .29$, $p = .032$) in the control group. **Discussion:** parents of children with ASD face increased stress and often resort to emotion-focused coping strategies or parenting styles; they are frequently linked to a lower quality of life. Exploring how these parents cope with difficult situations, manage stress, and maintain a satisfactory quality of life is an intriguing area for future studies.

Oral

2025年9月26日(金) 13:10 ~ 14:40 Session Room 8 (Meeting Room 1)

Oral 11

[O-11-02] Integrating perinatal and infant mental healthcare: building lifelong foundations- What are we doing at Austin Health Perinatal Community Services, Heidelberg, Melbourne

*Hewa Liyana Arachchi Chamali Rangika Wanigasekera^{1,2}, Anne Buist^{1,2}, Michelle McAlary McAlary¹ (1. Austin Health, Melbourne, Australia (Australia), 2. University of Melbourne, Victoria, Australia (Australia))

キーワード：Perinatal Psychiatry、Women and Children、prevention and early intervention

Chamali Wanigasekera^{1,2} MBBS,AMC,MPsych,FRANZCP

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Background: Mental illness during the perinatal period is a common public health issue. Despite high rates of mental illness, the healthcare systems worldwide struggle to provide basic care needs and services during the perinatal period are frequently poorly integrated. Research emphasizes the significance of integrating mental health care into perinatal services, addressing immediate mental health needs while supporting positive long-term developmental outcomes for children.

Objectives: To provide an integrated service to strengthen parent-infant relationships through evidence-based practices.

Description: Austin Health Perinatal Community Service (PCS) offers specialist mental health support through psychological therapies and parent-infant relationship framework for caregivers with a mental health problem who have a child under 24-months in North-East areas of Melbourne. Utilising both outreach and clinic-based services, we deliver psychological and parent-infant relational interventions (including Circle of Security) through our multidisciplinary team of psychiatrist, psychologist, social work and maternal child health nurses.

Conclusions: Supporting the caregiver's mental health and the parent-infant relationship is crucial for child development. Early intervention leads to better outcomes for children and society. This talk will cover our experiences implementing this model at Austin Health and our proposed outcomes research.

Oral

2025年9月26日(金) 14:50 ~ 16:20 Session Room 7 (Conference Room C)

Oral 12

[O-12-01]

Asylum seekers should not participate in intervention studies.

*Douwe van der Heide¹ (1. GGZ Centraal (Netherlands))

[O-12-02]

‘I felt like a fish in the water’: the feasibility of co-adapting a family intervention for asylum seeking families with parents themselves.

*Aseel Fawaz Alzaghouli¹, Rachel Kronick¹ (1. McGill University (Canada))

[O-12-03]

Breaking Barriers: A Mental Health Conference for Spanish-Speaking Communities in the USA.

*Jose Alberto Canaca¹, *Tomoko Hamma¹, *Caroline Bonham¹, *Mauricio Tohen¹, *Deborah Altschul¹ (1. American Psychiatric Association (United States of America))

[O-12-04]

Healing Our First Attachment: Cultural, Psychological, and Ecological Pathways to Reconnect with Nature

*Matthew Jenkins^{1,2}, *Sabine Egger² (1. University of Auckland (New Zealand), 2. Waikato Health NZ (New Zealand))

[O-12-05]

Irregular Migrants in Administrative Detention: Psychiatric Implications and Systemic Disparities - A Cross-National Overview

*Tommaso Cerisola¹ (1. Università degli Studi di Genova (Italy))

[O-12-06]

Cultural Belonging and Migrant Well-Being: Rethinking Urban Spaces for Mental Health

*Gesa Solveig Duden¹ (1. Concordia University, Montréal (Canada))

Oral

2025年9月26日(金) 14:50 ~ 16:20 Session Room 7 (Conference Room C)

Oral 12**[O-12-01] Asylum seekers should not participate in intervention studies.***Douwe van der Heide¹ (1. GGZ Centraal (Netherlands))

キーワード : Asylum seekers、Symptom validity、Cultural Psychiatry

Introduction

In a refugee mental health center in the Netherlands nine patients with severe therapy-resistant dissociative symptoms participated in a double-blind, placebo-controlled intervention study. The intervention involved caloric vestibular stimulation (causing vertigo) and confrontation with a mirror, provoking specific dissociative symptomatology in these patients. At this time, the results of a project with symptom validity tests in the same center indicated poor validity of symptom reports in fellow patients.

Methods

Assisted by dialogue interpreters eight patients who participated in the intervention study completed the same questionnaire as the patients who participated in the symptom validity project: The Structured Inventory of Malingered Symptomatology (SIMS), a list of implausible symptoms used to index over-reporting. The scores of both groups were compared.

Results

All patients of the intervention study endorsed more items of the SIMS than the cutoff of 16, on average 41.0 items out of a total of 75, 95% CI [29.0, 53.0], with a range of 18 to 58. Of the patients who participated in the symptom validity project ($n=203$) 164 (81%) scored above the cutoff, endorsing on average 33.8 items, 95% CI [31.5, 36.1], with a range of 3 to 62. The intervention study was aborted. Retrospective analysis of the results of the symptom validity project identified current involvement in a procedure for asylum as an important predictor of poor validity.

Conclusion

Symptom reports of asylum seekers may have poor validity. This, and the possibility that these patients may feel that they are not in a position to refrain from participation, means that it may be unethical to include them for intervention studies. Especially so if the study intervention is aversive.

Oral

2025年9月26日(金) 14:50 ~ 16:20 Session Room 7 (Conference Room C)

Oral 12

[O-12-02] 'I felt like a fish in the water': the feasibility of co-adapting a family intervention for asylum seeking families with parents themselves.

*Aseel Fawaz Alzaghouli¹, Rachel Kronick¹ (1. McGill University (Canada))

キーワード：Psychosocial Support、Cultural Adaptation、Asylum-seeking、Family Intervention

Background: Canada has received thousands of asylum seekers annually over the past decade. Asylum seekers face significant challenges, including pre-migration trauma and ongoing issues such as legal precarity, racism, and discrimination. Prevention programs to support asylum-seeking families are crucial. There is increasing emphasis on participatory frameworks and co-constructing interventions with users, but little research examines the experiences and challenges of those collaborating in the field. This study can provide important insights on opportunities and barriers to authentic adaptation design. **Aims:** This project aims to adapt the Teaching Recovery Techniques intervention (TRT) culturally and contextually, in partnership with refugee claimant parents, to enhance TRT's fit within the context of temporary shelters in Québec. In this presentation, we examine the feasibility, opportunities and challenges of co-adapting TRT intervention with the refugee claimant advisory committee for asylum seeking families residing at temporary lodgings in Québec. **Methods:** This study used a participatory qualitative approach that included a Refugee Claimant Advisory Committee who adapted the TRT module. Thematic analysis of ethnographic notes and meeting minutes from the six adaptation sessions identified key themes. **Preliminary Results:** The adaptation of TRT into a peer-supported intervention for asylum-seeking families demonstrated feasibility, despite notable contextual challenges. These challenges included a limited adaptation period of only six sessions and difficulties in perceiving all emotional cues or facial expressions, frequently intensified by the necessity of managing three languages concurrently. While maintaining the core cognitive-behavioral structure, the intervention was enhanced through substantial contributions from the cultural knowledge of facilitators and participants, alongside creative input from an art therapy intern. This integration bolstered cultural relevance and participant engagement. Furthermore, the adaptation embraced a holistic comprehensive approach, addressing not only psychological well-being but also broader resettlement requirements, including parenting in a new environment, accessing services, and rebuilding community. The adaptation's feasibility was strengthened by grounding it in the Ecological Validity Model, ensuring that linguistic, cultural, and contextual dimensions were meaningfully integrated throughout.

Oral

2025年9月26日(金) 14:50 ~ 16:20 Session Room 7 (Conference Room C)

Oral 12**[O-12-03] Breaking Barriers: A Mental Health Conference for Spanish-Speaking Communities in the USA.**

*Jose Alberto Canaca¹, *Tomoko Hamma¹, *Caroline Bonham¹, *Mauricio Tohen¹, *Deborah Altschul¹
(1. American Psychiatric Association (United States of America))

キーワード : Cultural psychiatry、Language、Community

The State of New Mexico in the USA has a distinctive characteristic: it is a state where the minority group is the majority, with approximately 50% of the population identifying as Hispanic. For over 30 years, the Rural Psychiatry Program at the University of New Mexico (UNM) has had the privilege of serving rural communities across the State. The services provided by the Rural Program include developing rural rotations for psychiatry residents and offering mental health conferences for providers in remote areas. These conferences, in English, were well received by those providers, but there was always a question by the Spanish-speaking providers floating in the air, "Why can't we have these conferences in Spanish? Due to requests from multiple providers and the lack of training offered in languages other than English in the USA, UNM decided to address this need. For the last three years, UNM has offered the Rural Psychiatry Conference 100% in Spanish. Since its inception in 2023, this Spanish-language conference has attracted over 200 Spanish-speaking participants yearly from various areas in New Mexico, other states in the United States, and countries in Latin America, including Mexico, Honduras, and Costa Rica, among others. The community's acceptance of this conference in Spanish has been overwhelming, to the point that in 2023, the American Psychiatric Association published an article in Psychiatric News titled "Culture, Language of Latinx Community Honor in Rural Psychiatry Conference," highlighting this innovative conference. This conference has made us more aware of the diverse needs of our communities in the USA and beyond. Through this presentation, we aim to share the learning acquired over the past few years and the impact that a conference, presented in their language, has had on a community eager to develop capacities in mental health to serve others.

Oral

2025年9月26日(金) 14:50 ~ 16:20 Session Room 7 (Conference Room C)

Oral 12

[O-12-04] Healing Our First Attachment: Cultural, Psychological, and Ecological Pathways to Reconnect with Nature

*Matthew Jenkins^{1,2}, *Sabine Egger² (1. University of Auckland (New Zealand), 2. Waikato Health NZ (New Zealand))

キーワード : indigenous、attachment theory、eco-therapy、human-nature relationship

Humanity's relationship with nature can be understood through the lens of attachment theory, framing the natural world as our original caregiver. Historically, indigenous cultures such as the Māori of Aotearoa New Zealand, First Nations of North America, and Sami of Northern Europe have maintained secure attachments to the land through practices of reciprocity, guardianship, and reverence for nature's cycles. However, urbanisation, industrialisation, and colonisation have disrupted this bond, leading to insecure attachment styles—avoidant, ambivalent, and disorganised—manifested as ecological neglect, exploitation, and fear.

This presentation explores the parallels between attachment theory and human-nature relationships, drawing on cultural psychiatry, indigenous knowledge, and ecological psychology to propose pathways for reconnection. By examining Māori principles of *kaitiakitanga* (guardianship) and *tangata whenua* (people of the land), alongside examples from other indigenous groups, we highlight the importance of restoring balance through cultural and nature-based approaches.

Therapeutic interventions such as ecotherapy, therapeutic gardening, and elemental meditations are presented as practical tools for healing this bond, supported by case studies demonstrating their effectiveness. By reframing nature as a caregiver, we foster pro-environmental behaviours and improve mental well-being.

This cross-disciplinary approach underscores the urgent need to heal humanity's "first attachment" to address both psychological and ecological crises. Integrating cultural psychiatry, indigenous knowledge, and ecological psychology provides a framework for sustainable mental health practices and environmental stewardship, essential for the well-being of current and future generations. *Ko au te whenua, ko te whenua ko au – I am the land, the land is me.*

Oral

2025年9月26日(金) 14:50 ~ 16:20 Session Room 7 (Conference Room C)

Oral 12**[O-12-05] Irregular Migrants in Administrative Detention: Psychiatric Implications and Systemic Disparities - A Cross-National Overview***Tommaso Cerisola¹ (1. Università degli Studi di Genova (Italy))

キーワード : Administrative detention、Mental health、Immigration、Human rights、Migrant health

Background: Administrative detention, particularly in the context of migration control, represents a growing global practice with significant implications for public health and human rights. While designed as a non-punitive measure, administrative detention often replicates or exceeds the psychological stressors of criminal incarceration. Mental health consequences in these settings remain underexplored, especially from a comparative international perspective.

Objective: This presentation aims to explore the psychiatric impact of administrative detention across different countries, with a particular focus on disparities in access to mental health care, legal safeguards, and detention conditions. Emphasis is placed on identifying structural and systemic factors that exacerbate or mitigate psychiatric morbidity among detained individuals.

Methods: Relevant peer-reviewed articles, institutional reports, and qualitative studies published between 2015 and 2025 were selected based on predefined inclusion and exclusion criteria. The literature was searched using English and Italian keywords, covering both European and international contexts. A comparative matrix was used to organize findings across countries.

Results: Preliminary findings show high prevalence rates of depression, PTSD, and suicidal ideation among detainees, often compounded by limited access to psychiatric care, indefinite detention periods, and legal uncertainty. Notable differences emerged between countries in terms of maximum detention duration, medical support availability, and procedural safeguards. Australia and the United States exhibit some of the most restrictive environments, whereas countries like Germany and the UK demonstrate relatively better access to mental health services, despite persistent gaps.

Conclusions: Administrative detention poses substantial risks to mental health. Psychiatric vulnerability is intensified by legal ambiguity and inadequate health infrastructure. This review highlights the urgent need for policy reform and harmonization of international standards to ensure the protection of psychological well-being in detention settings.

Oral

2025年9月26日(金) 14:50 ~ 16:20 Session Room 7 (Conference Room C)

Oral 12**[O-12-06] Cultural Belonging and Migrant Well-Being: Rethinking Urban Spaces for Mental Health***Gesa Solveig Duden¹ (1. Concordia University, Montréal (Canada))

キーワード : mental health、migration、urban spaces、cities、cultural belonging

With over half of the global population living in urban areas - a figure projected to reach 70% by 2050 – understanding the mental health impacts of city life has become increasingly urgent. Urban environments have been linked to elevated rates of anxiety and depression, particularly among migrants, who face added stressors such as social isolation, cultural displacement, and reduced access to support systems. This study investigated how urban contexts can be leveraged to support mental health and well-being among migrants, shifting the focus from risks to protective environmental and social factors. The research employed a cross-country, mixed-methods design. Qualitative go-along interviews were conducted with Brazilian migrants in Berlin and Montréal to explore how they experience their mental health in urban spaces. These insights were complemented by Experience Sampling Methodology (ESM) data from diverse migrant populations across multiple German cities, capturing moment-to-moment variations in emotional well-being and perceptions of their surroundings. Preliminary findings highlighted the importance of blue-green spaces – such as parks, riversides, and urban forests – not only for mental health but also for fostering a sense of belonging. Urban environments that were culturally inclusive and allowed for diversity in aesthetics, usage, and social interactions were particularly beneficial. Moreover, spaces that enabled low-intensity social contact – such as weak ties, nodding encounters, and casual interactions with strangers – emerged as important for reducing feelings of isolation and enhancing well-being. These findings offer concrete implications for urban design, mental health interventions, and migration policy. By identifying features of urban environments that support migrant mental health, the project contributes to developing more inclusive and psychologically supportive cities. In the context of ongoing global migration, post-pandemic mental health concerns, and evolving urban landscapes, the study provides timely evidence to inform future planning and policy.

Oral

2025年9月26日(金) 14:50 ~ 16:20 Session Room 8 (Meeting Room 1)

Oral 13

[O-13-01]

Exploring different needs of intervention in adolescents with different levels of psychological difficulties

*Nabilah Amalina Rozi^{1,2}, Sherly Saragih Turnip¹ (1. Research of Community Mental Health Initiative (RoCMHI), Faculty of Psychology, Universitas Indonesia (Indonesia), 2. Department of Global Public Health, Karolinska Institututet (Sweden))

[O-13-03]

Stressful life events and family adjustment in young people from Colombia.

Sandra Mateus-Gómez¹, Rosa Díaz², Claudia Navarro-Roldan⁴, *Ernesto Magallon-Neri^{1,3} (1. Department of Clinical Psychology and Psychobiology. Faculty of Psychology. University of Barcelona. (Spain), 2. Department of Child and Adolescent Psychiatry and Psychology. Institute of Neurosciences. Hospital Clínic Universitari of Barcelona. (Spain), 3. Institute of Neurosciences, UB. Group of Studies about Measure Invariance and Analysis of Change (GEIMAC) 2021SGR01071. (Spain), 4. Human development, cognition and education research group, Psychology program, University Pedagogical and Technological of Colombia. (Colombia))

[O-13-05]

Anxiety and depression among adolescents

*Cecilia Essau¹, Suwaibah Zakaria², Chuong Hock Ting Ting³, Julia Ai Cheng Lee³, Alvin Lai Oon Ng⁴, Nik Daliana Nik Farid⁵, Noor Azimah Muhammad⁶, Suzaily Wahab⁶, Alejandro de la Torre-Luque⁷ (1. University of Roehampton (UK), 2. Universiti Malaysia Sabah (Malaysia), 3. Universiti Malaysia Sarawak (Malaysia), 4. Sunway University (Malaysia), 5. Universiti Malaya (Malaysia), 6. Universiti Kebangsaan Malaysia (Malaysia), 7. Universidad Complutense de Madrid (Spain))

[O-13-06]

School Bullying Prevention and Intervention Across Cultures: The ICoRIP Study Protocol for Promoting Youth Mental Health in Six Nations

*Ekachaeryanti Zain¹, Atsunori Sugimoto^{2,3}, Emmanuel Aniekan Essien⁴, Gniewko Więckiewicz⁵, Ching-Hua Julie Lee⁶, Rwanda Gaffaz⁷, Joanna Smolarczyk⁵, Victor Pereira-Sanchez⁸, Kiyohiro Yoshinaga³, Masaya Ootake¹, Hiroyuki Kasahara², Faisal Budisasmitta Paturungi Parawansa¹, Isa Multazam Noor⁹, Naoki Fukui¹, Yuichiro Watanabe^{1,10}, Jun Egawa¹, Shuken Boku¹ (1. Department of Psychiatry, Niigata University Graduate School of Medical and Dental Sciences (Japan), 2. Department of Community Psychiatric Medicine, Niigata University Graduate School of Medical and Dental Sciences (Japan), 3. Department of Psychiatry, Niigata Psychiatric Center (Japan), 4. Federal Neuropsychiatric Hospital (Nigeria), 5. Department of Psychiatry, Faculty of Medical Sciences in Zabrze, Medical University of Silesia (Poland), 6. Tsao-tun Psychiatric Center, Ministry of Health and Welfare (Taiwan), 7. Alrazi Psychiatric Hospital (Libya), 8. Department of Psychiatry, Columbia University (United States of America), 9. Department of Psychiatry, Faculty of Medicine, YARSI University (Indonesia), 10. Department of Psychiatry, Uonuma Kikan Hospital (Japan))

Oral

2025年9月26日(金) 14:50 ~ 16:20 Session Room 8 (Meeting Room 1)

Oral 13**[O-13-01] Exploring different needs of intervention in adolescents with different levels of psychological difficulties**

*Nabilah Amalina Rozi^{1,2}, Sherly Saragih Turnip¹ (1. Research of Community Mental Health Initiative (RoCMHI), Faculty of Psychology, Universitas Indonesia (Indonesia), 2. Department of Global Public Health, Karolinska Institutet (Sweden))

キーワード：Psychological difficulties、Psychological well-being、Adolescents、Indonesia

Background: Psychological difficulties are risk factors to Indonesian adolescents' psychological well-being. Indonesian adolescents also have a higher cut-off point for classifying levels of psychological difficulties compared to the suggested cut-off point. These findings were valuable in developing screening and intervention programs to increase their psychological well-being through preventing mental health problems. However, empirical evidence is needed to determine which psychological difficulties level should be prioritised for intervention.

Objectives: This study aimed to identify which levels of psychological difficulties showed significant differences in psychological well-being.

Methods: This is a school-based cross-sectional study involving middle school students from five schools in Banyuwangi, Indonesia. We classified adolescents' psychological difficulties levels (close-to-average, slightly raised, high, and very high) using the Strength and Difficulties Questionnaire (SDQ) scores. We measured psychological well-being using Ryff's Psychological Well-Being Scale (PWB-18). One-way ANOVA was used to compare psychological well-being between levels in each difficulty (hyperactivity, conduct problems, emotional problems, and peer problems).

Results: 1138 adolescents aged 9–17 years old ($M_{age} = 13.91$, $SD = 0.82$) participated in the study, with 50.3% being male and 49.7% being female. One-way ANOVA showed significant differences in adolescents' psychological well-being between levels in hyperactivity ($F(3, 1132) = 45.01, p < .001$), conduct problems ($F(3, 1132) = 21.72, p < .001$), emotional problems ($F(3, 1131) = 56.08, p < .001$), and peer problems ($F(2, 1133) = 60.24, p < .001$). Post-hoc comparison using the Tukey HSD test indicated that the largest mean differences were between the close-to-average and slightly raised groups, in almost all psychological difficulties.

Discussion: A higher cut-off point may cause psychological difficulties to be overlooked and normalised, while interventions to prevent further progression of difficulties may be beneficial for increasing Indonesian adolescents' psychological well-being. This study highlights the importance of screening and early intervention.

Oral

2025年9月26日(金) 14:50 ~ 16:20 Session Room 8 (Meeting Room 1)

Oral 13**[O-13-03] Stressful life events and family adjustment in young people from Colombia.**

Sandra Mateus-Gómez¹, Rosa Díaz², Claudia Navarro-Roldan⁴, *Ernesto Magallon-Neri^{1,3} (1. Department of Clinical Psychology and Psychobiology. Faculty of Psychology. University of Barcelona. (Spain), 2. Department of Child and Adolescent Psychiatry and Psychology. Institute of Neurosciences. Hospital Clínic Universitari of Barcelona. (Spain), 3. Institute of Neurosciences, UB. Group of Studies about Measure Invariance and Analysis of Change (GEIMAC) 2021SGR01071. (Spain), 4. Human development, cognition and education research group, Psychology program, University Pedagogical and Technological of Colombia. (Colombia))

キーワード : Family adjustmet、Stressful live events、young

Objective: To examine the relationships between different concepts analyzed by the family APGAR (family support, communication, common decision making, shared time and feeling of affection) with the occurrence of different stressful life events. **Method:** in a sample of adolescents and young people (n= 600; 60.5% women) between 12 and 25 years of age ($M = 17.6$; $SD = 3.3$) from Colombia, the following tests were applied: the Familial APGAR and the Lifetime incidence of Traumatic Events, Student form (LITE-S). **Results:** Multiple significant relationships were identified ($p = .001$), mostly with a slight impact, among which: the event of being separated from the family will decrease the sensation of satisfaction of family support, time shared with the family and feeling of warm affection. Being beaten and physically abused mainly led to a decrease in satisfaction with family support. Having relational problems with parents, classmates or friends was widely related to a decrease in the perception of support, communication, decision making and satisfaction in shared time; This latter concept was also related with the inclusion of a new partner (stepfather or stepmother) in the family.

