

## 2025年9月27日(土)

### Presidential Lecture

■ 2025年9月27日(土) 14:10 ~ 15:00  Session Room 1 (Main Hall A)

### [Presidential Lecture 2] Psychiatry in Crises

Moderator: Suzanna Every-Palmer

[PL-2]

### Psychiatry in Crises

\*Tsuyoshi Akiyama<sup>1</sup> (1. Rokubancho Mental Clinic (Japan))

### Plenary Session

■ 2025年9月27日(土) 13:10 ~ 14:00  Session Room 1 (Main Hall A)

### [Plenary Session 4] How to Assess and Intervene Hikikomori in the 21st Digitalized Society

Moderator: Antonio Sison (University of the Philippines Philippine General Hospital)

[PS-4]

### How to Rescue Hikikomori, Pathological Social Withdrawal, in the Digital Urbanized Society

\*Takahiro A. Kato<sup>1</sup> (1. Department of Psychiatry, Hokkaido University Graduate School of Medicine (Japan))

### Educational Lecture

■ 2025年9月27日(土) 9:00 ~ 9:50  Session Room 1 (Main Hall A)

### [Educational Lecture 5] Toward a Poetics of Illness and Healing

Moderator: Junko Kitanaka (The Department of Human Sciences at Keio University in Tokyo)

[EL-5]

### Toward a Poetics of Illness and Healing

\*Laurence J. Kirmayer<sup>1</sup> (1. McGill University (Canada))

### Educational Lecture

■ 2025年9月27日(土) 11:10 ~ 12:00  Session Room 1 (Main Hall A)

### [Educational Lecture 6] From Transcultural Psychiatry to Cultural Psychiatry: the role of old mythologies and new scientific approaches in the construction of biocultural identities

Moderator: Roberto Lewis-Fernández (Columbia/NYS Psychiatric Institute)

[EL-6]

### FROM TRANSCULTURAL PSYCHIATRY TO CULTURAL PSYCHIATRY: the role of old mythologies and new scientific approaches in the construction of bio-cultural identities.

\*Goffredo Bartocci<sup>1,2,3</sup> (1. Italian Institute of Transcultural Mental Health (Italy), 2. World Association of Cultural Psychiatry (Italy), 3. Transcultural Psychiatry Section, Italian Society of Psychiatry (Italy))

**Educational Workshop****■ 2025年9月27日(土) 10:40 ~ 12:10  Session Room 4 (Large Hall B)****[Educational Workshop 2] The practice of yoga therapy**

Moderator: Sachiyō Morita (Shiga university of Medical Science Hospital, Cancer Center), Ramdas Ransing (Department of Psychiatry, BKL Walawalkar Rural Medical College)

**[EW-2]****The practice of yoga therapy**

\*Sachiyō Morita<sup>1</sup>, \*Keishin Kimura<sup>2</sup> (1. Shiga university of Medical Science Hospital, Cancer Center (Japan), 2. Japan Yoga Therapy Society (Japan))

**Movie****■ 2025年9月27日(土) 10:40 ~ 12:10  Session Room 8 (Meeting Room 1)****[MOVIE on ADHD] Lessons from "Normal 17": Rethinking ADHD Support Through a Family and Cultural Lens in Japan**

Moderator: Keiko Takayama (NPO Edison Club), Sounosuke Kita (NPO Edison Club)

**[MV-1]****Lessons from "Normal 17": Rethinking ADHD Support Through a Family and Cultural Lens in Japan**

\*Keiko Takayama<sup>1</sup> (1. NPO Edison Club (Japan))

## Grant Awardees

2025年9月27日(土) 9:50 ~ 10:50  Session Room 1 (Main Hall A)

## WACP Grant Award Session

[GA-1-01]

### *NYAWIJI, GREGET, SENGGUH, ORA MINGKUH: SUPPORTIVE PSYCHOTHERAPY THROUGH THE LENS OF KAWRUH JOGED MATARAM*

\*Bayu Adiputro Puruboyo<sup>1</sup>, Carla Raymondalexa Marchira<sup>2</sup>, Fajar Wijanarko<sup>3</sup> (1. Resident, Department of Psychiatry, Faculty of Medicine, Public Health, and Nursing, Universitas Gadjah Mada (Indonesia), 2. Staff, Department of Psychiatry, Faculty of Medicine, Public Health, and Nursing, Universitas Gadjah Mada (Indonesia), 3. Curator, Museum Keraton Yogyakarta (Indonesia))

[GA-1-02]

### *Navigating the Shadows: The Impact of Mindfulness, Cognitive Fusion, and Coping Strategies on Psychological Distress Among Mental Health Workers in Timor Leste*

Noviyanti Carla Tilman Leite<sup>2</sup>, Gaspar Quintao<sup>3</sup>, \*Nicholas Pang<sup>1</sup>, Eugene Koh<sup>4</sup>, Noor Melissa Nor Hadi<sup>4</sup>, Jhia Mae Woo<sup>5</sup>, Kah Mun Wan<sup>6</sup>, Marina Abdul Rahman Sabri<sup>7</sup>, Ming Gui Tan<sup>1</sup>, Assis Kamu<sup>1</sup>, Chong Mun Ho<sup>1</sup> (1. Universiti Malaysia Sabah (Malaysia), 2. PRADET (The Democratic Republic of Timor-Leste), 3. Guido Valadares National Hospital (The Democratic Republic of Timor-Leste), 4. Putra University Malaysia (Malaysia), 5. Sunway University (Malaysia), 6. ACT Kuala Lumpur (Malaysia), 7. Hospital Sultanah Aminah (Malaysia))

[GA-1-03]

### *The paradox impact of language proficiency and acculturation strategies on depressive symptoms in Indonesian migrant domestic workers*

\*Andrian Liem<sup>1,2</sup> (1. Universitas Sebelas Maret (Indonesia), 2. Monash University Malaysia (Malaysia))

[GA-1-04]

### *AI-Driven Multi-Omics Integration of Functional Connectomics and Biomarkers to Decode Resilience Mechanisms in Treatment-Resistant Depression*

\*Rifaldy Fajar<sup>1</sup>, Prihantini Prihantini<sup>2</sup>, Elfiany Elfiany<sup>3</sup>, Sahnaz Vivinda Putri<sup>4</sup>, Andi Nursanti Andi Ureng<sup>5</sup> (1. Yogyakarta State University (Indonesia), 2. Bandung Institute of Technology (Indonesia), 3. BLK General Hospital (Indonesia), 4. International University Semen Indonesia (Indonesia), 5. Andini Persada College of Health Sciences (Indonesia))

Symposium | Community care : [Symposium 55] Deinstitutionalization and Community Care2-Freedom first on the basis of Human Rights-

■ 2025年9月27日(土) 9:00 ~ 10:30 会場 Session Room 2 (Main Hall B)

## [Symposium 55] Deinstitutionalization and Community Care2-Freedom first on the basis of Human Rights-

Moderator: Itsuo Asai (Heart Clinic Medical Corporation)

[SY-55]

Deinstitutionalization and Community Care2-Freedom first on the basis of Human Rights-

Itsuo Asai<sup>1</sup>, Donato Zupin<sup>2</sup>, So Hee Lee<sup>3</sup>, Seiryō Mukaiyachi<sup>4</sup>, Pablo Farias<sup>5</sup> (1. Heart Clinic Medical Corporation (Japan), 2. MHD-WHO Collaborative Center (United States of America), 3. National Medical Center Seoul (Australia), 4. Health Sciences University of Hokkaido (Canada), 5. Hospital Civil de Guadalajara (Mexico))

[SY-55-01]

A full-scale open-door, no-restraint mental health system in Trieste, Italy

\*Donato Zupin<sup>1,2,3,4</sup> (1. DDSM - Mental Health Area-WHO Collaborative Center, ASUGI. Psychiatrist (Italy), 2. Italian Institute of Transcultural Mental Health (Italy), 3. Transcultural Psychiatry Section, Italian Society of Psychiatry (Italy), 4. World Association of Cultural Psychiatry (Italy))

[SY-55-02]

Community Measures to Reduce Involuntary and Long-Term Hospitalization of Individuals with Mental Illness

\*So Hee Lee<sup>1</sup> (1. National Medical Center (Korea))

[SY-55-03]

The Process and Current Challenges of Deinstitutionalization in the Eastern Hidaka Region, Hokkaido

\*IKUYOSHI MUKAIYACHI<sup>1</sup> (1. Health Sciences University of Hokkaido (Japan))

[SY-55-04]

Dilemmas of deinstitutionalization in contexts of absent psychiatric care: reflections from Chiapas, Mexico.

\*Pablo Farias<sup>1</sup> (1. Bats'i Lab (Mexico))

Symposium | Schizophrenia : [Symposium 56] Current status of psychiatric research using genetic medicine and genomic medicineImportance of collaborative research among East Asians

2025年9月27日(土) 9:00 ~ 10:30 Session Room 3 (Large Hall A)

## [Symposium 56] Current status of psychiatric research using genetic medicine and genomic medicineImportance of collaborative research among East Asians

Moderator: Nakao Iwata (Fujita Health University School of Medicine), Hailiang Huang (The Broad Institute of MIT and Harvard)

[SY-56]

### Current status of psychiatric research using genetic medicine and genomic medicine Importance of collaborative research among East Asians

Nakao Iwata<sup>1</sup>, Weihua Yue<sup>2</sup>, Po-Hsiu Kuo<sup>3</sup>, Hailiang Huang<sup>4</sup> (1. Fujita Health University School of Medicine (Japan), 2. Peking University Sixth Hospital (China), 3. National Taiwan University (Taiwan), 4. the Broad Institute of MIT and Harvard (United States of America))

[SY-56-01]

#### Pharmacogenomic Research on Antipsychotic Therapy in Chinese Han Population

\*Weihua Yue<sup>1,2,3,4,5</sup> (1. Peking University Sixth Hospital (China), 2. Institute of Mental Health, Peking University (China), 3. NHC Key Laboratory of Mental Health (Peking University) (China), 4. National Clinical Research Center for Mental Disorders (Peking University Sixth Hospital) (China), 5. PKU-IDG/McGovern Institute for Brain Research (China))

[SY-56-02]

#### Multimodal Genomic and Mobile Sensing Reveals Genetic and Behavioral Signatures in Mood Disorder Phenotypes

\*Po-Hsiu Kuo<sup>1,5,8</sup>, Chiao-Erh Chang<sup>1</sup>, Ting-Yi Lee<sup>1</sup>, Shiau-Shian Huang<sup>2,3</sup>, Ying-Ting Chao<sup>1,4</sup>, Hsi-Chung Chen<sup>5</sup>, Ming-Chyi Huang<sup>6</sup>, I-Ming Chen<sup>5</sup>, Chuhsing Kate Hsiao<sup>1,7</sup> (1. Institute of Epidemiology and Preventive Medicine, College of Public Health, National Taiwan University (Taiwan), 2. Department of Psychiatry, Taipei Veterans General Hospital (Taiwan), 3. College of Medicine, National Yang Ming Chiao Tung University (Taiwan), 4. Department of Medical Research, National Taiwan University (Taiwan), 5. Department of Psychiatry, National Taiwan University Hospital (Taiwan), 6. Department of Psychiatry, Taipei City Psychiatric Center, Taipei City Hospital (Taiwan), 7. Institute of Health Data Analytics and Statistics, College of Public Health, National Taiwan University (Taiwan), 8. Psychiatric Research Center, Wan Fang Hospital (Taiwan))

[SY-56-03]

#### Contribution of common and rare variants to schizophrenia risk in East and South Asian ancestries

\*Hailiang Huang<sup>1,2,3</sup>, Stanley Global Asia Initiatives (1. the Broad Institute of MIT and Harvard (United States of America), 2. Massachusetts General Hospital (United States of America), 3. Harvard Medical School (United States of America))

Symposium | Anxiety : [Symposium 57] Perception and stigma, trans-ethnic genetics, virtual reality treatment of anxiety disorder, and Hyperemesis Gravidarum

2025年9月27日(土) 9:00 ~ 10:30 Session Room 4 (Large Hall B)

## [Symposium 57] Perception and stigma, trans-ethnic genetics, virtual reality treatment of anxiety disorder, and Hyperemesis Gravidarum

Moderator: Kazuo Yamada (Toyo Eiwa University)

[SY-57]

Perception and stigma, trans-ethnic genetics, virtual reality treatment of anxiety disorder, and Hyperemesis Gravidarum

Tsuyoshi Akiyama<sup>1</sup>, Yong-Wook Shin<sup>2</sup>, Kazutaka Ohi<sup>3</sup>, Junhyung Kim<sup>4</sup>, Wan Asyikin<sup>5</sup> (1. Rokubancho Mental Clinic (Japan), 2. University of Ulsan (Korea), 3. Gifu University (Japan), 4. Kangbuk Samsung Hospital (Korea), 5. Hospital Permai (Malaysia))

[SY-57-01]

Breaking the Stigma: Cultural Norms, Celebrities, and Social Media

\*Yong-Wook Shin<sup>1</sup> (1. Department of Psychiatry, Asan Medical Center (Korea))

[SY-57-02]

Transethnic Genetic Etiology of Panic Disorder: Approaches Using Polygenic Scores and Their Machine Learning-Based Classification

\*Kazutaka Ohi<sup>1</sup>, Takeshi Otowa<sup>2</sup>, Hisanobu Kaiya<sup>3</sup>, Tsukasa Sasaki<sup>4</sup>, Hisashi Tanii<sup>5</sup>, Toshiki Shioiri<sup>1</sup> (1. Department of Psychiatry, Gifu University Graduate School of Medicine (Japan), 2. Department of Psychiatry, Teikyo University (Japan), 3. Panic Disorder Research Center, Warakukai Medical Corporation (Japan), 4. Department of Physical and Health Education, Graduate School of Education, The University of Tokyo (Japan), 5. Center for Physical and Mental Health, Mie University (Japan))

[SY-57-03]

Enhancing Early Treatment Response Prediction in Panic Disorder Using a Virtual Reality-Based Assessment Tool: Integrating Multimodal Indicators with Machine Learning

\*Junhyung Kim<sup>1</sup> (1. Department of psychiatry, Samsung Kangbuk Hospital, Sungkyunkwan University School of Medicine, Seoul, Republic of Korea (Korea))

[SY-57-04]

Anxiety, depression and marital satisfaction in women with hyperemesis gravidarum: A comparative cross-sectional study in Malaysia

\*Wan Asyikin Binti Wan Azlan<sup>1</sup>, Magendra Ramalingam<sup>1</sup>, Rosdinom Razali<sup>1</sup>, Mohamad Farouk Abdullah<sup>1</sup>, Fairuz Nazri Abdul Rahman<sup>1</sup> (1. Malaysia Ministry of Health (Malaysia))

Symposium | Cultural Psychiatry : [Symposium 58] 25th Anniversary of the Korea-Japan Young Psychiatrists Association (KJYPA)-Friendship and Research Collaboration

2025年9月27日(土) 9:00 ~ 10:30 Session Room 5 (Conference Room A)

## [Symposium 58] 25th Anniversary of the Korea-Japan Young Psychiatrists Association (KJYPA)-Friendship and Research Collaboration

Moderator: Takahiro A. Kato (Department of Psychiatry, Hokkaido University Graduate School of Medicine), Seok Woo Moon (Konkuk University Chungju Hospital)

Discussant: Toshihide Kuroki

[SY-58]

### 25th Anniversary of the Korea-Japan Young Psychiatrists Association (KJYPA)-Friendship and Research Collaboration

Takahiro A. Kato<sup>1</sup>, Moon Seok Woo<sup>2</sup>, Muneyuki Suzuki<sup>3</sup>, Michiko Fujimoto<sup>4</sup>, Gi Whan Byeon<sup>5</sup>, Seng Yoon Kim<sup>6</sup> (1. Hokkaido University (Japan), 2. Konkuk University Chungju Hospital (Korea), 3. Fukuma Hospital (Japan), 4. Osaka University Graduate School of Medicine (Japan), 5. Department of Psychiatry, Seoul St. Mary's Hospital, College of Medicine, The Catholic University of Korea (Korea), 6. Daegu Catholic University School of Medicine (Korea))

[SY-58-01]

#### The academic solidarity and friendship between Japan & Korea (KJYPA)

\*SEOK WOO MOON<sup>1</sup> (1. KONKUK UNIVERSITY MEDICAL COLLEGE (Korea))

[SY-58-02]

Korea Japan Young Psychiatrists' Conference (KJYPC) is a group cultural psychotherapy session for Korean and Japanese psychiatrists.

\*Muneyuki Suzuki<sup>1</sup> (1. Fukuma Hospital (Japan))

[SY-58-03]

#### Trends in cultural psychiatry in the Korea-Japan Young Psychiatrists' Conference

\*Michiko Fujimoto<sup>1</sup> (1. Health Care Division, Health and Counseling Center, The University of Osaka (Japan))

[SY-58-04]

#### Differential Effects of Soluble and Plaque Amyloid on Late-Life Depression: The Moderating Role of Tau Pathology

\*Giwhan Byeon<sup>1</sup>, Su Hyung Kim<sup>2</sup>, Sunghwan Kim<sup>3</sup>, Seunggyun Ha<sup>4</sup>, Yoo Hyun Um<sup>2</sup>, Sheng-Min Wang<sup>3</sup>, Hyun Kook Lim<sup>3,5,6</sup>, Dong Woo Kang<sup>1</sup> (1. Department of Psychiatry, Seoul St. Mary's Hospital, College of Medicine, The Catholic University of Korea, Seoul, Republic of Korea (Korea), 2. Department of Psychiatry, St. Vincent's Hospital, College of Medicine, The Catholic University of Korea, Seoul, Republic of Korea (Korea), 3. Department of Psychiatry, Yeouido St. Mary's Hospital, College of Medicine, The Catholic University of Korea, Seoul, Republic of Korea (Korea), 4. Division of Nuclear Medicine, Department of Radiology, Seoul St. Mary's Hospital, College of Medicine, The Catholic University of Korea, Seoul, Republic of Korea (Korea), 5. Research Institute, NEUROPHET Inc.; Seoul, Republic of Korea (Korea), 6. CMC Institute for Basic Medical Science, the Catholic Medical Center of The Catholic University of Korea, Seoul, Republic of Korea (Korea))

[SY-58-05]

#### Hikikomori or Early-Onset Schizophrenia? Diagnostic and Therapeutic Considerations in Adolescent Social Withdrawal – A Case-Based Review

\*Seng Yoon Kim<sup>1</sup>, Jung Yeon Moon<sup>1</sup>, Tae Young Choi<sup>1</sup> (1. Daegu Catholic University School of Medicine (Korea))

Symposium | Trauma : [Symposium 59] Cultural Responses to WW2 in Japan: Interdisciplinary Reflections and Intercultural Dialogue

2025年9月27日(土) 9:00 ~ 10:30 Session Room 6 (Conference Room B)

## [Symposium 59] Cultural Responses to WW2 in Japan: Interdisciplinary Reflections and Intercultural Dialogue

Moderator: Yuki Imoto (Keio University), Kai Ogimoto (Sagami Women's University) Discussant: Koh Eugen (University of Melbourne)

Discussant: Eugen Koh (University of Melbourne)

[SY-59]

### Cultural Responses to WW2 in Japan: Interdisciplinary Reflections and Intercultural Dialogue

Ritsu Yonekura<sup>1</sup>, Chizuko Tezuka<sup>2</sup>, Kai Ogimoto<sup>3</sup>, Eugen Koh<sup>4</sup> (1. Nihon University (Japan), 2. Independent (Japan), 3. Sagami Women's University (Japan), 4. Australian National University (Australia))

[SY-59-01]

#### Bias toward "Narratives of Sacrifice" in Japanese "August Journalism" and Collective Memory of War in Postwar Japan

\*Ritsu Yonekura<sup>1</sup> (1. Nihon University Department of Law (Japan))

[SY-59-02]

#### Japanese Narrative of World War 2 through the Cultural Lens of Japanese Tanka: Tragic Acceptance of War Realities and Its Implications

\*Chizuko Tezuka<sup>1</sup> (1. formerly Keio University (Japan))

[SY-59-03]

#### On the Myth of "Izanaki and Izanami": Mythological Thinking and Inability to Mourn after WW2 in Japan

\*Kai Ogimoto<sup>1</sup> (1. Sagami Women's University (Japan))

[SY-59-04]

#### Cultural work in the healing of cultural trauma from the Second World War

Discussant: Eugen Koh<sup>1</sup> (1. University of Melbourne (Australia))

**Symposium | Suicide prevention : [Symposium 60] Suicide and Psychotherapy****2025年9月27日(土) 9:00 ~ 10:30**  Session Room 7 (Conference Room C)**[Symposium 60] Suicide and Psychotherapy**

Moderator: Naoe Okamura (Hatsuishi Hospital)

**[SY-60]****Suicide and Psychotherapy**

Nobuaki Eto<sup>5,6</sup>, Rachel Gibbons<sup>1,3</sup>, Jo O'Reilly<sup>1,2,3</sup>, In-Soo LEE<sup>4</sup> (1. The Royal College of Psychiatrists (UK), 2. Medical Psychotherapy at the North London NHS Foundation Trust (UK), 3. British Psychoanalytic Society (UK), 4. Korean Psychoanalytic Center (Korea), 5. Fukuoka University (Japan), 6. Japan Psychoanalytic Society (Japan))

**[SY-60-01]****Psychoanalytic assessment as postvention**

\*Nobuaki Eto<sup>1</sup> (1. Fukuoka University (Japan))

**[SY-60-02]****The 'Truth' About Suicide: Insights and Challenges for Clinicians and the Bereaved**

\*Rachel Gibbons<sup>1</sup> (1. Royal College of Psychiatrists (UK))

**[SY-60-03]****The containment of persecution and recovery of thought; the role of a psychodynamically informed risk panel when working with suicidal states of mind.**

\*Josephine Kate O'Reilly<sup>1</sup>, Rachel Gibbons<sup>1</sup>, Nobuaki eto (1. Royal College of Psychiatrists London (UK))

**[SY-60-04]****Shame and the Unbearable Self:****Psychoanalytic Reflections on Suicidality in the Korean Context**

\*In-Soo Lee<sup>1</sup> (1. Korean Psychoanalytic Center (Korea))

Symposium | Forensic Psychiatry and Violence : [Symposium 61] Ethnic diversity, psychiatric conditions, and transgressive behavior: Insights from cases in forensic mental health care

2025年9月27日(土) 9:00 ~ 10:30 Session Room 8 (Meeting Room 1)

## [Symposium 61] Ethnic diversity, psychiatric conditions, and transgressive behavior: Insights from cases in forensic mental health care

Moderator: Charlotte Clous (Centre for Transcultural Psychiatry Veldzicht), Marjolein De Pau (Department of Special Needs Education, Ghent University)

[SY-61]

### Ethnic diversity, psychiatric conditions, and transgressive behavior: Insights from cases in forensic mental health care

Charlotte Clous<sup>2</sup>, Marjolein De Pau<sup>1</sup>, Morten Deleuran Terkildsen<sup>3,4,5</sup>, Ilaria Rossetto<sup>6</sup> (1. Department of Special Needs Education, Ghent University (Belgium), 2. Centre for Transcultural Psychiatry Veldzicht (Netherlands), 3. Department of Forensic Psychiatry, Aarhus University (Denmark), 4. Institute of Clinical Medicine, Health, Aarhus University (Denmark), 5. DEFACUM - Public Health Research (Denmark), 6. University of Milan, School of Medicine (Italy))

[SY-61-01]

#### Exploring the impact of mandatory repatriation on cultural identity and pathways to recovery of migrant forensic psychiatric patients in a Dutch Centre for Transcultural Psychiatry.

\*Charlotte Clous<sup>1,2</sup>, Hannah Jongsma<sup>1,2</sup>, Anniel Van Weeghel<sup>5,6</sup>, Ria Reis<sup>4,3</sup>, Wim Veling<sup>1</sup> (1. University Medical Centre Groningen (UMCG) (Netherlands), 2. Centre for Transcultural Psychiatry Veldzicht (Netherlands), 3. Leiden University Medical Centre (LUMC) (Netherlands), 4. Amsterdam institute for Global Health Development (AIGHD) (Netherlands), 5. University of Amsterdam (UvA) (Netherlands), 6. Arq Psychotrauma International (Netherlands))

[SY-61-02]

#### A Tapestry of Self: Laila's Intersectional Identity in Forensic Mental Health Care

\*Marjolein De Pau<sup>1</sup>, Tom Vander Beken<sup>1</sup>, Stijn Vandevelde<sup>1</sup>, Sara Rowaert<sup>1</sup> (1. Ghent University (Belgium))

[SY-61-03]

#### *Culture and Care in Practice: A Greenlandic Forensic Psychiatric Ward in Denmark*

\*Morten Deleuran Terkildsen<sup>1,2,4</sup>, Parnuña Heilmann<sup>3</sup>, Karen Aalling Mikkelsen<sup>1</sup>, Irene Thorsager Kruitbosch Jensen<sup>1</sup>, Ida Margrethe Nielsen<sup>1,3</sup>, Harry Kennedy<sup>1,2,5</sup>, Lisbeth Uhrskov Sørensen<sup>1,2</sup> (1. Department of Forensic Psychiatry, Aarhus University Hospital Psychiatry, Denmark (Denmark), 2. Department of Clinical Medicine, Health, Aarhus University, Aarhus, Denmark (Denmark), 3. Psychiatric Area, Queen Ingrid's Hospital, Nuuk, Greenland (Greenland), 4. DEFACUM - Public Health Research, Aarhus, Denmark (Denmark), 5. Trinity College Dublin, Dublin (Ireland))

[SY-61-04]

#### Forensic Psychiatry and Migrant Populations in Italy: Clinical Challenges and Culturally Informed Response

\*Ilaria Rossetto<sup>1</sup>, Stefano Tambuzzi<sup>1</sup>, Cristina Cattaneo<sup>1</sup>, Lia Parente<sup>2</sup>, Felice Francesco Carabello<sup>2</sup> (1. University of Milan (Italy), 2. University of Bari (Italy))

Symposium | Community care : [Symposium 62] Community mental health care: perspectives in Canada, Korea, and Japan inspired by a cultural -ecosocial view.

2025年9月27日(土) 10:40 ~ 12:10 Session Room 2 (Main Hall B)

## [Symposium 62] Community mental health care: perspectives in Canada, Korea, and Japan inspired by a cultural -ecosocial view.

Moderator: Masayuki Noguchi (Okayama Prefectural Mental Health & Welfare Center)

[SY-62]

Community mental health care: perspectives in Canada, Korea, and Japan inspired by a cultural -ecosocial view.

Laurence Kirmayer<sup>2</sup>, Boung Chul Lee<sup>3</sup>, Chiyo Fujii<sup>4</sup>, Masayuki Noguchi<sup>1</sup> (1. Okayama Prefectural Mental Health & Welfare Center (Japan), 2. McGill University (Canada), 3. Hallym University Hangang Sacred Heart Hospital (Korea), 4. National Institute of Mental Health National Center of Neurology and Psychiatry (Japan))

[SY-62-01]

Community Mental Health: A Cultural-Ecosocial Approach

\*Laurence J Kirmayer<sup>1</sup> (1. McGill University (Canada))

[SY-62-02]

Disasters and Community Mental Health

\*Boung Chul Lee<sup>1</sup> (1. Hangang Sacred Heart Hospital (Korea))

[SY-62-03]

Evolving Roles of Psychiatric Care Providers in Community Mental Health: Collaborative Outreach for People with Unmet Mental Health Needs in Japan

\*Chiyo Fujii<sup>1</sup> (1. National Center of Neurology and Psychiatry (Japan))

[SY-62-04]

Community-based Integrated Mental Health Care System for People with Mental Health Needs in Japan: Addressing Unmet Mental Health Needs through the Public Mental Health Sector.

\*Masayuki Noguchi<sup>1</sup> (1. Okayama Prefectural Mental Health & Welfare Center (Japan))

Symposium | Immigrant, Refugee : [Symposium 63] Rethinking Mental Health Support for Refugees

2025年9月27日(土) 10:40 ~ 12:10 Session Room 3 (Large Hall A)

## [Symposium 63] Rethinking Mental Health Support for Refugees

Moderator: Simon Groen (De Evenaar Center for Transcultural Psychiatry), Hans Rohlof (Mental Care Center)

[SY-63]

### Rethinking Mental Health Support for Refugees

UKAWA Ko<sup>1</sup>, Hans J.G.B.M. Rohlof<sup>2</sup>, Mario Braakman<sup>3</sup>, Simon Groen<sup>4</sup>, Valerie DeMarinis<sup>5</sup>, Claudia Blankenstijn<sup>6</sup> (1. Taisho University (Japan), 2. Mental Care Center (Netherlands), 3. Tilburg University (Netherlands), 4. De Evenaar Center for Transcultural Psychiatry (Netherlands), 5. Umeå University (Medical School) (Sweden), 6. linguist (Netherlands))

[SY-63-01]

#### Narrative Language Therapy® for refugee children

\*Claudia Blankenstijn<sup>1</sup> (1. linguist (Netherlands))

[SY-63-02]

#### Psychodiagnostic assessment and treatment of refugees

\*Hans Rohlof<sup>1</sup> (1. Private Practice Rohlof (Netherlands))

[SY-63-03]

#### Victimmigration, a longitudinal study of refugees suffering from stress and trauma in Greece and the Netherlands

\*Mario Hubertus Braakman<sup>1</sup> (1. Tilburg University (Netherlands))

[SY-63-04]

#### The recognition of grief in traumatized refugees in Dutch mental health care

\*Simon Groen<sup>1</sup> (1. De Evenaar, Center for Transcultural Psychiatry, GGZ Drenthe (Netherlands))

[SY-63-05]

#### Examining the situation on mental health support for refugees in Sweden

\*Valerie DeMarinis<sup>1</sup>, Sofie Bäärnhielm<sup>2</sup>, Mattias Strand<sup>2</sup> (1. Innlandet Hospital Trust, Norway; Umeå University, Sweden (Sweden), 2. Department of Clinical Neuroscience, Karolinska Institutet, Sweden (Sweden))

Symposium | Trauma : [Symposium 64] The long-term effects of the Asia-Pacific War and its transmission across generations in individuals, collectives and societies

2025年9月27日(土) 10:40 ~ 12:10 Session Room 5 (Conference Room A)

## [Symposium 64] The long-term effects of the Asia-Pacific War and its transmission across generations in individuals, collectives and societies

Moderator: Koh Eugen (University of Melbourne), Tadashi Takeshima (Taisho University)

[SY-64]

The long-term effects of the Asia-Pacific War and its transmission across generations in individuals, collectives and societies

Koh Eugen<sup>2</sup>, Tadashi Takeshima<sup>1</sup>, Shin Kurumizawa<sup>3</sup> (1. Taisho University (Japan), 2. University of Melbourne (Australia), 3. Hananotani Clinic (Japan))

[SY-64-01]

The transmission of Second World War Trauma across generations

\*Eugen Koh<sup>1</sup> (1. University of Melbourne (Australia))

[SY-64-02]

The Impact of the Asia-Pacific War on Suicide and Mental Health Policy in Japan

\*Tadashi Takeshima<sup>1</sup> (1. Taisho University (Japan))

[SY-64-03]

Transgenerational transmission of responsibility of perpetrator

\*Shin Kurumizawa<sup>1</sup> (1. Hananotani Clinic (Japan))

Symposium | Asylum and Mental Disorders : [Symposium 65] Assessment and care for asylum seekers with severe mental health problems

2025年9月27日(土) 10:40 ~ 12:10 Session Room 6 (Conference Room B)

## [Symposium 65] Assessment and care for asylum seekers with severe mental health problems

Moderator: Seline van den Ameele (Department of Psychiatry and Medical Psychology, University Hospital Brugmann, Brussels Collaborative Antwerp Psychiatric Research Institute (CAPRI), Antwerp University, Antwerp)

[SY-65]

### Assessment and care for asylum seekers with severe mental health problems

Seline van den Ameele<sup>1,2</sup>, Lukas Claus<sup>2,3</sup>, Laura Van de Vliet<sup>5,3</sup>, Sofie Vindevogel<sup>4</sup> (1. Department of Psychiatry and Medical Psychology, University Hospital Brugmann, Brussels (Belgium), 2. Collaborative Antwerp Psychiatric Research Institute (CAPRI), Antwerp University, Antwerp (Belgium), 3. Psychiatric Hospital Sint-Alexius, Brothers of Charity, Grimbergen (Belgium), 4. EQUALITY ResearchCollective, University of Applied Sciences and Arts HOGENT, Ghent (Belgium), 5. POZAH, Psychiatric Care for Asylum Seekers, Sint-Alexius, Grimbergen (Belgium))

[SY-65-01]

#### The Voices Not Heard: Asylum seekers' explanatory models of mental illness as elicited by the Cultural Formulation Interview

\*Seline van den Ameele<sup>1,2</sup> (1. Department of Psychiatry and Medical Psychology, University Hospital Brugmann, Brussels (Belgium), 2. Collaborative Antwerp Psychiatric Research Institute (CAPRI), Antwerp University, Antwerp (Belgium))

[SY-65-02]

#### Value of the CFI in asylum seekers' diagnostic assessment

\*Lukas Claus<sup>1,2</sup> (1. Resident Psychiatrist at Vrije Universiteit Brussel (Brussels, Belgium); (Belgium), 2. PhD researcher CAPRI (Collaborative Antwerp Psychiatric Research Institute), Universiteit Antwerpen (Antwerp, Belgium) (Belgium))

[SY-65-03]

#### Barriers to mental health care for asylum seekers and how to overcome them: an introduction

\*Laura Van de Vliet<sup>1</sup> (1. PZ St. Alexius Grimbergen (Belgium))

[SY-65-04]

#### Strengthening the frontline workforce to enhance transcultural mental health support in Belgian asylum reception centres.

\*Sofie Vindevogel Vindevogel<sup>1</sup>, Fayed Alabbas<sup>1</sup>, Yasmine Boumahdi<sup>1</sup>, Jürgen Magerman<sup>1</sup> (1. University of Applied Sciences and Arts Gent (Belgium))

Symposium | AI&IT : [Symposium 66] Digital Frontiers in Psychiatry: Innovative Approaches from Asia

2025年9月27日(土) 14:10 ~ 15:40 Session Room 2 (Main Hall B)

## [Symposium 66] Digital Frontiers in Psychiatry: Innovative Approaches from Asia

Moderator: Taishiro Kishimoto (Keio University School of Medicine)

[SY-66]

### Digital Frontiers in Psychiatry: Innovative Approaches from Asia

Taishiro Kishimoto<sup>1</sup>, Hwa-Young Lee<sup>2</sup>, Hsin-An Chang<sup>3</sup>, Hironobu Nakamura<sup>4</sup> (1. Keio University School of Medicine (Japan), 2. Soonchunhyang University Hospital (Korea), 3. Tri-Service General Hospital (Taiwan), 4. Institute of Science Tokyo (Japan))

[SY-66-01]

#### Development of software as a medical device for depression screening

\*Taishiro Kishimoto<sup>1</sup> (1. Keio University School of Medicine (Japan))

[SY-66-02]

#### AIOT (AI+IOT) based prediction system for suicide/aggressive behavior in psychiatric wards

\*Hwa-Young Lee Lee<sup>1</sup> (1. Soonchunhyang University Cheonan Hospital (Korea))

[SY-66-03]

#### Diagnosing and Treating Major Depressive Disorder Using EEG-Based Machine Learning

\*Hsin-An Chang<sup>1</sup>, Yi-Hung Liu<sup>2</sup> (1. Department of Psychiatry, Tri-Service General Hospital, National Defense Medical Center, Taipei (Taiwan), 2. Institute of Electrical and Control Engineering, National Yang Ming Chiao Tung University, Hsinchu (Taiwan))

Symposium | Community care : [Symposium 67] De-hospitalization and community psychiatry-1. Human Rights

2025年9月27日(土) 14:10 ~ 15:40 Session Room 3 (Large Hall A)

## [Symposium 67] De-hospitalization and community psychiatry-1. Human Rights

Moderator: Yuka Kudo (Gunma Hospital)

[SY-67]

### De-hospitalization and community psychiatry-1. Human Rights

Kazuo Okuma, Vittorio De Luca<sup>6</sup>, Donato Zupin<sup>4,2,7,8</sup>, Goffredo Bartocci<sup>2,7,8</sup>, Yoshikazu Ikehara<sup>3</sup>, Yuka Kudo<sup>1,5</sup> (1. Keio University (Japan), 2. Italian Institute of Transcultural Mental Health (Italy), 3. Tokyo Advocacy Law Office (Japan), 4. Mental Health Area – WHO Collaborative Center, ASUGI (Italy), 5. Gunma Hospital (Japan), 6. ASL ROMA5, Psychiatric Emergency Inward Monterotondo (RM) (Italy), 7. World Association of Cultural Psychiatry (Italy), 8. Transcultural Psychiatry Section, Italian Society of Psychiatry (Italy))

[SY-67-01]

#### Deinstitutionalization & human rights in emergency psychiatry in Italy

\*Vittorio De Luca<sup>1,2,3</sup>, Silvia Gubbini<sup>1</sup> (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))

[SY-67-02]

#### Deinstitutionalization in Italy: the Trieste model and its complex cultural path to human and social rights

\*Donato Zupin<sup>2,3,4,1</sup>, \*Goffredo Bartocci<sup>2,3,4</sup> (1. DDSM - Mental Health Area-WHO Collaborative Center, ASUGI. Psychiatrist (Italy), 2. Italian Institute of Transcultural Mental Health (Italy), 3. Transcultural Psychiatry Section, Italian Society of Psychiatry (Italy), 4. World Association of Cultural Psychiatry (Italy))

[SY-67-03]

#### Roadmap to abolish involuntary hospitalizations and restore the dignity of persons with psychosocial disabilities by Japan Federation of Bar Associations

\*Yoshikazu Ikehara<sup>1</sup> (1. Tokyo Advocacy Law Office (Japan))

Symposium | Trauma : [Symposium 68] Rethinking Trauma: Cultural Models of Care Across Clinical Practice and Treatment Systems

2025年9月27日(土) 14:10 ~ 15:40 Session Room 4 (Large Hall B)

## [Symposium 68] Rethinking Trauma: Cultural Models of Care Across Clinical Practice and Treatment Systems

Moderator: Selim G. Atici (Princeton University and University of Tokyo), Junko Kitanaka (The Department of Human Sciences at Keio University in Tokyo) Discussant: Laurence J. Kirmayer (McGill University)  
Discussant: Laurence J. Kirmayer (McGill University)

[SY-68]

### Rethinking Trauma: Cultural Models of Care Across Clinical Practice and Treatment Systems

Jessica Carlsson<sup>1</sup>, Charlotte Sonne<sup>1</sup>, Naoko Miyaji<sup>2</sup>, Selim G. Atici<sup>3,4</sup>, Laurence Kirmayer<sup>5</sup> (1. University of Copenhagen (Denmark), 2. Hitotsubashi University (Japan), 3. Princeton University (United States of America), 4. University of Tokyo (Japan), 5. McGill University (Canada))

[SY-68-01]

### Comparative Analysis of Post-Traumatic Stress Disorder and Complex Post-Traumatic Stress Disorder utilizing the International Trauma Interview Across Three Distinct Trauma-Affected populations: Veterans, Civilians, and Refugees

\*Jessica Mariana Carlsson Lohmann<sup>1,3,4</sup>, Hinuga Sandahl<sup>1,3,4</sup>, Sofie Folke<sup>2</sup>, Erik Vindbjerg<sup>1</sup>, Maja Bruhn<sup>1,4</sup> (1. Competence Centre for Transcultural Psychiatry, Mental Health Centre Ballerup (Denmark), 2. Department of Military Psychology, Danish Veterans Centre, Copenhagen, Denmark (Denmark), 3. Centre for Culture and the Mind, University of Copenhagen (Denmark), 4. Faculty of Health and Medical Science, University of Copenhagen (Denmark))

[SY-68-02]

### Integrating research in the treatment of trauma-related disorders in a transcultural context

\*Charlotte Sonne<sup>1</sup> (1. Competence center for Transcultural Psychiatry (CTP), Denmark (Denmark))

[SY-68-03]

### Trauma Island: Listening to Silenced Voices

\*Naoko Miyaji<sup>1</sup> (1. Hitotsubashi University (Japan))

[SY-68-04]

### Medico-Legal Recognition of Trauma for Asylum-Seeking Immigrants in Japan

\*Selim Gokce Atici<sup>1,2</sup> (1. University of Tokyo (Japan), 2. Princeton University (United States of America))

Symposium | Global Mental Health : [Symposium 69] Global Mental Health in a Polarized World: Building Bridges, Sharing Solutions.

2025年9月27日(土) 14:10 ~ 15:40 Session Room 5 (Conference Room A)

## [Symposium 69] Global Mental Health in a Polarized World: Building Bridges, Sharing Solutions.

Moderator: Itsuo Asai (Heart Clinic Medical Corporation)

[SY-69]

### Global Mental Health in a Polarized World: Building Bridges, Sharing Solutions.

Itsuo Asai<sup>1</sup>, Muhammad Irfan<sup>2,5</sup>, Kenneth Fung<sup>4</sup>, Azaad Kassam<sup>3</sup>, Yonas Baheretibeb<sup>7</sup>, Samuel Okpaku<sup>6</sup> (1. Heart Clinic Medical Corporation (Japan), 2. Peshawar Medical College (Pakistan), 3. University of Ottawa (Canada), 4. University of Toronto (Canada), 5. President-Elect, World Association of Cultural Psychiatry (Pakistan), 6. the Center for Health, Culture, & Society (United States of America), 7. Addis Ababa University (Ethiopia))

[SY-69-01]

#### Global Mental Health Equity: Addressing Barriers and Building Sustainable Solutions

\*Muhammad Irfan<sup>1</sup> (1. Department of Mental Health, Psychiatry & Behavioral Sciences, Peshawar Medical College, Riphah International University, Islamabad (Pakistan))

[SY-69-02]

#### Cultural Psychiatry & Global Mental Health: Bridging Perspectives for Inclusive Care

\*Kenneth Po-Lun Fung<sup>1</sup> (1. University of Toronto (Canada))

[SY-69-03]

#### Serving the Mental Health Needs of a Culturally and Geographically Diverse Faith Community

\*Azaad Kassam<sup>1</sup> (1. University of Ottawa (Canada))

[SY-69-04]

#### Bridging Cultural and Biomedical Paradigms: An Inter-Modality Approach to Mental Health Services in Ethiopia through Holy Water Practices

\*Yonas Baheretibeb Alemu<sup>1</sup>, Sam Law<sup>2</sup>, Lisa Andermann<sup>2</sup> (1. Addis Ababa University (Ethiopia), 2. University of Toronto (Canada))

[SY-69-05]

#### Reflections on Global Mental Health: Ethical and Humanitarian Considerations

Sam O. Okpaku<sup>1</sup> (1. Center for Health, Culture and Society)

Symposium | Psychotherapy : [Symposium 70] Approaches to the clients' 'everyday life' in psychotherapy and its links to 'mental liveliness'

2025年9月27日(土) 14:10 ~ 15:40 Session Room 6 (Conference Room B)

## [Symposium 70] Approaches to the clients' 'everyday life' in psychotherapy and its links to 'mental liveliness'

Moderator: Rieko Shioji (Faculty of Health Sciences, Tokyo Metropolitan University), Yuichiro Abe (Department of Psychiatry, Ishiki Hospital)

[SY-70]

### Approaches to the clients' 'everyday life' in psychotherapy and its links to 'mental liveliness'

Kentaro Morita<sup>3</sup>, Rieko Shioji<sup>1</sup>, Farooq Naeem<sup>4</sup>, Francisco Figueroa Medina<sup>5</sup>, Yuichiro Abe<sup>2</sup> (1. Faculty of Health Sciences, Tokyo Metropolitan University (Japan), 2. Department of Psychiatry, Ishiki Hospital (Japan), 3. Day hospital (Psychiatric Day Care) Department of Rehabilitation, University of Tokyo Hospital (Japan), 4. Department of Psychiatry, University of Toronto & Centre for Addiction and Mental Health (Canada), 5. The Faculty of Integrated Human Studies, Kyoto University (Japan))

[SY-70-01]

#### Seikatsu-Rinsho: A Japanese Approach to Co-Producing Recovery through Everyday Life

\*Kentaro Morita<sup>1</sup> (1. Department of Rehabilitation University of Tokyo Hospital (Japan))

[SY-70-02]

#### Morita Therapy's treatment process and its resonance with clients' daily lives

\*Rieko Shioji<sup>1</sup> (1. Faculty of Health Sciences, Tokyo Metropolitan University (Japan))

[SY-70-03]

#### Southampton Adaptation Framework for culturally adapting Cognitive Therapy

\*farooq naeem<sup>1</sup> (1. university of toronto, toronto, canada (Canada))

[SY-70-04]

#### Settling the Body, the Breath, and the Mind: *Zazen* Meetings as Group Therapy

\*Francisco Figueroa Medina<sup>1</sup> (1. Kyoto University (Japan))

[SY-70-05]

#### Raising awareness of social rhythm in daily clinical practices

\*Yuichiro Abe<sup>1</sup> (1. 1) Ishiki Hospital 2) Tokyo University and Graduate School of Social Welfare (Japan))

Symposium | Psychopharmacology : [Symposium 71] Exploring the potential of Traditional Indian yoga as a psychotherapy based on clinical experiences from other countries

2025年9月27日(土) 14:10 ~ 15:40 Session Room 7 (Conference Room C)

## [Symposium 71] Exploring the potential of Traditional Indian yoga as a psychotherapy based on clinical experiences from other countries

Moderator: Sachiyo Morita (Shiga university of Medical Science Hospital, Cancer Center)

[SY-71]

### Exploring the potential of traditional Indian yoga as a psychotherapeutic modality: Clinical insights and cross-cultural perspectives

Keishin Kimura<sup>2</sup>, Sachiyo Morita<sup>1</sup>, Kahori Ito<sup>3</sup>, TumurOchir Gantsetseg<sup>4</sup>, Hengsheng Chen<sup>5</sup> (1. Shiga university of Medical Science Hospital, Cancer Center (Japan), 2. Japan Yoga Therapy Society (Japan), 3. Sinsapporo Mental Clinic (Japan), 4. National Center of Mental Health Mongolia, Department of Mental Health, School of Medicine, MNUMS (Mongolia), 5. China Academy of Sciences, Institute of Psychology Chengdu (China))

[SY-71-01]

#### Assessment and Instruction theory & methods in yoga as a therapy

\*Keishin Kimura<sup>1</sup> (1. Japan Yoga Therapy Society (Japan))

[SY-71-02]

#### Effects of Yoga Therapy on Psychiatric Symptoms and Cognitive Restructuring

\*Sachiyo Morita<sup>1</sup> (1. Shiga university of Medical Science Hospital, Cancer Center (Japan))

[SY-71-03]

#### Involvement of Yoga Therapy in Patients with Mental Illnesses

\*KAHORI ITO<sup>1</sup> (1. Sinsapporo Mental Clinic (Japan))

[SY-71-04]

#### FROM THE RESULTS OF THE FIRST STAGE OF EXPERIMENTAL RESEARCH ON THE USE OF THERAPEUTIC YOGA IN PEOPLE DEPENDENT ON ALCOHOL

\*Gantsetseg Tumur-Ochir<sup>1,2</sup>, Nasanjargal Lkhgavasuren<sup>1</sup>, Enkhchimeg Birenbaral<sup>1</sup>, Uranchimeg Erdenebaatar<sup>1</sup>, Enkhchimeg Chuluunbaatar<sup>1</sup>, Binderiya Bayanmunkh<sup>2</sup>, Uuriintuya Batmend<sup>2,3</sup>, Naidan Bat-Ulzii<sup>3,4</sup>, Bayarmaa Ganbold<sup>5</sup>, Gijir Jamsran<sup>1</sup>, Enkhnaran Tumurbaatar<sup>2,3</sup>, Enkhsaikhan Tumurbaatar<sup>1</sup>, Kherlenzaya Enkhtungalag<sup>1</sup>, Elena Kazantseva<sup>1,6</sup>, Hiromi Mori<sup>7</sup>, Yukiko Kezuka<sup>7</sup>, Kimura Keishin<sup>7</sup> (1. National Center for Mental Health of Mongolia (Mongolia), 2. Mongolian Neuroscience Society (Mongolia), 3. Brain and Mind Research Institute, Mongolian Academy of Sciences (Mongolia), 4. Department of Psychology, National University of Mongolia (Mongolia), 5. Creative Brain" Psychology Institute NGO (Mongolia), 6. SodMed Mental Health Center (Mongolia), 7. Japan Yoga Therapy Society (Mongolia))

[SY-71-05]

#### An Intervention Study on Yoga Therapy-Based Body-Mind Relaxation Exercises for Improving Adolescent Depressive Symptoms

\*HENGSHENG CHEN<sup>1</sup> (1. China Academy of Sciences Institute of Psychology Chengdu CHINA. (China))

## Symposium | Medical Anthropology : [Symposium 72] Anthropology Philosophy, Spirituality, and Psychiatry

2025年9月27日(土) 15:50 ~ 17:20 Session Room 1 (Main Hall A)

## [Symposium 72] Anthropology Philosophy, Spirituality, and Psychiatry

Moderator: Tsuyoshi Akiyama (World Federation for Mental Health), Goffredo Bartocci (World Association of Cultural Psychiatry, Co-Founder and Past President)

[SY-72]

### Anthropology Philosophy, Spirituality, and Psychiatry

Tsuyoshi Akiyama<sup>1</sup>, Nami Lee<sup>2</sup>, Junko Kitanaka<sup>3</sup>, Marcos de Noronha<sup>4</sup>, Goffredo Bartocci<sup>5</sup> (1. Rokubancho Mental Clinic (Japan), 2. Seoul National University (Korea), 3. Keio University (Japan), 4. Brazilian Association of Cultural Psychiatry (Brazil), 5. University of Torino (Italy))

[SY-72-01]

#### Dementia as a basis of neurodiversity in Japan: A Medical Anthropological Perspective

\*Junko Kitanaka<sup>1</sup> (1. Keio University (Japan))

[SY-72-02]