Discussion: family dynamics and their level of satisfaction can be affected by the occurrence of certain stressful events that variously affect the degree of support, communication between its members and the overall perception of satisfaction related to the family. It is relevant to consider the evaluation of these events to understand in great depth their impact on family dynamics and their implication on mental health.

Oral

2025年9月26日(金) 14:50 ~ 16:20 Session Room 8 (Meeting Room 1)

Oral 13**[O-13-05] Anxiety and depression among adolescents**

*Cecilia Essau¹, Suwaibah Zakaria², Chuong Hock Ting Ting³, Julia Ai Cheng Lee³, Alvin Lai Oon Ng⁴, Nik Daliana Nik Farid⁵, Noor Azimah Muhammad⁶, Suzaily Wahab⁶, Alejandro de la Torre-Luque⁷ (1. University of Roehampton (UK), 2. Universiti Malaysia Sabah (Malaysia), 3. Universiti Malaysia Sarawak (Malaysia), 4. Sunway University (Malaysia), 5. Universiti Malaya (Malaysia), 6. Universiti Kebangsaan Malaysia (Malaysia), 7. Universidad Complutense de Madrid (Spain))

キーワード : Anxiety、Depression、Adolescents、Academic stress、School connectedness

Mental health problems such as anxiety and depression account for 13% of the global burden of disease and affect approximately 20% of adolescents worldwide. The onset of anxiety and depression typically occurs before 14 years of age, and these mental health problems are associated with poor school performance, alcohol and drug misuse, and suicidal behaviour. Some of the most commonly reported risk factors for anxiety and depression include genetic predisposition, family history of mental illness, exposure to trauma or chronic stress, peer-related difficulties such as bullying. The link between anxiety/depression with perceived academic stress and school connectedness has rarely been explored.

The aim of this study was to examine the prevalence of anxiety and depression, and their potential link with perceived academic stress and school connectedness. Another aim was to examine adolescent's mental health literacy. A total of 5354 adolescents (boys = 46.8%; girls = 53.2%) living in economically deprived areas in Malaysia, aged 12-14 years (mean age = 13.5 years), participated in this study. They completed a set of questionnaires, including questionnaires to measure anxiety and depressive symptoms, perceived academic stress, school connectedness, and knowledge of mental health problems.

Results showed that 17.5% of the adolescents endorsed moderate to severe levels of anxiety and depressive symptoms as measured using the Depression Anxiety and Stress Scale-21. Significantly more girls than boys endorsed moderate to severe levels of anxiety and depression. Anxiety and depression correlated significantly positive with academic stress and significantly negative with school connectedness. Adolescents also showed low level of mental health literacy, which contributed to delayed recognition, underreporting of symptoms, and limited help-seeking behaviour.

To conclude, our study underscores the urgent need for targeted public health strategies and improved mental health literacy to address the growing burden of anxiety and depression among adolescents.

Oral

2025年9月26日(金) 14:50 ~ 16:20 Session Room 8 (Meeting Room 1)

Oral 13**[O-13-06] School Bullying Prevention and Intervention Across Cultures: The ICoRIPI Study Protocol for Promoting Youth Mental Health in Six Nations**

*Ekachaeryanti Zain¹, Atsunori Sugimoto^{2,3}, Emmanuel Aniekan Essien⁴, Gniewko Więckiewicz⁵, Ching-Hua Julie Lee⁶, Rwanda Gaffaz⁷, Joanna Smolarczyk⁵, Victor Pereira-Sanchez⁸, Kiyohiro Yoshinaga³, Masaya Ootake¹, Hiroyuki Kasahara², Faisal Budisasmita Paturungi Parawansa¹, Isa Multazam Noor⁹, Naoki Fukui¹, Yuichiro Watanabe^{1,10}, Jun Egawa¹, Shuken Boku¹ (1. Department of Psychiatry, Niigata University Graduate School of Medical and Dental Sciences (Japan), 2. Department of Community Psychiatric Medicine, Niigata University Graduate School of Medical and Dental Sciences (Japan), 3. Department of Psychiatry, Niigata Psychiatric Center (Japan), 4. Federal Neuropsychiatric Hospital (Nigeria), 5. Department of Psychiatry, Faculty of Medical Sciences in Zabrze, Medical University of Silesia (Poland), 6. Tsaojun Psychiatric Center, Ministry of Health and Welfare (Taiwan), 7. Alrazi Psychiatric Hospital (Libya), 8. Department of Psychiatry, Columbia University (United States of America), 9. Department of Psychiatry, Faculty of Medicine, YARSI University (Indonesia), 10. Department of Psychiatry, Uonuma Kikan Hospital (Japan))

キーワード : School Bullying、Prevention and Intervention、Youth Mental Health、Cross-cultural Research

Bullying has been consistently associated with a range of psychiatric problems in children and adolescents, including depression, anxiety, post-traumatic stress disorder, behavioral and substance use disorders, self-harm, and suicidality. Global data indicate a victimization rate of 36%, with conceptual frameworks for bullying varying across cultures. While UNESCO defines bullying as repeated aggressive behavior involving a power imbalance, some countries base definitions solely on the victim's subjective experience of harm, regardless of intent, repetition, or power dynamics. Most existing interventions are Western-based and may not reflect diverse cultural contexts, limiting their global applicability.

To address this gap, the ICoRIPI project, led by Niigata University and supported by an international team, was launched across six culturally diverse countries: Indonesia, Japan, Libya, Nigeria, Poland, and Taiwan. This project aims to develop culturally informed strategies for addressing school bullying and mental health aspects.

A three-phase study protocol was designed to ensure methodological integrity and cultural relevance across participating countries. This presentation will share the current progress and preliminary insights from Phase 1, which involves the adaptation, translation, and standardization of the seven assessment tools measuring bullying, psychiatric symptoms, and school-related factors in each country's national language. Additionally, we will outline the methodological challenges of Phase 2, which consists of cross-sectional surveys to examine the prevalence of bullying, sociocultural determinants, and associated mental health problems using path modeling. We will also introduce the study design for Phase 3, which involves parallel, pragmatic cluster randomized controlled trials (RCTs) to evaluate the Niigata Ijime Prevention and Intervention Program (NIPIP).

We aim to invite expert feedback on this study protocol, particularly regarding

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methodological considerations and implementation strategies for upcoming phases. This discussion will contribute to enhancing the rigor and cultural relevance of global efforts to prevent school bullying, create safer school environments, and improve youth mental health.

Poster

2025年9月26日(金) 10:00 ~ 11:00 Poster Session (Foyer 1)

Poster 9

[P-9-01]

Relationship between Satisfaction and Psychological Well-Being in Dance Events Using Metaverse.

*KAZUMA TORA¹, Ryo Momosaki² (1. Akiyama Clinic (Japan), 2. Department of Rehabilitation Medicine, Graduate School of Medicine, Mie University (Japan))

[P-9-02]

Interplay between serum IL-1 β and BDNF in modulating antidepressant response: Insights from a prospective clinical study

*Jae-Min KIM¹ (1. Chonnam National University Hospital (Korea))

[P-9-03]

Effects of Methylphenidate on the Cognitive Functions and Electroencephalographic Characteristics of Drug-Naïve Children with Attention-Deficit/Hyperactivity Disorder

*Chi-Yung Shang¹, Hong-Hsiang Liu², Ming-Hsien Hsieh¹, Susan Shur-Fen Gau¹ (1. National Taiwan University Hospital (Taiwan), 2. Fu Jen Catholic University (Taiwan))

[P-9-04]

Dysregulation of the hypothalamic-pituitary-adrenal system in Tuvin alcoholics is associated with a high level of stress in comparison with ethnic Russian patients

*Tamara Vladimirovna Shushpanova¹ (1. LEADING RESEARCHER, MENTAL HEALTH RESEARCH INSTITUTE of TOMSK NATIONAL RESEARCH MEDICAL CENTER of RUSSIAN ACADEMY of SCIENCES (Russia))

[P-9-05]

Isolation in a Fully Connected World: From Dostoevsky to Thunderbolts

*Yulia Furlong¹ (1. University of Western Australia (Australia))

[P-9-06]

Are related the Psychological Inflexibility and their subprocess with Psychopathological symptoms in adolescents with and without psychiatric care?

*Ernesto Magallon-Neri^{1,2}, Sandra Mateus-Gómez¹, Josep Lluís Matalí³, Elena Flores³, Daniel Ilzarbe⁴, Rosa Díaz⁴ (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), 3. Child and Adolescent Psychiatry and Psychology Department of Hospital Sant Joan de Déu, Barcelona (Spain), 4. Department of Child and Adolescent Psychiatry and Psychology. Institute of Neurosciences. Hospital Clínic Universitari of Barcelona (Spain))

Poster

2025年9月26日(金) 10:00 ~ 11:00 Poster Session (Foyer 1)

Poster 9

[P-9-01] Relationship between Satisfaction and Psychological Well-Being in Dance Events Using Metaverse.

*KAZUMA TORA¹, Ryo Momosaki² (1. Akiyama Clinic (Japan), 2. Department of Rehabilitation Medicine, Graduate School of Medicine, Mie University (Japan))

キーワード : Virtual Reality、Metaverse、Well-Being

Dance events using metaverse provide a novel experience that transcends physical limitations. These are expected to have psychological and physical impacts. The purpose of this study is to evaluate the impacts of metaverse dance events on psychological well-being and satisfaction, and to clarify the relationship between these impacts. We also analyzed between-group differences in happiness and satisfaction based on equipment used for participation and exercise habits. A dance event was held on the cluster metaverse platform. Afterwards, the results of a questionnaire survey by 26 participants were analyzed. Survey items included satisfaction (10-point scale), psychological well-being, stress reduction, and exercise load (all on a 5-point likert scale). Equipment used for participation exercise habits, and physical improvement were evaluated. The relationships among psychological well-being, satisfaction, stress reduction, and exercise load were analyzed using Spearman's rank correlation coefficient. A t-test was used for between-group comparisons by equipment used and exercise habits. By gender, 42.3% male and 46.2% female. 65.4% of respondents were over 30 years old. The reason of participation was "because I like exercise and dancing" by 34.6%. Stress decreased in 84.6% of the participants. We found significant positive correlations between happiness and satisfaction ($r=0.592$), happiness and stress reduction ($r=0.761$), satisfaction and stress reduction ($r=0.411$). However, there was no significant difference in the comparison between the groups based on the presence or absence of exercise habits and the difference in the use of VR devices. The means of satisfaction, happiness, and stress reduction were slightly higher for VR device users and exercise enthusiasts. This study showed that satisfaction with metaverse dance events may contribute to psychological well-being and stress reduction.

Poster

2025年9月26日(金) 10:00 ~ 11:00 Poster Session (Foyer 1)

Poster 9**[P-9-02] Interplay between serum IL-1 β and BDNF in modulating antidepressant response: Insights from a prospective clinical study**

*Jae-Min KIM¹ (1. Chonnam National University Hospital (Korea))

キーワード : depression、interleukin-1 β 、brain-derived neurotrophic factor、remission

Objective: To explore how interactions between serum interleukin-1 beta (sIL-1 β) and brain-derived neurotrophic factor (sBDNF) influence outcomes of antidepressant treatment over a 12-week period in patients diagnosed with depressive disorders.

Methods: In a cohort of 1,086 patients undergoing naturalistic antidepressant treatment, we measured baseline sIL-1 β and sBDNF levels. Treatment response was quantified by achieving a score of 7 or lower on the Hamilton Depression Rating Scale at 12 weeks. We applied logistic regression models, adjusted for relevant demographic and clinical variables, to analyze the influence of these biomarkers on the likelihood of remission.

Results: Our analysis revealed that high sIL-1 β levels significantly predicted non-remission in patients with lower sBDNF levels. However, in the subset of patients with elevated sBDNF levels, sIL-1 β had no significant effect on remission rates. The predictive power of the interaction between sIL-1 β and sBDNF was robust, maintaining significance after controlling for potential confounders.

Conclusion: This investigation underscores the critical interaction between neuroinflammatory and neuroplastic biomarkers in determining the efficacy of antidepressant treatments. Integrating such biomarker data can potentially personalize and optimize treatment strategies for depression. Ongoing studies should aim to uncover the specific biological pathways involved in these interactions to better tailor antidepressant therapy to individual patient profiles.

Poster

2025年9月26日(金) 10:00 ~ 11:00 Poster Session (Foyer 1)

Poster 9**[P-9-03] Effects of Methylphenidate on the Cognitive Functions and Electroencephalographic Characteristics of Drug-Naïve Children with Attention-Deficit/Hyperactivity Disorder**

*Chi-Yung Shang¹, Hong-Hsiang Liu², Ming-Hsien Hsieh¹, Susan Shur-Fen Gau¹ (1. National Taiwan University Hospital (Taiwan), 2. Fu Jen Catholic University (Taiwan))

キーワード : Attention-deficit/hyperactivity disorder、Methylphenidate、Electroencephalographic characteristics、Cognitive Functions

Objective: This study investigated the effects of 12-week methylphenidate treatment on the cognitive functions and electrophysiological characteristics of drug-naïve children with attention-deficit/hyperactivity disorder (ADHD).

Methods: We recruited 16 drug-naïve children with ADHD and 43 healthy controls. The behavioral symptoms and cognitive functions of all the participants were measured by Clinical Global Impression - Severity scale (CGI-S), ADHD Rating Scale-IV (ADHRS-IV), and Continuous Performance Test (CPT). Children with ADHD received treatment with methylphenidate for 12 weeks. Electroencephalographic characteristics were assessed for both the ADHD group and the control group, at the baseline and after 12 weeks.

Results: The ADHD group had significantly more behavioral symptoms on CGI-S ($p < 0.001$), Inattention ($p < 0.001$), and Hyperactivity/Impulsivity ($p < 0.001$) of the ADHRS-IV than the control group at baseline. Moreover, the ADHD group had longer reaction time (RT; $p=0.017$) and greater standard deviation of reaction time (RTSD; $p=0.004$) on the CPT than the control group at baseline. In contrast, there were no significant differences in the CGI-S, Inattention, Hyperactivity/Impulsivity, RT, or RTSD between the two groups after 12 weeks. The electrophysiologic characteristics, including network efficiency, peak alpha frequency, and eigenvector centrality, also showed improvement in the ADHD group after 12-week treatment.

Conclusions: Our findings revealed remarkable enhancements in the cognitive functions and electrophysiologic characteristics of drug-naïve children with ADHD following a 12-week course of methylphenidate treatment. These results indicated that cognitive functions and electrophysiologic characteristics might serve as valuable biomarkers for evaluating the effects of methylphenidate in children with ADHD.

Poster

2025年9月26日(金) 10:00 ~ 11:00 Poster Session (Foyer 1)

Poster 9

[P-9-04] Dysregulation of the hypothalamic-pituitary-adrenal system in Tuvan alcoholics is associated with a high level of stress in comparison with ethnic Russian patients

*Tamara Vladimirovna Shushpanova¹ (1. LEADING RESEARCHER, MENTAL HEALTH RESEARCH INSTITUTE of TOMSK NATIONAL RESEARCH MEDICAL CENTER of RUSSIAN ACADEMY of SCIENCES (Russia))

キーワード : small peoples、ethnicity、Tuvans、steroid hormones、compulsive alcoholism

Objective: Affective disorders and alcoholism are associated with impaired hormonal metabolism and regulation of the negative feedback mechanism, according to which Cortisol released from the adrenal glands inhibits the production of corticotropin-releasing hormone, as a result of which the content of adrenocorticotropic hormone (ACTH) and Cortisol increases abnormally. **Material and Methods:** The study included 38 patients with alcoholism only men Russian, 30 patients - Tuvans and 23 healthy volunteers, standardized to the main group in age. Patients were treated at the Department of Addictive States Mental Health Research Institute and at the Republican Narcological Dispensary. The studies of ACTH, Cortisol were determined with use kits for enzyme-linked immunosorbent assay (ELISA). **Results:** In alcoholic patients of Tuvan nationality, deeper shifts in the increase in ACTH and Cortisol levels were revealed compared to ethnic Russian patients, which is associated with a high risk of developing alcohol dependence and a highly progressive course of the disease. The indicator of the Cortisol/ACTH ratio (Index Ratio - IR) in the blood of alcoholic Russians and Tuvans significantly (1.5 times) differs from that in healthy individuals. **Conclusion:** The background level of dysregulation of the hypothalamic-pituitary-adrenal axis in patients of Tuvan nationality is significantly more pronounced and is a predictor of the formation of alcohol dependence.

Poster

2025年9月26日(金) 10:00 ~ 11:00 Poster Session (Foyer 1)

Poster 9**[P-9-05] Isolation in a Fully Connected World: From Dostoevsky to Thunderbolts***Yulia Furlong¹ (1. University of Western Australia (Australia))

キーワード：1.Youth mental health、2.Loneliness and disconnect、3.Narrative psychiatry、4.Digital culture、5.Human flourishing

Young people today have unprecedented access to digital communication yet report rising levels of loneliness and declining emotional well-being. Although adolescence has traditionally been a time of carefree optimism, it is now increasingly marked by psychological distress. This paper examines the resurgence of older cultural narratives that resonate with these emotional experiences, offering insight into the inner lives of digitally saturated but emotionally isolated youth.

A striking example is the viral popularity of Fyodor Dostoevsky's *White Nights* on TikTok, where its themes of longing, alienation, and the ache for connection have struck a chord with Generation Z. The narrator, a dreamer alienated from society, forms a brief but poignant bond that breaks through his isolation. The novella validates the emotional world of young readers, reaffirming the need for meaningful connection with the quiet but powerful message: "You are not alone."

These motifs echo in contemporary storytelling. In Marvel's *Thunderbolts* (2025), the central antagonist, the "Void," brings despair and darkness that threatens New York. It is not defeated by individual force, but through shared vulnerability and reluctant collaboration. The story portrays the isolation of today's youth and serves as a metaphor for nihilism, depression, and internal shame. It is a powerful representation of contemporary emotional struggle: progress emerges from a collective yearning for authentic connection.

This cultural convergence is mirrored in empirical work such as Harvard's Human Flourishing Program, which integrates psychology, philosophy, and public health to promote well-being. A recent longitudinal study by Kim and colleagues (2024), based on over 11,000 U.S. adolescents, showed that increased positive affect during adolescence predicted better mental health, reduced loneliness, and greater well-being in adulthood.

Together, these narratives affirm the need to foster emotional and relational connections in youth. In a hyperconnected but emotionally fragmented world, healing begins with recognition, empathy, and shared humanity.

Poster

2025年9月26日(金) 10:00 ~ 11:00 Poster Session (Foyer 1)

Poster 9

[P-9-06] Are related the Psychological Inflexibility and their subprocess with Psychopathological symptoms in adolescents with and without psychiatric care?

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キーワード : psychological inflexibility、 psychopathological symptoms、 adolescents

Objective: To examine the relationships between different processes linked to psychological inflexibility (cognitive fusion and experience avoidance) with a global index of psychopathological symptoms. Method: in a sample of adolescents (n= 248; 58,8% women; 136 community subjects and 102 psychiatric patients) from Barcelona Spain, were applied: the Avoidance and Fusion Questionnaire for Youth (AFQ-Y) and the Symptom Assessment Questionnaire (SA-45) to analyze their Global Severity Index (GSI) of psychopathological symptoms. Results: significant correlations were identified ($r = .68$ in community adolescents and $r = .72$ in clinical sample; $p < .001$), between psychological inflexibility and GSI. Also, cognitive fusion and experience avoidance were related significantly to GSI. Subsequently, linear regression analysis identified a high capacity to explain the GSI starting from psychological inflexibility and their subprocesses, in community adolescents the model with these three variables explains (R^2 adjusted = .505; $F = 46.84$; $p < .001$) and for clinical sample (R^2 adjusted = .538; $F = 40.16$; $p < .001$). Discussion: The concept of psychological inflexibility is partially related to global psychiatric distress; therefore, this would be a good indicator for screening psychopathology not focusing only on overtly pathological symptoms and could be useful for clinical and community adolescent samples.

Poster

2025年9月26日(金) 11:00 ~ 12:00  Poster Session (Foyer 1)

Poster 10

[P-10-01]

Behavioral Intentions to Negotiate the Division of Domestic Labor: A Qualitative Study in Salahutu District, Maluku for Women- and Children-Friendly Village Initiative

*Laraszahra Kemalasari Erlambang^{1,2}, Sherly Saragih Turnip^{1,2}, Fitri Fausiah^{1,2} (1. Research of Community Mental Health Initiative (Indonesia), 2. Universitas Indonesia (Indonesia))

[P-10-02]

Gender Differences in The Concept of Mental Health of Indonesia's Police Officers

*Canalya Amira Azhar¹, Sherly Saragih Turnip¹, Fitri Fausiah¹ (1. Universitas Indonesia (Indonesia))

[P-10-03]

Gender Disparity and Mental Health in Policing: Exploring Indonesia's Women Police Officers' Perspectives in a Male-Dominated Field

*Canalya Amira Azhar¹, Sherly Saragih Turnip¹, Fitri Fausiah¹ (1. Universitas Indonesia (Indonesia))

[P-10-04]

Psychosocial Challenges and Support Faced by Individuals with Gender Incongruence and Gender Dysphoria in Japan: A Literature Review and Implications for Cross-National Nursing Education

*Mayu SAKAMOTO¹, Mayuko TSUJIMURA¹, Kazuma HONDA², Namiko KAWAMURA¹ (1. Shiga University of Medical Science (Japan), 2. Broken Hill University (Austria))

[P-10-05]

Psychological Symptoms and Treatment Approaches in Perimenopausal Women: A Global Cultural Perspective

*Mrinalinee Rana

[P-10-06]

Cultural models of masculinity and femininity in Canada and in Brazil: A potential first step towards better understanding gender discrepancies in mental health.