#### NEUROSCIENCE, SPIRITUALITY AND PSYCHIATRY

\*Marcos de Noronha<sup>1</sup> (1. Brazilian Association of Cultural Psychiatry (Brazil))

[SY-72-03]

#### The Role of Mythology in Shaping the Self and Its Transcendental Counterpart

\*Goffredo Bartocci<sup>1,2,3</sup> (1. Italian Institute of Transcultural Mental Health, Co-Founder (Italy), 2. World Association of Cultural Psychiatry, Co-Founder and Past President (Italy), 3. Transcultural Psychiatry Section, Italian Society of Psychiatry, Co-Founder and Past President (Italy))

Symposium | Neurodevelopmental disorder : [Symposium 73] Recent Findings in Adult Neurodevelopmental Disorders

2025年9月27日(土) 15:50 ~ 17:20 Session Room 2 (Main Hall B)

## [Symposium 73] Recent Findings in Adult Neurodevelopmental Disorders

Moderator: Haruhisa Ohta (Showa Medical University Medical Institute of Developmental Disabilities Research), Dan Nakamura (Department of Psychiatry, Showa Medical University)

[SY-73-01]

### Recent Findings in Adult Neurodevelopmental Disorders

\*Dan Nakamura<sup>1</sup>, \*Haruhisa Ohta<sup>2</sup>, \*Shoko Shimoyama<sup>3</sup>, \*Pietro De Rossi<sup>4</sup>, Akira Iwanami<sup>1</sup> (1. Department of Psychiatry, Showa Medical University (Japan), 2. Showa Medical University Medical Institute of Developmental Disabilities Research (Japan), 3. Research Center for Advanced Science and Technology, The University of Tokyo (Japan), 4. Unit of Child and Adolescent Psychiatry, Ospedale Pediatrico Bambino Gesù (Italy))

[SY-73-02]

### Diagnosis and Treatment of Adult Developmental Disorders: A Study Using autism diagnostic observation schedule, second edition

\*Dan Nakamura<sup>1</sup>, Kenji Sanada<sup>1</sup>, Akira Iwanami<sup>1</sup> (1. Department of Psychiatry, Showa University School of Medicine (Japan))

[SY-73-03]

### Brain imaging research on neurodevelopmental disorders

\*Haruhisa Ohta<sup>1</sup> (1. Showa Medical University (Japan))

[SY-73-04]

### Gender Dysphoria as a subset of *Pervasive Social Dysphoria*: A Qualitative Analysis of the Life Story of Japanese Autistic adults with Gender Dysphoria

\*Shoko Shimoyama<sup>1</sup> (1. Research Center for Advanced Science and Technology, The University of Tokyo (Japan))

[SY-73-05]

### Understanding ADHD in Adults

\*Pietro De Rossi<sup>1</sup> (1. Bambino Gesù Children's Hospital (Italy))

**Symposium | Global Mental Health : [Symposium 74] Psychiatry in times of disaster**

2025年9月27日(土) 15:50 ~ 17:20 Session Room 3 (Large Hall A)

**[Symposium 74] Psychiatry in times of disaster**

Moderator: Glen Milstein (The City College of New York), Meryam Schouler-Ocak (Charité University)

[SY-74]

**Psychiatry in times of disaster**

Mian Yoon Chong<sup>3</sup>, Hiroaki Tomita<sup>4</sup>, Maiko Fukasawa<sup>5</sup>, Meryam Schouler-Ocak<sup>2</sup>, Tsuyoshi Akiyama<sup>1</sup> (1. Rokubancho Mental Clinic (Japan), 2. Charité University (Germany), 3. HMI Medical, Singapore & Regency Specialist Hospital (Singapore), 4. Tohoku University (Japan), 5. Fukushima Medical University (Japan))

[SY-74-01]

**Disaster Psychiatry: Managing crisis as a leader**

\*Mian Yoon Chong<sup>1</sup> (1. Regency Specialist Hospital, Malaysia (Malaysia))

[SY-74-02]

**Worry about radiation and mental health after the Fukushima nuclear disaster**

\*Maiko Fukasawa<sup>1</sup> (1. Fukushima Medical University (Japan))

[SY-74-03]

**Role of media during a disaster – how should the reporting look like?**

\*Meryam Schouler-Ocak<sup>1</sup> (1. Psychiatric University Clinic of Charité at St. Hedwig Hospital (Germany))

Symposium | Schizophrenia : [Symposium 75] Current Topic of Biological Psychiatry: Synapse, Glia and Inflammation

2025年9月27日(土) 15:50 ~ 17:20 Session Room 4 (Large Hall B)

## [Symposium 75] Current Topic of Biological Psychiatry: Synapse, Glia and Inflammation

Moderator: Takahiro A. Kato (Department of Psychiatry, Hokkaido University Graduate School of Medicine), Shigenobu Kanba (Kyushu University)

[SY-75]

### Current Topic of Biological Psychiatry: Synapse, Glia and Inflammation

Takahiro A. Kato<sup>1</sup>, Shigenobu Kanba<sup>2</sup>, Sota Kyuragi<sup>2</sup>, Si Tianmei<sup>3</sup>, Masaaki Iwata<sup>4</sup> (1. Hokkaido University (Japan), 2. Kyushu University (Japan), 3. Peking University (China), 4. Tottori University (Japan))

[SY-75-01]

Reverse translational research using human blood induced microglia-like (iMG) cells: Are microglia causing fires in the brain?

\*Takahiro A. Kato<sup>1</sup> (1. Department of Psychiatry, Hokkaido University Graduate School of Medicine (Japan))

[SY-75-02]

Development of biomarkers of hikikomori focusing on inflammation and microglia

\*Sota Kyuragi<sup>1</sup>, Takahiro A Kato<sup>2</sup> (1. Kyushu University (Japan), 2. Hokkaido University (Japan))

[SY-75-03]

Study the Immunoinflammatory mechanisms of Depression: The role of protein tyrosine phosphatase receptor type Z1 and astrocyte-microglia interactions

\*Tian-Mei Si<sup>1,2</sup> (1. National Clinical Research Center for Mental Disorders(Peking University Sixth Hospital/Institute of Mental Health) (China), 2. The Key Laboratory of Mental Health, Ministry of Health (Peking University) (China))

[SY-75-04]

Antidepressant Effects of  $\beta$ -Hydroxybutyrate Based on the Neuroinflammation Hypothesis of Depression and Its Potential for Clinical Application

\*Masaaki Iwata<sup>1</sup> (1. Tottori University (Japan))

Symposium | Cultural Psychiatry : [Symposium 76] Transcultural Education in Psychiatry: The Enduring Global Legacy of Prof. Norman Sartorius for Emerging Clinicians

2025年9月27日(土) 15:50 ~ 17:20 Session Room 5 (Conference Room A)

## [Symposium 76] Transcultural Education in Psychiatry: The Enduring Global Legacy of Prof. Norman Sartorius for Emerging Clinicians

Moderator: Nozomu Oya (Kyoto Prefectural University of Medicine), Akihisa Iriki (Osaka Psychiatric Medical Center)

[SY-76]

### Transcultural Education in Psychiatry: The Enduring Global Legacy of Prof. Norman Sartorius for Emerging Clinicians

Morio Aki<sup>1</sup>, Michael Wallies<sup>2</sup>, Ekachaeryanti Zain<sup>3,4</sup>, Kumi Aoyama<sup>5</sup>, Masuo Tanaka<sup>6</sup>, Norman Sartorius<sup>7</sup> (1. Kyoto University (Japan), 2. Therapie auf Augenhoeh (Switzerland), 3. Mulawarman University (Indonesia), 4. Niigata University (Japan), 5. Kanagawa Psychiatric Center (Japan), 6. Jikei Hospital (Japan), 7. Association for the Improvement of Mental Health Programmes (Switzerland))

[SY-76-01]

#### Cultivating Transcultural Leaders through Peer-Led Narratives: Twenty Years of the Course for the Academic Development of Psychiatrists (CADP) and the Japan Young Psychiatrists Organisation (JYPO)

\*Morio Aki<sup>1,2</sup>, Akihisa Iriki<sup>1,3</sup>, Nozomu Oya<sup>1,4</sup>, Toshihiro Shimizu<sup>1,5</sup>, Fumiya Miyano<sup>1,6</sup>, Toru Horinouchi<sup>1,6</sup> (1. Japan Young Psychiatrists Organization (Japan), 2. Kyoto University (Japan), 3. Osaka Psychiatric Medical Center (Japan), 4. Kyoto Prefectural University of Medicine (Japan), 5. Saitama Psychiatric Medical Center (Japan), 6. Hokkaido University (Japan))

[SY-76-02]

#### 'We owe it to humanity to have good people.' - The Impact of Norman Sartorius on European psychiatry

\*Michael Wallies<sup>1</sup> (1. Therapie auf Augenhoeh (Switzerland))

[SY-76-03]

#### The Enduring Legacy of Professor Norman Sartorius on Psychiatry in Indonesia: Insights from Early-Career Psychiatrists

\*Ekachaeryanti Zain<sup>1,2</sup> (1. Department of Psychiatry, Niigata University Graduate School of Medical and Dental Sciences (Japan), 2. Department of Psychiatry, Faculty of Medicine, Mulawarman University (Indonesia))

[SY-76-04]

#### Beyond Education: Prof. Norman Sartorius' Mentorship and the Organizational Maturity of JYPO

\*Kumi Uehara Aoyama<sup>1</sup> (1. Kanagawa Psychiatric Center (Japan))

[SY-76-05]

#### Before Course for academic development of psychiatry (CADP) to After Development supported by Professor Sartorius and JYPO members.

\*Masuo Tanaka<sup>1</sup> (1. Zikei Hospital/Zikei psychiatric institute (Japan))

Symposium | Neurodiversity : [Symposium 77] Embracing Neurodiversity: Advancing Inclusive Workplaces for All Abilities

2025年9月27日(土) 15:50 ~ 17:20 Session Room 6 (Conference Room B)

## [Symposium 77] Embracing Neurodiversity: Advancing Inclusive Workplaces for All Abilities

Moderator: Fuminari Obuchi (Kaien Inc.)

[SY-77]

Embracing Neurodiversity: Advancing Inclusive Workplaces for All Abilities

Keita Suzuki<sup>1</sup>, Hasanen Al-Tairar, Takeo Kondo, Yoshihisa Kato (1. Kaien Inc. (Japan))

[SY-77-01]

Unlocking Potential: Neurodiversity as a Competitive Advantage in the Modern Japanese Workplace

\*Keita Suzuki<sup>1</sup> (1. Kaien Inc. (Japan))

[SY-77-02]

Diverse Abilities Center Leader of EY Japan

\*Yoshihisa Kato<sup>1</sup> (1. EY Japan (Japan))

Symposium | Suicide prevention : [Symposium 78] Suicide Prevention Laws in Japan, South Korea, and Taiwan: Achievements, Challenges, and Future Directions

2025年9月27日(土) 15:50 ~ 17:20 Session Room 7 (Conference Room C)

## [Symposium 78] Suicide Prevention Laws in Japan, South Korea, and Taiwan: Achievements, Challenges, and Future Directions

Moderator: Shu-Sen Chang (National Taiwan University), Tadashi Takeshima (Taisho University)

[SY-78]

**Suicide Prevention Laws in Japan, South Korea, and Taiwan: Achievements, Challenges, and Future Directions**

SHU-SEN CHANG<sup>1</sup>, Tae-Yeon Hwang<sup>2</sup>, Kevin Chien-Chang Wu<sup>1</sup>, Tadashi Takeshima<sup>3</sup> (1. National Taiwan University (Taiwan), 2. Korea Foundation for Suicide Prevention (Korea), 3. Taisho University (Japan))

[SY-78-01]

**Historical development of Japan's suicide prevention: its attainments and challenges**

\*Tadashi Takeshima<sup>1</sup>, Kazuhisa Najima<sup>2</sup> (1. Taisho University (Japan), 2. Ryukoku University (Japan))

[SY-78-02]

**Suicide Prevention Act and Action Plan of Korea**

\*Tae-Yeon Hwang<sup>1</sup> (1. Korea Foundation for Suicide Prevention (Korea))

[SY-78-03]

**Suicide Prevention Act and Suicide Prevention Strategies in Taiwan**

\*SHU-SEN CHANG<sup>1</sup> (1. National Taiwan University (Taiwan))

[SY-78-04]

**A Global Examination of Suicide Prevention Legislations**

\*Kevin Chien-Chang Wu<sup>1,2</sup>, Shu-Sen Chang<sup>3,4,5</sup> (1. Graduate Institute of Medical Education and Bioethics, National Taiwan University College of Medicine (Taiwan), 2. Department of Psychiatry, National Taiwan University Hospital (Taiwan), 3. Institute of Health Behaviors and Community Sciences and Global Health Program, College of Public Health, National Taiwan University (Taiwan), 4. Psychiatric Research Center, Wan Fang Hospital, Taipei Medical University (Taiwan), 5. Population Health Research Center, National Taiwan University (Taiwan))

Symposium | Psychiatric Diagnosis : [Symposium 115] Clinical Diagnosis is critical to advancing the improvement in clinical care and outcomes through research in mental health

2025年9月27日(土) 16:30 ~ 18:00 Session Room 8 (Meeting Room 1)

## [Symposium 115] Clinical Diagnosis is critical to advancing the improvement in clinical care and outcomes through research in mental health

Moderator: Megan Galbally (Monash University)

[SY-115]

Clinical Diagnosis is critical to advancing the improvement in clinical care and outcomes through research in mental health

Megan Galbally<sup>1</sup>, Josephine Power<sup>1</sup>, Izaak Lim<sup>1</sup>, Katherine Sevar<sup>1</sup>, Harish Kalra<sup>1</sup> (1. Monash University (Australia))

[SY-115-01]

Comparison and stability of measures of inattentive symptoms in childhood

\*Josephine Power<sup>1</sup> (1. Monash Health (Australia))

[SY-115-02]

Assessing depression in fatherhood research: Challenges and complexities in diagnostic and symptom measurement

\*Izaak Lim<sup>1,2</sup> (1. Monash University (Australia), 2. Monash Health (Australia))

[SY-115-03]

Clinical Diagnosis is critical to advancing the improvement in clinical care and outcomes through research in mental health

\*Katherine Sevar<sup>1,2</sup>, Harish Kalra<sup>1</sup> (1. Monash University (Australia), 2. Monash Health (Australia))

## Oral

■ 2025年9月27日(土) 10:40 ~ 12:10  Session Room 7 (Conference Room C)

## Oral 14

[O-14-01]

**A scoping review of qualitative studies assessing quality of life among individuals with Obsessive Compulsive Disorder across different cultural contexts.**

\*Ku Nurul Izzah Ku Seman<sup>1</sup>, Shalisah Sharip<sup>1</sup>, Syahnaz Mohd Hashim<sup>1</sup>, Idayu Badilla Idris<sup>1</sup> (1. Universiti Kebangsaan Malaysia (Malaysia))

[O-14-02]

**Personality Disorder and Culture**

\*Roger Mulder<sup>1</sup> (1. University of Otago (New Zealand))

[O-14-03]

**Development and Validation of a Perioperative Psychiatric Symptom Worsening Risk Score in Patients with Schizophrenia Spectrum Disorders: A retrospective cohort study**

\*Yoshihiro Matsumoto<sup>1</sup>, Nobutaka John Ayani<sup>1,2</sup>, Masaki Fujiwara<sup>3</sup>, Toshiya Funatsuki<sup>4</sup>, Takashi Fukao<sup>3</sup>, Shinji Ueda<sup>3</sup>, Ai Takahashi<sup>4</sup>, Nozomu Oya<sup>1,5</sup>, Riki Kitaoka<sup>1</sup>, Shinichiro Inoue<sup>6</sup>, Jin Narumoto<sup>1</sup> (1. Kyoto Prefectural University of Medicine (Japan), 2. Maizuru Medical Center (Japan), 3. Okayama University Hospital (Japan), 4. Kansai Medical University (Japan), 5. Japanese Red Cross Kyoto Daini Hospital (Japan), 6. Nimi University (Japan))

[O-14-04]

**36years in depression treatment ward**

\*Yuichiro Tokunaga<sup>1</sup>, Michihiko Matsushita<sup>1</sup>, Reo Goto<sup>2,1</sup>, Hikaru Hori<sup>2</sup> (1. Shiranui Hospital (Japan), 2. Department of Psychiatry, Faculty of Medicine, Fukuoka University (Japan))

[O-14-06]

**Cultural Dimensions of Hallucination and Delusion among Psychotic Patients in Java, Indonesia**

\*Subandi Subandi<sup>1</sup>, Carla R. Marchira<sup>1</sup>, Nida Ul Hasanat<sup>1</sup>, Muhana Sofiati Utami<sup>1</sup>, Byron J Good<sup>2</sup> (1. Universitas Gadjah Mada (Indonesia), 2. Harvard Medical School (United States of America))

## Oral

■ 2025年9月27日(土) 14:10 ~ 15:40  Session Room 8 (Meeting Room 1)

## Oral 15

[O-15-02]

Impact of perceived parental parenting on maternal–infant bonding impairment in the early postpartum period: mediating role of adult attachment style

\*Muhammad Dwi Wahyu<sup>1</sup>, Naoki Fukui<sup>1</sup>, Yuichiro Watanabe<sup>1,2</sup>, Ekachaeryanti Zain<sup>1</sup>, Por Leakhena<sup>1</sup>, Koyo Hashijiri<sup>1</sup>, Takaharu Motegi<sup>1</sup>, Maki Ogawa<sup>1</sup>, Jun Egawa<sup>1</sup>, Koji Nishijima<sup>3</sup>, Shuken Boku<sup>1</sup> (1. Department of Psychiatry, Niigata University Graduate School of Medical and Dental Sciences (Japan), 2. Department of Psychiatry, Uonuma Kikan Hospital (Japan), 3. Department of Obstetrics and Gynecology, Niigata University Graduate School of Medical and Dental Sciences (Japan))

[O-15-04]

Multilingual screening of mental health problems among refugees in Sweden - *development and evaluation of an online tiered screening procedure (i-TAP)*

\*Jennifer Meurling<sup>1</sup>, Elisabet Rondung<sup>1</sup>, Gerhard Andersson<sup>2</sup>, Anna Bjärtå<sup>1</sup> (1. Mid Sweden University (Sweden), 2. Linköping University (Sweden))

[O-15-05]

Renaming the high-risk for psychosis' concept in psychiatry. Young people's perspectives and cultural implications

\*Andrea Roberto Polari<sup>1</sup> (1. Orygen (Australia))

## Oral

■ 2025年9月27日(土) 15:40 ~ 16:25  Session Room 8 (Meeting Room 1)

## Oral 16

[O-16-01]

The mourning process and its importance in mental illness: a psychoanalytic understanding of psychiatric diagnosis and classification

\*Rachel Gibbons<sup>1</sup> (1. Royal College of Psychiatrists (UK))

[O-16-02]

Screening for Major Depressive Disorder with the Patient Health Questionnaire-9 (PHQ-9) by Primary Care-Type Physicians in Japan

\*Ariel Kiyomi Daoud<sup>1</sup> (1. University of Cincinnati (United States of America))

[O-16-03]

Validation of the Embodied Mindfulness Questionnaire (EMQ) in a Chinese Context: Preliminary Evidence for Cross-cultural Measurement Invariance

\*Jieting Zhang<sup>1</sup>, Ruixi Ji<sup>1</sup>, Rodrigo Clemente Vergara<sup>2,3</sup>, Mingcong Tang<sup>4</sup>, Bassam Khoury<sup>5</sup> (1. College of Psychology, Shenzhen University (China), 2. Centro Nacional de Inteligencia Artificial CENIA (Chile), 3. Universidad Metropolitana de Ciencias de La Educación (Chile), 4. Boston University (United States of America), 5. McGill University (Canada))

## Poster

■ 2025年9月27日(土) 10:00 ~ 11:00  Poster Session (Foyer 1)

## Poster 17

[P-17-01]

Conditions Associated with Deaths in Individuals with Schizophrenia in Psychiatric Units

\*Michitaka Funayama<sup>1</sup> (1. Ashikaga Red Cross Hospital (Japan))

[P-17-02]

Exploring Changes in Recognition and Stigmatization Toward Individuals with Schizophrenia in Singapore from 2014 to 2022

\*Ke Cao<sup>1</sup>, Edimansyah Abdin<sup>2</sup>, Mythily Subramaniam<sup>2</sup> (1. Duke-NUS Medical School (Singapore), 2. Institute of Mental Health (Singapore))

[P-17-03]

A study on the treatment of psychosis induced by invocation, Kitousei-Seishinbyo

\*Fumiya Miyano<sup>1</sup> (1. Department of Psychiatry, Hokkaido University Graduate School of Medicine (Japan))

[P-17-04]

PHARMACOTHERAPY OF CATATONIA WITH MODERN ANTIPSYCHOTIC AGENTS: ETHNO-CULTURAL FEATURES OF TREATMENT OF PATIENTS WITH SCHIZOPHRENIA AND COMORBID CHEMICAL ADDICTIONS IN THE NORTHWESTERN AND SIBERIAN FEDERAL DISTRICTS OF RUSSIA.

Georgy Yu. Selivanov<sup>1,2,3</sup>, Nikolay A. Bokhan<sup>1</sup>, \*Svetlana V. Vladimirova<sup>1</sup> (1. Mental Health Research Institute, Tomsk (Russia), 2. Saint Petersburg University of State Fire Service of Emercom of Russia (Russia), 3. Psychiatric Hospital of St. Nicholas, St. Petersburg (Russia))

[P-17-05]

Evaluation of ZNF804A (rs1344706) Polymorphism in a Familial Case of Schizophrenia

\*Halil ibrahim tas<sup>1</sup> (1. Ordu university (Turkey))

[P-17-06]

Contemporaneous changes in cytokines and cognitive function during chemotherapy in patients with breast cancer- a prospective follow up study

\*Shu-I Wu<sup>1</sup>, Ching-Hung Chen<sup>2</sup> (1. Mackay Memorial Hospital (Taiwan), 2. Chia-Yi Chang Gung Memorial Hospital (Taiwan))

## Poster

■ 2025年9月27日(土) 11:00 ~ 12:00  Poster Session (Foyer 1)

## Poster 18

[P-18-01]

Factors associated with depression and suicidality among unemployed adults

\*Jongbin Kim<sup>1</sup>, Young-Eun Jung<sup>1</sup> (1. Jeju National University Hospital (Korea))

[P-18-02]

The Usefulness of an Employment Preparation Support Program through Metaverse: A Preliminary Study

\*Izumi Mashimo<sup>1,2</sup>, Tomomi Tsujimoto<sup>3</sup> (1. Aino University graduate school of Health science (Japan), 2. Department of Rehabilitation Science, Kobe University Graduate School of Health Sciences (Japan), 3. Yururiwork (Japan))

[P-18-03]

Attempts to prevent social withdrawal through the use of school support volunteers

\*Shizuka Suzuki<sup>1</sup>, Masafumi Ohnishi<sup>1</sup>, Aiko Hirosawa<sup>1</sup>, Kaori Kawamura<sup>1</sup> (1. University of Fukui (Japan))

[P-18-04]

The effect of carbohydrate intake and healthy eating index on depression and suicidality: a nationwide population-based study

\*Hyewon Kim<sup>1</sup> (1. Hallym University Sacred Heart Hospital (Korea))

[P-18-05]

Development of a short form depression screening questionnaire for Korean career soldiers

\*Jong-Ik Park Park<sup>1</sup> (1. Kangwon National University (Korea))

[P-18-06]

Otaku, Weebs, and Social Wellbeing: Does Immersion in Niche Communities Help or Harm?

\*Jamie Parkerson<sup>1</sup>, \*Chaden Noureddine<sup>1</sup> (1. Icahn School of Medicine at Mount Sinai (United States of America))

## Poster

■ 2025年9月27日(土) 14:00 ~ 15:00  Poster Session (Foyer 1)

## Poster 19

[P-19-01]

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

Sra Jung<sup>1</sup>, \*Yeosuk An<sup>2</sup>, Min-Kyoung Kim<sup>1</sup>, Sung Joon Cho<sup>3,4</sup>, Sang-Won Jeon<sup>3,4</sup> (1. Department of Psychiatry, CHA University Ilsan Medical Center, Goyang, Republic of Korea (Korea), 2. Department of Psychiatry, Seoul National University Hospital, Seoul, Korea (Korea), 3. Department of Psychiatry, Kangbuk Samsung Hospital, Sungkyunkwan University School of Medicine, Seoul, Republic of Korea (Korea), 4. Workplace Mental Health Institute, Kangbuk Samsung Hospital, Seoul, Republic of Korea (Korea))

[P-19-02]

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

\*Young Myo Jae<sup>1</sup>, Eunsu Cho<sup>1</sup> (1. Bongseng Memorial Hospital (Korea))

[P-19-03]

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

\*SIN TUNG WAN<sup>1</sup> (1. The City University of Hong Kong (Hong Kong))

[P-19-04]

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

\*Hyejin Tae<sup>1,2</sup> (1. Stress Clinic, Health Promotion Center, Seoul St. Mary's Hospital, The Catholic University of Korea, Seoul, Republic of Korea (Korea), 2. Department of Medicine, Graduate School, The Catholic University of Korea, Seoul, Republic of Korea (Korea))

[P-19-05]

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

\*Hyeyoon Park<sup>1,2</sup>, Hye Jung Ahn<sup>2</sup>, Sun Young Lee<sup>3</sup> (1. Department of Psychiatry, Seoul National University College of Medicine (Korea), 2. Department of Psychiatry, Seoul National University Hospital (Korea), 3. Public Healthcare Center, Seoul National University Hospital (Korea))

[P-19-06]

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

\*Quankamon Dejatiwongse Na Ayudhya<sup>1</sup>, Punyisa Prachgosin<sup>1</sup>, Kritta Supanimitamorn<sup>1</sup>, Nipaporn Supaprasert<sup>1</sup>, Parawee Keawjamrus<sup>1</sup>, Kankamol Jaisin<sup>1</sup> (1. Department of Psychiatry, Faculty of Medicine Siriraj Hospital, Mahidol University (Thailand))

## Poster

■ 2025年9月27日(土) 15:00 ~ 16:10  Poster Session (Foyer 1)

## Poster 20

[P-20-01]

**The higher ability of verbal fluency and attention and processing speed with clinical recovery in patients with schizophrenia than remitted patients through the comparison of schizophrenia and healthy controls: A cross-sectional study**

\*Ryo Asada<sup>1</sup>, Hitoshi Iida<sup>1</sup>, Leo Gotho<sup>1</sup>, Kiyohiro Yasumatsu<sup>1</sup>, Hikaru Hori<sup>1</sup> (1. Department of Psychiatry, Faculty of Medicine, Fukuoka University (Japan))

[P-20-02]

**Personality theory based on Chinese culture**

\*zhuangsheng Wang<sup>1</sup> (1. Binzhou Medical school (China))

[P-20-03]

**Comparative Network Structures of Depressive Symptoms in Asian Individuals With Guilt-Rich and Guilt-Free Depressive Disorders: Findings From the REAP-AD3**

\*Seon-Cheol Park<sup>1</sup> (1. Department of Psychiatry, Hanyang University College of Medicine (Korea))

[P-20-04]

**A Psychiatric Analysis of Batman and the Public Perception of Mental Illness**

\*Tejbir Singh Deol<sup>1</sup>, Ella Bauwens<sup>1</sup>, Michael Rooney<sup>1</sup>, Saad Yawar<sup>1</sup>, Noah Beetge<sup>1</sup>, Madhusudan Dalvi<sup>1,2</sup> (1. King's College London (UK), 2. Kent and Medway NHS and Social Care Partnership Trust (UK))

[P-20-05]

**Mapping the geography of depressive symptoms and early maladaptive schemas: Comparative network analysis between major depressive disorder and bipolar disorder**

\*Myeongkeun Cho<sup>1</sup>, Chanhee Park<sup>1</sup>, Christopher Hyung Keun Park<sup>2</sup> (1. Asan Institute for Life Sciences (Korea), 2. Asan Medical Center (Korea))

[P-20-06]

**Chi-Chi from Dragon Ball: An ICD-Informed Psychoanalytic and Cultural Analysis of Maternal Anxiety and Marital Imbalance**

\*Tejbir Singh Deol<sup>1</sup>, Kyle McMullen<sup>1</sup>, Madhusudan Dalvi<sup>1,2</sup> (1. King's College London (UK), 2. Kent and Medway NHS and Social Care Partnership Trust (UK))

[P-20-07]

**Cognitive Heterogeneity in First-Episode Schizophrenia Patients: A Latent Profile Analysis and Network Analysis Based on the CANTAB Test**

\*Weiyang Wang<sup>1</sup>, Tao Li<sup>1</sup> (1. Affiliated Mental Health Centre & Hangzhou Seventh People's Hospital, Zhejiang University School of Medicine (China))

## Poster

■ 2025年9月27日(土) 11:00 ~ 11:50  Poster Session (Foyer 2)

## Poster 21

[P-21-01]

### Cultural Implications Of Fatherlessness In Indonesia: A Psychodynamic And Gender Identity Perspective

\*Amita Rouli Purnama Sitanggang<sup>1</sup>, Cokorda Bagus Jaya Lesmana<sup>2,3</sup>, I Putu Dharma Krisna Aji<sup>2,4</sup> (1. Murni Teguh Tuban Bali Hospital (Indonesia), 2. Department of Psychiatry, Faculty of Medicine Udayana University (Indonesia), 3. Ngoerah Hospital (Indonesia), 4. Udayana University Hospital (Indonesia))

[P-21-02]

### Preliminary Study on the Current Situation and Issues in After-School Day Services in Japan

\*Satoshi Obata<sup>1</sup>, Nobuhiro Watanabe<sup>1</sup> (1. Kinoko club (Japan))

[P-21-03]

### Preliminary survey on the actual situation of risk of obscenity in the caring for children with disabilities

### Focusing on Child Development Support and After-school Day Care Service Providers and the staffs who work there

\*Nobuhiro Watanabe<sup>1</sup>, \*Satoshi Obata<sup>1</sup> (1. NPO Daichi (Japan))

[P-21-04]

### Exploring the Influence of Continued Therapeutic Horseback Riding on Children with Neurodevelopmental Conditions: Focus on Sleep and Parental Well-Being

\*Namiko KAWAMURA<sup>1</sup>, Mayu SAKAMOTO<sup>1</sup>, Kayoko MACHIDA<sup>2</sup>, Hiroshi KADOTANI<sup>1</sup>, Yuji Ozeki<sup>1</sup> (1. Shiga University of Medical Science (Japan), 2. Sapporo City University (Japan))

[P-21-05]

### The Effectiveness of a Clinical Nature-Based Intervention for ASD Children from a Biopsychosocial Perspective

\*John Wong<sup>1,2</sup>, Tammy Neo<sup>1</sup>, Lina Lim<sup>2</sup>, Angelia Sia<sup>3</sup>, Esther Tai<sup>1</sup>, Sze-Yin Seow<sup>1</sup>, Michelle Lee, Maria Paula Leon Mora<sup>2</sup>, Chris Loo<sup>2</sup>, Christel Chang, Natalie Lei<sup>1</sup>, Tiffany Ho<sup>1</sup>, Kenneth Khoo<sup>3</sup>, Kian Seng Ding, Maria Koh, \*Kee Juan Yeo<sup>2</sup> (1. National University Hospital Singapore (Singapore), 2. National University of Singapore (Singapore), 3. National Parks Board, Singapore (Singapore))

## Poster

■ 2025年9月27日(土) 14:00 ~ 15:00  Poster Session (Foyer 2)

## Poster 22

[P-22-01]

Factors related to the quality of life of people with mental disorders living in remote islands

\*Misako Hisamatsu<sup>1</sup>, Ayako Yamashita<sup>2</sup>, Norio Maeda<sup>3</sup>, Yasuhito Nerome<sup>2</sup> (1. Kumamoto Health Science University (Japan), 2. Kagoshima University (Japan), 3. Kio University (Japan))

[P-22-02]

Involuntary Psychiatric Admission in East Asia: A Case-Vignette-Based Comparative Analysis in Japan, South Korea, and Taiwan

\*Kei Kobayashi<sup>1,2</sup>, Eisuke Sakakibara<sup>1</sup>, Shinsuke Kondo<sup>1</sup>, Kanna Sugiura<sup>2</sup>, Keijin Yamamura<sup>3</sup>, Kaori Usui<sup>2</sup>, Mayui Nara<sup>2</sup>, Satoe Takashima<sup>2</sup>, Asami Matsunaga<sup>2</sup>, Chiyo Fujii<sup>2</sup>, Kiyoto Kasai<sup>1</sup>, Toshiya Murai<sup>3</sup> (1. Department of Neuropsychiatry, Graduate School of Medicine, The University of Tokyo (Japan), 2. Department of Community Mental Health & Law, National Institute of Mental Health, National Center of Neurology and Psychiatry (Japan), 3. Department of Psychiatry, Graduate School of Medicine, Kyoto University (Japan))

[P-22-03]

Development of Contraceptive Education Program for Labor Migrants and Students from Vietnam

\*UKAWA Ko<sup>1</sup> (1. Taisho University (Japan))

## Poster

2025年9月27日(土) 10:00 ~ 11:00 Poster Session (Foyer 2)

## Poster 23

[P-23-01]

### Co-Designing a Pharmacist-Led Wellness and Wellbeing Service for Long-Term Condition Patients with Subthreshold Depression and Anxiety

\*Patrick Cabasag<sup>1</sup>, Frederick Sundram<sup>2</sup>, Amy Hai Yan Chan<sup>1</sup>, Kebede Beyene<sup>3</sup>, Holly Wilson<sup>1</sup>, Jeff Harrison<sup>1</sup> (1. School of Pharmacy, Faculty of Medical and Health Sciences, The University of Auckland, Auckland (New Zealand), 2. Department of Psychological Medicine, Faculty of Medical and Health Sciences, The University of Auckland, Auckland (New Zealand), 3. Department of Pharmaceutical and Administrative Sciences, University of Health Sciences and Pharmacy in St Louis, St Louis, MO (United States of America))

[P-23-02]

### Diagnostic Distribution of Antidepressant Users: Findings from the REAP-AD3 Study

\*Huang-Li Lin<sup>1</sup>, Yueh-Pin Lin<sup>2</sup>, Tian-Mei Si<sup>3</sup>, Roy Abraham Kalliyalil<sup>4</sup>, Andi J Tantra<sup>5</sup>, Amir Hossein Jalali Nadoushan<sup>6</sup>, Toshiya Inada<sup>7</sup>, Seon-Cheol Park<sup>8,9</sup>, Kok Yoon Chee<sup>10</sup>, Afzal Javed<sup>11</sup>, Kang Sim<sup>12</sup>, Kuan-Lun Huang<sup>13</sup>, Pornjira Pariwatcharakul<sup>14</sup>, Norman Sartorius<sup>15</sup>, Mian-Yoon Chong<sup>16</sup>, Naotaka Shinfuku<sup>17</sup>, Takahiro A. Kato<sup>18</sup>, \*Shih-Ku Lin<sup>1,2</sup> (1. Department of Psychiatry, Linkou Chang Gung Memorial Hospital, Taoyuan, Taiwan (Taiwan), 2. Taipei City Hospital and Psychiatric Center, Taipei, Taiwan (Taiwan), 3. Institute of Mental Health, Peking University, Beijing, China (China), 4. Pushpagiri Institute of Medical Sciences and Research Centre, Thiruvalla, Kerala, India (India), 5. Department of Psychiatry, Faculty of Medicine, Hasanuddin University, Makassar 90245, Indonesia (Indonesia), 6. Psychiatry Department, Mental Health Research Center, Iran University of Medical Sciences, Tehran, Iran (Iran), 7. Department of Psychiatry, Nagoya University Graduate School of Medicine, Aichi, Nagoya, Japan (Japan), 8. Department of Psychiatry, Hanyang University College of Medicine, Seoul, Republic of Korea (Korea), 9. Department of Psychiatry, Hanyang University Guri Hospital, Guri, Republic of Korea (Korea), 10. Department of Psychiatry & Mental Health, Tunku Abdul Rahman Institute of Neurosciences, Kuala Lumpur Hospital, Kuala Lumpur, Malaysia (Malaysia), 11. Pakistan Psychiatric Research Centre, Fountain House, Lahore, Pakistan (Pakistan), 12. Institute of Mental Health, Buangkok Green Medical Park, Singapore (Singapore), 13. Tsaotun Psychiatric Center, Ministry of Health and Welfare, Nantou, Taiwan (Taiwan), 14. Faculty of Medicine Siriraj Hospital, Mahidol University, Bangkok, Thailand (Thailand), 15. Association for the Improvement of Mental Health Programs, Geneva, Switzerland (Switzerland), 16. Regency Specialist Hospital, Johor, Malaysia (Malaysia), 17. School of Human Sciences, Seinan Gakuin University, Fukuoka, Japan (Japan), 18. Department of Neuropsychiatry, Graduate School of Medical Sciences, Kyushu University, Fukuoka, Japan (Japan))

[P-23-03]

### Identification and Association of Sociodemographic Profile and Clinical Characteristics of Overseas Filipino Workers (OFW) referred by the Overseas Workers Welfare Administration (OWWA) in the Outpatient Section of National Center for Mental Health from January 2020 to December 2022

\*Francisco IV Gabriel Bolinao<sup>1</sup>, Robert Roy Mapa<sup>1</sup> (1. National Center for Mental Health (Philippines))

[P-23-04]

### Descriptive Study of Service Users with Movement Disorder Seen at the Neurology Out-Patient Section of the National Center for Mental Health, Philippines

\*Ryan Lazatin<sup>1</sup> (1. National Center for Mental Health (Philippines))

[P-23-05]

### Descriptive Study of Service Users with Movement Disorder Seen at the Neurology Out-Patient Section of the National Center for Mental Health, Philippines "Grant Contest2"

\*Ryan Lazatin<sup>1</sup> (1. National Center for Mental Health (Philippines))

[P-23-06]

## Negotiating Normalcy and Patienthood: A Dialectical View of Mental Illness Narratives among Indian Women with Psychiatric Diagnoses

\*Annie Baxi Baxi<sup>1</sup> (1. Ashoka University (India))

Poster

2025年9月27日(土) 15:00 ~ 16:10 Poster Session (Foyer 2)

### Poster 24

[P-24-01]

#### Metabolic dysfunction-associated steatotic liver disease and risk of depression in young adults: A nationwide population-based cohort study

\*Eunyoung Kim<sup>1</sup>, Su-Min Jeong, Sang Jin Rhee Rhee, Kyu Na Lee, Kyungdo Han (1. Department of Human Systems Medicine, Seoul National University College of Medicine, Seoul, Republic of Korea (Korea))

[P-24-02]

#### Alterations in Neurotransmitter-Related Brain Networks in Schizophrenia During Auditory Speech Stimulation

\*Hanxiaoran Li<sup>1</sup>, Tao Li<sup>1</sup>, Wei Wei<sup>1</sup> (1. Affiliated Mental Health Centre & Hangzhou Seventh People's Hospital, Zhejiang University School of Medicine (China))

[P-24-03]

#### Conceptualization of Recovery from Eating Disorders: A Qualitative Study Based on Interviews with Recovered Individuals

\*Akie Nakayama<sup>1</sup>, Masaru Takahashi<sup>1</sup> (1. Ochanomizu University (Japan))

[P-24-04]

#### The Association between Hemoglobin Level and Risk of Developing Dementia : National Health Screening Cohort(NHIS-HEALS) in Korea

\*SEONG HWAN KIM<sup>1</sup>, Ho Chan Kim<sup>2</sup>, Hyun Soo Kim<sup>1</sup> (1. Dong-A University (Korea), 2. Kosin University (Korea))

[P-24-05]

#### Association between auditory impairment and risk of VLOSLP: a multicenter, retrospective cohort study

\*Young Tak Jo<sup>1</sup> (1. Kangdong Sacred Heart Hospital (Korea))

[P-24-06]

#### Acculturation and Psychological Distress Among Adolescents in the United States: A Cross-Racial Analysis Using California Health Interview Survey (CHIS)

Franco Valencia<sup>1</sup>, \*Karin Kai Wing Wang<sup>1</sup>, So Hee Naomi Ahn<sup>1</sup>, Thirumagal Gowrikanthan<sup>1</sup>, Jasmin Choi<sup>1</sup>, Lester Andrew Uy<sup>1</sup>, Armaan Jamal<sup>1</sup>, Nitya Rajeshuni<sup>1,2</sup>, Robert Huang<sup>1,3</sup>, Gloria Kim<sup>1,3</sup>, Malathi Srinivasan<sup>1,3</sup>, Latha Palaniappan<sup>1,3</sup>, Steven Sust<sup>1,4</sup> (1. Stanford Center for Asian Health Research and Education (United States of America), 2. Department of Pediatrics, Stanford University School of Medicine (United States of America), 3. Department of Medicine, Stanford University School of Medicine (United States of America), 4. Department of Psychiatry and Behavioral Sciences, Stanford University School of Medicine (United States of America))

[P-24-07]

#### Aspects of Experiential Knowledge Accompanying Recovery among Survivors of Substance Use Disorder: A phenomenological study

\*Ayako Yamashita<sup>1</sup>, Yasuaki Akasaki<sup>1</sup> (1. School of Health Sciences, Faculty of Medicine, Kagoshima University (Japan))

## Poster

■ 2025年9月27日(土) 11:00 ~ 12:10  Poster Session (6F Meeting Room 4-6)

## Poster 36

[P-36-01]

**Electrophysiological changes in depressive patients with non-suicidal self-injury: An event-related potential study and source analysis**

\*Sehoon Shim<sup>1</sup>, Sangwoo Hahn<sup>2</sup> (1. SOONCHUNHYANG UNIV. CHEONAN HOSPITAL (Korea), 2. SOONCHUNHYANG UNIV. HOSPITAL (Korea))

[P-36-02]

**Effective Management of Severe Aggression and Self-Injurious Behaviours with Clozapine in Adults with Autism Spectrum Disorder and Intellectual Disability**

\*Hui Xin Jenies Foo<sup>1</sup>, Jiaqian Sun<sup>1</sup>, Sajith Sreedharan Geetha<sup>1</sup> (1. Institute of Mental Health (Singapore))

[P-36-03]

**Development of a visual assessment tool for screening major depressive episodes**

\*Phannaratch Sritongkum<sup>1</sup>, Sirirat Kooptiwoot<sup>1</sup>, Woraphat Ratthaapha<sup>1</sup> (1. Faculty of medicine, Siriraj Hospital, Mahidol Univ. (Thailand))

[P-36-04]

**Survey research on the development of employment support apps for people with disabilities**

\*Miki MARUTANI Marutani<sup>1</sup>, Chie Usui<sup>2</sup>, Hiroo Wada<sup>2</sup>, Gensei Ishimura<sup>3</sup> (1. National Institute of Public Health (Japan), 2. Juntendo University (Japan), 3. Professional University of Information and Management for Innovation (Japan))

[P-36-05]

**Habenular Abnormalities in Bipolar Disorder and Their Molecular Correlates: A Multimodal Imaging Study**

\*Meng xuan Qiao<sup>1</sup>, Hua Yu<sup>1</sup>, Tao Li<sup>1</sup> (1. Affiliated Mental Health Center & Hangzhou Seventh People's Hospital and School of Brain Science and Brain Medicine, Zhejiang University School of Medicine (China))

[P-36-06]

**Expectancy Violation Enhances Inhibitory Learning in Personalized Virtual Reality Exposure Therapy for Panic Disorder: A Randomized Controlled Trial**

\*Daeyoung Roh<sup>1</sup>, Ki Won Jang<sup>1</sup>, Han Wool Jung<sup>2</sup> (1. Hallym University (Korea), 2. Yonsei University (Korea))

## Poster

■ 2025年9月27日(土) 14:00 ~ 15:10  Poster Session (6F Meeting Room 4-6)

## Poster 37

[P-37-02]

### Differentiating Non-Suicidal Self-Injury from Suicide Attempts in Patients Presenting to the Emergency Department

\*Kyoung-Uk Lee<sup>1</sup>, Sunghwan Kim<sup>2</sup>, Jung Taek Park<sup>3</sup>, Kyoung Ho Choi<sup>3</sup> (1. Department of Psychiatry, Uijeongbu St. Mary's Hospital, College of Medicine, The Catholic University of Korea, Seoul, Republic of Korea (Korea), 2. Department of Psychiatry, Yeouido St. Mary's Hospital, College of Medicine, The Catholic University of Korea, Seoul, Republic of Korea (Korea), 3. Department of Emergency Medicine, Uijeongbu St. Mary's Hospital, College of Medicine, The Catholic University of Korea, Seoul, Republic of Korea (Korea))

[P-37-03]

### Prevalence and Factors Associated with Depression Among Pregnant Women of Siriraj Hospital, Bangkok

Keerati Pattanaseri<sup>1</sup>, \*Suchada Samranjit<sup>1</sup>, Supawee Kaewchuen<sup>1</sup>, Kantanut Yutrirak<sup>1</sup>, Pattarawalai Talungchit<sup>2</sup>, Tachjaree Panchalee Boonbawornpong<sup>2</sup>, Napat Sittanomai<sup>3</sup>, Pasika Srinual<sup>4</sup>, Supaporn Kwadkweang<sup>2</sup> (1. Department of Psychiatry, Faculty of Medicine Siriraj Hospital, Mahidol University (Thailand), 2. Department of Obstetrics&Gynecology, Faculty of Medicine Siriraj Hospital, Mahidol University (Thailand), 3. Department of Pediatrics, Faculty of Medicine Siriraj Hospital, Mahidol University (Thailand), 4. Faculty of Medicine Siriraj Hospital, Mahidol University (Thailand))

[P-37-04]

### Validation the priority of Fixel-based Analysis of white matter alterations in drug-naïve patients with schizophrenia

\*Min Yang<sup>1</sup>, Wei Wei<sup>1</sup>, Tao Li<sup>1</sup> (1. Affiliated Mental Health Center & Hangzhou Seventh People's Hospital, Zhejiang University School of Medicine, Hangzhou, Zhejiang, China (China))

[P-37-05]

### Longitudinal Changes in Quality of Life and Posttraumatic Growth Among Colorectal Cancer Patients: A One-Year Prospective Study in Taiwan

\*CHUNGJEN TENG<sup>1,2,3</sup>, KUAN-HSUAN CHEN<sup>1</sup> (1. Far Eastern Memorial Hospital (Taiwan), 2. Institute of Public Health, College of Medicine, National Yang Ming Chiao Tung University (Taiwan), 3. School of Medicine, National Yang Ming Chiao Tung University (Taiwan))

[P-37-06]

### Prevalence of anhedonia in patients with psychiatric disorders: Results from a national survey in Thailand

\*Pornjira Pariwatcharakul<sup>1</sup> (1. Department of Psychiatry, Faculty of Medicine Siriraj Hospital, Mahidol University (Thailand))

[P-37-07]

### Evaluating the Factor Structure of the 25-item Autism-Spectrum Quotient Japanese Version as a Potential Screening Tool in Perinatal Women

\*Ekachaeryanti Zain<sup>1,2</sup>, Naoki Fukui<sup>1</sup>, Yuichiro Watanabe<sup>1,3</sup>, Koyo Hashijiri<sup>1</sup>, Takaharu Motegi<sup>1</sup>, Maki Ogawa<sup>1</sup>, Jun Egawa<sup>1</sup>, Koji Nishijima<sup>4</sup>, Toshiyuki Someya<sup>1</sup> (1. Department of Psychiatry, Niigata University Graduate School of Medical and Dental Sciences (Japan), 2. Department of Psychiatry, Faculty of Medicine, Mulawarman University (Indonesia), 3. Department of Psychiatry, Uonuma Kikan Hospital (Japan), 4. Department of Obstetrics and Gynecology, Niigata University Graduate School of Medical and Dental Sciences (Japan))

## Presidential Lecture

2025年9月27日(土) 14:10 ~ 15:00 Session Room 1 (Main Hall A)

**[Presidential Lecture 2] Psychiatry in Crises**

Moderator: Suzanna Every-Palmer

[PL-2]

Psychiatry in Crises

\*Tsuyoshi Akiyama<sup>1</sup> (1. Rokubancho Mental Clinic (Japan))

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## Presidential Lecture

2025年9月27日(土) 14:10 ~ 15:00 Session Room 1 (Main Hall A)

## [Presidential Lecture 2] Psychiatry in Crises

Moderator: Suzanna Every-Palmer

### [PL-2] Psychiatry in Crises

\*Tsuyoshi Akiyama<sup>1</sup> (1. Rokubancho Mental Clinic (Japan))

キーワード : Crises、Psychiatry、Dehumanization、Artificial Intelligence、Evolutionary Psychiatry

This lecture discusses the current inner and outer crises of psychiatry.

#### Inner Crises

First, the traditional diagnostic criteria are criticized for arbitrary boundaries between disorder and normality, heterogeneity of presentation within disorders, and instability of diagnosis. Comprehensive taxonomies are still not in practical use. Second, the study on patients' subjective lives is relevant as a scientific enterprise, but strikingly limited. Third, the provision of appropriate community care has long been debated. Fourth, the profound impact of artificial intelligence on mental health care is not sufficiently analyzed.

#### Outer crises

As outer crises, first, in dehumanization, people are seen as less than human and suffer violence, deprivation, and exclusion. Appropriate care and explicit research are badly needed. Second, we have learned that social determinants impact mental health, but lack an effective appeal to policymakers.

#### Is there a hope?

There can't be one simple answer. But first, evolutionary psychiatry illuminates evolved human biological design and contributes to the development of a more comprehensive and sane understanding of human mental health phenomena. Second, there is an awareness that the service users should be included in the decisions about the research to avoid wasting resources on investigating irrelevant research questions. Third, clinically, listening to patient preferences when making health care decisions is increasingly considered an essential element of practice. People are more willing to initiate and engage in treatments that match their preferences. Fourth, the balanced care model helps to overcome a false dichotomy between hospital and community care. Fifth, to provide care to many societies exposed to humanitarian and health emergencies, the WHO has released a series of scalable psychosocial interventions, including a low-intensity transdiagnostic psychosocial intervention. So, there is some hope. However, there seems to be little hope for the dehumanization tragedy, and the impact of artificial intelligence is not yet known.