*Mariana Borges da Fonseca^{1,2,4}, Andrew G Ryder^{1,2,3,4} (1. Concordia University (Canada), 2. Centre for Clinical Research in Health, Concordia University (Canada), 3. Culture & Mental Health Research Unit, Jewish General Hospital (Canada), 4. Culture, Health and Personality Lab, Concordia University (Canada))

Poster

2025年9月26日(金) 11:00 ~ 12:00 Poster Session (Foyer 1)

Poster 10

[P-10-01] Behavioral Intentions to Negotiate the Division of Domestic Labor: A Qualitative Study in Salahutu District, Maluku for Women- and Children-Friendly Village Initiative

*Laraszahra Kemalasari Erlambang^{1,2}, Sherly Saragih Turnip^{1,2}, Fitri Fausiah^{1,2} (1. Research of Community Mental Health Initiative (Indonesia), 2. Universitas Indonesia (Indonesia))

キーワード：Behavioral intention、Domestic labor、Gender equality、Community empowerment、Women-friendly village

Based on the Indonesian Central Bureau of Statistics, Indonesia has a Gender Inequality Index (GII) value of 0.447 in 2023. Maluku Province ranks amongst the highest GII in the nation, with its history of long-term conflict that extended its violence to homes, including gender-based violence. In an effort to realize gender equality, the Indonesian government has launched the Desa Ramah Perempuan dan Peduli Anak (DRPPA/Women- and Children-Friendly Village) initiative, aimed at gender mainstreaming as well as cultivating supportive villages for women and children, with Salahutu District, Central Maluku Regency being one of the local areas to first initiate it. This study aims to examine women's behavioral intentions to negotiate the division of domestic labor with male family members in Salahutu District, within the DRPPA framework. Using Ajzen's Theory of Planned Behavior and an emancipatory action research methodology, data were gathered through observation, analysis of existing village records, discussions with local institutions, as well as interviews with female community members across six villages in the district. Thematic analysis reveals that while many women express a desire to advocate for a more equitable sharing of household tasks, actual negotiation is often constrained by internalized gender norms, perceived male resistance, and broader cultural expectations. These findings suggest that community-based structures, such as Kader Sahabat Perempuan dan Anak (Support Cadres for Women and Children), may support women in translating intention into action. Such initiatives would empower village communities to cultivate sustainable practices to challenge prevailing gender norms that start within the domestic sphere.

Poster

2025年9月26日(金) 11:00 ~ 12:00  Poster Session (Foyer 1)

Poster 10

[P-10-02] Gender Differences in The Concept of Mental Health of Indonesia's Police Officers

*Canalya Amira Azhar¹, Sherly Saragih Turnip¹, Fitri Fausiah¹ (1. Universitas Indonesia (Indonesia))

キーワード : police, women police officer, mental health, gender differences, Indonesia

Background

A report by the World Economic Forum (2024) showed that gender equality in the workforce declined from last year. Its impact is more prominent in male-dominated fields, such as law enforcement and police officers. To date, the Indonesian National Police (Polri) has advanced its gender mainstreaming policies. Yet, women are still underrepresented, presenting additional challenges and adversely affecting police women officers' mental health. This study aims to assess the differences in perception of mental health among male and female police officers In Indonesia.

Method

To investigate the mental health characteristics pertinent to police officers' line of work, we developed an instrument using the biopsychosocial framework of health. Through literature reviews and focus group discussions, we identified fifteen key characteristics. These characteristics were paired to form 115 items, including 10 items for consistency checks. Participants were asked to endorse characteristics they perceived appropriate to their context of work. The surveys underwent readability testing before being distributed to Indonesian police officers in 34 provinces. Descriptive statistics analysis was used to analyze the data from surveys.

Results

504 (20.72%) women and 1.928 (79.28%) men participated in this study. The descriptive statistics analysis indicates that all police officers recognize "Compliance to norms and rules" as a vital component of mental health, followed by social characteristics all in the similar manner. There was only a slight variation observed in how certain psychological traits are perceived by gender. Men prioritize anger management over anxiety and depression, ranking it 7th and 9th respectively, whereas women reverse this order, ranking anxiety and depression 7th and anger management 8th. Variations on other aspects and gender differences based on rank, region, and function are also presented in this study.

Discussion

There was only a slight difference in women police officers' perspective on mental health which may reflect their experience in policing compared to their male counterparts. However, taking account of these differences could help us create a suitable action to promote mental health.

Poster

2025年9月26日(金) 11:00 ~ 12:00  Poster Session (Foyer 1)

Poster 10

[P-10-03] Gender Disparity and Mental Health in Policing: Exploring Indonesia's Women Police Officers' Perspectives in a Male-Dominated Field

*Canalya Amira Azhar¹, Sherly Saragih Turnip¹, Fitri Fausiah¹ (1. Universitas Indonesia (Indonesia))

キーワード : police, women police officer, mental health, gender disparity, Indonesia

Background

The World Economic Forum (2024) reported that gender parity progressed very slowly and will only be reached in over 130 years. Until today, certain professions are perceived as masculine which created male-dominated fields. In Indonesia, one of the professions is police officer. Despite similar job challenges faced by both genders in this profession, women police officers tend to meet additional challenges due to society's stereotypes about men and women.

Objective

This study explores gender differences in the perception of mental health among police officers in Indonesia.

Method

To study police officers' perceptions, we conducted three focus group discussions (FGDs) in three different cities (Padang, Jakarta, and Makassar). Fifty-five police officers from different ranks and divisions participated in the FGDs. Thematic content analysis was used to analyze the data from FGDs.

Result

The thematic content analyses show that gender disparity is common in regions farther from the city, where the gendered division of labour is more prominent in society. They perceived women police officers as only suitable for indoor or administrative tasks, as they are more patient and softer than men. This study also shows that male police officers perceived emotion regulation and reaching out for help are not important for mental health and only make them weak. On the contrary, female police officers are more open-minded and positively perceive it. There are also different views regarding family, where women police officers take more jobs in nurturing, while men lead their families.

Discussion

This study highlighted gender differences in mental health among police officers in Indonesia. Despite their choice to work in a male-dominated job, the stereotypes about gender roles are still highly influencing women police officers. Consequently, those stereotypes also influence their career pathways and mental health.

Poster

2025年9月26日(金) 11:00 ~ 12:00 Poster Session (Foyer 1)

Poster 10**[P-10-04] Psychosocial Challenges and Support Faced by Individuals with Gender Incongruence and Gender Dysphoria in Japan: A Literature Review and Implications for Cross-National Nursing Education**

*Mayu SAKAMOTO¹, Mayuko TSUJIMURA¹, Kazuma HONDA², Namiko KAWAMURA¹ (1. Shiga University of Medical Science (Japan), 2. Broken Hill University (Austria))

キーワード：Gender Incongruence/Gender Dysphoria、Challenges、Literature Review、Nursing Education、Cross-national Perspectives

Aim: This study aims to categorize findings from Japanese literature on the challenges faced by individuals with Gender Incongruence (GI) and Gender Dysphoria (GD), along with the types of support they have received. It also explores implications for enhancing nursing education through cross-national perspectives.

Method: The literature review was conducted using the Ichushi-Web and CiNii databases using the keywords “Gender Identity Disorder AND care”, “Gender Identity Disorder AND support”, and “Gender Identity Disorder AND psychology”, covering the period from 2014 to 2024. A total of 507 articles were initially retrieved. After excluding conference proceedings, review articles, duplicate entries, and studies based on quantitative methods, 18 articles were selected for analysis. These were categorized according to the challenges encountered and the support described.

Result: The psychosocial challenges experienced by individuals with GI/GD, as identified in the literature, were broadly classified into two major categories: 1. *Reflections on the Self* including: “Aversion to the Assigned Gendered Body”, “Resistance to Assigned Gender Roles”, “Relief through Seeing Gender Expression in Others”, “Affirming One’s Authentic Self”, “Liberation through Medical Transition”, “Fear of Social Rejection”, “Concern about Harming Loved Ones”, “Envy toward Congruent Bodies”, “Discomfort with Bodily Gaze”, “Guilt over Concealing Identity”, and 2. *Experiences in the Social Context* including: “Barriers to Medical Information”, “Loneliness and the Search for Belonging”, “Solidarity through Media Representation”, “Understanding Personal Incongruence”, “Isolation and Acceptance from Others”, “Relief through Inclusive Environments”. These findings also revealed a lack of sufficient support for individuals who are often underserved, such as those navigating multiple gender identities or experiencing liberation after gender transition.

Conclusion: The study underscores the importance of nursing education that addresses existing support gaps. By comparing nursing education practices in Japan with those in countries such as Australia, the study highlights the need for more inclusive and responsive educational frameworks.

Poster

2025年9月26日(金) 11:00 ~ 12:00 Poster Session (Foyer 1)

Poster 10**[P-10-05] Psychological Symptoms and Treatment Approaches in Perimenopausal Women: A Global Cultural Perspective**

*Mrinalinee Rana

キーワード：Perimenopause、Psychological disturbances、Cultural differences、Treatment approaches、Global mental health

Background: Perimenopause, the transitional period to menopause, is associated with significant hormonal, physical and psychological changes. Depression, anxiety, mood swings, irritability, and cognitive disturbances are experienced universally.

Objective: To explore the cross-cultural presentation of psychological symptoms in perimenopausal women and analyze globally implemented treatment approaches. It also identifies culturally informed factors and influences of cultural beliefs, gender norms that impact diagnosis, treatment, and help-seeking behaviors.

Methods: This paper synthesizes data from cross-cultural epidemiological studies, reviews and meta analysis, qualitative interviews and clinical trials. Studies with validated methods to assess psychological symptoms in perimenopausal women have been included.

Results: Data from Global Burden of Disease from the year 1991 to 2021 on the burden and disability associated with anxiety disorders shows its presence across regions. A pooled prevalence of depression (peri and postmenopause was more than 30pc. Research on cognitive changes suggests that verbal learning and memory are most affected along with deficits in attention, processing speed and working memory. Western biomedical approaches emphasize more on hormonal replacement therapy (HRT), antidepressants and psychotherapy. Many non-western countries including India incorporate natural practices such as Ayurveda, herbs, and spiritual healing and dietary changes.

Conclusion: Psychological disorders such as depression, anxiety and cognitive dysfunction are common in this demographic. However, factors ranging from cultural expectations, gender roles and stigma, to lack of access to mental health care and finances influence women's beliefs and perceptions. These pose as a major challenge in dealing with this stage of life smoothly. Thus, an effective mental health care approach that integrates biomedical and culturally ground approaches is required to reduce the negative impact of these debilitating symptoms on overall health in perimenopausal women. Addressing individual needs in this regard is vital in improving the overall well-being and quality of life for women navigating this important life stage.

Poster

2025年9月26日(金) 11:00 ~ 12:00 Poster Session (Foyer 1)

Poster 10

[P-10-06] Cultural models of masculinity and femininity in Canada and in Brazil: A potential first step towards better understanding gender discrepancies in mental health.

*Mariana Borges da Fonseca^{1,2,4}, Andrew G Ryder^{1,2,3,4} (1. Concordia University (Canada), 2. Centre for Clinical Research in Health, Concordia University (Canada), 3. Culture & Mental Health Research Unit, Jewish General Hospital (Canada), 4. Culture, Health and Personality Lab, Concordia University (Canada))

キーワード：Mental health、Gender、Cultural norms、Cultural Consensus Analysis

Cultural groups share implicit models of what it means to be a man or a woman, including beliefs about what is desirable, appropriate, or normative for each gender. These models strongly influence individuals' experiences, self-perceptions, and how their emotions and behaviors are interpreted by others, including mental health professionals. When individuals do not conform to these gender norms, they may be perceived as deviant or unhealthy, reflecting how cultural expectations shape judgments of behavior.

Although extensive research has documented gender differences in the prevalence, expression, and treatment of mental health conditions, few studies have examined how culturally specific models of femininity and masculinity may contribute to these differences. Furthermore, while prior research has shown that alignment with cultural norms is associated with greater psychological well-being, cultural models of gender have yet to be explored in this context.

This study aimed to address that gap by investigating cultural models of femininity and masculinity among Canadians in Montreal ($n=35$) and Brazilians in Brasília ($n=39$). Data were collected using a free-listing method: participants acted as cultural informants responding to prompts about culturally expected (1) life goals, (2) personal qualities, and (3) accomplishments for both women and men (7 prompts each). Cultural Consensus Analysis (CCA) was used to identify shared patterns of knowledge within each group.

The results revealed significant differences in models of femininity and masculinity both within each culture (masculinity vs. femininity) and between the two cultural contexts (Canada vs. Brazil). These findings offer a culturally grounded understanding of what it means to be a man or woman in each setting and provide a foundation for future research on the impact of gender norms on mental health. The study highlights the importance of culturally informed approaches in mental health care.

Poster

2025年9月26日(金) 14:00 ~ 15:10  Poster Session (Foyer 1)

Poster 11

[P-11-01]

Case Report: Obsessive Compulsive Disorder Presenting as Spiritual Possession in a Southeast Asian Context

*Sabrina Goo¹, *Tian Ling Low² (1. Institute of Mental Health (Singapore), 2. Singapore General Hospital (Singapore))

[P-11-02]

Cultural discontinuity, cultural resilience, and mental health in the era of Large Language Models: Civilizational disruption and reconstruction in the context of technological revolution

*Jian-Zhong Yang Yang¹ (1. Department of Psychiatry, the First Affiliated Hospital, Zhejiang University School of Medicine, Hangzhou, China (China))

[P-11-03]

Spirit Possession in Psychiatric Perspective, a case study in Indonesia

*Syarifah Aini¹, Bintang Arroyantri Prananjaya¹, Gilang Perkasa Dokman², Puji Rizky Suryani¹, Diyaz Syauki Ikhsan¹, Suksmi Yitnamurti², Abdullah Sahab¹ (1. Department of Psychiatry, Faculty of Medicine, Universitas Sriwijaya, Palembang (Indonesia), 2. Department of Psychiatry, Faculty of Medicine, Universitas Airlangga, Surabaya (Indonesia))

[P-11-04]

“Between Demon and *Espíritu*: Transcultural Psychiatry in a Purépecha Woman with Severe Mood Disorder, Psychosis, and Catatonia”

*Diana Mireles Ortega¹, *Claudia Alejandra Igual¹, Nicholas Soto Hernández¹, Christian Rosales-Michel¹, Aura Garcia-Aguilar¹, Sergio Armando Covarrubias-Castillo¹, Jose Manuel Hernandez Salas, Humberto Arizpe Mejía¹ (1. Hospital Civil de Guadalajara "Fray Antonio Alcalde" (Mexico))

[P-11-05]

Comparison between psychiatric morbidity in SARS survivors and COVID-19 survivors at 30 months post-outbreak in Hong Kong

*Mei Cheung Wong¹ (1. Dept of Psychiatry, United Christian Hospital, Hong Kong (Hong Kong))

[P-11-06]

TRI HITA KARANA CONCEPT AS A FRAMEWORK FOR SUBSTANCE USE DISORDER TREATMENT TARGETING FOREIGN TRAVELLERS IN BALI

*Savitri Yuanita¹, Cokorda Bagus Jaya Lesmana¹, Luh Nyoman Alit Aryani¹, Hari Nugroho² (1. Department of Psychiatry University of Udayana (Indonesia), 2. Humphrey Fellowship Program in Substance Abuse Education, Prevention, and Treatment at Virginia Commonwealth University (United States of America))

[P-11-07]

Investigating Neurophysiological Correlates of Depression in Children with ADHD: A qEEG Study

*Yeonjung Lee¹ (1. Soonchunhyang university, Seoul hospital (Korea))

Poster

2025年9月26日(金) 14:00 ~ 15:10  Poster Session (Foyer 1)

Poster 11

[P-11-01] Case Report: Obsessive Compulsive Disorder Presenting as Spiritual Possession in a Southeast Asian Context

*Sabrina Goo¹, *Tian Ling Low² (1. Institute of Mental Health (Singapore), 2. Singapore General Hospital (Singapore))

キーワード : culture bound syndrome、 obsessive compulsive disorder、 cultural psychiatry

Culture affects how patients perceive and report discomfort, and the way in which clinicians interpret symptoms in terms of psychiatric diagnoses. Numerous culture-bound syndromes in Asia reflect the interaction of diverse cultural beliefs with mental illness, typified by the Eastern emphasis on the mind and body connection (in *dhat*), spiritual and ancestral worlds (in *hsieh-ping*), somatisation and emotional suppression (in *shenjing shuairuo*) and interdependence (in *taijin-kyofusho*). As religion is a way of explaining the unknown, of making meaning of experience and of healing, it is turned to as an avenue for mental health help in Asia. Some sects of Taoism, an East Asian religion, involve the idea of spirit possession where a medium's body is taken over by a deity, spirit, or ancestor, who then speaks through the medium. We report a case of a Singaporean male, who subscribed to Taoism, and who presented with various somatic complaints whom he attributed to ancestral spirits. His fixation on his bodily complaints, in the context of 'spiritual possession', engendered anxiety which then led to the manifestation of obsessive-compulsive symptoms with a compulsion to tap parts of his body to 'satisfy the [possessing] spirit'. This case highlights the need for the application of a culturally sensitive lens to the diagnosis of psychiatric illnesses given the ill-defined borders of cultural beliefs with psychotic beliefs.

Poster

2025年9月26日(金) 14:00 ~ 15:10 Poster Session (Foyer 1)

Poster 11

[P-11-02] Cultural discontinuity, cultural resilience, and mental health in the era of Large Language Models: Civilizational disruption and reconstruction in the context of technological revolution

*Jian-Zhong Yang Yang¹ (1. Department of Psychiatry, the First Affiliated Hospital, Zhejiang University School of Medicine, Hangzhou, China (China))

キーワード : Cultural discontinuity、cultural resilience、Large Language Models

In the past five years, large language model (LLM) technologies, represented by GPT-4 and DeepSeek, have developed rapidly and reshaped the underlying logic of knowledge production and dissemination. According to statistics, the global market size of AI-generated content is expected to exceed 100 billion US dollars in 2025. While this technological revolution has improved efficiency, it has also triggered deep-seated cultural discontinuity and mental health crises. Cultural discontinuity is not only manifested in the dissolution of marginal cultures and the homogenization of languages, but also exacerbated psychological changes in the population through mechanisms such as algorithmic recommendations, collaborative filtering, and digital identity recognition. For example, algorithmic recommendations and collaborative filtering can create echo chambers that reinforce existing biases and limit exposure to diverse cultural perspectives. Digital identity recognition mechanisms, which use AI to verify and authenticate individuals in digital environments, can also contribute to psychological changes by shaping how people perceive themselves and others online. This paper, from the perspective of the intersection of technology and humanities, systematically analyzes the manifestations of cultural discontinuity, the impact on mental health, and the response pathways in the era of LLM, attempting to provide theoretical support for building cultural resilience in the technological age.

Poster

2025年9月26日(金) 14:00 ~ 15:10 Poster Session (Foyer 1)

Poster 11**[P-11-03] Spirit Possession in Psychiatric Perspective, a case study in Indonesia**

*Syarifah Aini¹, Bintang Arroyantri Prananjaya¹, Gilang Perkasa Dokman², Puji Rizky Suryani¹, Diyaz Syauki Ikhsan¹, Suksmi Yitnamurti², Abdullah Sahab¹ (1. Department of Psychiatry, Faculty of Medicine, Universitas Sriwijaya, Palembang (Indonesia), 2. Department of Psychiatry, Faculty of Medicine, Universitas Airlangga, Surabaya (Indonesia))

キーワード : spirit possession、possession trance disorder、dissociative、cultural psychiatry

Background: Spirit possession goes back as far as history goes. It is related to spiritual, religious and cultural beliefs. Though has been classified as a mental disorder, the majority cases are not reported and or brought to health institutions^{1,2}.

Case Study: Female, 28 yo, moslem, single, post-graduated, with a history of dysthymia and sexual abuse since adulthood, complained of excessive anxiety and worry since 3 months ago. The complaint worsened after she was consulted to a spiritual guru whom performed rituals remotely. She had forced sexual experiences by a genie, to the point of orgasm, every night after being consulted. She felt disturbed and worry, because rationally that such experiences were not possible.

Discussion: Spirit Possession or Possession Trance Disorder (PTD) is a single or episodic change in consciousness described as an experience of being controlled, accompanied by the disturbance of identity related to certain magical powers. Possession can be occurred when it was allowed, usually by a god or spirit that is worshiped, but can also without consent¹. PTD is classified into the dissociative disorder, subcategory of trance and possession disorders, as a condition of temporary loss of consciousness and or identity². In the case above, the helplessness towards the guru's power followed by the consciousness changes that patient denies logically but her instilled values made she believe irrationally. Based on patient's religious perspective, one of the models used to understand an illness is possession by a genie. Although Quran state that genie and their of existence are to worship Allah, there also the bad ones that cause illness^{3,4}. Because her negative expressions about past abusive experience towards her parents are not allowed, dissociation and repression considered more acceptable⁵.

Conclusion: Aside from psychiatric assessment, religious and cultural belief are also needed to understand the spirit possession.