## Plenary Session

2025年9月27日(土) 13:10 ~ 14:00 Session Room 1 (Main Hall A)

## [Plenary Session 4] How to Assess and Intervene Hikikomori in the 21st Digitalized Society

Moderator: Antonio Sison (University of the Philippines Philippine General Hospital)

[PS-4]

How to Rescue Hikikomori, Pathological Social Withdrawal, in the Digital Urbanized Society

\*Takahiro A. Kato<sup>1</sup> (1. Department of Psychiatry, Hokkaido University Graduate School of Medicine (Japan))

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## Plenary Session

2025年9月27日(土) 13:10 ~ 14:00 Session Room 1 (Main Hall A)

## [Plenary Session 4] How to Assess and Intervene Hikikomori in the 21st Digitalized Society

Moderator: Antonio Sison (University of the Philippines Philippine General Hospital)

### [PS-4] How to Rescue Hikikomori, Pathological Social Withdrawal, in the Digital Urbanized Society

\*Takahiro A. Kato<sup>1</sup> (1. Department of Psychiatry, Hokkaido University Graduate School of Medicine (Japan))

キーワード : hikikomori、social isolation、diagnosis、psychoanalysis、digital psychiatry

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. Recently, hikikomori has been spreading not only in Japan but also globally, including Asia, Europe, and the Americas (Kato et al. Lancet 2011; World Psychiatry 2018; Psychiatry and Clinical Neurosciences 2019). I have been organizing 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). Remarkably, hikikomori has been included in the DSM-5TR (2022). The internet society, which expanded during the COVID-19 pandemic, has led to an increase in hikikomori cases. In the post-COVID-19 era, where online classes and remote work have become the norm, hikikomori can be viewed not only as a pathological phenomenon but also as a cutting-edge lifestyle. Persons with hikikomori may represent pioneers in utilizing "technopathy," a psychic ability to interact, communicate, and manipulate technology through the mind. In this lecture, I will introduce the latest psychiatric assessment methods for both pathological and non-pathological (i.e., "happy") hikikomori (Kato et al. Current Opinions in Psychiatry 2024). By showcasing our ongoing hikikomori support system using digital tools such as the metaverse and communication robotics, I will explore the future of hikikomori-like lifestyles in digital urban societies.

**Educational Lecture**

■ 2025年9月27日(土) 9:00 ~ 9:50 Session Room 1 (Main Hall A)

**[Educational Lecture 5] Toward a Poetics of Illness and Healing**

Moderator: Junko Kitanaka (The Department of Human Sciences at Keio University in Tokyo)

[EL-5]

Toward a Poetics of Illness and Healing

\*Laurence J. Kirmayer<sup>1</sup> (1. McGill University (Canada))

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## Educational Lecture

2025年9月27日(土) 9:00 ~ 9:50 Session Room 1 (Main Hall A)

## [Educational Lecture 5] Toward a Poetics of Illness and Healing

Moderator: Junko Kitanaka (The Department of Human Sciences at Keio University in Tokyo)

### [EL-5] Toward a Poetics of Illness and Healing

\*Laurence J. Kirmayer<sup>1</sup> (1. McGill University (Canada))

This lecture will present some of the main ideas in a recently published book, “Healing and the Invention of Metaphor: Toward a Poetics of Illness Experience” (Cambridge University Press, 2025). The book explores how metaphors structure illness experience and symbolic healing. The presentation will discuss the influence of metaphor, narrative, and imagination in experiences of suffering and processes of healing across cultures. The aim is to show how the study of metaphor clarifies mechanisms of illness experience and healing that depend on embodied meaning and symbolism, myth and imagination. Approaching illness experience and healing through the study of metaphor can help lay bare the cognitive machinery, discursive practices, sociocultural matrix, and forms of life that constitute and transform experience in sickness and in health. Metaphor theory provides ways to link meaning and mechanism, content and process, connecting personal and cultural history with the unfolding psychophysiology and sociophysiology of illness experience. At the same time, examining the metaphors used in psychiatric theory can provide a critique of assumptions that undergird the epistemology and practice of contemporary biomedicine, psychiatry, and psychotherapy. Becoming aware of the root metaphors of our practice can open the door to more creative use of alternative models and metaphors. Throughout, the goal is to advance an embodied and enactive theory of language that can deepen our understanding of the poetics of illness experience and the process of healing.

**Educational Lecture**

2025年9月27日(土) 11:10 ~ 12:00 Session Room 1 (Main Hall A)

**[Educational Lecture 6] From Transcultural Psychiatry to Cultural Psychiatry: the role of old mythologies and new scientific approaches in the construction of biocultural identities**

Moderator: Roberto Lewis-Fernández (Columbia/NYS Psychiatric Institute)

[EL-6]

FROM TRANSCULTURAL PSYCHIATRY TO CULTURAL PSYCHIATRY: the role of old mythologies and new scientific approaches in the construction of bio-cultural identities.

\*Goffredo Bartocci<sup>1,2,3</sup> (1. Italian Institute of Transcultural Mental Health (Italy), 2. World Association of Cultural Psychiatry (Italy), 3. Transcultural Psychiatry Section, Italian Society of Psychiatry (Italy))

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## Educational Lecture

2025年9月27日(土) 11:10 ~ 12:00 Session Room 1 (Main Hall A)

## [Educational Lecture 6] From Transcultural Psychiatry to Cultural Psychiatry: the role of old mythologies and new scientific approaches in the construction of biocultural identities

Moderator: Roberto Lewis-Fernández (Columbia/NYS Psychiatric Institute)

### [EL-6] FROM TRANSCULTURAL PSYCHIATRY TO CULTURAL PSYCHIATRY: the role of old mythologies and new scientific approaches in the construction of biocultural identities.

\*Goffredo Bartocci<sup>1,2,3</sup> (1. Italian Institute of Transcultural Mental Health (Italy), 2. World Association of Cultural Psychiatry (Italy), 3. Transcultural Psychiatry Section, Italian Society of Psychiatry (Italy))

キーワード : Cultural Psychiatry、Biocultural Identities、Mythologies & Scientific Paradigms

Every population has its own way of conceiving the physical nature of external reality so as the psychological development of internal issues. The mental function of transcending what we call reality lead us to reflect on the multitude of cultural beliefs (magic, visionary, religious, rational, hyper-logical) influencing behaviours, ideas, emotions creating a vicious cycle between nature and culture.

This presentation will illustrate how Cultural Psychiatry emerged within the framework and throughout the development of Transcultural Psychiatry.

A complex task, made possible by the fact that the Author, who was the founder of WACP, was able to experience first hand the many aspects of this story, not only in theory but also in practice.

Pioneers of Transcultural Psychiatry used to compare clinical syndromes differentiating cultural influences from influences determined by the social context and the environment. As examples of changes in clinical syndromes over time, the Author will cite the increase of chronic psychotic syndromes in the West, versus the prevalence of brief pseudo-psychotic syndromes with altered states of consciousness and oniroid states in countries once defined as “traditional cultures”.

Particular attention will be given to the evaluation of the efficacy of the current scientific paradigm in establishing valid preventive and therapeutic procedures

**Educational Workshop**

2025年9月27日(土) 10:40 ~ 12:10  Session Room 4 (Large Hall B)

**[Educational Workshop 2] The practice of yoga therapy**

Moderator: Sachiyo Morita (Shiga university of Medical Science Hospital, Cancer Center), Ramdas Ransing (Department of Psychiatry, BKL Walawalkar Rural Medical College)

[EW-2]

**The practice of yoga therapy**

\*Sachiyo Morita<sup>1</sup>, \*Keishin Kimura<sup>2</sup> (1. Shiga university of Medical Science Hospital, Cancer Center (Japan), 2. Japan Yoga Therapy Society (Japan))

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**Educational Workshop**

2025年9月27日(土) 10:40 ~ 12:10  Session Room 4 (Large Hall B)

**[Educational Workshop 2] The practice of yoga therapy**

Moderator: Sachiyo Morita (Shiga university of Medical Science Hospital, Cancer Center), Ramdas Ransing (Department of Psychiatry, BKL Walawalkar Rural Medical College)

**[EW-2] The practice of yoga therapy**

\*Sachiyo Morita<sup>1</sup>, \*Keishin Kimura<sup>2</sup> (1. Shiga university of Medical Science Hospital, Cancer Center (Japan), 2. Japan Yoga Therapy Society (Japan))

キーワード : yoga therapy、psychiatric patients、tension and relaxation

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Yoga therapy is interesting because it has the potential to reduce anxiety and change the cognition when used in psychiatric treatment. Clinical observations from continuous practice among psychiatric patients have shown improvements in insomnia, decreased anxiety levels, and an enhanced awareness of self and their surroundings. Furthermore, many patients developed a proactive attitude towards independent problem-solving. This workshop will show the sequence of simple yoga therapy which we used to provide to psychiatric patients at the university hospital. The key points of yoga therapy are tension and relaxation, and body awareness. Through structured breathing exercises and body movements, I would demonstrate that yoga therapy is a practical method for cultivating a kind of mindfulness. I hope you all enjoy the world of yoga therapy.

Movie

2025年9月27日(土) 10:40 ~ 12:10 Session Room 8 (Meeting Room 1)

## [MOVIE on ADHD] Lessons from "*Normal 17*": Rethinking ADHD Support Through a Family and Cultural Lens in Japan

Moderator: Keiko Takayama (NPO Edison Club), Sounosuke Kita (NPO Edison Club)

[MV-1]

Lessons from "*Normal 17*": Rethinking ADHD Support Through a Family and Cultural Lens in Japan

\*Keiko Takayama<sup>1</sup> (1. NPO Edison Club (Japan))

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Movie

2025年9月27日(土) 10:40 ~ 12:10 Session Room 8 (Meeting Room 1)

## [MOVIE on ADHD] Lessons from "*Normal 17*": Rethinking ADHD Support Through a Family and Cultural Lens in Japan

Moderator: Keiko Takayama (NPO Edison Club), Sounosuke Kita (NPO Edison Club)

### [MV-1] Lessons from "*Normal 17*": Rethinking ADHD Support Through a Family and Cultural Lens in Japan

\*Keiko Takayama<sup>1</sup> (1. NPO Edison Club (Japan))

キーワード : ADHD in Japan、High school girls with ADHD、Family conflict

“Normal 17” is a powerful film that portrays the lives of two Japanese high school girls with ADHD and the complex emotional struggles they and their families face. Set in contemporary Japan, the film sheds light on how rigid cultural norms—such as the emphasis on group harmony, obedience, and conformity—can marginalize individuals who display behavioral or cognitive differences. In particular, the film critiques how intense parental pressure in the name of academic success can border on what is now referred to as “educational abuse,” placing an overwhelming burden on adolescents with neurodevelopmental disorders. In families where values like effort, perseverance, and “not causing trouble to others” are held as absolute, children with ADHD are often misunderstood and forced to suppress their differences. This frequently results in emotional distress, fractured family relationships, and delayed access to appropriate support. While medical treatment—including the use of medication—has become more available, psychosocial and familial support systems in Japan remain underdeveloped. Most services tend to focus solely on the individual, neglecting the broader relational dynamics within families. This film not only advocates for a more inclusive and empathetic society but also emphasizes the need for psychoeducation to foster mutual understanding between individuals with ADHD and their families. It offers a compelling case for shifting from a deficit-based medical model to a more holistic support framework that integrates family involvement. Following the screening, a Q&A session will be held with the director and a representative of an ADHD advocacy organization who is also a person with lived experience. This will provide attendees with an opportunity to further explore the film’s themes and deepen their understanding of the social and psychological challenges faced by individuals with ADHD and their families in Japan.

## Grant Awardees

2025年9月27日(土) 9:50 ~ 10:50 Session Room 1 (Main Hall A)

## WACP Grant Award Session

[GA-1-01]

*NYAWIJI, GREGET, SENGGUH, ORA MINGKUH:*

SUPPORTIVE PSYCHOTHERAPY THROUGH THE LENS OF *KAWRUH JOGED MATARAM*

\*Bayu Adiputro Puruboyo<sup>1</sup>, Carla Raymondalexas Marchira<sup>2</sup>, Fajar Wijanarko<sup>3</sup> (1. Resident, Department of Psychiatry, Faculty of Medicine, Public Health, and Nursing, Universitas Gadjah Mada (Indonesia), 2. Staff, Department of Psychiatry, Faculty of Medicine, Public Health, and Nursing, Universitas Gadjah Mada (Indonesia), 3. Curator, Museum Keraton Yogyakarta (Indonesia))

[GA-1-02]

Navigating the Shadows: The Impact of Mindfulness, Cognitive Fusion, and Coping Strategies on Psychological Distress Among Mental Health Workers in Timor Leste

Noviyanti Carla Tilman Leite<sup>2</sup>, Gaspar Quintao<sup>3</sup>, \*Nicholas Pang<sup>1</sup>, Eugene Koh<sup>4</sup>, Noor Melissa Nor Hadi<sup>4</sup>, Jhia Mae Woo<sup>5</sup>, Kah Mun Wan<sup>6</sup>, Marina Abdul Rahman Sabri<sup>7</sup>, Ming Gui Tan<sup>1</sup>, Assis Kamu<sup>1</sup>, Chong Mun Ho<sup>1</sup> (1. Universiti Malaysia Sabah (Malaysia), 2. PRADET (The Democratic Republic of Timor-Leste), 3. Guido Valadares National Hospital (The Democratic Republic of Timor-Leste), 4. Putra University Malaysia (Malaysia), 5. Sunway University (Malaysia), 6. ACT Kuala Lumpur (Malaysia), 7. Hospital Sultanah Aminah (Malaysia))

[GA-1-03]

The paradox impact of language proficiency and acculturation strategies on depressive symptoms in Indonesian migrant domestic workers

\*Andrian Liem<sup>1,2</sup> (1. Universitas Sebelas Maret (Indonesia), 2. Monash University Malaysia (Malaysia))

[GA-1-04]

AI-Driven Multi-Omics Integration of Functional Connectomics and Biomarkers to Decode Resilience Mechanisms in Treatment-Resistant Depression

\*Rifaldy Fajar<sup>1</sup>, Prihantini Prihantini<sup>2</sup>, Elfiany Elfiany<sup>3</sup>, Sahnaz Vivinda Putri<sup>4</sup>, Andi Nursanti Andi Ureng<sup>5</sup> (1. Yogyakarta State University (Indonesia), 2. Bandung Institute of Technology (Indonesia), 3. BLK General Hospital (Indonesia), 4. International University Semen Indonesia (Indonesia), 5. Andini Persada College of Health Sciences (Indonesia))

## Grant Awardees

2025年9月27日(土) 9:50 ~ 10:50 Session Room 1 (Main Hall A)

## WACP Grant Award Session

### [GA-1-01] *NYAWIJI, GREGET, SENGGUH, ORA MINGKUH: SUPPORTIVE PSYCHOTHERAPY THROUGH THE LENS OF Kawruh Joged Mataram*

\*Bayu Adiputro Puruboyo<sup>1</sup>, Carla Raymondalexas Marchira<sup>2</sup>, Fajar Wijanarko<sup>3</sup> (1. Resident, Department of Psychiatry, Faculty of Medicine, Public Health, and Nursing, Universitas Gadjah Mada (Indonesia), 2. Staff, Department of Psychiatry, Faculty of Medicine, Public Health, and Nursing, Universitas Gadjah Mada (Indonesia), 3. Curator, Museum Keraton Yogyakarta (Indonesia))

キーワード : Kawruh Joged Mataram、Supportive psychotherapy、Javanese culture、Javanese tradition

**Background:** Kawruh Joged Mataram refers to the philosophy and knowledge behind the traditional dance forms of the Mataram Kingdom (now Sultanate of Yogyakarta), Indonesia. It encompasses not only the technical aspects of the dance but also the deeper philosophical, spiritual, and cultural values embedded in the art form. This concept highlights the integration of physical expression, inner mindfulness, and social harmony, reflecting Javanese ideals of balance and refinement. Using *Kawruh Joged Mataram* in psychotherapy also counters mental health stigma in non-Western societies by integrating familiar cultural elements.

**Objectives:** This study aims to explore the values of supportive psychotherapy through the lens of *Kawruh Joged Mataram*.

**Methods:** This study is conducted through a comprehensive literature review, also incorporates insights from classic Javanese literature to provide a culturally grounded perspective.

**Results:** In the Javanese worldview, *Nyawiji*, *Greget*, *Sengguh*, *Ora Mingkuh* represents fundamental principles that guide personal conduct, relationships, and harmony with the universe. These principles encompass values that align closely with the goals of supportive psychotherapy, emphasizing emotional regulation, resilience, and harmonious relationships.

**Discussion:** *Nyawiji* emphasizes unity and harmony, promoting the integration of mental, emotional, and physical well-being, which aligns with supportive psychotherapy's goal of treating the whole person. *Ora Mingkuh* encourages commitment and responsibility, as motivation to actively participate in their therapeutic journey. *Greget*, which symbolizes passion and determination, inspires clients to face challenges with vitality and purpose. *Sengguh* emphasizes confidence balanced with humility, helping clients build self-esteem while maintaining openness to growth and connection with others. These principles resonate with the therapeutic aim of fostering a balanced sense of self and interpersonal relationships.

**Conclusion:** Integrating the values of *Kawruh Joged Mataram* in supportive psychotherapy involves aligning therapeutic practices with the principles these values represent. These Javanese philosophical concepts can enhance therapy by promoting emotional balance, self-awareness, resilience, and commitment.

## Grant Awardees

2025年9月27日(土) 9:50 ~ 10:50 Session Room 1 (Main Hall A)

## WACP Grant Award Session

### [GA-1-02] Navigating the Shadows: The Impact of Mindfulness, Cognitive Fusion, and Coping Strategies on Psychological Distress Among Mental Health Workers in Timor Leste

Noviyanti Carla Tilman Leite<sup>2</sup>, Gaspar Quintao<sup>3</sup>, \*Nicholas Pang<sup>1</sup>, Eugene Koh<sup>4</sup>, Noor Melissa Nor Hadi<sup>4</sup>, Jhia Mae Woo<sup>5</sup>, Kah Mun Wan<sup>6</sup>, Marina Abdul Rahman Sabri<sup>7</sup>, Ming Gui Tan<sup>1</sup>, Assis Kamu<sup>1</sup>, Chong Mun Ho<sup>1</sup> (1. Universiti Malaysia Sabah (Malaysia), 2. PRADET (The Democratic Republic of Timor-Leste), 3. Guido Valadares National Hospital (The Democratic Republic of Timor-Leste), 4. Putra University Malaysia (Malaysia), 5. Sunway University (Malaysia), 6. ACT Kuala Lumpur (Malaysia), 7. Hospital Sultanah Aminah (Malaysia))

キーワード : vicarious trauma、Cognitive Fusion、Timor Leste、Post traumatic stress disorder、mindfulness

**Background:** Timor Leste's history of conflict and trauma has significantly impacted the mental health of its population, leading to high levels of psychological distress. This study aims to investigate the relationships between mindfulness, cognitive fusion, coping strategies, and psychological distress (depression, anxiety, and stress) among psychological workers in Timor Leste. **Methods:** A cross-sectional study design was employed, involving a convenience sample of psychological workers from PRADET and the national referral hospital in Dili. Mindfulness was assessed using the Toronto Mindfulness Questionnaire (TMQ), psychological flexibility using the Acceptance and Action Questionnaire (AAQ-II), cognitive fusion was measured using the Cognitive Fusion Questionnaire (CFQ), and coping strategies were evaluated using the DBT-Ways of Coping Checklist (DBT-WCCL). Depression, anxiety, and stress were measured using the Depression Anxiety Stress Scales (DASS-21). All scales were using the Bahasa Indonesia validated versions. Descriptive statistics, Pearson correlation coefficients, and multiple regression analyses were used to analyze the data. **Results:** Strong positive correlations were observed between mindfulness facets (curiosity and de-centering) and cognitive fusion ( $r=0.736, p<.001$ ). Cognitive fusion was significantly associated with higher levels of anxiety ( $r=0.527, p<.001$ ), stress ( $r=0.519, p<.001$ ), and depression ( $r=0.486, p<.01$ ). Dysfunctional coping strategies, particularly blaming others ( $r=0.340, p<.05$ ), also showed significant correlations with cognitive fusion. Cognitive fusion significantly predicted increased levels of depression ( $\beta=0.418, p<.05$ ), anxiety ( $\beta=0.491, p <.05$ ), and stress ( $\beta=0.482, p<.05$ ). Conversely, coping strategies involving skills use were linked to a significant reduction in depression ( $\beta=-19.697, p<.05$ ). **Conclusion:** The findings highlight the critical roles of cognitive fusion and coping strategies in predicting psychological distress among mental health workers in Timor Leste. Addressing these factors can enhance resilience and well-being among mental health professionals.

## Grant Awardees

2025年9月27日(土) 9:50 ~ 10:50 Session Room 1 (Main Hall A)

## WACP Grant Award Session

### [GA-1-03] The paradox impact of language proficiency and acculturation strategies on depressive symptoms in Indonesian migrant domestic workers

\*Andrian Liem<sup>1,2</sup> (1. Universitas Sebelas Maret (Indonesia), 2. Monash University Malaysia (Malaysia))

キーワード：migrant workers、depression、acculturation、language mastery、domestic workers

**Background:** Indonesian migrant domestic workers (IMDWs) often serve as informal caregivers for older adults in many Asian countries. Despite this essential contribution, their mental health remains largely understudied, particularly in relation to cultural factors such as language proficiency and acculturation strategies. **Objectives:** This cross-sectional study aims to investigate the impact of local language proficiency (reading, listening, writing, and speaking) and Berry's acculturation strategy (separation, integration, assimilation, and marginalization) on depressive symptoms. **Method:** The data were collected via an online survey conducted between August and December 2022 in Malaysia, Singapore, Hong Kong, Macau, and Taiwan. The severity of depressive symptoms was measured using the 9-item Patient Health Questionnaire (PHQ-9), which then was categorized following the 10-point cut-off score (0=no clinical symptoms; 1=have clinical symptoms). A hierarchical logistic regression was used to analyze the impact of language proficiency and acculturation strategy on depressive symptoms while controlling for demographic factors, caregiving burden, and perceived-loneliness. **Results:** The survey was completed by 872 participants with an average age of 36.8 years ( $SD=6.5$ ) and were predominantly female (98.5%). The PHQ-9 average score was 7.7 ( $SD=4.7$ ) and 24.7% of the total participants were categorized as having clinical depressive symptoms. The final predictive model was statistically significant ( $\chi^2[11]=348.8$ ,  $p<.001$ ), which explained 49% (*Nagelkerke R<sup>2</sup>*) of the variance. As assimilation strategy increased, the odds of developing clinical symptoms decreased ( $OR=0.27$ ,  $95\% CI=0.17-0.43$ ). Conversely, as speaking fluency and marginalization strategy increased, the odds of developing clinical symptoms also increased ( $OR=1.53$ ,  $95\% CI=1.16-2.01$ ;  $OR=2.27$ ,  $95\% CI=1.55-3.32$ , respectively). **Discussion:** The unexpected positive association between speaking fluency and depressive symptoms warrants further investigation as it may suggest that increased language proficiency could lead to greater awareness of one's marginalized status or exposure to potentially stressful situations. Targeted interventions and policies are needed to support MDWs' mental health by focusing on healthy acculturation strategies promotion.

## Grant Awardees

2025年9月27日(土) 9:50 ~ 10:50 Session Room 1 (Main Hall A)

## WACP Grant Award Session

### [GA-1-04] AI-Driven Multi-Omics Integration of Functional Connectomics and Biomarkers to Decode Resilience Mechanisms in Treatment-Resistant Depression

\*Rifaldy Fajar<sup>1</sup>, Prihantini Prihantini<sup>2</sup>, Elfiany Elfiany<sup>3</sup>, Sahnaz Vivinda Putri<sup>4</sup>, Andi Nursanti Andi Ureng<sup>5</sup> (1. Yogyakarta State University (Indonesia), 2. Bandung Institute of Technology (Indonesia), 3. BLK General Hospital (Indonesia), 4. International University Semen Indonesia (Indonesia), 5. Andini Persada College of Health Sciences (Indonesia))

キーワード：Treatment-Resistant Depression (TRD)、Resilience Mechanisms、AI-Driven Multi-Omics、Functional Connectomics、Circulating miRNA Biomarkers

**Background/Aim:** Treatment-Resistant Depression (TRD) affects up to 30% of major depressive disorder (MDD) patients, presenting a significant challenge in psychiatry. Resilience, the ability to maintain psychosocial functioning despite TRD, is poorly understood. This study leverages AI to integrate functional connectomics and circulating miRNA biomarkers, aiming to identify resilience mechanisms and develop precision psychiatry interventions. **Methods:** Functional MRI (fMRI) data were obtained from the UK Biobank (n=2,500; TRD cases, n=900), and circulating miRNA profiles from the exRNA Atlas (n=1,100 participants). Resilience was operationalized as high psychosocial functioning despite TRD, assessed via validated mental health scales. Functional connectomics were analyzed using a graph neural network (GNN) to map and evaluate disruptions in the default mode network (DMN), salience network (SN), and fronto-limbic circuits. Differential expression analysis identified resilience-associated miRNAs influencing synaptic remodeling and neuroinflammation. A multi-modal variational autoencoder (VAE) integrated fMRI connectivity and miRNA expression patterns into unified resilience signatures, validated using 10-fold cross-validation. An ensemble AI model predicted resilience, with critical features ranked by SHAP values. **Results:** The prediction model achieved an AUROC of 0.86 (95% CI: 0.83–0.89) and an accuracy of 78.3% (95% CI: 76.2–80.4%). DMN-SN connectivity disruptions were the strongest predictors of resilience (SHAP value: 0.62). Resilient individuals showed significantly elevated miR-124 and miR-146a expression (log2 fold change: 2.1; adjusted p<0.001). Integrating fMRI and miRNA features improved prediction by 22% over single-modality models, with resilient patients scoring 10.4 points higher in psychosocial functioning (p<0.01). **Conclusions:** This study provides a robust framework for decoding resilience in TRD using AI-driven multi-omics integration, offering novel perspectives for targeted interventions in precision psychiatry.

Symposium | Community care : [Symposium 55] Deinstitutionalization and Community Care2-Freedom first on the basis of Human Rights-

2025年9月27日(土) 9:00 ~ 10:30 Session Room 2 (Main Hall B)

## [Symposium 55] Deinstitutionalization and Community Care2-Freedom first on the basis of Human Rights-

Moderator: Itsuo Asai (Heart Clinic Medical Corporation)

[SY-55]

Deinstitutionalization and Community Care2-Freedom first on the basis of Human Rights-

Itsuo Asai<sup>1</sup>, Donato Zupin<sup>2</sup>, So Hee Lee<sup>3</sup>, Seiryo Mukaiyachi<sup>4</sup>, Pablo Farias<sup>5</sup> (1. Heart Clinic Medical Corporation (Japan), 2. MHD-WHO Collaborative Center (United States of America), 3. National Medical Center Seoul (Australia), 4. Health Sciences University of Hokkaido (Canada), 5. Hospital Civil de Guadalajara (Mexico))

[SY-55-01]

A full-scale open-door, no-restraint mental health system in Trieste, Italy

\*Donato Zupin<sup>1,2,3,4</sup> (1. DDSM - Mental Health Area-WHO Collaborative Center, ASUGI. Psychiatrist (Italy), 2. Italian Institute of Transcultural Mental Health (Italy), 3. Transcultural Psychiatry Section, Italian Society of Psychiatry (Italy), 4. World Association of Cultural Psychiatry (Italy))

[SY-55-02]

Community Measures to Reduce Involuntary and Long-Term Hospitalization of Individuals with Mental Illness

\*So Hee Lee<sup>1</sup> (1. National Medical Center (Korea))

[SY-55-03]

The Process and Current Challenges of Deinstitutionalization in the Eastern Hidaka Region, Hokkaido

\*IKUYOSHI MUKAIYACHI<sup>1</sup> (1. Health Sciences University of Hokkaido (Japan))

[SY-55-04]

Dilemmas of deinstitutionalization in contexts of absent psychiatric care: reflections from Chiapas, Mexico.

\*Pablo Farias<sup>1</sup> (1. Bats'i Lab (Mexico))

Symposium | Community care : [Symposium 55] Deinstitutionalization and Community Care2-Freedom first on the basis of Human Rights-

2025年9月27日(土) 9:00 ~ 10:30 Session Room 2 (Main Hall B)

## [Symposium 55] Deinstitutionalization and Community Care2-Freedom first on the basis of Human Rights-

Moderator: Itsuo Asai (Heart Clinic Medical Corporation)

### [SY-55] Deinstitutionalization and Community Care2-Freedom first on the basis of Human Rights-

Itsuo Asai<sup>1</sup>, Donato Zupin<sup>2</sup>, So Hee Lee<sup>3</sup>, Seiryo Mukaiyachi<sup>4</sup>, Pablo Farias<sup>5</sup> (1. Heart Clinic Medical Corporation (Japan), 2. MHD-WHO Collaborative Center (United States of America), 3. National Medical Center Seoul (Australia), 4. Health Sciences University of Hokkaido (Canada), 5. Hospital Civil de Guadalajara (Mexico))

キーワード : de-hospitalization、abolition、psychiatric hospital、freedom first、human rights

#### Deinstitutionalization and Community-Based Psychiatry: Global Pathways Beyond Institutions

This symposium focuses on how psychiatric care systems around the world are moving beyond institutional models toward community-based approaches grounded in freedom and human rights. It examines practical pathways to deinstitutionalization, highlighting innovations and challenges in diverse sociopolitical contexts.

Dr. Donato Zupin will introduce the Trieste model in northeast Italy, a globally recognized example of radical deinstitutionalization. Drawing from the legacy of Franco Basaglia, the model promotes an open-door, no-restraint approach and integrates psychiatric care with housing, employment, and social services. Dr. Zupin will outline the key features of this system and reflect on how it continues to evolve amid shifting political and administrative pressures.

In South Korea, the Mental Health Act was significantly reformed in 2017, and institutional closures have been implemented in some regions. Dr. So Hee Lee will discuss what measures can be taken by the community in reducing involuntary admissions and long-term hospitalization.

From Japan, Professor Seiryo Mukaiyachi will share insights from municipalities in Hokkaido where psychiatric hospitals have been eliminated. His presentation will address how mental health care is organized in such areas and what outcomes have emerged.

Dr. Pablo Farias will present on psychiatric services in Central and South America, where hospitals are often scarce. He will raise key questions about whether such institutions are necessary, or whether community-based models can meet the needs of local populations.

Together, the symposium invites reflection on how to build sustainable, non-institutional mental health systems that uphold dignity, autonomy, and inclusion.

Symposium | Community care : [Symposium 55] Deinstitutionalization and Community Care2-Freedom first on the basis of Human Rights-

2025年9月27日(土) 9:00 ~ 10:30 Session Room 2 (Main Hall B)

## [Symposium 55] Deinstitutionalization and Community Care2-Freedom first on the basis of Human Rights-

Moderator: Itsuo Asai (Heart Clinic Medical Corporation)

### [SY-55-01] A full-scale open-door, no-restraint mental health system in Trieste, Italy

\*Donato Zupin<sup>1,2,3,4</sup> (1. DDSM - Mental Health Area-WHO Collaborative Center, ASUGI. Psychiatrist (Italy), 2. Italian Institute of Transcultural Mental Health (Italy), 3. Transcultural Psychiatry Section, Italian Society of Psychiatry (Italy), 4. World Association of Cultural Psychiatry (Italy))

キーワード : Deinstitutionalization、No-Restraint、Open-Door、Cultural psychiatry、Community mental health

The Trieste (Italy) model of community mental health care has long been recognized for its radical commitment to a no-restraint, open-door approach. Rooted in the legacy of Franco Basaglia and the Italian movement for psychiatric reform, this model is founded on the idea that mental health care must prioritize freedom, social inclusion, and respect for human rights, rejecting the logic of segregation and institutionalization.

While the core principles of the Basaglian model remain embedded in daily practice, the evolving political and administrative landscape continues to influence service delivery and clinical approaches. Maintaining this delicate balance between ideological commitment, local governance, and broader healthcare policies has always been a defining feature of Trieste's system.

This presentation will focus on how the principles of "open door" and "no restraint" are practically implemented in the current Trieste mental health system. Through the integration of psychiatric care with social services, housing support, and employment programs, the model ensures that mental health care remains firmly rooted in the social fabric of the community. Key operational strategies include 24/7 community mental health centers, assertive home-based interventions, crisis management without seclusion or mechanical restraint, and continuous relational work with patients and their social networks.

Focusing on the tensions between continuity and change, the presentation will reflect on how a radical deinstitutionalization model adapts over time to shifting institutional and socio-political contexts. Particular attention will be given to the challenges of sustaining a rights-based approach in everyday clinical work, while navigating new pressures and expectations. Ultimately, this contribution aims to offer not only a practical description of Trieste's methods, but also a critical reflection on the resilience and adaptability of community-based mental health care in the face of evolving social and political dynamics.

Symposium | Community care : [Symposium 55] Deinstitutionalization and Community Care2-Freedom first on the basis of Human Rights-

2025年9月27日(土) 9:00 ~ 10:30 Session Room 2 (Main Hall B)

## [Symposium 55] Deinstitutionalization and Community Care2-Freedom first on the basis of Human Rights-

Moderator: Itsuo Asai (Heart Clinic Medical Corporation)

### [SY-55-02] Community Measures to Reduce Involuntary and Long-Term Hospitalization of Individuals with Mental Illness

\*So Hee Lee<sup>1</sup> (1. National Medical Center (Korea))

キーワード : Community Measures、Involuntary Hospitalization、Long-Term Hospitalization、Mental Illness

The main causes of involuntary and long-term hospitalization for individuals with mental illness can be broadly categorized into two factors. First, **frequent relapses and worsening symptoms due to decreased adherence** to medication. Second, **the inability to lead an independent life due to functional decline**. The issue of functional decline often results in a need for external assistance due to financial difficulties and a lack of self-care ability. When no available caregiver is present, discharge becomes difficult.

Therefore, community-based measures to address these issues include:

**Ensuring Consistent Outpatient Care:** Mental health welfare centers can provide services such as accompanying patients to medical appointments and monitoring their progress. Additionally, long-acting injectable medications for schizophrenia can be utilized to ensure adherence to treatment.

**Expanding Rehabilitation Programs:** Increasing infrastructure to operate programs such as day hospitals can enhance the life skills of individuals with mental illness and help them manage their medications consistently.

**Providing Residential Facilities:** For individuals with diminished self-care abilities and no caregivers, residential facilities should be established, and social workers should be assigned to manage cases and assist with medication adherence.

**Post-Prison Outpatient Treatment Orders:** For individuals with mental illness released from prison after committing offenses, outpatient treatment orders should be enforced to ensure the stabilization of psychiatric symptoms in the community.

With investments from the government and local authorities in these measures, a comprehensive management network for individuals with mental illness can be established. This would not only reduce involuntary and long-term hospitalizations but also enable individuals with mental illness to integrate and thrive in their communities.

Symposium | Community care : [Symposium 55] Deinstitutionalization and Community Care2-Freedom first on the basis of Human Rights-

2025年9月27日(土) 9:00 ~ 10:30 Session Room 2 (Main Hall B)

## [Symposium 55] Deinstitutionalization and Community Care2-Freedom first on the basis of Human Rights-

Moderator: Itsuo Asai (Heart Clinic Medical Corporation)

### [SY-55-03] The Process and Current Challenges of Deinstitutionalization in the Eastern Hidaka Region, Hokkaido

\*IKUYOSHI MUKAIYACHI<sup>1</sup> (1. Health Sciences University of Hokkaido (Japan))

キーワード : deinstitutionalization、community living support、consumer-led

The eastern Hidaka region of Hokkaido, located in northern Japan, has a population of approximately 20,300 and consists of three coastal towns facing the Pacific Ocean: Urakawa, Samani, and Erimo. The region is known for its fishing industry, racehorse breeding, and strawberry production. Urakawa, the central town of the district, once had a psychiatric ward with 130 beds. The number of psychiatric beds per 1,000 residents there was more than twice the national average in Japan, which already has the highest ratio of psychiatric beds in the world. A turning point came in 1978 with the establishment of a self-help group for people with psychiatric disabilities in Urakawa. This initiative eventually led to the founding of Urakawa Bethel House (Urakawa Bethel no Ie) in 1984, an organization that promotes peer support, employment, and housing assistance. In 2000, a department was created within the hospital to promote deinstitutionalization and community reintegration. The psychiatric ward was ultimately closed in 2014. Since then, both medical care and daily life support have been provided on a community basis, representing a major step forward in Japan's efforts toward deinstitutionalization.

Symposium | Community care : [Symposium 55] Deinstitutionalization and Community Care2-Freedom first on the basis of Human Rights-

2025年9月27日(土) 9:00 ~ 10:30 Session Room 2 (Main Hall B)

## [Symposium 55] Deinstitutionalization and Community Care2-Freedom first on the basis of Human Rights-

Moderator: Itsuo Asai (Heart Clinic Medical Corporation)

[SY-55-04] Dilemmas of deinstitutionalization in contexts of absent psychiatric care: reflections from Chiapas, Mexico.

\*Pablo Farias<sup>1</sup> (1. Bats'i Lab (Mexico))

キーワード : Deinstitutionalization、Trauma、Violence、Displacement、community mental health

Psychiatric deinstitutionalization has been advanced as a policy priority in Mexico in recent years. New legislation mandates that no new public psychiatric hospitals can be created and that funding should be gradually reduced for existing psychiatric care hospitals. Legislation also promotes the goal of integrating psychiatric care into general hospitals, but no programs or funding have been developed to advance these goals.

Reflecting on the processes of deinstitutionalization of psychiatric care from the perspective of the rural regions of Chiapas, Mexico, where healthcare is generally precarious and no access to psychiatric resources exists, presents us with the dilemma of creating alternatives for participation of psychiatry professionals in the development of alternative community resources. Based on the experiences of communities that have confronted trauma due to repression, violence and displacement, this presentation explores alternative strategies that could enable psychiatry to play a more significant role in community mental health.

Symposium | Schizophrenia : [Symposium 56] Current status of psychiatric research using genetic medicine and genomic medicine  
Importance of collaborative research among East Asians

2025年9月27日(土) 9:00 ~ 10:30 Session Room 3 (Large Hall A)

## [Symposium 56] Current status of psychiatric research using genetic medicine and genomic medicine Importance of collaborative research among East Asians

Moderator: Nakao Iwata (Fujita Health University School of Medicine), Hailiang Huang (The Broad Institute of MIT and Harvard)

[SY-56]

Current status of psychiatric research using genetic medicine and genomic medicine  
Importance of collaborative research among East Asians

Nakao Iwata<sup>1</sup>, Weihua Yue<sup>2</sup>, Po-Hsiu Kuo<sup>3</sup>, Hailiang Huang<sup>4</sup> (1. Fujita Health University School of Medicine (Japan), 2. Peking University Sixth Hospital (China), 3. National Taiwan University (Taiwan), 4. the Broad Institute of MIT and Harvard (United States of America))

[SY-56-01]

Pharmacogenomic Research on Antipsychotic Therapy in Chinese Han Population

\*Weihua Yue<sup>1,2,3,4,5</sup> (1. Peking University Sixth Hospital (China), 2. Institute of Mental Health, Peking University (China), 3. NHC Key Laboratory of Mental Health (Peking University) (China), 4. National Clinical Research Center for Mental Disorders (Peking University Sixth Hospital) (China), 5. PKU-IDG/McGovern Institute for Brain Research (China))

[SY-56-02]

Multimodal Genomic and Mobile Sensing Reveals Genetic and Behavioral Signatures in Mood Disorder Phenotypes

\*Po-Hsiu Kuo<sup>1,5,8</sup>, Chiao-Erh Chang<sup>1</sup>, Ting-Yi Lee<sup>1</sup>, Shiau-Shian Huang<sup>2,3</sup>, Ying-Ting Chao<sup>1,4</sup>, Hsi-Chung Chen<sup>5</sup>, Ming-Chyi Huang<sup>6</sup>, I-Ming Chen<sup>5</sup>, Chuhsing Kate Hsiao<sup>1,7</sup> (1. Institute of Epidemiology and Preventive Medicine, College of Public Health, National Taiwan University (Taiwan), 2. Department of Psychiatry, Taipei Veterans General Hospital (Taiwan), 3. College of Medicine, National Yang Ming Chiao Tung University (Taiwan), 4. Department of Medical Research, National Taiwan University (Taiwan), 5. Department of Psychiatry, National Taiwan University Hospital (Taiwan), 6. Department of Psychiatry, Taipei City Psychiatric Center, Taipei City Hospital (Taiwan), 7. Institute of Health Data Analytics and Statistics, College of Public Health, National Taiwan University (Taiwan), 8. Psychiatric Research Center, Wan Fang Hospital (Taiwan))

[SY-56-03]

Contribution of common and rare variants to schizophrenia risk in East and South Asian ancestries

\*Hailiang Huang<sup>1,2,3</sup>, Stanley Global Asia Initiatives (1. the Broad Institute of MIT and Harvard (United States of America), 2. Massachusetts General Hospital (United States of America), 3. Harvard Medical School (United States of America))

Symposium | Schizophrenia : [Symposium 56] Current status of psychiatric research using genetic medicine and genomic medicine  
Importance of collaborative research among East Asians

2025年9月27日(土) 9:00 ~ 10:30 Session Room 3 (Large Hall A)

## [Symposium 56] Current status of psychiatric research using genetic medicine and genomic medicine Importance of collaborative research among East Asians

Moderator: Nakao Iwata (Fujita Health University School of Medicine), Hailiang Huang (The Broad Institute of MIT and Harvard)

### [SY-56] Current status of psychiatric research using genetic medicine and genomic medicine Importance of collaborative research among East Asians

Nakao Iwata<sup>1</sup>, Weihua Yue<sup>2</sup>, Po-Hsiu Kuo<sup>3</sup>, Hailiang Huang<sup>4</sup> (1. Fujita Health University School of Medicine (Japan), 2. Peking University Sixth Hospital (China), 3. National Taiwan University (Taiwan), 4. the Broad Institute of MIT and Harvard (United States of America))

キーワード : genetics and epidemiology、pharmacogenetics、schizophrenia、bipolar disorder

Despite various efforts to elucidate the biological pathogenesis of major mental disorders, much remains unclear at present. No clear biomarkers have been identified, and since the disease entity is the brain, which is extremely difficult to access *in vivo*, current medical science approaches cannot easily elucidate the pathogenesis.

Genetic factors in major mental disorders such as schizophrenia and bipolar disorder have been observed for a long time. If Mendel's laws are true, clues to the pathogenesis of mental disorders are certainly recorded in genetic information.

Recent advances in genomic medicine research, particularly the development and low-cost availability of whole-genome sequencing technology and the advancement of computer technology enabling rapid analysis of large amounts of data, have yielded significant results in genomic medicine research.

In schizophrenia and bipolar disorder, hundreds of associated gene loci and genes have been identified. By combining various analytical techniques with image and multiomics analysis data, findings that shed light on the pathogenesis of these disorders based on genomic information are gradually accumulating.

In this symposium, we will introduce and discuss the latest findings in genetic epidemiology, genomic medicine, and pharmacogenetics aimed at elucidating the pathophysiology of mental disorders, based on collaborative research across Japan, China, Taiwan, and various other ethnic groups around the world.

Symposium | Schizophrenia : [Symposium 56] Current status of psychiatric research using genetic medicine and genomic medicine  
Importance of collaborative research among East Asians

2025年9月27日(土) 9:00 ~ 10:30 Session Room 3 (Large Hall A)

## [Symposium 56] Current status of psychiatric research using genetic medicine and genomic medicine Importance of collaborative research among East Asians

Moderator: Nakao Iwata (Fujita Health University School of Medicine), Hailiang Huang (The Broad Institute of MIT and Harvard)

### [SY-56-01] Pharmacogenomic Research on Antipsychotic Therapy in Chinese Han Population

\*Weihua Yue<sup>1,2,3,4,5</sup> (1. Peking University Sixth Hospital (China), 2. Institute of Mental Health, Peking University (China), 3. NHC Key Laboratory of Mental Health (Peking University) (China), 4. National Clinical Research Center for Mental Disorders (Peking University Sixth Hospital) (China), 5. PKU-IDG/McGovern Institute for Brain Research (China))

キーワード : Schizophrenia、Pharmacogenomics、Antipsychotics

Schizophrenia (SCZ) is one of the most complex diseases with high heterogeneity in mechanism or clinical phenotype. Without any specific or effective biomarkers, this is a very difficult issue for the clinicians to solve the key clinical issues about subjective diagnosis, or experiential therapy of schizophrenia. The strategy of genetics has been proven to be effective and helpful to explore the mechanism of schizophrenia and the molecular basis of antipsychotic medications. The speaker has been committed to finding the susceptibility genes of schizophrenia in Chinese Han population. The major topic are as follows: 1) Using the genome-wide association study (GWAS) and meta-analysis, her group has found several novel susceptible loci of schizophrenia. Combined clues of bioinformatics data and functional experiments, they further explored the potential function of the novel susceptible genes. 2) Using the multi-omics approaches, they found there were very important interactive effects on genetic polymorphisms or variants, on transcriptional levels or neuroimaging characters in schizophrenia patients. 3) With a relatively large sample size of pharmacogenomics, her group reported several susceptible genes associated with individual differences in therapeutic or side effects of common antipsychotic medicines. Based on the genetic, clinical-environmental, brain structure or function, molecular pathway, her group explored the potential objective biomarkers for diagnosis and biotypes with clinical implications of efficacy prediction for schizophrenia.

Symposium | Schizophrenia : [Symposium 56] Current status of psychiatric research using genetic medicine and genomic medicine  
Importance of collaborative research among East Asians

2025年9月27日(土) 9:00 ~ 10:30 Session Room 3 (Large Hall A)

## [Symposium 56] Current status of psychiatric research using genetic medicine and genomic medicine Importance of collaborative research among East Asians

Moderator: Nakao Iwata (Fujita Health University School of Medicine), Hailiang Huang (The Broad Institute of MIT and Harvard)

### [SY-56-02] Multimodal Genomic and Mobile Sensing Reveals Genetic and Behavioral Signatures in Mood Disorder Phenotypes

\*Po-Hsiu Kuo<sup>1,5,8</sup>, Chiao-Erh Chang<sup>1</sup>, Ting-Yi Lee<sup>1</sup>, Shiau-Shian Huang<sup>2,3</sup>, Ying-Ting Chao<sup>1,4</sup>, Hsi-Chung Chen<sup>5</sup>, Ming-Chyi Huang<sup>6</sup>, I-Ming Chen<sup>5</sup>, Chuhsing Kate Hsiao<sup>1,7</sup> (1. Institute of Epidemiology and Preventive Medicine, College of Public Health, National Taiwan University (Taiwan), 2. Department of Psychiatry, Taipei Veterans General Hospital (Taiwan), 3. College of Medicine, National Yang Ming Chiao Tung University (Taiwan), 4. Department of Medical Research, National Taiwan University (Taiwan), 5. Department of Psychiatry, National Taiwan University Hospital (Taiwan), 6. Department of Psychiatry, Taipei City Psychiatric Center, Taipei City Hospital (Taiwan), 7. Institute of Health Data Analytics and Statistics, College of Public Health, National Taiwan University (Taiwan), 8. Psychiatric Research Center, Wan Fang Hospital (Taiwan))

キーワード : antidepressant induce mania、unipolar mania、digital phenotyping

Mood disorders span diverse phenotypes. We integrate genome-wide analyses and digital phenotyping to clarify how inherited risk and real-world mobility inform mood disorder classification and prediction. Among 772 Han Chinese patients with unipolar depression, 145 (19.7%) developed antidepressant-induced mania (AIM) within 28 days of antidepressant exposure or discontinuation. Genome-wide testing identified eight suggestive SNPs, and higher bipolar polygenic risk scores significantly predicted AIM (OR  $\approx 1.25$ ,  $p < .05$ ). Clinical risk factors included female sex, postpartum depression, OCD, severe episodes, substance use, and psychoses. Additionally, bipolar patient with unipolar mania (UM) were compared to 1,041 with depressive-manic (D-M) presentations. A genome-wide locus (rs149251101, *THSD7A*) differentiated UM from D-M cases ( $p = 5.3 \times 10^{-8}$ ). PRS for bipolar disorder, major depression, and suicide attempt were positively associated with UM, while insomnia liability was inversely linked. Lastly, in two smartphone cohorts ( $n=107$ ), passive GPS and mood data over six months revealed over 10,000 person-days. Homestay predicted next-day fatigue, depressed mood, and irritability; higher location variance predicted lower depression. Depressive symptoms, in turn, predicted reduced mobility. Spectral and diurnal analyses identified mood-linked movement cycles and evening mobility declines as digital markers of depression. These multimodal approaches reveal overlapping genetic and behavioral markers in mood disorders, enabling future personalized, movement-informed interventions.

Symposium | Schizophrenia : [Symposium 56] Current status of psychiatric research using genetic medicine and genomic medicine  
Importance of collaborative research among East Asians

2025年9月27日(土) 9:00 ~ 10:30 Session Room 3 (Large Hall A)

## [Symposium 56] Current status of psychiatric research using genetic medicine and genomic medicine Importance of collaborative research among East Asians

Moderator: Nakao Iwata (Fujita Health University School of Medicine), Hailiang Huang (The Broad Institute of MIT and Harvard)

### [SY-56-03] Contribution of common and rare variants to schizophrenia risk in East and South Asian ancestries

\*Hailiang Huang<sup>1,2,3</sup>, Stanley Global Asia Initiatives (1. the Broad Institute of MIT and Harvard (United States of America), 2. Massachusetts General Hospital (United States of America), 3. Harvard Medical School (United States of America))

キーワード : Schizophrenia、Genetics、Sequencing

Schizophrenia genetic studies have primarily focused on European ancestries, leaving variants in other populations underexplored and potentially increasing health disparities. Here, we report initial findings from the first large-scale schizophrenia sequencing study examining both common and rare variants in East and South Asian populations (EAS and SAS), using the Blended Genome Exome (BGE), a technology combining low-pass whole-genome and deep whole-exome sequencing.