Poster

2025年9月26日(金) 14:00 ~ 15:10 Poster Session (Foyer 1)

Poster 11**[P-11-04] “Between Demon and *Espíritu*: Transcultural Psychiatry in a Purépecha Woman with Severe Mood Disorder, Psychosis, and Catatonia”**

*Diana Mireles Ortega¹, *Claudia Alejandra Igual¹, Nicholas Soto Hernández¹, Christian Rosales-Michel¹, Aura Garcia-Aguilar¹, Sergio Armando Covarrubias-Castillo¹, Jose Manuel Hernandez Salas, Humberto Arizpe Mejía¹ (1. Hospital Civil de Guadalajara "Fray Antonio Alcalde" (Mexico))

キーワード：Transcultural psychiatry、Culturally sensitive care、Indigenous mental health、Purépecha culture、Spiritual beliefs

The Purépecha people of Michoacán, Mexico, conceptualize health as a balance between body, mind, and spirit. Illness arises when this harmony is disrupted by spiritual or emotional forces. Traditional healers (chiricahuas or uacúsechas) restore balance through rituals, prayers, and herbal interventions. We present the case of a 62-year-old Purépecha woman from a rural community in Michoacán with psychotic depression marked by severe self-harm, nihilistic delusions (“I am pure spirit”), command hallucinations, and catatonia. She attributed her symptoms to malevolent entities and spiritual disturbances, consistent with traditional beliefs. A culturally sensitive, multimodal approach integrated Western psychiatry and Purépecha healing practices. Language support through bilingual staff and interpreters was essential to build trust and improve adherence. Research shows that culturally competent, language-concordant care improves outcomes in Indigenous populations. Treatment combined pharmacotherapy with respect for the patient’s worldview, allowing the participation of traditional healers and rituals. Over several months, she demonstrated partial improvement: depressive symptoms and nihilistic delusions diminished, although distressing hallucinations and motivational deficits persisted. This case highlights how Purépecha cultural perspectives—emphasizing spiritual imbalance, community support, and rituals—are crucial to understanding and addressing mental illness. Persistent challenges included distrust in biomedical systems, treatment abandonment, and language barriers. Implementing culturally responsive care models, such as outreach teams staffed by Purépecha-speaking clinicians and inclusive healthcare spaces, can enhance engagement and continuity. A transcultural approach that acknowledges spiritual beliefs and incorporates ritual practices strengthens therapeutic alliances, improves treatment adherence, and may prevent relapse. Integrating biomedical and traditional care exemplifies the congress theme, “Where the Pacific Rim Meets the World,” by bridging ancestral traditions and modern psychiatry to promote holistic healing among Indigenous populations.

Poster

2025年9月26日(金) 14:00 ~ 15:10 Poster Session (Foyer 1)

Poster 11

[P-11-05] Comparison between psychiatric morbidity in SARS survivors and COVID-19 survivors at 30 months post-outbreak in Hong Kong

*Mei Cheung Wong¹ (1. Dept of Psychiatry, United Christian Hospital, Hong Kong (Hong Kong))

キーワード : COVID-19、Psychiatric comorbidities、Long-term follow up、SARS

Background: Severe acute respiratory syndrome (SARS) and COVID-19 are both highly infectious diseases that cause severe respiratory illness. This study aimed to compare survivors of SARS and COVID-19 and identify factors associated with long-term psychiatric comorbidities.

Methods: This was a retrospective cohort study of adult Chinese survivors of SARS and COVID-19 who had been admitted to the United Christian Hospital, Hong Kong. In total, 90 SARS survivors and 60 COVID-19 survivors agreed to participate, and their data at 30 months post-infection were retrieved.

Results: Compared with SARS survivors, COVID-19 survivors had a lower prevalence of psychiatric disorder at 30 months post-infection (6.7% vs 33.3%, $p < 0.001$). The COVID-19 subjects perceived SARS to be more severe than COVID-19. Higher levels of anxiety and depression were independently associated with greater perceived functional impairment, higher average pain intensity level in the past month, and less use of rational problem solving in COVID-19 subjects.

Conclusion: Experience of SARS might be a protective factor to combat COVID-19 in the Hong Kong population. Potential treatment strategies include optimisation of pain management, physical rehabilitation, and enhancing effective coping strategies.

Poster

2025年9月26日(金) 14:00 ~ 15:10 Poster Session (Foyer 1)

Poster 11**[P-11-06] TRI HITA KARANA CONCEPT AS A FRAMEWORK FOR SUBSTANCE USE DISORDER TREATMENT TARGETING FOREIGN TRAVELLERS IN BALI**

*Savitri Yuanita¹, Cokorda Bagus Jaya Lesmana¹, Luh Nyoman Alit Aryani¹, Hari Nugroho² (1.

Department of Psychiatry University of Udayana (Indonesia), 2. Humphrey Fellowship Program in Substance Abuse Education, Prevention, and Treatment at Virginia Commonwealth University (United States of America))

キーワード：Tri Hita Karana、Substance use Disorder、Foreign Travellers

Background: Bali's resurgence as a global tourism hub coincides with a growing need for specialized substance use disorder (SUD) treatment for foreign travellers, particularly those seeking a spiritual and cultural approach. Tri Hita Karana is a Balinese philosophy that emphasizes maintaining balance in the relationships between humans, God, and nature, to attain harmony and well-being. It may provide a foundation for a holistic approach that integrates spiritual, social, and ecological dimensions into SUD treatment. **Objectives:** This review presents a potential framework for integrating the Tri Hita Karana concept into SUD treatment models for foreign travellers in Bali, with a focus on cultural relevance, therapeutic approaches, and their contributions to holistic recovery. **Methods:** A narrative review approach was employed to identify relevant literature on culture-based SUD treatment, the Tri Hita Karana concept, and SUD treatment practices within the context of tourism and Balinese communities. Scholarly articles, books, institutional reports, and local cultural documents serve as data resources. **Results:** The three dimensions of Tri Hita Karana hold significant potential for integration into treatment components: (1) *Parahyangan* through spiritual therapy and meditation, (2) *Pawongan* through the development of cross-cultural supportive communities, and (3) *Palemahan* through nature-based therapy. This integration might enhance the psychological, social, and spiritual aspects of the patient, thereby improving the effectiveness and sustainability of the recovery process. **Discussion:** The integration of Tri Hita Karana concept into SUD treatment for foreign travellers in Bali offers a contextually relevant and culturally meaningful alternative approach and offers an opportunity to develop an integrative SUD treatment service model that contributes to sustainable tourism and advances public health. Potential challenges, such as intercultural barriers, might be overcome through cross-sectoral collaboration. Further qualitative and quantitative studies are needed to develop an evidence-based model of this treatment approach.

Poster

2025年9月26日(金) 14:00 ~ 15:10  Poster Session (Foyer 1)

Poster 11

[P-11-07] Investigating Neurophysiological Correlates of Depression in Children with ADHD: A qEEG Study

*Yeonjung Lee¹ (1. Soonchunhyang university, Seoul hospital (Korea))

キーワード : Attention-deficit/hyperactivity disorder、Depression、Electroencephalography、Child、Adolescent

Although depression is a common comorbidity in children with attention-deficit/hyperactivity disorder (ADHD), its neurophysiological relationship according to each symptom has rarely been explored. This study aimed to inform clinical practice by exploring the neurophysiological underpinnings of depression comorbidity in ADHD. We conducted a cross-sectional study on 87 children with ADHD (68 males) aged 5 to 18 at a child and adolescent psychiatric clinic. Resting quantitative electroencephalography (qEEG) recordings were collected with eyes closed. We used various questionnaires to evaluate ADHD symptoms, depression levels, and anxiety. Pearson correlation coefficients were used to investigate the relationship between the z-score relative spectral power of qEEG and each psychological symptom. Data were analyzed using IBM SPSS 27.0 (SPSS Inc., Chicago, IL, USA). The study's findings indicated that theta activity at the Fz (frontal), Cz (central), and Pz (parietal) locations had a negative correlation with the severity of ADHD symptoms in children diagnosed with ADHD. In contrast, alpha activity in these same regions demonstrated a positive correlation with symptom severity. Additionally, delta activity in the regions was negatively correlated with depression severity. These findings suggest that alpha and theta activity might serve as a reliable neurophysiological marker of ADHD symptom severity, while delta activity might function as a reliable biological marker of depression severity in children with ADHD. However, further research is needed to generalize the results of this study.

Poster

2025年9月26日(金) 16:00 ~ 17:10 Poster Session (Foyer 1)

Poster 12

[P-12-01]

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

*Mylène Boissy¹, 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 Ohno¹, *Yuta Kitahata² (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 Han¹, *Namyung Lee² (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 Rohde¹, Julia Rosarie Kingston², Hermano Tavares¹ (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 Nudhar¹, Rizma Adlia Syakurah², *Bintang Arroyantri Prananjaya¹, Puji Rizki Suryani¹, Syarifah Aini¹, Diyaz Syauki Ikhsan¹ (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 Appau¹, Mark Boateng¹ (1. Ankaful Psychiatric Hospital (Ghana))

Poster

2025年9月26日(金) 16:00 ~ 17:10  Poster Session (Foyer 1)

Poster 12

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

*Mylène Boissy¹, Fannie Dupont (1. Université du Québec à Trois-Rivières (Canada))

キーワード：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.

Poster

2025年9月26日(金) 16:00 ~ 17:10  Poster Session (Foyer 1)

Poster 12

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

*Yoshiko Ohno¹, *Yuta Kitahata² (1. Graduate School of Human Sciences, The University of Osaka (Japan), 2. Kinan Mental Health Center (Japan))

キーワード : 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.

Poster

2025年9月26日(金) 16:00 ~ 17:10 Poster Session (Foyer 1)

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 Han¹, *Namyung Lee² (1. Samsan Hospital (Korea), 2. Munmak Public Health Clinic (Korea))

キーワード：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.^{1,2}

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.

1. Hundt, N. E., Mignogna, J., Underhill, C., & Cully, J. A. (2013). The relationship between use of CBT skills and depression treatment outcome: A theoretical and methodological review of the literature. *Behavior therapy*, 44(1), 12-26.

2. López-López, J. A., Davies, S. R., Caldwell, D. M., Churchill, R., Peters, T. J., Tallon, D., ... & Welton, N. J. (2019). The process and delivery of CBT for depression in adults: a systematic review and network meta-analysis. *Psychological medicine*, 49(12), 1937-1947.

Poster

2025年9月26日(金) 16:00 ~ 17:10 Poster Session (Foyer 1)

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 Rohde¹, Julia Rosarie Kingston², Hermano Tavares¹ (1. Department of Psychiatry, School of Medicine of the University of São Paulo (Brazil), 2. Department of Folklore, University College Cork (Ireland))

キーワード : 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).

Poster

2025年9月26日(金) 16:00 ~ 17:10 Poster Session (Foyer 1)

Poster 12

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

*Lathifah Nudhar¹, Rizma Adlia Syakurah², *Bintang Arroyantri Prananjaya¹, Puji Rizki Suryani¹, Syarifah Aini¹, Diyaz Syauki Ikhsan¹ (1. Psychiatry Department, Faculty of Medicine, Sriwijaya University (Indonesia), 2. Faculty of Public Health, Sriwijaya University, Indonesia (Indonesia))

キーワード : 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.

Poster

2025年9月26日(金) 16:00 ~ 17:10  Poster Session (Foyer 1)

Poster 12

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

*John Appau¹, Mark Boateng¹ (1. Ankaful Psychiatric Hospital (Ghana))

キーワード : 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.

Poster

2025年9月26日(金) 11:00 ~ 11:50 Poster Session (Foyer 2)

Poster 13

[P-13-01]

An Accessible, Affordable and Effective Clinical Nature-Based Intervention Programme for ASD Children and their caregivers

*Tammy Neo¹, *John, Chee Meng Wong^{1,2}, Angelia Sia³, Esther, Yuen Ling Tai¹, Stephanie, Sze-Yin Seow¹, Michelle Lee, Christel Chang, Tiffany Ho¹, Natalie Lei¹, Maria Paula Leon Mora, Kenneth Khoo³, Kian Seng Ding, Maria Koh, *Kee Juan Yeo² (1. National University Hospital, Singapore (Singapore), 2. National University of Singapore (Singapore), 3. National Parks Board of Singapore (Singapore))

[P-13-02]

Self-injury features (addictive features, modalities, and motives) and relationships with psychological factors, distal risk factors in adolescent inpatients aged 13–19: Network analysis and mediation path analysis

*AQian Hu^{1,2}, ZiXin Mao^{4,3}, WanJun Guo^{1,2,3} (1. Affiliated Mental Health Center & Hangzhou Seventh People's Hospital, Zhejiang University School of Medicine (China), 2. Zhejiang university (China), 3. Mental Health Center and Psychiatric Laboratory, West China Hospital, Sichuan University (China), 4. Yichang Mental Health Center (China))

[P-13-03]

Switching at the Peak: The Malaysian Experience. A Case Series on Lemborexant as a Nondependent Agent for Managing Benzodiazepine or Z Drug Dependence in Insomnia.

*Julian Joon Ip Wong¹ (1. Universiti Malaya (Malaysia))

[P-13-04]

Association between anti-infective agent prescription and incidence of neurodevelopmental disorder

*yunhye Oh¹, Vin Ryu¹ (1. Hallym University Sacred Heart Hospital (Korea))

[P-13-05]

Virtual Hospitalization treatment for OCD

*Oded ben arush¹ (1. OCD treatment center clinical director (Israel))

Poster

2025年9月26日(金) 11:00 ~ 11:50 Poster Session (Foyer 2)

Poster 13**[P-13-01] An Accessible, Affordable and Effective Clinical Nature-Based Intervention Programme for ASD Children and their caregivers**

*Tammy Neo¹, *John, Chee Meng Wong^{1,2}, Angelia Sia³, Esther, Yuen Ling Tai¹, Stephanie, Sze-Yin Seow¹, Michelle Lee, Christel Chang, Tiffany Ho¹, Natalie Lei¹, Maria Paula Leon Mora, Kenneth Khoo³, Kian Seng Ding, Maria Koh, *Kee Juan Yeo² (1. National University Hospital, Singapore (Singapore), 2. National University of Singapore (Singapore), 3. National Parks Board of Singapore (Singapore))

キーワード : Autism Spectrum Disorder、Family Therapy、Nature Therapy、Emotional Well-being、Mental Health

Nature has been proven to be useful in improving the mental well-being of neurotypical children. A lack of affordable and accessible therapies for Autism Spectrum Disorder (ASD) children persists, with an even greater lack of family-based therapies and self-care programs.

A 6-week 90-minute intervention program curated based on DIRFloortime® principles involving caregiver-facilitator assisted nature play was carried out in specially designed Nature Playgardens. Participant dyads (n=28) were ASD boys aged 5-9 and their caregivers aged 21-80. Study consisted of 4 time-points, pre (T0), mid (T1), post (T2), post 4-weeks (T3) intervention. Pediatric Quality of Life Inventory (PEDsQL) measured child's psychosocial quality of life (QoL) at T0, T2, and T3, while the Emotional Regulation Checklist (ERC) tested for a child's negative emotional reactivity at T0 and T2. General Health Questionnaire (GHQ-12) measured caregiver's mental well-being at T0, T1, T2 and T3 while Burden Scale for Family Caregivers (BSFC-s) measured caregiving burden.

Linear Mixed Model Analysis controlling for age revealed at 95% CI:

Child participants' negative emotional reactivity (ERC) significantly decreased from T0 to T2, mean difference = -4.71, p<.001, CI (-6.31, -3.11). Child's psychosocial QoL (PEDsQL) significantly increased from T0 to T2 and T3. Mean difference (T2) = 5.96, p = .004, CI (1.98, 9.95). Mean difference (T3) = 6.82, p = .001, CI (2.84, 10.81).

Caregivers' mental well-being improved with a significant decrease in GHQ-12 scores from T0 to T2, mean difference = -2.03, p = .046, CI (-3.82, -.034). Pearson correlation revealed a significant negative relationship between caregiving burden and child's psychosocial QoL at T2, r(26) = -.42, p =.027.

Hence, this clinical nature-based intervention helped increase emotional and psychosocial health of ASD children, with this improvement simultaneously decreasing caregiving burden. An increase in overall caregiver psychological well-being was also observed, validating an effective, accessible and affordable self-care intervention program.

Poster

2025年9月26日(金) 11:00 ~ 11:50 Poster Session (Foyer 2)

Poster 13

[P-13-02] Self-injury features (addictive features, modalities, and motives) and relationships with psychological factors, distal risk factors in adolescent inpatients aged 13–19: Network analysis and mediation path analysis

*AQian Hu^{1,2}, ZiXin Mao^{4,3}, WanJun Guo^{1,2,3} (1. Affiliated Mental Health Center & Hangzhou Seventh People's Hospital, Zhejiang University School of Medicine (China), 2. Zhejiang university (China), 3. Mental Health Center and Psychiatric Laboratory, West China Hospital, Sichuan University (China), 4. Yichang Mental Health Center (China))

キーワード : Self-injury、Addictive features、Adolescents、Psychological factors、Stress

Background: Self-injury is an increasingly serious problem among adolescents and is associated with various mental health issues. However, little is known about the relationship between adolescent self-injury features and the underlying psychopathological mechanisms. This study aims to explore the relationships among self-injury features and the complex relationships with psychological factors and distal risk factors.

Methods: We recruited 471 hospitalized adolescents aged 13 to 19 who had engaged in self-injury within the past year. The study first classified self-injury by tool type into external-tool and own-body self-injury modalities. Network analysis was used to examine associations among self-injury features, such as addictive features, modalities, and motives. Using network analysis and mediating path analysis, we further explored the pathways between self-injury features and distal stressors (e.g., childhood trauma, adolescent stress) as well as proximal psychological symptoms (e.g., psychoticism, depression, anxiety, paranoid).

Results: Addictive features was the most central node in the self-injury features network; Psychoticism and depression were central nodes in the self-injury addictive features and risk factor network; In the pathways from distal risk factors, such as childhood trauma or adolescent stress, to self-injury addiction, psychological factors play a full or partial mediating role, respectively; Importantly, psychological factors influenced self-injury modalities differently: for external-tool self-injury, effects were mostly indirect via addiction and motives pathways; for own body self-injury, both direct and indirect effects were observed; External-tool self-injury exhibited higher addictive potential and stronger suicidal motives than own-body self-injury;

Conclusion: Addictive features are a core characteristic of self-injury and a critical target for intervention. Early intervention for psychological symptoms, especially psychoticism and depression, may prevent self-injury addiction triggered by distal risk factors. This study underscores the importance of tailoring intervention strategies according to different self-injury modalities. Specifically, external-tool self-injury requires early identification of suicidal motives and prevent addiction. Overall, this study offers valuable insights for early prevention and targeted intervention in adolescent self-injury.

Poster

2025年9月26日(金) 11:00 ~ 11:50  Poster Session (Foyer 2)

Poster 13

[P-13-03] Switching at the Peak: The Malaysian Experience. A Case Series on Lemborexant as a Nondependent Agent for Managing Benzodiazepine or Z Drug Dependence in Insomnia.

*Julian Joon Ip Wong¹ (1. Universiti Malaya (Malaysia))

キーワード : clinical psychiatry、insomnia、DORA、benzodiazepines、z-drug

We describe two clinical cases of successful crosstapering from benzodiazepines and z drugs to lemborexant, with clinical utility in facilitating transition from conventional hypnotic dependence and minimizing adverse effects.

Poster

2025年9月26日(金) 11:00 ~ 11:50 Poster Session (Foyer 2)

Poster 13**[P-13-04] Association between anti-infective agent prescription and incidence of neurodevelopmental disorder***yunhye Oh¹, Vin Ryu¹ (1. Hallym University Sacred Heart Hospital (Korea))

キーワード : Anti-infective agent、Neurodevelopmental disorder、Infection

Early-life infections may increase the risk of neurodevelopmental disorders, but the role of anti-infective agents remains unclear. This study aimed to examine the association between hospitalization for infections in infancy and subsequent exposure to anti-infective agents with the risk of neurodevelopmental disorders. Using a nationwide claims database from South Korea, we constructed a matched cohort of children hospitalized five or more times due to infection before age five, and a control group hospitalized for inguinal hernia. Propensity score matching was applied to reduce confounding. We found that the frequency and duration of anti-infective agent use, particularly antibacterial and antifungal agents, were associated with increased risk of neurodevelopmental disorders. Antiviral agents showed no significant association. The association was strongest for exposures occurring before one year of age. These findings suggest that early repeated infection-related hospitalizations and anti-infective exposures may contribute to neurodevelopmental vulnerability. Judicious use of anti-infectives in early childhood may be warranted.

Poster

2025年9月26日(金) 11:00 ~ 11:50 Poster Session (Foyer 2)

Poster 13

[P-13-05] Virtual Hospitalization treatment for OCD

*Oded ben arush¹ (1. OCD treatment center clinical director (Israel))

キーワード : OCD treatment、Virtual Hospitalization、Intensive outpatient treatment

Abstract
Virtual Hospitalization treatment for OCD
Oded Ben Arush, Joseph Zohar, Lior Carmi
The Israeli Center for the treatment for obsessive and compulsive disorders, Modiin Israel
Obsessive-compulsive disorder (OCD), due to its distinct features, requires specialized behavioral and pharmacological interventions.

Virtual hospitalization is an innovative approach to delivering intensive, continuous care in the frame of outpatient clinic, and could also replace physical hospitalization. Virtual hospitalization utilizes technology—including WhatsApp groups, remote monitoring, and specialized applications—to provide real-time support. At the Israeli Center for OCD, patients and their families are integrated into dedicated WhatsApp groups, facilitating 24/7 immediate communication with the treatment team. Patients report obsessive thoughts or compulsive urges as they arise, enabling prompt intervention. Some patients are required to record and share videos of their exposure exercises, ensuring adherence to therapeutic guidelines and preventing maladaptive coping mechanisms, such as reassurance-seeking from family members. This model not only enhances patient accountability within their natural environment but also fosters independence rather than reliance on hospital staff. It allows for precise exposure therapy, guided by a consensus-driven approach among clinicians regarding intensity and technique. Furthermore, virtual monitoring enables the safe administration of high-dose serotonin reuptake inhibitors (SRIs) while closely tracking side effects. Over the past decade, this approach has demonstrated effectiveness across a wide spectrum of patients, particularly those with severe OCD. Exclusion criteria include individuals at risk of suicide, aggression, or severe impulse control issues, who require different programs before joining virtual care.

Poster

2025年9月26日(金) 14:00 ~ 15:10  Poster Session (Foyer 2)

Poster 14

[P-14-01]

A Systematic Review of Suicide Intervention Components to Manage Suicide Risk in Emergency Psychiatric Settings

Hoi Ting Leung¹, *Janine H.N. Ang¹ (1. Institute of Mental Health (Singapore))

[P-14-03]

Exploring Cannabis Knowledge and Attitudes among Mental Health Clinic Outpatients: Implications for Education and Intervention Strategies

*Napat Kammarabutr¹, Veevarin Charoenporn¹, Pairath Tapanadechopone¹ (1. Thammasat University Hospital (Thailand))

[P-14-04]

Selective neuroinflammation induced by chronic stress in zebrafish: Differential responses in telencephalon and habenula

*Cheolmin Shin¹ (1. Korea University College of Medicine (Korea))

[P-14-05]

A Questionnaire Survey on the experiences of hotline counselors involved in suicide prevention in Tokyo

*Rieko Shioji¹, Hiromi Imuta¹, Atsuko Tanimura¹, Mayuko Yamashita¹ (1. Faculty of Health Sciences, Tokyo Metropolitan University (Japan))

[P-14-06]

The Incidence Rates, Characteristics, and Related Factors of Student Suicides in Taiwan

*YU-CHUAN HUANG¹, Hsuan Chiu¹, Hui-Xiu Chen¹, *Shu-Sen Chang¹ (1. National Taiwan University (Taiwan))

[P-14-07]

Bupropion for Cocaine Addiction: A Systematic Review and Meta-Analysis of Randomized Controlled Trials

*Prajna Wijaya¹, *Kristiana Siste², Andrea Gonzalez Lezana³, Camila Laiana Magri Mendes⁴, Nazlia Hariza Rahmadani Latulumamina⁵ (1. Faculty of Medicine, Universitas Indonesia (Indonesia), 2. Department of Psychiatry, Faculty of Medicine, Universitas Indonesia – dr. Cipto Mangunkusumo General Hospital, Jakarta, Indonesia (Indonesia), 3. Instituto de Investigaciones Clínicas Mar del Plata, Buenos Aires (Argentine), 4. Faculty of Medicine, Unicesumar (Brazil), 5. Faculty of Medicine, Universitas Pattimura (Indonesia))

Poster

2025年9月26日(金) 14:00 ~ 15:10 Poster Session (Foyer 2)

Poster 14**[P-14-01] A Systematic Review of Suicide Intervention Components to Manage Suicide Risk in Emergency Psychiatric Settings**Hoi Ting Leung¹, *Janine H.N. Ang¹ (1. Institute of Mental Health (Singapore))

キーワード : Suicide prevention、Emergency、Psychiatric setting

Background: Mental health needs have been increasing globally, including Singapore, with more reports of individuals expressing suicidal ideations. One such touchpoint is the Emergency Department (ED), which aims to assess suicide risk and stabilise individuals with active suicidal ideation. Apart from providing short-term suicide watch, EDs around the world have explored and implemented a variety of psychosocial strategies to enhance safety of patients after their discharge from ED. This current research hopes to answer three questions: 1.What are the different suicide intervention/prevention components in emergency psychiatric settings? 2.How are these components implemented? 3.What are the outcomes studied? It is hoped that the findings from the review can inform ED efforts in managing suicide risk in emergency psychiatric settings. **Methods:** The study aimed to systematically review available scientific literature related to suicide intervention components in emergency psychiatric settings. A systematic literature search based on PRISMA model was conducted using two databases, PsychINFO and PsychARTICLES. **Results:** Following screening, 52 full text articles were eligible for review. Intervention components gleaned from the included articles mainly comprised suicide intervention programmes and therapy approaches. The key issues these interventions sought to target were reducing suicidal behaviour, improving repertoire of safety resources and confidence in resource utilisation, and augmenting family/social support. **Discussions and Conclusions:** The review reports findings to address the three research questions. In summary, EDs across the world have adopted intervention components based on established suicide intervention programmes and therapy approaches. These interventions were provided to both patients and caregivers through a variety of means and achieved positive effects.

Poster

2025年9月26日(金) 14:00 ~ 15:10 Poster Session (Foyer 2)

Poster 14**[P-14-03] Exploring Cannabis Knowledge and Attitudes among Mental Health Clinic Outpatients: Implications for Education and Intervention Strategies**

*Napat Kammarabutr¹, Veevarin Charoenporn¹, Pairath Tapanadechopone¹ (1. Thammasat University Hospital (Thailand))

キーワード : Cannabis、Knowledge、Attitude、Legalization、Mental health

Introduction: This study explores the attitudes and knowledge regarding cannabis legalization and potential harm among outpatient psychiatric patients at Thammasat University Hospital. It explores perceptions of cannabis legalization considering age, gender, diagnosis, frequency of use and assesses knowledge regarding the adverse effects of cannabis on mental health, focusing on patient awareness of associated risks.

Objectives: To investigate the views, attitudes, knowledge, understanding of possible cannabis adverse effects and risk factors among non-emergency psychiatric patients.

Methods: A cross-sectional research design was used, targeting patients over 15 years old attending the mental health clinic from May 31 to October 31, 2023. Purposive sampling selected patients diagnosed with primary psychiatric disorders under ICD-10 codes F20-F29, F30-F31, F32-F34, F40-F41, and F43. A total of 423 patients were surveyed using validated questionnaires, including the Burapha University questionnaire and WHO-Smoking and Substance Involvement Screening Test for cannabis (ASSIST) V3.

Results: Of the 423 patients, 59.1% were women, with a mean age of 32.62 years. The majority were single (75.95%) and Buddhist (80.6%), with 50.15% earning less than 15,000 baht monthly. Depressive disorders were diagnosed in 49.1%, 14.2% had a history of cannabis use, and 5.2% were current users with 79.3% of users are at intermediate risk of addiction.

Notably, 82% had poor understanding of cannabis, with only 18% having fair knowledge. Influential factors included age, occupation, and history of cannabis use. Perceptions toward cannabis were generally fair, while those with higher incomes and cannabis use history had more positive perceptions. No significant association was found between variables and attitudes towards cannabis laws and recreational use.

Conclusions: These findings highlight the need for tailored education and intervention strategies to address knowledge gaps and potential harms associated with cannabis use in this vulnerable population, particularly considering the high proportion of women and individuals with low socioeconomic status in this sample.

Poster

2025年9月26日(金) 14:00 ~ 15:10 Poster Session (Foyer 2)

Poster 14**[P-14-04] Selective neuroinflammation induced by chronic stress in zebrafish: Differential responses in telencephalon and habenula***Cheolmin Shin¹ (1. Korea University College of Medicine (Korea))

キーワード : neuroinflammation、unpredictable chronic stress model、depression、zebrafish

Background: Neuroinflammation is associated with depression. However, the mechanism behind neuroinflammation related to depression remains unknown, although it is broadly linked to intricate interactions in innate and acquired immunity pathways, with its specific effects on neuron generation and function still unclear.

Aims and Objectives: This study aimed to determine whether chronic stress affects the regulation of neuroinflammation in the telencephalon and habenular nuclei of the zebrafish brain.

Methods: Forty adult (4–5 months old) male and female (approximately 50:50) wild-type short-fin zebrafish were used. Unpredictable chronic stress (UCS) was applied to half of the animals. The novel tank, predator avoidance, and social preference tests were used to assess depression-like behaviors. We examined the mRNA expression of neuroinflammation-related genes including *il1b*, *il6*, *infg1*, *tnfa*, and *nfkb2* in the telencephalon and habenular region. Additionally, RNAscope *in situ* hybridization was used to visualize *il1b* expression in both regions.

Results: UCS increased locomotor activity, including greater distance traveled, higher swimming velocity, and a higher frequency of vertical movement, with reduced latency to enter the upper zone. UCS also induced increased side-to-side motion in response to a predator and decreased proximity to conspecifics in the social preference test. Gene expression analysis revealed significant upregulation of *il1b*, *tnfa*, and *infg1* in the telencephalon, but not in the habenular nuclei. RNAscope analysis further confirmed increased *il1b* transcript abundance in the telencephalon, while the habenular region showed no detectable elevation, despite comparable regional area, suggesting region-specific neuroimmune activation.

Conclusions: Chronic stress enhances neuroinflammation in the zebrafish brain, particularly in the telencephalon. The findings suggest that anatomical and molecular differences contribute to regional vulnerability, and support the involvement of telencephalic neuroimmune processes in stress-related behavioral changes. In contrast, the habenular nucleus showed no clear evidence of inflammatory cytokine upregulation, possibly reflecting distinct or delayed neuroimmune dynamics.

Poster

2025年9月26日(金) 14:00 ~ 15:10 Poster Session (Foyer 2)

Poster 14**[P-14-05] A Questionnaire Survey on the experiences of hotline counselors involved in suicide prevention in Tokyo**

*Rieko Shioji¹, Hiromi Imuta¹, Atsuko Tanimura¹, Mayuko Yamashita¹ (1. Faculty of Health Sciences, Tokyo Metropolitan University (Japan))

キーワード : suicide prevention、lifeline、Tokyo metropolitan、support for supporter、questionnaire survey

Background: Suicide prevention is an extremely crucial mental health-related issue that needs to be addressed. The situation in Tokyo remains serious, with approximately 2,000 people taking their own lives each year. Tokyo has been working on comprehensive measures for suicide prevention.

Various issues need to be addressed, and the importance of support for suicide prevention workers has been pointed out. We conducted a questionnaire survey targeting hotline counselors, who directly provide support to individuals who attend consultations, with the aim of suicide prevention.

Methods: Anonymous questionnaires (partially using paper medium) were administered online. Participants are suicide prevention hotline counselors in Tokyo who have agreed to participate. They belong to three organizations that agreed to cooperate in the study, out of seven organizations listed in the Tokyo Metropolitan Government Bureau of Social Welfare and Public Health's list of consultation services.

Results: Responses were obtained from 66 individuals. Two organizations were volunteer-centric consultation agencies, while another was a consultation agency comprising full-time and part-time counselors. Over 50% of respondents were aged 60~69, 70% were female, and 73% were volunteers. All respondents had prior experience dealing with individuals with suicidal ideation, 80% had prior experience dealing with individuals who revealed that they were contemplating suicide(75% among volunteers alone). Over 70% of respondents had received consultations regarding individuals close to the consultor and over 90% had received consultations from individuals who had previously attempted suicide. Approximately 80% had experience receiving consultations from bereaved families. The *presence of, as well as relationships with one's companions* was frequently mentioned in the open-ended answers received regarding factors that supported them.

Discussion: Suicide prevention counselors receive consultations regarding suicide, including that from individuals contemplating suicide. Increasing available support for suicide prevention support providers is desirable.

Poster

2025年9月26日(金) 14:00 ~ 15:10  Poster Session (Foyer 2)

Poster 14

[P-14-06] The Incidence Rates, Characteristics, and Related Factors of Student Suicides in Taiwan

*YU-CHUAN HUANG¹, Hsuan Chiu¹, Hui-Xiu Chen¹, *Shu-Sen Chang¹ (1. National Taiwan University (Taiwan))

キーワード : Suicide、Students、Characteristics、Sex、Age

Suicide is a major public health concern among children and youth worldwide. This study examined the incidence, characteristics, and related factors of student suicides in Taiwan (2018-2023). We analyzed national student death reports from the Ministry of Education, Taiwan. The suicide rates for students were compared with the general population by calculating the standard mortality ratio (SMR) and 95% Confidence Intervals (CIs) using Poisson regression. Sex and age differences in the characteristics (method, location, month) and related factors of student suicides were analyzed using the Pearson's chi-square test or Fisher's exact test, where appropriate, and logistic regression for odds ratios (ORs). When examining the monthly variations in suicide, the monthly rates and SMRs of suicide were calculated. In 2018-2023, there were 622 student suicides (51% males), and 55% were university students. Female students aged 23-29 had higher suicide rates than their general population counterparts (SMR = 1.46, 95% CI 1.13-1.87). Falling from a height (48%) was the most common method, especially among females (55%) and younger students aged 6-18 (59%). Most suicides occurred off-campus (83%), mainly at home (51%). March and October were peak months for female and male suicides, respectively. Mental illness (40%), family relationship issues (33%), and academic-related issues (25%) were the most common related factors. Sexual assault, harassment, and bullying incidents showed the strongest association with female student suicide (OR = 8.72, 95% CI 1.99-38.25). Financial, workplace, and housing issues showed the strongest association with suicide in older students aged 19-29 (OR = 5.90, 95% CI 2.30-15.15). Only 39% and 42% of students had prior contact with on- and off-campus counseling services before suicide, respectively. Student suicide characteristics and related factors differ by sex and age, and low service contacts highlight the urgent need to enhance help-seeking and service accessibility for students at risk of suicide.

Poster

2025年9月26日(金) 14:00 ~ 15:10 Poster Session (Foyer 2)

Poster 14**[P-14-07] Bupropion for Cocaine Addiction: A Systematic Review and Meta-Analysis of Randomized Controlled Trials**

*Prajna Wijaya¹, *Kristiana Siste², Andrea Gonzalez Lezana³, Camila Laiana Magri Mendes⁴, Nazlia Hariza Rahmadani Latulumamina⁵ (1. Faculty of Medicine, Universitas Indonesia (Indonesia), 2. Department of Psychiatry, Faculty of Medicine, Universitas Indonesia – dr. Cipto Mangunkusumo General Hospital, Jakarta, Indonesia (Indonesia), 3. Instituto de Investigaciones Clínicas Mar del Plata, Buenos Aires (Argentine), 4. Faculty of Medicine, Unicesumar (Brazil), 5. Faculty of Medicine, Universitas Pattimura (Indonesia))

キーワード：Bupropion、Cocaine、Addiction、Use-disorder、dependence

Introduction:

Cocaine addiction, including cocaine use disorder and dependence, continues to pose a major global public health challenge. According to the World Drug Report 2024, approximately 0.45% of individuals aged 15 to 64 worldwide have used cocaine in the past year. In Indonesia, authorities have seized a total of 1,337.36 grams of cocaine over the past decade, suggesting an emerging concern. According to the National Narcotics Board in 2022, stimulants are among the most frequently used substances in Indonesia. While contingency management remains the most effective behavioral treatment, access is limited, and there is currently no FDA-approved pharmacotherapy for stimulant or cocaine use disorders. Off-label use of bupropion, a norepinephrine and dopamine reuptake inhibitor, has gained attention for its potential to reduce cocaine use and comorbid depressive symptoms. However, prior evidence is limited.

Aim:

To provide a comprehensive evaluation of bupropion's efficacy in promoting abstinence, reducing depressive symptoms, and adverse effects in individuals with cocaine addiction.

Methods:

We conducted a systematic review and meta-analysis following the Cochrane Handbook and PRISMA guidelines. Eligible studies included randomized controlled trials comparing bupropion with placebo or standard care in patients with cocaine addiction. We searched PubMed, EMBASE, ClinicalTrials.gov, and Cochrane Library up to July 2024. Primary outcomes were abstinence duration and depressive symptoms. Risk ratios and mean differences were calculated using random-effects models.

Results:

Five RCTs with 397 patients were included. Bupropion significantly increased the longest abstinence duration (mean difference: 1.75 days, 95% CI: 0.29, 3.20, $p = 0.02$) but showed no significant effects on achieving consecutive abstinence of 2 or 3 weeks. Bupropion shows no significant difference in depression scores and adverse effects.

Conclusions:

Bupropion may enhance abstinence duration and alleviate depressive symptoms in individuals with cocaine addiction, though the evidence remains limited. Further high-quality trials are needed to strengthen these findings.

Poster

2025年9月26日(金) 10:00 ~ 11:00  Poster Session (Foyer 2)

Poster 15

[P-15-01]

Relationships Between Adult Attention Deficit Hyperactivity Disorder Symptoms and Problem/Pathological Gambling

*Wonseok Lee¹, Moon-Doo Kim^{1,2}, Young-Eun Jung^{1,2} (1. Department of Psychiatry, Jeju National University Hospital (Korea), 2. Department of Psychiatry, School of Medicine, Jeju National University (Korea))

[P-15-02]

Differentiating suicide attempters from suicidal ideators: Differences between major depressive and bipolar disorders

Chanhee Park¹, *Christopher Hyung Keun Park¹ (1. Asan Medical Center (Korea))

[P-15-03]

The Status of Hopelessness and Related Factors in Korean Female Full-Time Homemakers: A Community-Based Cross-Sectional Survey Study

*TAE-YOUNG HWANG¹ (1. NATIONAL FORENSIC HOSPITAL, MINISTRY OF JUSTICE (Korea))

[P-15-04]

Trends in diagnoses in adult developmental disorder outpatient clinics

-Five years on-

*Yoshifumi Nakamura¹, Haruhisha Oota^{1,2}, Motoaki Nakamura², Tsukasa Okimura², Mari Yamada¹, Ayaka Nakai¹, Yasusshi Oda¹, Takashi Nishio¹, Akira Iwanami¹ (1. Showa Medical University Psychiatry Department (Japan), 2. SHOWA Medical University Medical Institute of Developmental Disabilities Research (Japan))

[P-15-05]

Validation of New Stress Scale: Pregnant Women Perspective

*Siti Noor Aisyah Ghani¹, Shalisah Sharip¹ (1. National University of Malaysia (Malaysia))

[P-15-06]

Cross-Cultural Assessment of Self-Stigma in Epilepsy: A Multinational Comparative Study Using the Epilepsy Self-Stigma Scale (ESSS)

*Izumi Kuramochi¹, Go Taniguchi¹, Esra Yildiz⁴, Estefanía Conde-Blanco³, Anne Hagemann², Kheng-Seang Lim⁵, Eiji Nakagawa¹ (1. National Center of Neurology and Psychiatry (Japan), 2. Society for Epilepsy Research, Bielefeld (Germany), 3. Epilepsy Program, Neurology Department, Hospital Clinic Barcelona (Spain), 4. Faculty of Nursing, Ataturk University, Erzurum (Turkey), 5. Division of Neurology, Department of Medicine, Faculty of Medicine, Universiti Malaya (Malaysia))

Poster

2025年9月26日(金) 10:00 ~ 11:00 Poster Session (Foyer 2)

Poster 15**[P-15-01] Relationships Between Adult Attention Deficit Hyperactivity Disorder Symptoms and Problem/Pathological Gambling**

*Wonseok Lee¹, Moon-Doo Kim^{1,2}, Young-Eun Jung^{1,2} (1. Department of Psychiatry, Jeju National University Hospital (Korea), 2. Department of Psychiatry, School of Medicine, Jeju National University (Korea))

キーワード：Pathological gambling、ADHD、Korean adults

Objectives

Recently, the clinical importance of attention deficit hyperactivity disorder (ADHD) and problem/pathological gambling has been increasing. Studies on the relationship between ADHD and problem/pathological gambling are ongoing worldwide but few are conducted. This study examined the relationship between adult ADHD symptoms and problem/pathological gambling.

Methods

Data from 500 adults aged 20 to 59 who took part in a community survey were analyzed. All participants completed self-report questionnaires in which demographic variables and ADHD symptoms were assessed using the Adult ADHD Self-Report Scale. Problem/pathological gambling was assessed using a Korean version of the Diagnostic Interview Schedule.

Results

The prevalence of adult ADHD symptoms was 15.2%. The association between ADHD symptoms and problem/pathological gambling was significant ($p<0.001$). Additionally, subjects with ADHD symptoms showed a more positive attitude toward gambling than subjects without symptoms. Multivariate analysis revealed a significant relationship between ADHD symptoms and problem/pathological gambling (odds ratio, 2.394; 95% confidence interval, 1.104–5.191; $p=0.027$).

Conclusion

Problem/pathological gambling is associated with ADHD symptoms. Therefore, clinicians should provide education and intervention on gambling behavior to subjects with ADHD symptoms.

Poster

2025年9月26日(金) 10:00 ~ 11:00  Poster Session (Foyer 2)

Poster 15

[P-15-02] Differentiating suicide attempters from suicidal ideators: Differences between major depressive and bipolar disorders

Chanhee Park¹, *Christopher Hyung Keun Park¹ (1. Asan Medical Center (Korea))

キーワード : suicide, major depressive disorder, bipolar disorder

Background

Studies have emphasized the importance of identifying psychological variables that differentiate individuals who have engaged in suicide attempts from those who had suicidal ideations that did not progress to attempts.

Objectives

This study aimed to investigate the differences between individuals with major depressive disorder (MDD) and bipolar disorder (BD) in the progression from suicidal ideations to suicide attempts, using the ideation-to-action framework.

Methods

Participants were outpatients who visited the Mood Disorder and Suicide Prevention Clinic at Asan Medical Center, South Korea. Suicidal history, early maladaptive schemas, borderline personality features, childhood maltreatment, and interpersonal psychological theory of suicide factors were assessed using self-report questionnaires. Independent t-tests and multivariate logistic regression examined factors differentiating patients with MDD and BD who experienced suicidal ideations (SIs) and those with suicide attempt histories (SAs).

Results

The proportion of SAs was significantly higher in the BD group than in the MDD group. In the BD group, the differentiating factors included multiple early maladaptive schemas, borderline personality features, childhood physical and sexual abuse, and perceived burdensomeness. In the MDD group, the differentiating factors were limited to specific maladaptive schemas, self-harming behavior, childhood emotional abuse, perceived burdensomeness, and fearlessness about death.

Conclusions

This study revealed different factors distinguishing between SIs and SAs in those with MDD versus BD, suggesting the importance of considering diagnostic differences within the ideation-to-action framework. Future research should prospectively evaluate the predictive validity of these differentiating factors in assessing suicide risk.