We ascertained 98,739 East Asian (cases: 45,925, controls: 52,814) and 17,697 South Asian individuals (cases: 8,843, controls: 8,854), and conducted genotyping, WES, and BGE. We also incorporated European (EUR) cohorts (cases: 53,386, controls: 77,258), achieving a total sample size of 247,080. In GWAS, we identified 41 schizophrenia-associated loci in EAS—a 5x increase over the largest previous EAS study. In SAS, we found 7 genome-wide significant loci, marking the first large-scale GWAS in this population. We observed high genetic correlations across the three populations: 0.86-1.08. A multi-ancestry meta-analysis across EUR, EAS, and SAS revealed 461 loci significantly associated with schizophrenia, 131 of which are novel, with SNP-based heritability of 23%.

For RVAS, we identified 12 exome-wide significant genes (29 at FDR 5%), including four novel genes. Schizophrenia RVAS signals were significantly enriched in schizophrenia GWAS loci compared to loci for a non-psychiatric trait. By integrating both common and rare variants, we prioritized genes strongly associated with schizophrenia, such as SCAF1, FYN, and KLC1.

This study provides, for the first time, insights into the genetic architecture in the SAS population and the integrative contribution of both common and rare variants to schizophrenia in three major populations. These novel findings will enable future investigations and uncover the pathogenesis of schizophrenia, ultimately contributing to the reduction of its disease across ancestries.

Symposium | Anxiety : [Symposium 57] Perception and stigma, trans-ethnic genetics, virtual reality treatment of anxiety disorder, and Hyperemesis Gravidarum

2025年9月27日(土) 9:00 ~ 10:30 Session Room 4 (Large Hall B)

## [Symposium 57] Perception and stigma, trans-ethnic genetics, virtual reality treatment of anxiety disorder, and Hyperemesis Gravidarum

Moderator: Kazuo Yamada (Toyo Eiwa University)

[SY-57]

Perception and stigma, trans-ethnic genetics, virtual reality treatment of anxiety disorder, and Hyperemesis Gravidarum

Tsuyoshi Akiyama<sup>1</sup>, Yong-Wook Shin<sup>2</sup>, Kazutaka Ohi<sup>3</sup>, Junhyung Kim<sup>4</sup>, Wan Asyikin<sup>5</sup> (1. Rokubancho Mental Clinic (Japan), 2. University of Ulsan (Korea), 3. Gifu University (Japan), 4. Kangbuk Samsung Hospital (Korea), 5. Hospital Permai (Malaysia))

[SY-57-01]

Breaking the Stigma: Cultural Norms, Celebrities, and Social Media

\*Yong-Wook Shin<sup>1</sup> (1. Department of Psychiatry, Asan Medical Center (Korea))

[SY-57-02]

Transethnic Genetic Etiology of Panic Disorder: Approaches Using Polygenic Scores and Their Machine Learning-Based Classification

\*Kazutaka Ohi<sup>1</sup>, Takeshi Otowa<sup>2</sup>, Hisanobu Kaiya<sup>3</sup>, Tsukasa Sasaki<sup>4</sup>, Hisashi Tanii<sup>5</sup>, Toshiki Shioiri<sup>1</sup> (1. Department of Psychiatry, Gifu University Graduate School of Medicine (Japan), 2. Department of Psychiatry, Teikyo University (Japan), 3. Panic Disorder Research Center, Warakukai Medical Corporation (Japan), 4. Department of Physical and Health Education, Graduate School of Education, The University of Tokyo (Japan), 5. Center for Physical and Mental Health, Mie University (Japan))

[SY-57-03]

Enhancing Early Treatment Response Prediction in Panic Disorder Using a Virtual Reality-Based Assessment Tool: Integrating Multimodal Indicators with Machine Learning

\*Junhyung Kim<sup>1</sup> (1. Department of psychiatry, Samsung kangbuk Hospital, Sungkyunkwan University School of Medicine, Seoul, Republic of Korea (Korea))

[SY-57-04]

Anxiety, depression and marital satisfaction in women with hyperemesis gravidarum: A comparative cross-sectional study in Malaysia

\*Wan Asyikin Binti Wan Azlan<sup>1</sup>, Magendra Ramalingam<sup>1</sup>, Rosdinem Razali<sup>1</sup>, Mohamad Farouk Abdullah<sup>1</sup>, Fairuz Nazri Abdul Rahman<sup>1</sup> (1. Malaysia Ministry of Health (Malaysia))

Symposium | Anxiety : [Symposium 57] Perception and stigma, trans-ethnic genetics, virtual reality treatment of anxiety disorder, and Hyperemesis Gravidarum

2025年9月27日(土) 9:00 ~ 10:30 Session Room 4 (Large Hall B)

## [Symposium 57] Perception and stigma, trans-ethnic genetics, virtual reality treatment of anxiety disorder, and Hyperemesis Gravidarum

Moderator: Kazuo Yamada (Toyo Eiwa University)

### [SY-57] Perception and stigma, trans-ethnic genetics, virtual reality treatment of anxiety disorder, and Hyperemesis Gravidarum

Tsuyoshi Akiyama<sup>1</sup>, Yong-Wook Shin<sup>2</sup>, Kazutaka Ohi<sup>3</sup>, Junhyung Kim<sup>4</sup>, Wan Asyikin<sup>5</sup> (1. Rokubancho Mental Clinic (Japan), 2. University of Ulsan (Korea), 3. Gifu University (Japan), 4. Kangbuk Samsung Hospital (Korea), 5. Hospital Permai (Malaysia))

キーワード : Anxiety disorder、Stigma、Trans-ethnic genetics、Virtual reality treatment

Anxiety disorder places a substantial burden on both individuals and society. Despite its impact, an understanding of the disorder is still limited, and various debates remain. The purpose of this symposium is to highlight a few outstanding issues related to anxiety disorders. Yong-Wook Shin examines how the evolving role of social media networks is influencing public perceptions of anxiety, contributing to changing stigma dynamics, and ultimately impacting the prevalence and treatment of anxiety disorders in Eastern and Western societies. In recent years, social platforms have become spaces for increased mental health advocacy, creating both opportunities for support and visibility as well as challenges related to misinformation and online harassment. Kazutaka Ohi reports genetic studies on anxiety disorders, with a focus on trans-ethnic genetic backgrounds between Asian and European populations. Despite cultural and genetic differences between these populations, anxiety disorders in Asian population shares transethnic genetic etiologies with anxiety disorders as well as other psychiatric disorders and related intermediate phenotypes in European population. Junhyung Kim presents the development of a novel assessment method for anxiety disorders and a predictive model for treatment response utilizing virtual reality (VR) technology. Virtual reality is a promising supplemental or alternative approach for treating anxiety disorders. Focusing on the unique affordances of VR, such as immersive therapeutic settings and uniform treatment delivery, both the current applications and future potential of VR technology in treating and assessing anxiety disorders will be explored. Wan Asyikin reports a study done in a tertiary center hospital in Malaysia. The focus of this study was anxiety, depression, and marital satisfaction in Hyperemesis Gravidarum. There was no association between Hyperemesis Gravidarum (HG) and anxiety disorder, depressive disorder, and marital satisfaction.

Symposium | Anxiety : [Symposium 57] Perception and stigma, trans-ethnic genetics, virtual reality treatment of anxiety disorder, and Hyperemesis Gravidarum

2025年9月27日(土) 9:00 ~ 10:30 Session Room 4 (Large Hall B)

## [Symposium 57] Perception and stigma, trans-ethnic genetics, virtual reality treatment of anxiety disorder, and Hyperemesis Gravidarum

Moderator: Kazuo Yamada (Toyo Eiwa University)

### [SY-57-01] Breaking the Stigma: Cultural Norms, Celebrities, and Social Media

\*Yong-Wook Shin<sup>1</sup> (1. Department of Psychiatry, Asan Medical Center (Korea))

キーワード : Stigma、Celebrities、Cultural Norms、Social Media

This study examines cultural differences in the prevalence and perception of anxiety disorders across Eastern and Western societies, focusing on the role of traditional stigma and the transformative influence of digital platforms and public figures. Epidemiological studies show that lifetime rates of anxiety and depression in Western countries are four to ten times higher than those in many Asian nations, despite often greater social stress in Eastern populations. One explanation lies in cultural norms that discourage open discussion of mental health in many Eastern societies, contributing to underreporting and misdiagnosis. The rise of social media has begun to challenge these norms. Online platforms allow individuals to share mental health experiences—often anonymously—thereby reducing stigma and encouraging help-seeking behaviors. Notably, public disclosures by celebrities and influencers about their mental health struggles have further helped normalize conversations and mobilize supportive communities. However, these platforms also pose new risks. The rapid spread of misinformation, symptom normalization, and online harassment can distort public understanding of anxiety disorders and compromise care-seeking decisions. Healthcare professionals must critically evaluate the digital mental health landscape and promote accurate, culturally relevant information. This work highlights the urgent need for culturally sensitive interventions that integrate awareness of evolving digital behaviors and public narratives. Building mental health systems that bridge traditional and digital contexts is essential to ensuring equitable and effective care across diverse populations.

Symposium | Anxiety : [Symposium 57] Perception and stigma, trans-ethnic genetics, virtual reality treatment of anxiety disorder, and Hyperemesis Gravidarum

2025年9月27日(土) 9:00 ~ 10:30 Session Room 4 (Large Hall B)

## [Symposium 57] Perception and stigma, trans-ethnic genetics, virtual reality treatment of anxiety disorder, and Hyperemesis Gravidarum

Moderator: Kazuo Yamada (Toyo Eiwa University)

### [SY-57-02] Transethnic Genetic Etiology of Panic Disorder: Approaches Using Polygenic Scores and Their Machine Learning-Based Classification

\*Kazutaka Ohi<sup>1</sup>, Takeshi Otowa<sup>2</sup>, Hisanobu Kaiya<sup>3</sup>, Tsukasa Sasaki<sup>4</sup>, Hisashi Tanii<sup>5</sup>, Toshiki Shioiri<sup>1</sup> (1. Department of Psychiatry, Gifu University Graduate School of Medicine (Japan), 2. Department of Psychiatry, Teikyo University (Japan), 3. Panic Disorder Research Center, Warakukai Medical Corporation (Japan), 4. Department of Physical and Health Education, Graduate School of Education, The University of Tokyo (Japan), 5. Center for Physical and Mental Health, Mie University (Japan))

キーワード : Panic disorder, Polygenic score, Machine Learning

Panic disorder (PD), one of the core anxiety disorders, is modestly heritable worldwide despite cultural differences across countries. The genetic basis of anxiety disorders overlaps with that of other psychiatric disorders, such as major depressive disorder (MDD), as well as with intermediate phenotypes such as neuroticism, particularly in individuals of European ancestry. First, we have comprehensively investigated the transethnic polygenetic features shared between European individuals with psychiatric disorders and their intermediate phenotypes and Japanese individuals with PD [718 PD and 1,717 healthy controls(HCs)] using several polygenic scores (PGSs) derived from large-scale genome-wide association studies. Second, we have examined whether individuals with PD could be reliably diagnosed by utilizing combinations of multiple PGSs-up to 48- for psychiatric disorders and their intermediate phenotypes, compared with single PGS approaches, using specific machine learning classifiers: logistic regression, neural networks, quadratic discriminant analysis, random forests, and support vector machines. Our results demonstrated that PGSs derived from European studies of anxiety disorders and MDD were associated with PD in the Japanese populations. Among intermediate phenotypes, PGSs for loneliness, neuroticism, and lower cognitive function were also associated with Japanese PD individuals. All five classifiers performed relatively well in distinguishing PD individuals from HCs, with classification accuracy improving as the number of PGSs increased. The greatest areas under the curve at the best PGS combination significantly differed among the five classifiers. Notably, random forests exhibited the lowest accuracy, while support vector machines had higher accuracy than neural networks in classification performance. Our findings suggest that PD shares transethnic genetic etiologies with other psychiatric disorders and related intermediate phenotypes. Moreover, increasing the number of PGS, up to approximately 10, effectively improved the classification accuracy. Among the classifiers tested, support vector machines exhibited the highest accuracy. However, the overall classification accuracy of PD based solely on PGS combinations remained modest.

Symposium | Anxiety : [Symposium 57] Perception and stigma, trans-ethnic genetics, virtual reality treatment of anxiety disorder, and Hyperemesis Gravidarum

2025年9月27日(土) 9:00 ~ 10:30 Session Room 4 (Large Hall B)

## [Symposium 57] Perception and stigma, trans-ethnic genetics, virtual reality treatment of anxiety disorder, and Hyperemesis Gravidarum

Moderator: Kazuo Yamada (Toyo Eiwa University)

### [SY-57-03] Enhancing Early Treatment Response Prediction in Panic Disorder Using a Virtual Reality-Based Assessment Tool: Integrating Multimodal Indicators with Machine Learning

\*Junhyung Kim<sup>1</sup> (1. Department of psychiatry, Samsung kangbuk Hospital, Sungkyunkwan University School of Medicine, Seoul, Republic of Korea (Korea))

キーワード : virtual reality、panic disorder、early treatment response、machine learning

**Background:** Early treatment response (ETR) is a robust predictor of long-term outcomes in anxiety disorders, including panic disorder (PD). However, conventional assessments may lack ecological validity and sensitivity to early psychophysiological changes, limiting their utility in real-world clinical settings. **Objective:** We aimed to evaluate the predictive potential of the *Virtual Reality Assessment of Panic Disorder (VRA-PD)*—a novel VR-based tool capturing subjective and physiological responses during anxiety-provoking scenarios—for identifying ETR in patients with PD. **Methods:** Fifty-two individuals (25 PD patients and 27 healthy controls [HCs]) completed assessments every two months for six months. Measures included VR-based anxiety scores, heart rate variability (HRV), conventional clinical scales (e.g., Panic Disorder Severity Scale, Anxiety Sensitivity Index), and demographic variables. PD patients were categorized as early responders (ER,  $n=7$ ) or delayed responders (DR,  $n=18$ ) based on symptom change trajectories. **Results:** A CatBoost machine learning model incorporating both VR-based and conventional features showed improved performance in classifying ER, DR, and HCs (accuracy: 85%, F1-score: 0.71), outperforming models using only conventional (accuracy: 77%, F1-score: 0.56) or VR-only (accuracy: 75%, F1-score: 0.64) data. Performance further improved when restricted to the top 10 predictors identified by SHapley Additive exPlanations (accuracy: 90%, F1-score: 0.83). Key features included VR-based anxiety responses, HRV indices, and clinical severity ratings. **Conclusions:** The integration of immersive VR-based assessment and machine learning enables accurate ETR prediction in PD, addressing key limitations of conventional methods. These findings support the clinical utility of digital phenotyping and VR technologies in developing personalized, ecologically valid treatment strategies in anxiety disorders.

Symposium | Anxiety : [Symposium 57] Perception and stigma, trans-ethnic genetics, virtual reality treatment of anxiety disorder, and Hyperemesis Gravidarum

2025年9月27日(土) 9:00 ~ 10:30 Session Room 4 (Large Hall B)

## [Symposium 57] Perception and stigma, trans-ethnic genetics, virtual reality treatment of anxiety disorder, and Hyperemesis Gravidarum

Moderator: Kazuo Yamada (Toyo Eiwa University)

### [SY-57-04] Anxiety, depression and marital satisfaction in women with hyperemesis gravidarum: A comparative cross-sectional study in Malaysia

\*Wan Asyikin Binti Wan Azlan<sup>1</sup>, Magendra Ramalingam<sup>1</sup>, Rosdinom Razali<sup>1</sup>, Mohamad Farouk Abdullah<sup>1</sup>, Fairuz Nazri Abdul Rahman<sup>1</sup> (1. Malaysia Ministry of Health (Malaysia))

キーワード : Antenatal anxiety、Hyperemesis gravidarum、Depression、Marital satisfaction

Hyperemesis Gravidarum (HG) is a severe form of vomiting that occurs among pregnant mothers. Due to the nature of HG, pregnant mothers may feel fatigued and burdened by it and questions have been raised about the emergence of psychiatric illness during this period of vulnerability. A comparative cross-sectional study using Hospital Anxiety and Depression Scale (HADS), M.I.N.I (MINI International Neuropsychiatric Interview) and ENRICH- EMS (Evaluation and Nurturing Relationship Issues, Communication and Happiness – Marital Satisfaction Scale) were performed in a group of 112 pregnant women. Findings noted there were no differences in the prevalence rate of any anxiety disorder among the patient with HG vs comparative group (9% vs 3%,  $P > 0.05$ ) and depressive disorder in women with HG vs comparative group (16% vs 8%,  $P > 0.05$ ) respectively. There were associations between HG and gravida, past history of miscarriage, and gestational diabetes ( $P < 0.05$ ). After adjustment, only past history of gestational diabetes was associated with HG as a protective factor (AOR 0.034 95% CI 0.002–0.181;  $P = 0.0014$ ). We found that women in the HG group tended to score statistically significantly higher than the comparison for depressive symptoms in the HADS Depression subscale ( $P = 0.041$ ). As a conclusion, we found no convincing association between HG and anxiety disorder, depressive disorder, and marital satisfaction, but women with HG statistically significantly reported more depressive symptoms than women who were not diagnosed with HG.

Symposium | Cultural Psychiatry : [Symposium 58] 25th Anniversary of the Korea-Japan Young Psychiatrists Association (KJYPA)-Friendship and Research Collaboration

2025年9月27日(土) 9:00 ~ 10:30 Session Room 5 (Conference Room A)

## [Symposium 58] 25th Anniversary of the Korea-Japan Young Psychiatrists Association (KJYPA)-Friendship and Research Collaboration

Moderator: Takahiro A. Kato (Department of Psychiatry, Hokkaido University Graduate School of Medicine), Seok Woo Moon (Konkuk University Chungju Hospital)

Discussant: Toshihide Kuroki

[SY-58]

25th Anniversary of the Korea-Japan Young Psychiatrists Association (KJYPA)-Friendship and Research Collaboration

Takahiro A. Kato<sup>1</sup>, Moon Seok Woo<sup>2</sup>, Muneyuki Suzuki<sup>3</sup>, Michiko Fujimoto<sup>4</sup>, Gi Whan Byeon<sup>5</sup>, Seng Yoon Kim<sup>6</sup> (1. Hokkaido University (Japan), 2. Konkuk University Chungju Hospital (Korea), 3. Fukuma Hospital (Japan), 4. Osaka University Graduate School of Medicine (Japan), 5. Department of Psychiatry, Seoul St. Mary's Hospital, College of Medicine, The Catholic University of Korea (Korea), 6. Daegu Catholic University School of Medicine (Korea))

[SY-58-01]

The academic solidarity and friendship between Japan & Korea (KJYPA)

\*SEOK WOO MOON<sup>1</sup> (1. KONKUK UNIVERSITY MEDICAL COLLEGE (Korea))

[SY-58-02]

Korea Japan Young Psychiatrists' Conference (KJYPC) is a group cultural psychotherapy session for Korean and Japanese psychiatrists.

\*Muneyuki Suzuki<sup>1</sup> (1. Fukuma Hospital (Japan))

[SY-58-03]

Trends in cultural psychiatry in the Korea-Japan Young Psychiatrists' Conference

\*Michiko Fujimoto<sup>1</sup> (1. Health Care Division, Health and Counseling Center, The University of Osaka (Japan))

[SY-58-04]

Differential Effects of Soluble and Plaque Amyloid on Late-Life Depression: The Moderating Role of Tau Pathology

\*Giwhan Byeon<sup>1</sup>, Su Hyung Kim<sup>2</sup>, Sunghwan Kim<sup>3</sup>, Seunggyun Ha<sup>4</sup>, Yoo Hyun Um<sup>2</sup>, Sheng-Min Wang<sup>3</sup>, Hyun Kook Lim<sup>3,5,6</sup>, Dong Woo Kang<sup>1</sup> (1. Department of Psychiatry, Seoul St. Mary's Hospital, College of Medicine, The Catholic University of Korea, Seoul, Republic of Korea (Korea), 2. Department of Psychiatry, St. Vincent's Hospital, College of Medicine, The Catholic University of Korea, Seoul, Republic of Korea (Korea), 3. Department of Psychiatry, Yeouido St. Mary's Hospital, College of Medicine, The Catholic University of Korea, Seoul, Republic of Korea (Korea), 4. Division of Nuclear Medicine, Department of Radiology, Seoul St. Mary's Hospital, College of Medicine, The Catholic University of Korea, Seoul, Republic of Korea (Korea), 5. Research Institute, NEUROPHET Inc.; Seoul, Republic of Korea (Korea), 6. CMC Institute for Basic Medical Science, the Catholic Medical Center of The Catholic University of Korea, Seoul, Republic of Korea (Korea))

[SY-58-05]

Hikikomori or Early-Onset Schizophrenia? Diagnostic and Therapeutic Considerations in Adolescent Social Withdrawal – A Case-Based Review

\*Seng Yoon Kim<sup>1</sup>, Jung Yeon Moon<sup>1</sup>, Tae Young Choi<sup>1</sup> (1. Daegu Catholic University School of Medicine (Korea))



Symposium | Cultural Psychiatry : [Symposium 58] 25th Anniversary of the Korea-Japan Young Psychiatrists Association (KJYPA)-Friendship and Research Collaboration

2025年9月27日(土) 9:00 ~ 10:30 Session Room 5 (Conference Room A)

## [Symposium 58] 25th Anniversary of the Korea-Japan Young Psychiatrists Association (KJYPA)-Friendship and Research Collaboration

Moderator: Takahiro A. Kato (Department of Psychiatry, Hokkaido University Graduate School of Medicine), Seok Woo Moon (Konkuk University Chungju Hospital)

Discussant: Toshihide Kuroki

### [SY-58] 25th Anniversary of the Korea-Japan Young Psychiatrists Association (KJYPA)-Friendship and Research Collaboration

Takahiro A. Kato<sup>1</sup>, Moon Seok Woo<sup>2</sup>, Muneyuki Suzuki<sup>3</sup>, Michiko Fujimoto<sup>4</sup>, Gi Whan Byeon<sup>5</sup>, Seng Yoon Kim<sup>6</sup> (1. Hokkaido University (Japan), 2. Konkuk University Chungju Hospital (Korea), 3. Fukuma Hospital (Japan), 4. Osaka University Graduate School of Medicine (Japan), 5. Department of Psychiatry, Seoul St. Mary's Hospital, College of Medicine, The Catholic University of Korea (Korea), 6. Daegu Catholic University School of Medicine (Korea))

キーワード : Korea-Japan Young Psychiatrists Association (KJYPA)、Korea、Japan、Hikikomori、Dementia

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25th Anniversary of the Korea-Japan Young Psychiatrists Association (KJYPA)-Friendship and Research Collaboration

Symposium | Cultural Psychiatry : [Symposium 58] 25th Anniversary of the Korea-Japan Young Psychiatrists Association (KJYPA)-Friendship and Research Collaboration

2025年9月27日(土) 9:00 ~ 10:30 Session Room 5 (Conference Room A)

## [Symposium 58] 25th Anniversary of the Korea-Japan Young Psychiatrists Association (KJYPA)-Friendship and Research Collaboration

Moderator: Takahiro A. Kato (Department of Psychiatry, Hokkaido University Graduate School of Medicine), Seok Woo Moon (Konkuk University Chungju Hospital)

Discussant: Toshihide Kuroki

### [SY-58-01] The academic solidarity and friendship between Japan & Korea (KJYPA)

\*SEOK WOO MOON<sup>1</sup> (1. KONKUK UNIVERSITY MEDICAL COLLEGE (Korea))

キーワード : international exchange、 academic solidarity、 Young psychiatrists

This international academic meeting between two countries was founded by Professor Min Byung Kun of Korea and Professor Masahisa Nishizono of Japan, who hoped that psychiatrists from both countries would become friends and continue academic exchanges by opening a Korean-Japanese society. Thus, the first Korea-Japanese Young Psychiatrists' Conference (KJYPC) was held in Fukuoka, Japan in 2000 under the name of "The Joint Workshop for Psychiatric Residents of Japan and Korea." Since then, this conference has been held alternately in Korea and Japan every year. At the request of Professor Min, who has emphasized the leadership of young psychiatrists, the OB members of both countries have been the main organizers of the conference since 2014, which has deepened mutual understanding and friendship between Japan and Korea in the overall field of psychiatry. As we enter the era of the 4th industrial revolution, international academic exchanges are becoming more active in all fields, and the field of psychiatry is no exception. As an international gathering that is conducted with friendship, the Korea-Japan Young Psychiatrists' Association (KJYPA) has quietly continued its role through academic exchanges for more than 20 years. Now, this KJYPA conference has become a meeting led by Professor Takahiro Kato of Japan and Professor Moon Seok Woo of Korea, who are the moderators today who have inherited the great will of the two founders. We sincerely hope that this KJYPC will become even more meaningful based on the academic solidarity and friendship that have been built between Japan and Korea.