Poster

2025年9月26日(金) 10:00 ~ 11:00  Poster Session (Foyer 2)

Poster 15

[P-15-03] The Status of Hopelessness and Related Factors in Korean Female Full-Time Homemakers: A Community-Based Cross-Sectional Survey Study

*TAE-YOUNG HWANG¹ (1. NATIONAL FORENSIC HOSPITAL, MINISTRY OF JUSTICE (Korea))

キーワード : Full-Time Homemaker、Female、Mental Health、Hopelessness、Suicide

Objectives: This study aimed to investigate the status of hopelessness and related factors in community-dwelling female full-time homemakers, and to evaluate the necessity of policy approaches to the full-time homemakers as a high-risk group for mental health. **Method:** This survey study was sequentially and randomly conducted targeting community-dwelling full-time female homemakers aged 19 to 50, using structured questionnaires composed of general items as well as the Korean version of Beck Hopelessness Scale (K-BHS), the Korean version of the Glasgow Sleep Effort Scale (K-GSES), and Resenberg Self-Esteem Scale (RSES). The monetary values of the labor of individual full-time homemakers were measured through the willingness-to-pay (WTP) approach. **Results:** A total of 180 questionnaires were distributed, of which 154 were analyzed. In the frequency analysis, the total proportion of hopelessness group was 62.3%, of which 42.2% was for the mild level, 16.2% for moderate level, and 3.9% for the severe level. In between-group comparative analyses [Normal group (n = 58) vs. Hopelessness group (n = 96)], significant differences were manifested in the length of career ($t = -2.667, p = 0.008$), level of social activity ($t = 2.762, p = 0.008$), degree of emotional bond with husband ($t = 2.339, p = 0.021$), K-GSES ($t = -2.459, p = 0.015$), and RSES($t = 5.380, p < 0.001$). Furthermore, in binary logistic regression analysis, significant negative factor for the transition to the hopelessness group was level of social activity ($p = 0.021$; odds ratio (OR), 0.694; 95% confidence interval (CI), 0.508 - 0.946), and significant positive factor was the score on K-GSES ($p = 0.041$; OR, 1.155; 95% CI, 1.006 – 1.328). **Conclusion:** The findings of this study showed that a substantial number of female full-time homemakers might be in a state of hopelessness, implicating that full-time homemakers are at high-risk for mental health and suicide. Therefore, policy and psychiatric intervention to promote and recover mental health of full-time homemakers is essential.

Poster

2025年9月26日(金) 10:00 ~ 11:00 Poster Session (Foyer 2)

Poster 15

[P-15-04] Trends in diagnoses in adult developmental disorder outpatient clinics

-Five years on-

*Yoshifumi Nakamura¹, Haruhisha Oota^{1,2}, Motoaki Nakamura², Tsukasa Okimura², Mari Yamada¹, Ayaka Nakai¹, Yasusshi Oda¹, Takashi Nishio¹, Akira Iwanami¹ (1. Showa Medical University Psychiatry Department (Japan), 2. SHOWA Medical University Medical Institute of Developmental Disabilities Research (Japan))

キーワード：Review of medical records、autism spectrum disorder、ADHD、specialized outpatient clinic for adult developmental disorders

[Objective] Showa Medical University has had a specialized outpatient clinic for adult developmental disorders since 2007. Previously, we retrospectively investigated the medical records of patients who visited the adult developmental disorder specialist clinic from April 2008 to March 2017, and reported on their age, sex, diagnosis, AQ score, etc. This time, we investigated from April 2017 to March 2022.[Method] We retrospectively investigated the medical records of the developmental disorder specialist clinic from April 2017 to March 2022 and compared the results with the previous results. The diagnoses of Asperger's syndrome, pervasive developmental disorder, and autism were summarized as autism spectrum disorder (ASD).[Results] Compared to the previous survey, the average age tended to be younger overall. In addition, the gender ratio was not significantly different from the previous survey for any diagnosis, but the proportion of women was relatively increased in diagnoses other than ASD + ADHD and developmental disorders. In this survey, the proportion of patients diagnosed with developmental disorders as their main illness increased. In particular, the proportion of patients with ASD+ADHD increased significantly. AQ scores generally declined. [Discussion] The younger average age of patients suggests more people are seeking medical care earlier due to increased awareness of developmental disorders. The increased proportion of patients diagnosed with developmental disorders suggests that accurate knowledge has spread and more reliable patients are seeking medical treatment. The increased proportion of patients with ASD+ADHD represents a change in the awareness of diagnosing physicians due to changes in diagnostic criteria. The decreased proportion of patients diagnosed with ADHD may be due to the increase in ASD+ADHD as well as the increased activity of ADHD specialist outpatient clinics at our hospital. The lower AQ scores suggests that the ASD characteristics of those diagnosed with developmental disorders may be becoming milder.

Poster

2025年9月26日(金) 10:00 ~ 11:00 Poster Session (Foyer 2)

Poster 15

[P-15-05] Validation of New Stress Scale: Pregnant Women Perspective

*Siti Noor Aisyah Ghani¹, Shalisah Sharip¹ (1. National University of Malaysia (Malaysia))

キーワード : Stress、Questionnaire、Psychometric properties、Pregnant Women

Introduction: Pregnancy-related stress has been extensively documented, however there is a limited availability of effective and simple questionnaire to assess stress during pregnancy. Given that elevated stress levels during pregnancy are linked to negative health outcomes for both mother and child, there is a critical need for reliable screening tools in clinical practice. This study aims to develop and evaluate the validity and reliability of a 12-item instrument designed to assess stress among pregnant women.

Methodology: The newly-designed stress scale was developed based on literature review, as well as adaptation and modification from other stress scales. A pilot study was conducted prior to the field study. Next, this questionnaire was distributed to 390 pregnant women, aged between 18- 45 years old, through email. The respondents were recruited among patients that visited antenatal clinic at Hospital Canselor Tuanku Muhriz Kuala Lumpur, Malaysia.

Exploratory Factor Analysis (EFA) was conducted using data collected from 130 respondents and subsequently Confirmatory Factor Analysis (CFA) was conducted using the remaining data.

Result: EFA conducted using principal component extraction with Varimax rotation, identified a three-factor structure that accounted for 72.76% of the total variance. The instrument demonstrated excellent internal consistency, with a Cronbach's alpha of .928. The Kaiser-Meyer-Olkin (KMO) value of .885 and a significant Bartlett's test ($\chi^2 = 1130.582, p < .001$) supported the adequacy of the data for factor analysis. CFA conducted to verify the factor structure, revealing moderate model fit indices: $\chi^2 = 353.8, df = 51, \chi^2/df = 6.93$, GFI = 0.817, AGFI = 0.721, RMSEA = 0.151, NFI = 0.856, and CFI = 0.874.

Conclusion: This new stress scale has strong reliability and valid to be used as screening tool for stress. This scale serves as an alternative tool to evaluate stress during pregnancy, potentially contribute to effective outcome measures.

Poster

2025年9月26日(金) 10:00 ~ 11:00 Poster Session (Foyer 2)

Poster 15**[P-15-06] Cross-Cultural Assessment of Self-Stigma in Epilepsy: A Multinational Comparative Study Using the Epilepsy Self-Stigma Scale (ESSS)**

*Izumi Kuramochi¹, Go Taniguchi¹, Esra Yildiz⁴, Estefanía Conde-Blanco³, Anne Hagemann², Kheng-Seang Lim⁵, Eiji Nakagawa¹ (1. National Center of Neurology and Psychiatry (Japan), 2. Society for Epilepsy Research, Bielefeld (Germany), 3. Epilepsy Program, Neurology Department, Hospital Clinic Barcelona (Spain), 4. Faculty of Nursing, Ataturk University, Erzurum (Turkey), 5. Division of Neurology, Department of Medicine, Faculty of Medicine, Universiti Malaya (Malaysia))

キーワード : Cross-cultural validation、Mental health、Psychometric analysis、Self-esteem、Quality of life

Background: Self-stigma, the internalization of negative societal attitudes, adversely affects the quality of life, treatment engagement, and mental health of people with epilepsy (PWE). While the Epilepsy Self-Stigma Scale (ESSS) was originally developed in Japan, cross-cultural validations have now been conducted in Germany, Spain, Turkey, and Malaysia.

Objective: To synthesize findings from international validation studies of the ESSS and explore cultural and psychological factors associated with self-stigma in PWE.

Methods: We reviewed psychometric validation studies of the ESSS across five cultural contexts (Japan, Germany, Spain, Turkey, Malaysia—Malay and Chinese groups). Each version underwent factor analysis, reliability testing, and evaluation of construct validity with established psychological scales (e.g., NDDI-E, GAD-7, RSES). This presentation is based on previously published studies. No new data collection involving human participants was conducted by the authors for this synthesis.

Results: The ESSS demonstrated good internal consistency in all versions (Cronbach's α = 0.74–0.83). Factor structures varied: Japan and Turkey supported a three-factor model; Spain revealed two factors; Germany showed a unidimensional structure. ESSS scores consistently correlated with depression, anxiety, and lower self-esteem. Japanese and Turkish cohorts exhibited higher self-stigma than Spanish and Malaysian groups. Cultural differences in stigma expression were partly mediated by psychological distress (depression/anxiety), as shown in ANCOVA models.

Conclusion: This cross-cultural synthesis highlights the importance of integrating mental health support into anti-stigma efforts. The ESSS enables standardized evaluation of self-stigma in epilepsy across cultures and provides a foundation for developing culturally tailored interventions.

Poster

2025年9月26日(金) 16:00 ~ 17:10 Poster Session (Foyer 2)

Poster 16

[P-16-01]

Work Passion as a Protective Factor Against Burnout Among Nurses in Thailand

*Vatanya Chiewvattanakul¹, Nattha Saisavoey¹, Sirirat Kooptiwoot¹, Varaporn Sripirom¹ (1. Department of Psychiatry, Faculty of Medicine Siriraj Hospital, Mahidol University (Thailand))

[P-16-02]

Workplace Attachment Style, Burnout Levels, and Sleep Quality in Nurses of Hong Kong

*Sze Man Chan¹, Mark Lawrence WONG² (1. Registered Nurse, Master's Student, City University of Hong Kong (Hong Kong), 2. Clinical Psychologist, Assistant Professor, Department of Social and Behavioural Sciences, City University of Hong Kong (Hong Kong))

[P-16-03]

How does race impact the pathway of sleep disturbance to depression through emotional regulation for a high-risk population?

*Jeremy Gibbs¹, Rachel Fusco¹ (1. University of Georgia (United States of America))

[P-16-04]

Sleep quality affecting burnout syndrome among practical and registered nurses in Siriraj hospital

*Chayangkoon Poomkamjorn¹, Kamonporn Wannarit¹, Panate Pukrittayakamee¹, Ubol Hunkaewchompoo¹ (1. Siriraj hospital, Mahidol university (Thailand))

[P-16-05]

Too Much Screen Time? Binge-Watching Behavior and Its Mental Health Correlates Among Thai University Undergraduates.

*Pongrawee Thiansirikhun¹, Muthita Phanasathit² (1. Department of Psychiatry, Faculty of Medicine, Thammasat University (Thailand), 2. Department of Psychiatry, Center of Excellence of Applied Epidemiology, Faculty of Medicine, Thammasat University. (Thailand))

[P-16-06]

Exploring the "Fidelity" of Recovery Colleges in Japan: Gaps Between Core Values and Practice

*Yui Komine¹, Taisuke Katsuragawa² (1. Graduate School of Human Sciences, Waseda University (Japan), 2. Faculty of Human Sciences, Waseda University (Japan))

[P-16-07]

Investigating the mechanism of action of an intervention based on metacognitive therapy for social dysfunction in high worriers.

*Minori Machida¹, Jun Tayama¹ (1. Waseda University (Japan))

Poster

2025年9月26日(金) 16:00 ~ 17:10  Poster Session (Foyer 2)

Poster 16

[P-16-01] Work Passion as a Protective Factor Against Burnout Among Nurses in Thailand

*Vatanya Chiewvattanakul¹, Nattha Saisavoey¹, Sirirat Kooptiwoot¹, Varaporn Sripirom¹ (1. Department of Psychiatry, Faculty of Medicine Siriraj Hospital, Mahidol University (Thailand))

キーワード : Work passion、Burnout、Nurses

Background

The COVID-19 pandemic has placed unprecedented psychological and workload-related demands on healthcare workers, particularly nurses. Burnout has emerged as a critical mental health concern. In Thailand, cultural dynamics such as hierarchical organizational culture, spiritual beliefs, and personal identity may shape how nurses maintain psychological well-being. Work passion, reflecting intrinsic motivation and meaningful engagement in one's profession, may buffer against burnout. However, evidence among Thai nurses remains limited.

Objective

To investigate the relationship between work passion and burnout among nurses and identify key contributing factors.

Methods

A cross-sectional study was conducted among 363 nurses at Siriraj Hospital, a major public tertiary hospital in Thailand. The survey assessed burnout, work passion, and associated factors across four domains: job-related, organizational, relational, and individual. Chi-square test was used to examine factors associated with burnout and work passion. Spearman's rank correlation analyses were performed to explore correlation between burnout and work passion.

Results

Burnout rates were highest (20–30%) in surgical, obstetric, and internal medicine units, though department-based differences were not statistically significant. Younger nurses (aged 21–40) reported significantly lower work passion than older counterparts ($P < 0.05$). High work passion was observed in 36% (ages 21–30), 40% (31–40), compared to 69% (41–50) and 65% (above 51). Nurses with a master's degree showed significantly higher work passion (73% vs. 45%, $P < 0.05$). Work passion negatively correlated with burnout ($r = -0.296$, $P < 0.01$). Especially autonomy, work-life balance, fairness, collaboration, psychological support, recognition, and spirituality were linked to lower burnout and enhanced passion.

Conclusion

Promoting work passion through supportive organizational practices may mitigate burnout and strengthen resilience among nurses. Targeted interventions—particularly in high-stress departments—should be considered as part of long-term mental health strategies in healthcare systems.

Poster

2025年9月26日(金) 16:00 ~ 17:10 Poster Session (Foyer 2)

Poster 16**[P-16-02] Workplace Attachment Style, Burnout Levels, and Sleep Quality in Nurses of Hong Kong**

*Sze Man Chan¹, Mark Lawrence WONG² (1. Registered Nurse, Master's Student, City University of Hong Kong (Hong Kong), 2. Clinical Psychologist, Assistant Professor, Department of Social and Behavioural Sciences, City University of Hong Kong (Hong Kong))

キーワード : Workplace attachment style、nurses、burnout、Hong Kong、sleep quality

Background Burnout and depression are highly prevalent among nurses in Hong Kong due to a highly stressful working environment. The demands of teamwork and shift duty often result in increased mental stress and poor sleep quality. Workplace attachment theory—a novel concept—explores the emotional bond between individuals and their work environment. Secure workplace attachment has been associated with lower emotional exhaustion, greater perceived comfort, and reduced stress. In contrast, insecure attachment styles, such as preoccupied and avoidant, are linked to higher stress and poorer outcomes. However, these relationships have not yet been examined in the local context of Hong Kong, where the healthcare environment is particularly demanding, with nurse-to-patient ratios reaching up to 1:13. Investigating these associations is essential to inform targeted interventions that promote psychological well-being and resilience among nurses.

Aim This study aimed to examine the relationship between workplace attachment styles and psychological outcomes including burnout and sleep quality. It was hypothesized that secure workplace attachment would be negatively associated with burnout, while insecure attachment would show a positive association. Furthermore, sleep quality was hypothesized to mediate the relationship between attachment style and burnout.

Method This cross-sectional study recruited a convenience sample of Hong Kong nurses (N = 189) through an online survey conducted between November 2024 and February 2025. The survey collected demographic data and utilized the following instruments: the Depression Anxiety Stress Scales-21 (DASS-21), Workplace Attachment Style Questionnaire (WASQ), Maslach Burnout Inventory-Human Services Survey for Medical Personnel (MBI-HSS-MP), and the Pittsburgh Sleep Quality Index (PSQI). Data were analyzed using Spearman correlations and mediation analysis via SPSS and PROCESS macro.

Results Secure workplace attachment was significantly negatively associated with depression, anxiety, stress, poor sleep quality, and burnout. Mediation analysis revealed that the protective effect of secure workplace attachment on burnout was partially mediated by better sleep quality. The findings support a partial mediation model in which secure attachment is associated with lower levels of burnout both directly and indirectly through improved sleep quality.

Conclusion This study suggests that workplace attachment style may play a protective role in preventing or reducing burnout among nurses. A longitudinal study or randomized controlled trial is recommended to further examine the causal relationships underlying these associations and to support the development of effective strategies for mitigating burnout among nurses in Hong Kong.

Poster

2025年9月26日(金) 16:00 ~ 17:10  Poster Session (Foyer 2)

Poster 16

[P-16-03] How does race impact the pathway of sleep disturbance to depression through emotional regulation for a high-risk population?

*Jeremy Gibbs¹, Rachel Fusco¹ (1. University of Georgia (United States of America))

キーワード : Depression、Emotional Regulation、Sleep、Race、Sexual Minority

Background: Sleep disturbance can disrupt the mind's ability to regulate emotions, and emotional regulation impacts mental health. No known research has investigated this pathway to depression and how it may function differently based on race and culture. Therefore, we aim to (1) investigate the pathway of sleep to depression through emotional regulation in a population that is high-risk for mental health issues (i.e., sexual minority men), and (2) identify pathway differences based on race and culture.

Methods: In June 2020, 239 sexual minority men (e.g., gay) were recruited in the U.S. to participate in an online survey. Participants answered demographic items and validated scales of sleep disturbance, emotional regulation (i.e., cognitive reappraisal, emotional suppression), and depression symptomology. Relationships between study variables were investigated using linear regressions, with sleep disturbance as the independent variable, cognitive reappraisal and emotional suppression as the mediators, and depression as the outcome. Two separate models were run: one with White participants, and one with all Non-White participants. Sobel tests were used to identify significant mediation.

Results: Participants were racially diverse: 47% White, 41% Black, 4% Latino, 3% Asian, 3% Multiracial. The final White participant model accounted for 39% of the variance in depression ($F=22.924$, $p<.001$) with two significant covariates: sleep disturbance, and cognitive reappraisal. Sobel tests revealed no significant indirect effects. The final Non-White participant model accounted for 36% of the variance in depression ($F=21.981$, $p<.001$) with two significant covariates: sleep disturbance, and expressive suppression. Sobel tests revealed one significant indirect effect of sleep disturbance through expressive suppression ($ST=2.227$, $p=.026$).

Discussion: Emotional regulation strategies have different relationships with depression based on race and culture. Only Non-White individuals' sleep disturbance impacted depression through emotional regulation, suggesting an avenue for psychological intervention for this population. Future research should consider longitudinal testing of this model.

Poster

2025年9月26日(金) 16:00 ~ 17:10  Poster Session (Foyer 2)

Poster 16

[P-16-04] Sleep quality affecting burnout syndrome among practical and registered nurses in Siriraj hospital

*Chayangkoon Poomkamjorn¹, Kamonporn Wannarit¹, Panate Pukrittayakamee¹, Ubol Hunkaewchompoo¹ (1. Siriraj hospital, Mahidol university (Thailand))

キーワード : Burnout、Sleep Quality、Nurse

Importance

Burnout is a critical issue affecting nurses globally, impacting not only their mental health and job satisfaction but also the quality of care delivered to patients. Sleep disturbances have increasingly been recognized as a potential and modifiable contributor to burnout.

Objective

To explore the relationship between sleep quality and burnout syndrome among practical and registered nurses at Siriraj Hospital.

Design, Setting, and Participants

This cross-sectional study was conducted at Siriraj Hospital and included 170 practical and registered nurses. Participants were recruited through voluntary enrollment and completed an online self-administered questionnaire.

Exposures

Sleep quality was assessed using the Thai version of the Pittsburgh Sleep Quality Index (PSQI). Based on established cutoffs, respondents were categorized into “good sleep” (n = 43; 25.3%) and “poor sleep” (n = 127; 74.7%) groups.

Main Outcome and Measures

Burnout was evaluated using the Thai version of the Copenhagen Burnout Inventory (CBI), focusing on total burnout scores (CBI-T). Statistical analyses included descriptive statistics, chi-square tests, and binary logistic regression.

Results

Burnout was significantly more prevalent among participants with poor sleep quality: 40.2% in the poor sleep group reported burnout, compared to 18.6% in the good sleep group ($p = 0.010$). Multivariable regression analysis revealed a significant association between poor sleep and increased burnout risk, with a regression coefficient of 0.186. This corresponds to an 18% higher likelihood of burnout in poor sleepers, with a 95% confidence interval of 10% to 35%.

Conclusion

Poor sleep quality is strongly linked to a higher risk of burnout among nurses. These findings highlight the importance of addressing sleep health as part of strategies to prevent burnout and support the well-being of healthcare professionals.

Poster

2025年9月26日(金) 16:00 ~ 17:10 Poster Session (Foyer 2)

Poster 16**[P-16-05] Too Much Screen Time? Binge-Watching Behavior and Its Mental Health Correlates Among Thai University Undergraduates.**

*Pongrawee Thiansirikhun¹, Muthita Phanasathit² (1. Department of Psychiatry, Faculty of Medicine, Thammasat University (Thailand), 2. Department of Psychiatry, Center of Excellence of Applied Epidemiology, Faculty of Medicine, Thammasat University. (Thailand))

キーワード：Prevalence、Binge-watching、Mental Health、University、Undergraduates

Background: Binge-watching—a popular media consumption behavior—has been linked to depression, anxiety, and insomnia. However, whether it qualifies as a behavioral addiction remains debated. In Southeast Asia, research on this topic is limited. **Objective:** To evaluate the psychometric properties of the Thai version of the Problematic Series Watching Scale (Thai-PSWS), and investigate prevalence binge-watching and its associated factors to mental health problems among Thai undergraduates. **Methods:** A cross-sectional study was conducted among 359 undergraduate students at Thammasat University. Participants completed the Thai-PSWS, the Thai version of the General Health Questionnaire (GHQ-28), and the Thai Patient Health Questionnaire (PHQ-9). Binge-watching was defined as watching more than one episode of a television series in a single sitting for entertainment purposes. It excluded news, commercials, trailers, social media, and user-generated video platforms. The Thai-PSWS assessed the risk of problematic binge-watching; higher scores indicated a greater likelihood of negative impacts on mental health. Correlation and logistic regression analyses were employed to explore associations with mental health. **Results:** The Thai-PSWS demonstrated good psychometric validity, with an Index of Item Objective Congruence ranging from 0.6-1.0, a Cronbach's Alpha Coefficient of 0.70 (95% CI: 0.56-0.81), and an Intraclass Coefficient of 0.71 ($p < 0.01$). Binge-watching prevalence was 81.62%. Thai-PSWS scores were significantly positively correlated with Thai PHQ-9 depressive scores ($p = 0.26, p < 0.01$) and Thai GHQ-28 social dysfunction scores ($p = 0.11, p = 0.04$). Predictors for binge-watching included female sex ($OR = 2.09, 95\% CI: 1.10-4.00$), higher Thai-PSWS scores ($OR = 1.18, 95\% CI: 1.09-1.28$), and lower Thai PHQ-9 scores ($OR = 0.94, 95\% CI: 0.89-0.98$). **Discussion:** Binge-watching is highly prevalent among Thai undergraduates. While viewing more than one episode, may not inherently indicate behavioral addiction, problematic binge-watching pattern was significantly associated with depression, anxiety, insomnia, social dysfunction, and somatic symptoms.

Poster

2025年9月26日(金) 16:00 ~ 17:10  Poster Session (Foyer 2)

Poster 16

[P-16-06] Exploring the "Fidelity" of Recovery Colleges in Japan: Gaps Between Core Values and Practice

*Yui Komine¹, Taisuke Katsuragawa² (1. Graduate School of Human Sciences, Waseda University (Japan), 2. Faculty of Human Sciences, Waseda University (Japan))

キーワード : Recovery Colleges、Co-production、Mental health recovery

Background

Recovery Colleges (RC) are places where people with mental health challenges, professionals, and citizens learn and grow together. Participation has been shown to enhance mental health and promote recovery (Allard et al., 2024). However, most studies are based in WEIRD countries (Hayes et al., 2024), with limited focus on how core principles are upheld elsewhere. This study explores which values are prioritized in Japanese RC and how consistently they are implemented (fidelity).

Methods

Survey period: 16 May – 8 June 2025

Method: Online or mail-based questionnaire

Target: Japanese organizations titled "Recovery College" or "Recovery School".

Content: 8 principal items (Perkins et al., 2012), original operational questions (from Hayes et al., 2023), and the RECOLLECT-Fidelity-Measure-Japanese (Toney et al., 2019; Sakamoto et al., 2022)

Analysis: Mean and SD calculated. For multiple responses per RC, average scores and item-wise score distributions (0/1/2) were compiled.

Ethics: Approved by Waseda University Ethics Committee (No. 2025-014)

Results

Sixteen responses were obtained. In terms of RC philosophy, co-production ($M=4.91$), open to anyone ($M=4.82$), and differences from professional support ($M=4.79$) received high ratings. On the other hand, presence of personal tutors ($M=2.37$) and referral support to other institutions ($M=3.42$) received low ratings. The fidelity scale averaged 6.45 points ($SD=3.14$), and like philosophy ratings, community focus and tailored to the student were harder to implement. On the other hand, social connectedness and equality received relatively high ratings. Additionally, while co-production was the most important philosophy, only five cases received a score of 2 in the fidelity evaluation.

Discussion

The results suggest that some principles, though widely supported, are not consistently practiced. This may reflect resource constraints or ambiguity in applying concepts like co-production. Future work should model influencing factors within the Japanese context and expand comparative research across cultures.

Poster

2025年9月26日(金) 16:00 ~ 17:10 Poster Session (Foyer 2)

Poster 16

[P-16-07] Investigating the mechanism of action of an intervention based on metacognitive therapy for social dysfunction in high worriers.

*Minori Machida¹, Jun Tayama¹ (1. Waseda University (Japan))

キーワード：high worrieres、social dysfunctions、attentional strategies、ecological momentary assessment

Objectives. This study aimed to examine mechanisms of change in metacognitive beliefs and attentional strategies related to social dysfunctions among high worriers, who lie on a continuum with generalized anxiety disorder (GAD).

Methods. Thirty individuals reporting clinically significant levels of worry and social dysfunction were semi-randomly assigned to an experimental group or an active control group ($n=15$ each). Both groups received feedback on self-report scales and participated in Ecological Momentary Assessment (EMA) for one week before and after the intervention. The experimental group received psychoeducation on self-instruction training, attention training technique, and situational attentional refocusing (SAR), with each component administered over one week. The active control group did not receive SAR.

Results. A group \times time ANOVA showed significant main effects of time on social dysfunctions, trait worry, and negative metacognitive beliefs. Hierarchical Bayesian modeling also revealed significant main effects of time for both disengagement and engagement attentional strategies. No significant interaction effects were found. To investigate potential mechanisms, we tested baseline–post changes in correlations between key processes and outcomes. Fisher's Z test showed that the correlation between negative metacognitive beliefs and social dysfunctions increased significantly from baseline to post-intervention ($r=.15$ vs. $r=.47$; $z=2.38$, $p=.018$), suggesting a stronger link following intervention. Other correlation changes were nonsignificant. Hierarchical Bayesian mediation analysis including group \times time interactions detected no credible indirect effects, likely due to limited sample size.

Conclusion. These findings suggest that interventions modifying metacognitive beliefs may enhance the structural coupling between beliefs and social dysfunctions, even when direct causal effects are not observable. Future research should test this mechanism in larger samples.

Poster

2025年9月26日(金) 11:00 ~ 12:10  Poster Session (6F Meeting Room 4-6)

Poster 34

[P-34-01]

The Benefits and Future Potential of Generative Artificial Intelligence (GAI) on Mental Health: A Delphi Study

*Nicholas Pang¹, Chit Thet Lal Oo², Walton Wider², Eugene Koh³, Rajkumar K. Vasanthi², Lester N. Udang⁴, Leilei Jiang², Rodrigo Ramalho⁵, Bilge N. Özdemir⁶, Kashmine Mahboob⁷ (1. Universiti Malaysia Sabah (Malaysia), 2. INTI International University (Malaysia), 3. Putra Malaysia University (Malaysia), 4. Shinawatra University (Thailand), 5. The University of Auckland (New Zealand), 6. Ataturk State Hospital (Turkey), 7. Ayub Teaching Hospital (Japan))

[P-34-02]

Parental immigration status and offspring mental health service use for anxiety and depression: A Finnish nationwide register study

*Prakash Khanal^{1,2}, Subina Upadhyaya^{1,2}, Tiia Ståhlberg^{1,2,3}, Emmi Heinonen^{1,2}, Terhi Luntamo^{1,4}, Andre Sourander^{1,2,4} (1. Research Center for Child Psychiatry, University of Turku, Turku (Finland), 2. INVEST Research Flagship Center, University of Turku, Turku (Finland), 3. Department for Adolescent Psychiatry, Turku University Hospital, Turku (Finland), 4. Department for Child Psychiatry, Turku University Hospital, Turku (Finland))

[P-34-03]

Perceived Academic Stress and Adolescent Mental Health in Singapore: The Protective Role of Resilience

*Brenda Lio Liaw Wen¹, John Chee Meng Wong¹, Liang Shen¹, Dennis Kom³, Victoria Fee³, Ruochen Du¹, Qai Ven Yap¹, Natalie Cheok Ling Lei¹, Natalie Hui Jing 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))

[P-34-04]

Exploring Bicultural Belonging and Mental Health: A Qualitative Study of Second-Generation Nikkei Brazilians in Japan

*JULIANA MIKA KONNO HORI¹, RIEKO SHIOJI¹, ATSUKO TANIMURA¹ (1. Tokyo Metropolitan University (Japan))

[P-34-05]

The Potential of Naikan Therapy as a Glocal Psychotherapy: A Buddhist Perspective on Its Mechanism and the Value of “SUNAO”

*Miho Takahashi¹ (1. the University of Tokyo (Japan))

[P-34-06]

rTMS in Anorexia Nervosa: Novel adjunct in a complex case

*Rupika Dhurjati¹, Sri Krishna Teja Vemulakonda¹ (1. Sukoon Health (India))

[P-34-07]

Between Sleep and Sorrows: Case Report on Narcolepsy

*NICOLE MARIE BOGNOT MANALASTAS¹, MARK ANTHONY PASCUAL^{1,2} (1. NATIONAL CENTER FOR MENTAL HEALTH (Philippines), 2. PHILIPPINE HEART CENTER (Philippines))

Poster

2025年9月26日(金) 11:00 ~ 12:10  Poster Session (6F Meeting Room 4-6)

Poster 34

[P-34-01] The Benefits and Future Potential of Generative Artificial Intelligence (GAI) on Mental Health: A Delphi Study

*Nicholas Pang¹, Chit Thet Lal Oo², Walton Wider², Eugene Koh³, Rajkumar K. Vasanthi², Lester N. Udang⁴, Leilei Jiang², Rodrigo Ramalho⁵, Bilge N. Özdemir⁶, Kashmine Mahboob⁷ (1. Universiti Malaysia Sabah (Malaysia), 2. INTI International University (Malaysia), 3. Putra Malaysia University (Malaysia), 4. Shinawatra University (Thailand), 5. The University of Auckland (New Zealand), 6. Ataturk State Hospital (Turkey), 7. Ayub Teaching Hospital (Japan))

キーワード : Generative artificial intelligence、Delphi study、Mental health

This study explores the perceived benefits and future potential of Generative Artificial Intelligence (GAI) in mental health care. With the increasing integration of AI technologies like ChatGPT, understanding how GAI can enhance accessibility, treatment, and support for mental health is crucial. The study aims to consolidate expert insights on the advantages and implications of GAI in mental health practice and policy. A two-round Delphi method was conducted with a purposive sample of 15 psychiatry, psychology, counseling, and medical research experts. In the first round, experts provided open-ended insights on GAI's benefits and future potential. Responses were thematically analyzed to identify key dimensions. In the second round, experts ranked the identified dimensions, with consensus measured using Kendall's W to assess agreement. The study identified eight key benefits of GAI in mental health, including accessibility, personalized treatment, cost-efficiency, and data analysis. Additionally, eight future potential themes were recognized, such as AI's role in diagnostics, support for professionals, and ethical considerations. The consensus among experts indicated that "Accessibility and Availability" was the most critical benefit, while "AI as a Collaborative and Informative Tool" was seen as the most promising potential. The study highlights opportunities for enhancing mental health services through GAI and challenges related to digital divides, ethical considerations, and technology limitations. This research provides a unique perspective on the role of GAI in mental health, offering a structured understanding of its benefits and potential future applications. The findings contribute to discussions on responsible AI integration in mental health care, with implications for policymakers, practitioners, and technology developers seeking to enhance mental health service delivery.

Poster

2025年9月26日(金) 11:00 ~ 12:10 Poster Session (6F Meeting Room 4-6)

Poster 34**[P-34-02] Parental immigration status and offspring mental health service use for anxiety and depression: A Finnish nationwide register study**

*Prakash Khanal^{1,2}, Subina Upadhyaya^{1,2}, Tiia Ståhlberg^{1,2,3}, Emmi Heinonen^{1,2}, Terhi Luntamo^{1,4}, Andre Sourander^{1,2,4} (1. Research Center for Child Psychiatry, University of Turku, Turku (Finland), 2. INVEST Research Flagship Center, University of Turku, Turku (Finland), 3. Department for Adolescent Psychiatry, Turku University Hospital, Turku (Finland), 4. Department for Child Psychiatry, Turku University Hospital, Turku (Finland))

キーワード : Child and adolescent Psychiatry、mental health service utilization、anxiety and depression、immigration status、register-based study

Background: Within the global megatrend of immigration, there are persistent disparities in access to mental health services among immigrants. Despite growing research on immigrant health outcomes, little is known about how parental immigration status specifically affects offspring mental health service utilization. This register study investigates how parental immigration status relates to offspring mental health service utilization for anxiety, depression, and comorbid anxiety and depression.

Methods: Using Finnish national registers (singleton live birth 1992-2006 birth cohort), we analyzed parental immigration status and their association with mental health service use for 33,137 cases: depression only (10,003), anxiety only (14,014), and comorbid anxiety and depression (9,120); matched with 138,957 controls based on age and biological sex. We used multinomial logistic regression to calculate adjusted odds ratios (aORs), controlling for parental age, parity, parental psychopathology, socioeconomic status, and marital status.

Findings: Children with two immigrant parents had reduced likelihood of service use for all outcomes: comorbid anxiety and depression (aOR 0.4, 95% CI 0.3-0.6, p<0.001), depression only (aOR 0.5, 95% CI 0.4-0.6, p<0.001), and anxiety only (aOR 0.8, 95% CI 0.7-0.9, p=0.001). Those with immigrant fathers and Finnish mothers showed increased likelihood across all outcomes: comorbid anxiety and depression (aOR 1.6, 95% CI 1.4-1.8, p<0.001), anxiety only (aOR 1.4, 95% CI 1.3-1.6, p<0.001), and depression only (aOR 1.4, 95% CI 1.2-1.6, p<0.001). Maternal immigration <1 year before childbirth lowered service use of comorbid conditions. Children with both parents from low HDI countries and with mothers from Sub-Saharan Africa exhibited significantly lower service utilization across all categories.

Interpretation: The significant differences in mental health service utilization among children of immigrant parents suggests that cultural factors, healthcare navigation skills, and migration-related stressors may influence service-seeking behaviors.

Funding: INVEST Research Flagship Centre, Research Council of Finland, European Research Council, Finnish Brain Foundation, Sigrid Jusélius Foundation.

Poster

2025年9月26日(金) 11:00 ~ 12:10  Poster Session (6F Meeting Room 4-6)

Poster 34

[P-34-03] Perceived Academic Stress and Adolescent Mental Health in Singapore: The Protective Role of Resilience

*Brenda Lio Liaw Wen¹, John Chee Meng Wong¹, Liang Shen¹, Dennis Kom³, Victoria Fee³, Ruochen Du¹, Qai Ven Yap¹, Natalie Cheok Ling Lei¹, Natalie Hui Jing 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))

キーワード : academic stress、resilience、adolescence、internalizing symptoms、Singapore

Introduction

In Singapore, academic success is culturally central, and stress from academic expectations contributes significantly to mental distress. However, less is known about how this stress differs across developmental stages and the protective role of resilience. This study examines how stress from academic expectations impacts internalising symptoms across adolescence and identifies resilience domains that buffer internalizing symptoms in Singaporean adolescents.

Methods

A sample of Singaporean adolescents aged 11–18 ($n = 3,336$) completed self-report measures: Academic Expectations Stress Inventory (AESI), Youth Self Report (YSR), and Singapore Youth Resilience Scale (SYRESS). Participants were grouped into early (11–12), early-middle (13–14), late-middle (15–16), and late adolescence (17–18). Moderated regression analyses examined age and resilience as moderators of the relationship between perceived academic stress and internalising symptoms.

Results

Perceived academic stress from self ($\beta = 1.31$, $p < .001$) and others ($\beta = 1.05$, $p < .001$) were associated with higher internalizing symptoms. Adolescents aged 15–16 reported significantly higher distress ($\beta = 1.62$, $p < .05$), with age groups 2 and 3 moderating the effect of academic stress due to self-expectations. After accounting for age, resilience significantly moderated the impact of both self- and others-imposed academic stress. Domain-level analysis revealed that personal control, positive self-image/optimism, and emotional regulation were the most protective ($p < .001$, $f^2 = 0.017-0.023$) with medium–large effect sizes. For stress from parent/teacher expectations, these domains remained protective ($f^2s = 0.011-0.014$; all $p < .001$), with medium effect sizes.

Conclusion

Mid-adolescence is a sensitive period where self-imposed academic stress contribute to internalizing symptoms. Resilience—particularly personal control, positive self-image, and emotional regulation moderate and serve as critical buffers of perceived academic stress. These findings underscore the importance of culturally sensitive, developmentally informed

interventions that enhance domain-specific resilience to reduce mental distress among adolescents navigating academic pressures in Singapore.

Poster

2025年9月26日(金) 11:00 ~ 12:10  Poster Session (6F Meeting Room 4-6)**Poster 34****[P-34-04] Exploring Bicultural Belonging and Mental Health: A Qualitative Study of Second-Generation Nikkei Brazilians in Japan**

*JULIANA MIKA KONNO HORI¹, RIEKO SHIOJI¹, ATSUKO TANIMURA¹ (1. Tokyo Metropolitan University (Japan))

キーワード：Second-Generation Immigrants、Mental Health、Bicultural Identity、Family Dynamics

According to the United Nations World Migration Report (2024), there are over 281 million international migrants globally, representing 3.6% of the world's population—a number projected to rise in the coming decades. Migration holds the potential to enhance human development, yet it also presents significant challenges, particularly in public health. Second-generation immigrants are particularly vulnerable due to the psychological stress of navigating dual cultural identities, discrimination, and intergenerational conflict. Studies from Canada, the U.S., Denmark, and Japan have identified increased risks for mood disorders and suicidal behavior among second-generation migrants. Despite being raised predominantly in the host country, second-generation immigrants can be significantly shaped by the enduring cultural influences present in their family environment. Japan, though not historically a major immigration destination, is now home to over 3.5 million immigrants, including more than 210,000 Nikkei Brazilians, many of whom are second-generation youth. This is a qualitative study that aims to explore the long-term mental health effects of growing up in an immigrant household through in-depth, semi-structured interviews with Nikkei Brazilian descendants. By understanding the impacts of growing up in an immigrant household, the findings of this research can contribute to health promotion interventions that will support youth immigrants in navigating bicultural identity integration and building psychological resilience.

Poster

2025年9月26日(金) 11:00 ~ 12:10 Poster Session (6F Meeting Room 4-6)

Poster 34**[P-34-05] The Potential of Naikan Therapy as a Glocal Psychotherapy: A Buddhist Perspective on Its Mechanism and the Value of “SUNAO”***Miho Takahashi¹ (1. the University of Tokyo (Japan))

キーワード：Naikan Therapy、Buddhist、SUNAO

Background: Naikan therapy is one of the few psychotherapies developed in Japan, but it is not necessarily considered mainstream within Japanese psychotherapy. Meanwhile, mindfulness is gaining global attention, and the Japanese clinical psychology community, which has long overlooked the value of Eastern culture, now needs to reexamine the glocal potential of Naikan therapy. Naikan therapy was developed based on the ascetic practices of a Buddhist sect, but its religious elements have been removed. However, the unique mechanism that allows Naikan therapy to transcend religion and become a form of psychotherapy remains unclear. Therefore, this study examines the mechanism of Naikan therapy through interviews with Buddhist scholars and focuses on the psychological state of “SUNAO,” which is considered one of the states achieved through Naikan therapy, and its value.

Method: In June 2025, I conducted interviews with Buddhist psychologists and Buddhist practitioners. The transcripts were analyzed using the KJ method. This research was conducted after ethical review by the author's university.

Results: Five categories were extracted: “using the non-ordinary,” “a structure of suffering is built in,” “the existence of others as a mechanism of salvation,” “SUNAO as a state of mind,” and “the significance of Naikan as a form of psychotherapy.”

Discussion: Naikan therapy shares similarities with Buddhist ascetic practices in that it involves placing oneself in an extraordinary setting and incorporating mechanisms that enable the experience of suffering. However, it was suggested that introspective therapy also incorporates several unique elements not found in Buddhist practices. Additionally, the unique psychological state of “SUNAO” specific to Japan was considered to hold distinctive value. The findings of this study present a new understanding of Naikan therapy that differs from conventional views, and it is believed that this has unique value as a form of psychotherapy in modern society. The potential of Naikan therapy as a “glocal” psychotherapy with cultural specificity yet global appeal, as well as the value of Eastern culture derived from it, is suggested.

Poster

2025年9月26日(金) 11:00 ~ 12:10  Poster Session (6F Meeting Room 4-6)

Poster 34

[P-34-06] rTMS in Anorexia Nervosa: Novel adjunct in a complex case

*Rupika Dhurjati¹, Sri Krishna Teja Vemulakonda¹ (1. Sukoon Health (India))

キーワード : rTMS、Anorexia Nervosa、Eating Disorder in Adolescents、Neuromodulation、Treatment for Anorexia

Background

Anorexia Nervosa (AN) in adolescents is often chronic and associated with significant psychosocial burden. CBT and family-based therapy are time-intensive and face challenges with accessibility and adherence. Pharmacological options offer limited benefits and are often poorly tolerated. Given the limitations, novel interventions are being explored. Repetitive Transcranial Magnetic Stimulation (rTMS), a non-invasive technique with minimal long-term side effects, has shown promise in OCD. Due to shared features such as ruminations and compulsive behaviors, rTMS may be a valuable adjunct in improving outcomes and reducing treatment duration in AN.

Case Presentation

A 15-year-old girl was transferred to Acute Inpatient Psychiatry Centre following a suicide attempt by falling from a height, resulting in multiple fractures and head injury with subarachnoid hemorrhage (SAH). She exhibited active suicidal ideation, body image dissatisfaction, and severely restricted calorie intake due to fear of gaining weight. Ward observations also noted forgetfulness, decreased interaction and Obsessive-compulsive traits (e.g., compulsive food photography and food logging). Due to limited response to multidisciplinary interventions, rTMS was initiated.

Methodology

Sociodemographic and Clinical details (detailed history and MSE) 2. Relevant psychological assessments (DSM 5 cross cutting) were done pre-RTMS, at 15th session, Post rTMS High Frequency to Left DLPFC and Low Frequency to Right DLPFC was given.

Results

Significant clinical improvement after 30 sessions of rTMS, including improvement of eating behavior, interactions, compulsive symptoms and successful reintegration into academic life.

Discussion

AN and OCD share clinical and neurobiological features, prompting interest in rTMS as a treatment for AN. In OCD, **low-frequency** rTMS to **Right DLPFC** reduces ruminations, while **high-frequency** stimulation of the **left DLPFC** enhances executive function.

In this case, rTMS showed significant response, supporting its potential as an early adjunctive

therapy in AN, especially with OCD-like symptoms. More research is needed to confirm its broader use.

Poster

2025年9月26日(金) 11:00 ~ 12:10  Poster Session (6F Meeting Room 4-6)

Poster 34

[P-34-07] Between Sleep and Sorrows: Case Report on Narcolepsy

*NICOLE MARIE BOGNOT MANALASTAS¹, MARK ANTHONY PASCUAL^{1,2} (1. NATIONAL CENTER FOR MENTAL HEALTH (Philippines), 2. PHILIPPINE HEART CENTER (Philippines))

キーワード : sleep、narcolepsy、depression、general psychiatry

Objective: To explore the clinical presentation, diagnosis, and treatment of a 20-year-old female with overlapping depressive symptoms and excessive daytime sleepiness, cataplexy, fragmented sleep, vivid dreams and sleep-related hallucinations.

Methodology: This case study follows Mikan, a Filipino first-year college student, who first sought consultation in June 2023 at the Adult Outpatient Section. Detailed history taking was conducted. Polysomnography (PSG), test of wakefulness and mean sleep latency tests (MSLT) were done revealing Narcolepsy due to the presence of sleep onset REM periods (SOREMP) and short mean sleep latency of about 5 minutes². Other tests include the HLA-DQB1*06:02 genetic marker testing and the cerebrospinal fluid levels of Hypocretin which are not available in the country². She was started on Methylphenidate 10 mg/tablet 1 tablet and Fluoxetine 20 mg/capsule 1 capsule in the morning. Her repeat post-treatment sleep studies showed resolution of SOREMP but still with MSLT of about 5 minutes showing improvement.

Results: The patient's depressive symptoms such as persistent sadness, poor concentration and appetite, anhedonia, fatigue and suicidal ideations, began at age 11. Social withdrawal and academic decline were evident. By age 13, excessive daytime sleepiness became prominent, with involuntary sleep episodes, cataplexy, vivid dreams, hypnagogic and hypnopompic hallucinations, and fragmented nighttime sleep. Despite extended sleep durations and frequent naps, fatigue persisted. Depressive symptoms remitted partially over time, but the unresolved sleep issues significantly impaired functioning. With the medications prescribed, she was able to resume functioning and experience relief of symptoms.

Conclusion: Mikan's case underscores the interplay between psychiatric and sleep disorders, demonstrating how untreated sleep conditions can exacerbate or mimic mental health issues. **Psychiatric disorders are commonly overlapping with symptoms of narcolepsy including the timeline of symptoms which makes diagnosis challenging. Analysis of other studies regarding Narcolepsy revealed association with psychiatric illnesses¹.** Early multidisciplinary evaluation, including sleep studies and psychiatric assessment, is essential for accurate diagnosis and treatment. This case emphasizes the need for increased education about sleep disorders to prevent long-term psychosocial and functional impairment.

References:

- Black, J., Reaven, N. L., Funk, S. E., McGaughey, K., Ohayon, M. M., Guilleminault, C., & Ruoff, C. (2017). Medical comorbidity in narcolepsy: findings from the Burden of Narcolepsy Disease (BOND) study. *Sleep medicine*, 33, 13–18. <https://doi.org/10.1016/j.sleep.2016.04.004>

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Poster

2025年9月26日(金) 14:00 ~ 15:10 Poster Session (6F Meeting Room 4-6)

Poster 35

[P-35-01]

Affective Responses to Stress and Genetic Variation of rs4570625 in Thai Medical Students

*Pathitta Kittimongkolsuk¹, *Jirapa Puriterangkul¹, Krittisak Anuroj², Sivaporn Wannaiaampikul³ (1. Faculty of Medicine, Srinakharinwirot University (Thailand), 2. Department of Psychiatry, Faculty of Medicine, Srinakharinwirot University (Thailand), 3. Department of Biochemistry, Faculty of Medicine, Srinakharinwirot University (Thailand))

[P-35-02]

Exploring the Association Between rs17110690 of the TPH2 Gene and Positive and Negative Affects in Thai Preclinical Medical Students

*Jirapa Puriterangkul¹, *Pathitta Kittimongkolsuk¹, Krittisak Anuroj³, Sivaporn Wannaiaampikul² (1. Faculty of Medicine, Srinakharinwirot University (Thailand), 2. Department of Biochemistry, Faculty of Medicine, Srinakharinwirot University (Thailand), 3. Department of Psychiatry, Faculty of Medicine, Srinakharinwirot University (Thailand))

[P-35-03]

Effect of Cinemeducation on Empathy of Thai Clinical-Year Medical Students: A Randomized Controlled Trial

*Pichaya Tantaatipanit¹, Natee Viravan¹, Wuttipat Iammeechai^{1,3}, Karan Wongprakarnsanti² (1. Faculty of medicine siriraj hospital, mahidol university (Thailand), 2. Suanprung Psychiatric Hospital, Department of Mental Health, Ministry of Public Health (Thailand), 3. MGH Institute of Health Professions, Boston, Massachusetts (United States of America))

[P-35-04]

Inhibitory Control and Social Anxiety: The Mediating Role of Irritability and the Specific Contribution of Avoidance

*Juyeong Kim¹, Somi Yun¹, Eunjae Lee¹ (1. Hanyang University Guri Hospital (Korea))

[P-35-05]

From Comic Panels to Psychiatric Labels: A Psychiatric Review of The Joker and the Public Perception of Mental Illness

*Tejbir Singh Deol¹, Arun Thakur¹, Saif Toubasey¹, Ella Marie Bauwens¹, Madhusudan Dalvi^{1,2} (1. King's College London (UK), 2. Kent and Medway NHS and Social Care Partnership Trust (UK))

[P-35-06]

Cross-Cultural Adaptation and Validation of the ABLE Scale in Japan: Toward Global Understanding of Epilepsy Stigma

*Takafumi Shiganami¹, Satoshi Saito^{2,3}, Chihiro Nakata², Sayaka Kobayashi¹, Haruo Yoshimasu¹, Mohmad Farooq Shaikh⁴, Go Taniguchi², Izumi Kuramochi^{1,2} (1. Department of Psychiatry, Saitama Medical Center, Saitama Medical University, Saitama, Japan (Japan), 2. Department of Epileptology, National Center Hospital, National Center of Neurology and Psychiatry (Japan), 3. Department of Neurology, Tokyo Women's Medical University School of Medicine (Japan), 4. Department of Pharmacology, Charles Sturt University, Orange, NSW (Australia))

[P-35-07]

Social capital and social support as moderators in the association between perceived discrimination and mental health among Filipino domestic workers in Macao

*Xiaoyu Duan^{1,2}, Timothy S. Sumerlin², Brian J. Hall^{2,3} (1. Department of International Health, Bloomberg School of Public Health, Johns Hopkins University (United States of America), 2. Center for Global Health Equity, NYU Shanghai (China), 3. Department of Health, Behavior and Society, Bloomberg School of Public Health, Johns Hopkins University (United States of America))

Poster

2025年9月26日(金) 14:00 ~ 15:10  Poster Session (6F Meeting Room 4-6)**Poster 35****[P-35-01] Affective Responses to Stress and Genetic Variation of rs4570625 in Thai Medical Students**

*Pathitta Kittimongkolsuk¹, *Jirapa Puriterangkul¹, Krittisak Anuroj², Sivaporn Wannaianpikul³ (1. Faculty of Medicine, Srinakharinwirot University (Thailand), 2. Department of Psychiatry, Faculty of Medicine, Srinakharinwirot University (Thailand), 3. Department of Biochemistry, Faculty of Medicine, Srinakharinwirot University (Thailand))

キーワード : Emotional response、Genetic variation、Medical students、rs4570625、TPH2

Mental health challenges, including stress-related emotional difficulties, are common among medical students due to the demanding academic and clinical responsibilities. Multiple factors act in concert to produce variability in emotion, among them being genetic factors. Tryptophan Hydroxylase 2 (TPH2), a key enzyme in serotonin synthesis, has been implicated in individual differences in stress reactivity and affect regulation. This study examines the association between rs4570625 variation, and emotion response to psychosocial stressors.

The study involved 338 Thai preclinical medical students. Participants rated their emotion using the Thai adaptation of the Positive and Negative Affect Schedule (PANAS). Demographic variables, perceived psychosocial stressors, and preferred coping strategies were collected as potential covariates. Participants provided consent for the analysis of their leftover blood specimens, from which DNA was extracted for rs4570625 genotyping by TaqMan SNP Genotyping Assays with StepOnePlus® Real-Time PCR Systems. The genotype effects and interactions with stress on mood were analyzed using generalized linear models.

Controlled for stressors, coping preference, and other covariates, individuals with the T/T genotype reported significantly lower negative affect scores compared to the G/G group ($B = -1.13$, $p = 0.003$), with the G/T group also showing a smaller but significant effect ($B = -0.70$, $p = 0.038$). The T/T genotype was also associated with higher positive affect and moderated the negative impact of stressors on positive affect ($B = 0.39$, $p = 0.044$), preserving emotions under stress.

The rs4570625 with T allele, particularly in T/T homozygotes, appears to be associated with more favorable emotional profiles—lower negative affect and greater maintenance of positive affect under stress. These findings suggest a possible role of TPH2 genetic variation in emotional variation and resilience.

Poster

2025年9月26日(金) 14:00 ~ 15:10 Poster Session (6F Meeting Room 4-6)

Poster 35

[P-35-02] Exploring the Association Between rs17110690 of the TPH2 Gene and Positive and Negative Affects in Thai Preclinical Medical Students

*Jirapa Puriterangkul¹, *Pathitta Kittimongkolsuk¹, Krittisak Anuroj³, Sivaporn Wannaianampikul² (1. Faculty of Medicine, Srinakharinwirot University (Thailand), 2. Department of Biochemistry, Faculty of Medicine, Srinakharinwirot University (Thailand), 3. Department of Psychiatry, Faculty of Medicine, Srinakharinwirot University (Thailand))

キーワード：Emotional regulation、Medical students、Psychological resilience、Single nucleotide polymorphism (SNP)、TPH2 gene

Purpose: Medical students are often exposed to intense academic leading to significant stress, which can significantly impact their mental health and emotional well-being. The Tryptophan Hydroxylase 2 (TPH2) gene, which regulates serotonin synthesis in the brain, plays a key role in emotional regulation. Genetic variations in TPH2 may influence individual differences in emotional responses. However, the rs17110690, located in intron 8 of TPH2, remains largely understudied. This study aimed to examine the association between rs17110690 and emotional traits in Thai preclinical medical students.

Patients and Methods: A cross-sectional study was conducted among 364 preclinical medical students (1st -3rd year) at Srinakharinwirot University, Thailand. Emotion was self-reported using the Thai adaptation of the Positive and Negative Affect Schedule (PANAS). The rs17110690 genotypes (G/G, G/A, A/A) was genotyped using TaqMan SNP Genotyping Assays with StepOnePlus® Real-Time PCR Systems. Generalized linear models were used to evaluate associations between rs17110690 genotypes and positive, negative, and anxious affect, adjusting for psychosocial stressors, preferred coping strategies, and demographic variables.

Results: Participants carrying the variant genotypes (G/A or A/A) reported significantly higher positive affect ($B = 2.21$, $p = 0.001$) and lower negative affect ($B = -0.863$, $p = 0.001$) compared to G/G homozygotes. No significant difference was found for anxious affect ($p = 0.870$).

Conclusion: The rs17110690 of TPH2 was associated with a more favorable emotional profile, underscoring the potential role of genetic factors in contributing to the psychological resilience and capacity to adapt and recover from adversity. These findings support further investigation into TPH2 variation in mental health research, particularly in relation to emotional resilience.

Poster

2025年9月26日(金) 14:00 ~ 15:10  Poster Session (6F Meeting Room 4-6)

Poster 35

[P-35-03] Effect of Cinemedication on Empathy of Thai Clinical-Year Medical Students: A Randomized Controlled Trial

*Pichaya Tantaatipanit¹, Natee Viravan¹, Wuttipat Iammeechai^{1,3}, Karan Wongprakarnsanti² (1. Faculty of medicine siriraj hospital, mahidol university (Thailand), 2. Suanprung Psychiatric Hospital, Department of Mental Health, Ministry of Public Health (Thailand), 3. MGH Institute of Health Professions, Boston, Massachusetts (United States of America))

キーワード : Empathy、Medical student、Cinemedication、Movie、Medical education

Background: Empathy in medical students often declines during training, potentially affecting patient care, professional growth, and well-being. Cinemedication - using films and reflective discussion to promote emotional insight - is an emerging educational approach that may enhance empathy, though evidence remains limited and more research is needed to confirm broader impact. This study aimed to evaluate the effect of cinemedication on empathy over time in Thai clinical-year medical students. **Methods:** Forty-seven clinical-year medical students were recruited and randomly assigned to an intervention group ($n = 23$) or control group ($n = 24$). The intervention group joined a cinemedication session that included viewing *A Beautiful Mind* and structured discussions before and after the screening. The control group followed the standard medical curriculum without additional activities. Empathy was measured using the validated Thai version of the Jefferson Scale of Empathy - Student Version (JSE-S) at baseline, immediately post-session, and at 1- and 3-month follow-ups. Changes in empathy scores between groups were analyzed using repeated-measures regression. **Results:** Over three months, regression analysis showed a significant overall increase in empathy scores in the intervention group compared to the control group ($\beta = 5.18$, $p = 0.025$). Supplementary t-tests showed significantly higher scores in the intervention group immediately post-intervention (mean difference = 10.68, $p = 0.003$), at one month (mean difference = 6.23, $p = 0.015$), and at three months (mean difference = 6.36, $p = 0.079$). Although empathy improved, scores declined gradually over time. **Conclusions:** A single cinemedication session significantly enhanced empathy in medical students, with effects lasting up to three months. However, the declining trend suggests that longer follow-up or reinforcement interventions may be needed.

Poster

2025年9月26日(金) 14:00 ~ 15:10  Poster Session (6F Meeting Room 4-6)**Poster 35****[P-35-04] Inhibitory Control and Social Anxiety: The Mediating Role of Irritability and the Specific Contribution of Avoidance***Juyeong Kim¹, Somi Yun¹, Eunjae Lee¹ (1. Hanyang University Guri Hospital (Korea))

キーワード : Inhibitory control、Irritability、Social anxiety、Mediation

Background: Inhibitory control has been discussed as a cognitive factor associated with social anxiety, but a consistent explanatory mechanism between the two has yet to be clearly established. Meanwhile, irritability is a common emotional response pattern observed across various psychiatric conditions and has been suggested to play a mediating role, particularly in anxiety-related symptomatology.

Objective: This study aimed to examine whether irritability mediates the relationship between inhibitory control and social anxiety, and to investigate whether this mediation effect differs between the two subcomponents of social anxiety: anxiety and avoidance.

Methods: A total of 83 psychiatric patients completed questionnaires on irritability (Brief Irritability Test) and social anxiety (Liebowitz Social Anxiety Scale; LSAS). The LSAS includes subscales for anxiety and avoidance. They also completed the Stroop task to assess inhibitory control. Regression analyses and bootstrap sampling methods were used for data analysis.

Results: Inhibitory control showed no significant total or direct effect on the total score of social anxiety or on the anxiety subcomponent, but the indirect effect through irritability was significant in both. Additionally, for the avoidance subcomponent, while the direct effect was not significant, both the total effect and the indirect effect through irritability were significant, indicating a full mediation model.

Conclusion: This study empirically demonstrated that irritability serves as a significant mediating pathway in the relationship between inhibitory control and social anxiety, with the proposed model showing the strongest explanatory power in the avoidance domain. These findings suggest that the pathway between inhibitory control and irritability is more clearly expressed in avoidance symptoms of social anxiety, and that identifying this specific mechanism contributes to a more integrated understanding of the cognitive and emotional underpinnings of social anxiety.

Poster

2025年9月26日(金) 14:00 ~ 15:10 Poster Session (6F Meeting Room 4-6)

Poster 35**[P-35-05] From Comic Panels to Psychiatric Labels: A Psychiatric Review of The Joker and the Public Perception of Mental Illness**

*Tejbir Singh Deol¹, Arun Thakur¹, Saif Toubasey¹, Ella Marie Bauwens¹, Madhusudan Dalvi^{1,2} (1. King's College London (UK), 2. Kent and Medway NHS and Social Care Partnership Trust (UK))

キーワード : Cultural Psychiatry、Psychiatry、Media、Social perceptions、Comic books

Background:

The Joker, an iconic comic book figure symbolising chaos and madness, is associated with various psychiatric conditions and mental health disorders due to his unpredictable and violent behaviour. Over the decades, his character has had a significant cultural impact on public attitudes toward mental health and the stigma surrounding psychiatric illness.

Aims:

This review examines how The Joker has influenced public perceptions of mental illness. It explores his character's evolution through a psychiatric lens to identify key themes and their impact on mental health stigma and cultural ideas about mental illness in society.

Methods:

A hybrid approach combined qualitative thematic analysis of key Joker comic storylines with a narrative literature review of the media's role in shaping mental health perceptions. Primary texts were analysed for psychiatric themes, while secondary literature assessed media driven stigma and evolving portrayals.

Results:

Four main psychiatric themes emerged: (1) early depictions of the Joker as a "dangerous madman" reflecting psychosis and antisocial traits; (2) associations between severe mental illness and violent criminality, often framed through trauma informed narratives; (3) psychiatric institutional failure and stigma, symbolised by Arkham Asylum's portrayal; and (4) contemporary complexity highlighting trauma, dissociation, and identity fragmentation, reflecting diagnoses like dissociative identity disorder. The literature review confirmed that the media frequently exaggerate violence linked to mental illness, reinforcing stigma and impeding public understanding of recovery. Although recent narratives show greater psychological nuance, the Joker remains predominantly characterised as untreatable and dangerous.

Conclusions:

The Joker serves as a reflection and a representation of societal views on mental illness. This review highlights the pressing need for collaboration between mental health professionals and media creators to promote accurate portrayals. Enhancing mental health literacy through responsible storytelling can reduce stigma. The Joker's evolving portrayal offers a critical lens on the intersection of psychiatry, media, and culture.

Poster

2025年9月26日(金) 14:00 ~ 15:10  Poster Session (6F Meeting Room 4-6)

Poster 35

[P-35-06] Cross-Cultural Adaptation and Validation of the ABLE Scale in Japan: Toward Global Understanding of Epilepsy Stigma

*Takafumi Shiganami¹, Satoshi Saito^{2,3}, Chihiro Nakata², Sayaka Kobayashi¹, Haruo Yoshimasu¹, Mohmad Farooq Shaikh⁴, Go Taniguchi², Izumi Kuramochi^{1,2} (1. Department of Psychiatry, Saitama Medical Center, Saitama Medical University, Saitama, Japan (Japan), 2. Department of Epileptology, National Center Hospital, National Center of Neurology and Psychiatry (Japan), 3. Department of Neurology, Tokyo Women's Medical University School of Medicine (Japan), 4. Department of Pharmacology, Charles Sturt University, Orange, NSW (Australia))

キーワード : epilepsy stigma、ABLE-J、public health、measurement tool、cross-cultural adaptation

Background: Epilepsy stigma remains a significant public health concern worldwide. In Japan, misconceptions such as the belief that epilepsy is a mental illness are widespread. To address the lack of culturally relevant assessment tools, we adapted and validated the Japanese version of the Attitudes and Beliefs about Living with Epilepsy scale (ABLE-J). **Methods:** An online cross-sectional survey was conducted with 400 Japanese adults from the general population. The ABLE scale was translated and culturally adapted following ISPOR guidelines. We examined construct validity using confirmatory factor analysis (CFA) and assessed internal consistency using Cronbach's alpha. Criterion-related validity was evaluated via correlations with epilepsy knowledge, cultural beliefs, and the Public Attitudes Toward Epilepsy Scale—Japanese version (PATE-J). **Results:** CFA supported a four-factor structure—Negative Stereotypes, Risk and Safety Concerns, Work and Role Expectations, and Personal Fear and Social Avoidance. The 27-item revised model demonstrated improved fit ($CFI = 0.893$, $TLI = 0.880$, $RMSEA = 0.087$). All subscales showed good to excellent reliability ($\alpha = 0.81$ – 0.94). ABLE-J scores were positively correlated with PATE-J ($r = 0.617$) and cultural stigma ($r = 0.489$), and negatively with epilepsy knowledge ($r = -0.326$). No significant differences in stigma were found across demographic groups. **Conclusion:** The ABLE-J is a reliable and valid instrument to assess multidimensional public stigma toward epilepsy in Japan. It is applicable for evaluating public health interventions and enables cross-cultural comparisons. These findings underscore the need for culturally sensitive anti-stigma strategies in epilepsy care.

Poster

2025年9月26日(金) 14:00 ~ 15:10  Poster Session (6F Meeting Room 4-6)

Poster 35

[P-35-07] Social capital and social support as moderators in the association between perceived discrimination and mental health among Filipino domestic workers in Macao

*Xiaoyu Duan^{1,2}, Timothy S. Sumerlin², Brian J. Hall^{2,3} (1. Department of International Health, Bloomberg School of Public Health, Johns Hopkins University (United States of America), 2. Center for Global Health Equity, NYU Shanghai (China), 3. Department of Health, Behavior and Society, Bloomberg School of Public Health, Johns Hopkins University (United States of America))

キーワード : Migrant domestic workers、 Perceived discrimination、 Mental health、 Social capital、 Social support

Background: Migrant domestic workers (MDW) face a heightened risk of poor mental health while working abroad, partly due to perceived discrimination. Social networks, including cognitive and structural social capital and perceived social support, are often viewed as protective. However, findings are mixed, with some studies reporting paradoxical effects, namely higher social capital or support associated with worse mental health. **Objectives:** To assess whether social capital and social support moderate the association between perceived discrimination and symptoms of anxiety and depression among Filipino MDWs in Macao, China. **Materials and Methods:** A total of 1,362 Filipino MDWs in Macao completed self-administered surveys between November 2016 and August 2017, using respondent-driven sampling. Demographics, perceived discrimination, anxiety and depression, cognitive and structural social capital, and perceived social support were collected. Multiple linear regression assessed the association between perceived discrimination and mental health, and tested moderation by social capital and social support. **Results:** Perceived discrimination was independently and positively associated with both depression ($\beta = 0.217$, $P < 0.001$) and anxiety ($\beta = 0.198$, $P < 0.001$). Higher cognitive social capital was independently associated with lower depression ($\beta = -0.477$, $P = < 0.001$) and anxiety ($\beta = -0.356$, $P = 0.009$). Structural social capital was positively linked to depression ($\beta = 0.071$, $P = < 0.001$), but not with anxiety. Social support showed no significant association. No moderating effects of social capital or social support on the relationship between perceived discrimination and mental health were observed. **Conclusions:** Perceived discrimination is a robust predictor of anxiety and depression among Filipino MDWs. Cognitive social capital appears independently protective, while no buffering effects were found for social capital or social support. Further research is needed to explore the roles of social networks in this population and to inform interventions aimed at reducing discrimination and strengthening social resources.