Symposium | Cultural Psychiatry : [Symposium 58] 25th Anniversary of the Korea-Japan Young Psychiatrists Association (KJYPA)-Friendship and Research Collaboration

2025年9月27日(土) 9:00 ~ 10:30 Session Room 5 (Conference Room A)

## [Symposium 58] 25th Anniversary of the Korea-Japan Young Psychiatrists Association (KJYPA)-Friendship and Research Collaboration

Moderator: Takahiro A. Kato (Department of Psychiatry, Hokkaido University Graduate School of Medicine), Seok Woo Moon (Konkuk University Chungju Hospital)

Discussant: Toshihide Kuroki

[SY-58-02] Korea Japan Young Psychiatrists' Conference (KJYPC) is a group cultural psychotherapy session for Korean and Japanese psychiatrists.

\*Muneyuki Suzuki<sup>1</sup> (1. Fukuma Hospital (Japan))

キーワード : Personal cultural experience、Political tensions between neighboring countries、Personal close relationship、Intimate community of fellow professionals、Group cultural psychotherapy

KJYPC originated from the meeting and exchange between Professor Min Byung Kun and Professor Masahisa Nishizono. The two had strong feelings for each other's countries based on their personal experiences during World War II, and they were leaders who played pioneering roles in the development of psychiatry in their respective countries, instantly becoming close friends at the first encounter. They wanted to spread their close relationship to future generations. In 2000, a joint workshop for young Korean and Japanese psychiatrists started. Dr. Sasaki Yūnoshin, the director of Fukuma Hospital, who had lived in Korea before World War II, also fully supported the meeting. Exchanges between psychiatrists from the two countries blossomed, both on an individual level and on a group level. I, the presentor, participated firstly in 2009. It was deeply impressive experience that being embraced by this very intimate group despite being abroad. I was attracted to the community of fellow professionals from neighbouring countries and have continued to participate every year. With the retirement of the two leaders, young psychiatrists have taken the lead in running the conference since 2013. Despite political tensions and the COVID-19 pandemic, this group continues to this day. This meeting is like a group cultural psychotherapy session designed for psychiatrists from both countries. In this presentation, I would like to discuss the significance of this meeting for participants and tips for running it.

Symposium | Cultural Psychiatry : [Symposium 58] 25th Anniversary of the Korea-Japan Young Psychiatrists Association (KJYPA)-Friendship and Research Collaboration

2025年9月27日(土) 9:00 ~ 10:30 Session Room 5 (Conference Room A)

## [Symposium 58] 25th Anniversary of the Korea-Japan Young Psychiatrists Association (KJYPA)-Friendship and Research Collaboration

Moderator: Takahiro A. Kato (Department of Psychiatry, Hokkaido University Graduate School of Medicine), Seok Woo Moon (Konkuk University Chungju Hospital)  
 Discussant: Toshihide Kuroki

### [SY-58-03] Trends in cultural psychiatry in the Korea-Japan Young Psychiatrists' Conference

\*Michiko Fujimoto<sup>1</sup> (1. Health Care Division, Health and Counseling Center, The University of Osaka (Japan))

キーワード : Korea-Japan Young Psychiatrists' Conference、Cultural Psychiatry、Korea-Japan Young Psychiatrists Academy

The Korea-Japan Young Psychiatrists' Conference (KJYPC) was originally established by Prof. Byung Kun Min and Prof. Masahisa Nishizono as the Joint Workshop for Psychiatric Residents of Korea & Japan. Afterwards, the Korea-Japan Young Psychiatrists Academy has held the conference every year as the organizer since 2013. The advantage of the KJYPC is the community mainly for the young psychiatrists who have promising possibilities in the future, and the face-to-face conference where the participants have a fruitful time. The presentation topics that showed the trends in psychiatry in Korea and Japan were various and different for these 20 years. The similarity and the difference of the psychiatric issues between Korea and Japan are affected by their cultures. The educational system for psychiatrists is also partially different between Korea and Japan. The KJYPC gives the good opportunity for young psychiatrists to know the cultural psychiatry in Korea and Japan, to discuss the psychiatric topics in the clinical practice, and to understand the persons one another beyond the country. In the presentation, the cultural effect on mental health in Japan will be also discussed.

Symposium | Cultural Psychiatry : [Symposium 58] 25th Anniversary of the Korea-Japan Young Psychiatrists Association (KJYPA)-Friendship and Research Collaboration

2025年9月27日(土) 9:00 ~ 10:30 Session Room 5 (Conference Room A)

## [Symposium 58] 25th Anniversary of the Korea-Japan Young Psychiatrists Association (KJYPA)-Friendship and Research Collaboration

Moderator: Takahiro A. Kato (Department of Psychiatry, Hokkaido University Graduate School of Medicine), Seok Woo Moon (Konkuk University Chungju Hospital)

Discussant: Toshihide Kuroki

### [SY-58-04] Differential Effects of Soluble and Plaque Amyloid on Late-Life Depression: The Moderating Role of Tau Pathology

\*Gihwan Byeon<sup>1</sup>, Su Hyung Kim<sup>2</sup>, Sunghwan Kim<sup>3</sup>, Seunggyun Ha<sup>4</sup>, Yoo Hyun Um<sup>2</sup>, Sheng-Min Wang<sup>3</sup>, Hyun Kook Lim<sup>3,5,6</sup>, Dong Woo Kang<sup>1</sup> (1. Department of Psychiatry, Seoul St. Mary's Hospital, College of Medicine, The Catholic University of Korea, Seoul, Republic of Korea (Korea), 2. Department of Psychiatry, St. Vincent's Hospital, College of Medicine, The Catholic University of Korea, Seoul, Republic of Korea (Korea), 3. Department of Psychiatry, Yeouido St. Mary's Hospital, College of Medicine, The Catholic University of Korea, Seoul, Republic of Korea (Korea), 4. Division of Nuclear Medicine, Department of Radiology, Seoul St. Mary's Hospital, College of Medicine, The Catholic University of Korea, Seoul, Republic of Korea (Korea), 5. Research Institute, NEUROPHET Inc.; Seoul, Republic of Korea (Korea), 6. CMC Institute for Basic Medical Science, the Catholic Medical Center of The Catholic University of Korea, Seoul, Republic of Korea (Korea))

キーワード : Alzheimer Disease、Amyloid beta-Peptides、Tau Proteins、Depression

**Background:** Alzheimer's disease (AD) and late-life depression frequently co-occur, yet the interactive effects of AD pathologies on depressive symptoms remain unclear.

**Aims:** To examine how MDS-oligomerized amyloid-beta (OA $\beta$ ), amyloid PET, and tau PET are associated with depressive symptoms in older adults across the cognitive spectrum.

**Method:** We analyzed 103 participants (24 cognitively normal, 54 with mild cognitive impairment, 25 with amyloid-positive dementia) who underwent amyloid/tau PET, plasma MDS-OA $\beta$  measurement, and clinical depression assessments (CSDD, HAM-D, GDS-SV). Generalized linear models were used to assess interaction effects.

**Results:** A significant negative interaction was found between MDS-OA $\beta$  and tau PET SUVR on depression scores. MDS-OA $\beta$  levels were positively associated with depression only in the low-tau group, but negatively in the high-tau group. Global amyloid SUVR predicted greater depression severity only in the high-tau subgroup.

**Conclusions:** The associations between amyloid markers and depression differ by tau pathology stage. MDS-OA $\beta$  and Amyloid PET SUVR may reflect distinct mechanisms underlying depression in the AD continuum.

Symposium | Cultural Psychiatry : [Symposium 58] 25th Anniversary of the Korea-Japan Young Psychiatrists Association (KJYPA)-Friendship and Research Collaboration

2025年9月27日(土) 9:00 ~ 10:30 Session Room 5 (Conference Room A)

## [Symposium 58] 25th Anniversary of the Korea-Japan Young Psychiatrists Association (KJYPA)-Friendship and Research Collaboration

Moderator: Takahiro A. Kato (Department of Psychiatry, Hokkaido University Graduate School of Medicine), Seok Woo Moon (Konkuk University Chungju Hospital)  
 Discussant: Toshihide Kuroki

### [SY-58-05] Hikikomori or Early-Onset Schizophrenia? Diagnostic and Therapeutic Considerations in Adolescent Social Withdrawal – A Case-Based Review

\*Seng Yoon Kim<sup>1</sup>, Jung Yeon Moon<sup>1</sup>, Tae Young Choi<sup>1</sup> (1. Daegu Catholic University School of Medicine (Korea))

キーワード : Early onset schizophrenia、Hikikomori、Social withdrawal

#### **Abstract:**

Early-onset schizophrenia and hikikomori are two distinct yet interrelated phenomena that primarily affect adolescents and young adults. This case-based review explores these complexities through a clinical scenario, focusing on early recognition, assessment, and targeted pharmacological intervention.

#### **Case:**

A 17-year-old high school student was brought in by his parents after over a year of progressive social isolation, withdrawal from school, and confinement to his room. He exhibited minimal verbal communication, irregular sleep patterns, and functional decline. Initially, the clinical picture suggested hikikomori as prominent psychotic symptoms were not observed. Although there were persecutory ideas—such as believing that school friends were talking behind his back—they were not bizarre in nature. However, subtle behavioral cues—including occasional muttering, suspiciousness, and impaired emotional responsiveness—prompted further psychiatric evaluation. Over weeks of observation and structured interviews, signs consistent with early-onset schizophrenia emerged, including mild thought disorganization and negative symptoms. A diagnosis of schizophrenia was made. The patient started on aripiprazole but soon began to complain of akathisia. Although propranolol was administered, there was no improvement, and the patient subsequently reported a depressed mood and suicidal ideation. Therefore, the medication was switched to paliperidone. Following this change, the patient showed improvement in akathisia, as well as gradual enhancement in engagement, affect, and social functioning. After discharge, the patient has continued outpatient appointments, adhere to prescribed medications, Although the patient's level of functioning has declined compared to previous assessments, he is still able to maintain a certain degree of daily life while continuing to work.

#### **Conclusion:**

This case highlights the diagnostic complexity in distinguishing hikikomori from early-onset schizophrenia in adolescents. Overlapping features such as isolation and functional decline can obscure underlying psychotic processes, particularly when positive symptoms are subtle or delayed. Early identification and intervention are crucial, as timely antipsychotic treatment may significantly alter the illness trajectory.

Symposium | Trauma : [Symposium 59] Cultural Responses to WW2 in Japan: Interdisciplinary Reflections and Intercultural Dialogue

2025年9月27日(土) 9:00 ~ 10:30 Session Room 6 (Conference Room B)

## [Symposium 59] Cultural Responses to WW2 in Japan: Interdisciplinary Reflections and Intercultural Dialogue

Moderator: Yuki Imoto (Keio University), Kai Ogimoto (Sagami Women's University) Discussant: Koh Eugen (University of Melbourne)

Discussant: Eugen Koh (University of Melbourne)

[SY-59]

Cultural Responses to WW2 in Japan: Interdisciplinary Reflections and Intercultural Dialogue

Ritsu Yonekura<sup>1</sup>, Chizuko Tezuka<sup>2</sup>, Kai Ogimoto<sup>3</sup>, Eugen Koh<sup>4</sup> (1. Nihon University (Japan), 2. Independent (Japan), 3. Sagami Women's University (Japan), 4. Australian National University (Australia))

[SY-59-01]

Bias toward “Narratives of Sacrifice” in Japanese “August Journalism” and Collective Memory of War in Postwar Japan

\*Ritsu Yonekura<sup>1</sup> (1. Nihon University Department of Law (Japan))

[SY-59-02]

Japanese Narrative of World War 2 through the Cultural Lens of Japanese Tanka: Tragic Acceptance of War Realities and Its Implications

\*Chizuko Tezuka<sup>1</sup> (1. formerly Keio University (Japan))

[SY-59-03]

On the Myth of "Izanaki and Izanami": Mythological Thinking and Inability to Mourn after WW2 in Japan

\*Kai Ogimoto<sup>1</sup> (1. Sagami Women's University (Japan))

[SY-59-04]

Cultural work in the healing of cultural trauma from the Second World War

Discussant: Eugen Koh<sup>1</sup> (1. University of Melbourne (Australia))

Symposium | Trauma : [Symposium 59] Cultural Responses to WW2 in Japan: Interdisciplinary Reflections and Intercultural Dialogue

2025年9月27日(土) 9:00 ~ 10:30 Session Room 6 (Conference Room B)

## [Symposium 59] Cultural Responses to WW2 in Japan: Interdisciplinary Reflections and Intercultural Dialogue

Moderator: Yuki Imoto (Keio University), Kai Ogimoto (Sagami Women's University) Discussant: Koh Eugen (University of Melbourne)  
Discussant: Eugen Koh (University of Melbourne)

### [SY-59] Cultural Responses to WW2 in Japan: Interdisciplinary Reflections and Intercultural Dialogue

Ritsu Yonekura<sup>1</sup>, Chizuko Tezuka<sup>2</sup>, Kai Ogimoto<sup>3</sup>, Eugen Koh<sup>4</sup> (1. Nihon University (Japan), 2. Independent (Japan), 3. Sagami Women's University (Japan), 4. Australian National University (Australia))

Global conflicts and regional tensions evoke cultural responses from the past, particularly WW2. Our panel aims to illuminate these historical cultural reactions and their implications in contemporary contexts, fostering a dialogue.

Cultural responses to collective experiences like war can often be biased and distorted. Japanese narratives focus on the tragedies of innocent victims while they leave out the victims of Japanese colonialism and aggression abroad (Hein & Selden, 1997). It is essential to explore both victimization and perpetration aspects of the Japanese wartime experiences and to discuss the responsibilities of Japanese citizens regarding WW2.

1. Prof. Ritsu Yonekura, a journalist from Nihon University will explore public narratives in TV Journalism, focusing on programs aired on and around August 15, the Japanese Commemoration Day of the End of the War.
2. Chizuko Tezuka, a former professor at Keio University, will analyze narratives expressed in Tanka, a form of uniquely Japanese short poetry consisting of just 31 syllables. These poems were composed both on battlefields abroad and Japanese islands during the war and postwar period.
3. Kai Ogimoto, an associate professor at Sagami Women's University and an psychoanalyst in training, will investigate the deeply personal narrative of war-related trauma and guilt experienced in psychotherapy, analyzing through lens of the Japanese mythology of Izanaki and Izanami.

To enrich our reflections and broaden our discussion to include perspectives from beyond Japan, we invite Dr. Eugen Koh, a Chinese Australian psychiatrist renowned for his concepts of “cultural trauma” and its associated “cultural work,” to be our discussant. We sincerely hope that open dialogues across cultural borders will be fostered through the active participation of everyone in the audience. Yuki Imoto, an anthropologist associate professor of Keio University and Kai Okimoto will moderate the session.

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2025年9月27日(土) 9:00 ~ 10:30 Session Room 6 (Conference Room B)

## [Symposium 59] Cultural Responses to WW2 in Japan: Interdisciplinary Reflections and Intercultural Dialogue

Moderator: Yuki Imoto (Keio University), Kai Ogimoto (Sagami Women's University) Discussant: Koh Eugen (University of Melbourne)

Discussant: Eugen Koh (University of Melbourne)

### [SY-59-01] Bias toward “Narratives of Sacrifice” in Japanese “August Journalism” and Collective Memory of War in Postwar Japan

\*Ritsu Yonekura<sup>1</sup> (1. Nihon University Department of Law (Japan))

キーワード : August Journalism、Collective Memory、responsibility for the war

In Japan, it has become customary for television and newspapers to concentrate on war-related topics every August, a practice known as "August journalism. The results of several surveys indicate "August journalism" is deeply related to the formation of Japanese people's views and images of war. After a long time has passed since the war, people are now learning more and more about the war indirectly through the media, and August journalism is playing an increasingly important role.

August journalism has focused on themes related to the "damage" and "sacrifice" of the Japanese people in the war, such as the atomic bombings of Hiroshima and Nagasaki, air raids in Tokyo and other cities. On the other hand, "August Journalism" has only slightly focused on themes related to "harm" such as Japan's invasion of Asia, colonial rule, forced labor, and comfort women. This tendency of "August journalism" to emphasize the 'damage' and to put the "harm" in the background has caused a serious bias in the Japanese people's view of war and their perception of history.

Understanding themselves as "victims" of the war, the Japanese have avoided clarifying why and who started the war or thinking deeply about the responsibility for the war. This has often been the cause of sharp tensions between Japan and China, Korea, and other Asian countries during the long postwar period. I would like to reconsider the merits and demerits of "August journalism," taking into account the content of the "August Journalism" in 2025, the major milestone year of the "80-year postwar period.

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Moderator: Yuki Imoto (Keio University), Kai Ogimoto (Sagami Women's University) Discussant: Koh Eugen (University of Melbourne)

Discussant: Eugen Koh (University of Melbourne)

### [SY-59-02] Japanese Narrative of World War 2 through the Cultural Lens of Japanese Tanka: Tragic Acceptance of War Realities and Its Implications

\*Chizuko Tezuka<sup>1</sup> (1. formerly Keio University (Japan))

As the fierce resistance and eventual cancellation of the planned Enola Gay exhibition, which attempted to incorporate human suffering in Hiroshima after the atomic bombing around the 50th anniversary of the end of World War 2, starkly illuminates, the American collective narrative of the war tends to justify that bombing without taking the perspective of the victims. Similarly unbalanced yet in the opposite direction, the Japanese public narrative of the war with a focus on victimization still exists in Japan as the 80th anniversary is approaching.

This study is a small but sincere effort to reflect on Japanese narratives in a self-introspective manner by exploring tanka, a uniquely Japanese short poetry form consisting of just 31 syllables, composed on the battlefields abroad and the home front in Japan during and after the war by tanka poets. They either fought to kill or be killed as officers/soldiers or survived the bombing while witnessing painful death all around them as civilians. I also include tanka by other poets who did not participate in battlefield killing or experience the atomic bombing yet continued to ponder the grave implications of the war for themselves and Japan long after it ended.

Major themes from these tanka are first, an absence of anger towards the U.S.A.; second, empathic sadness for the atomic bombing victims and their last shining moments; third, an outcry against war's cruelty coupled with repentance; and lastly, lingering sorrowful helplessness and emptiness in the peaceful postwar period. By using Japanese cultural concepts/attitudes of *shikata ga nai* (it cannot be helped), mono no aware (sorrowful appreciation of the impermanence of life/beauty), and non-confrontational conflict resolution style, I will try to elucidate these themes.

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Moderator: Yuki Imoto (Keio University), Kai Ogimoto (Sagami Women's University) Discussant: Koh Eugen (University of Melbourne)

Discussant: Eugen Koh (University of Melbourne)

### [SY-59-03] On the Myth of "Izanaki and Izanami": Mythological Thinking and Inability to Mourn after WW2 in Japan

\*Kai Ogimoto<sup>1</sup> (1. Sagami Women's University (Japan))

キーワード : inability to mourn、Japanese mythology、social unconscious、war responsibility、psychoanalysis

The German psychoanalysts Mitscherlich and Mitscherlich applied S. Freud's theory of the process of mourning to their analysis of postwar German society. The Mitscherlichs pointed out that the German people had not begun to mourn the loss of Adolf Hitler, their highest authority. In their manic rush to economic activity, they considered that by not even beginning the work of mourning, people had failed to confront the crimes of genocide, such as the invasions and holocausts (Mitscherlich & Mitscherlich, 1967). The author believes that this structure also occurred in Japan, where "Inability to mourn" the loss of the Emperor as a living god after WW2 may explain the collective mode of reaction postwar Japan, including the country's inability to accept the atrocities it has committed(Ogimoto & Plaenkers, 2024). Mythology is one way to explore the social unconscious: "Society behaves as a cohesive entity under the influence of myths and stories, and iteratively repeats the themes described in the myths and stories" (Hopper & Weinberg, 2011). Psychoanalyst Osamu Kitayama analyzes Japanese mythology "Izanaki-Izanami-story" in Kojiki (Kitayama & Hashimoto, 2009). The myth is a tragedy in which two couple gods cannot mourn the other's loss and blame each other. The male god never reflects his commitment to humiliation towards the female god. He does not take responsibility. What the author has learned from experience of training and practice in psychoanalysis and psychotherapy is that when emotionally loaded persons come face to face, the guilt or shame of perpetration is easily projected onto the other person. Facing one's own evil or sadism requires a safe space where one is allowed to take the time to explore it and not be shamed or asked for formalistic redemption.

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Discussant: Eugen Koh (University of Melbourne)

### [SY-59-04] Cultural work in the healing of cultural trauma from the Second World War

Discussant: Eugen Koh<sup>1</sup> (1. University of Melbourne (Australia))

キーワード : trauma、culture、war

The generation of Japanese that experienced the direct impact of the Second World War, suffered a massive collective trauma, that decades later, becomes embedded in their shared consciousness, which is their culture. If we use *trauma* in its original Greek meaning - injury or wound, we might say the culture has been injured or wounded. Working from psychodynamic perspectives, which emphasises people's experiences, I define trauma as *experiences that cannot be processed*. I have, over the past decade, proposed the concept of cultural trauma - defined as '*as the distortion or destruction to a culture resulting from widely shared experiences that cannot or have not been processed*'.

These changes to culture affect the behaviour of individuals and large groups, including social institutions and processes, and government policies and operations. The impact of cultural trauma on a society continue for generations if it remains unexamined and unaddressed.

These presentations examine the impact of Japan's traumatic experience of the war on its culture - a process that I have called *cultural work*. Chizuko Tezuka's exploration of the use of a form of Japanese poetry called *tanka* to deeply "self-introspect" on the war demonstrate how such cultural devises might be utilised to explore experiences that are difficult to describe as a narrative. The critical examination of Japanese media's bias of war narratives by Ritsu Yonekura is courageous, and desperately needed, because the shame and humiliation from the war has created a conspiracy of silence around what really happened. Kai Ogimoto explored the pain of Japan's experience even more deeply through a psychoanalytic consideration of an ancient Japanese mythology. These are important contributions to the healing of Japan's cultural trauma from the War.

I hope the countries that Japan invaded will undertake similar cultural work to address their cultural trauma

**Symposium | Suicide prevention : [Symposium 60] Suicide and Psychotherapy****2025年9月27日(土) 9:00 ~ 10:30** **Session Room 7 (Conference Room C)****[Symposium 60] Suicide and Psychotherapy**

Moderator: Naoe Okamura (Hatsuishi Hospital)

**[SY-60]****Suicide and Psychotherapy**

Nobuaki Eto<sup>5,6</sup>, Rachel Gibbons<sup>1,3</sup>, Jo O'Reilly<sup>1,2,3</sup>, In-Soo LEE<sup>4</sup> (1. The Royal College of Psychiatrists (UK), 2. Medical Psychotherapy at the North London NHS Foundation Trust (UK), 3. British Psychoanalytic Society (UK), 4. Korean Psychoanalytic Center (Korea), 5. Fukuoka University (Japan), 6. Japan Psychoanalytic Society (Japan))

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**[SY-60-01]****Psychoanalytic assessment as postvention**

\*Nobuaki Eto<sup>1</sup> (1. Fukuoka University (Japan))

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**[SY-60-02]****The 'Truth' About Suicide: Insights and Challenges for Clinicians and the Bereaved**

\*Rachel Gibbons<sup>1</sup> (1. Royal College of Psychiatrists (UK))

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**[SY-60-03]****The containment of persecution and recovery of thought; the role of a psychodynamically informed risk panel when working with suicidal states of mind.**

\*Josephine Kate O'Reilly<sup>1</sup>, Rachel Gibbons<sup>1</sup>, Nobuaki eto (1. Royal College of Psychiatrists London (UK))

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**[SY-60-04]****Shame and the Unbearable Self:****Psychoanalytic Reflections on Suicidality in the Korean Context**

\*In-Soo Lee<sup>1</sup> (1. Korean Psychoanalytic Center (Korea))

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## Symposium | Suicide prevention : [Symposium 60] Suicide and Psychotherapy

2025年9月27日(土) 9:00 ~ 10:30 Session Room 7 (Conference Room C)

**[Symposium 60] Suicide and Psychotherapy**

Moderator: Naoe Okamura (Hatsuishi Hospital)

**[SY-60] Suicide and Psychotherapy**

Nobuaki Eto<sup>5,6</sup>, Rachel Gibbons<sup>1,3</sup>, Jo O'Reilly<sup>1,2,3</sup>, In-Soo LEE<sup>4</sup> (1. The Royal College of Psychiatrists (UK), 2. Medical Psychotherapy at the North London NHS Foundation Trust (UK), 3. British Psychoanalytic Society (UK), 4. Korean Psychoanalytic Center (Korea), 5. Fukuoka University (Japan), 6. Japan Psychoanalytic Society (Japan))

キーワード : Suicide prevention、Suicide survivor、Psychotherapy、Psychoanalysis

Suicide requires an interdisciplinary understanding that includes not only psychiatric, but also cultural, social, legal and ethical issues.

We live in a society that is threatened by rapid social change, war and disaster. Despite advances in biological psychiatry and various social initiatives to address suicide, suicide will never disappear.

In addition to public health approaches, there are also approaches to high-risk individuals that focus on medical care. Furthermore, it is also recognised as important to consider how to support the bereaved families of those who have committed suicide, as well as the medical staff who have lost patients due to suicide.

In this symposium, experts in psychoanalysis and psychodynamic psychiatry will discuss how to approach the issue of suicide. From the perspective of a psychoanalytic approach, understanding high-risk suicide patients will involve dealing with the issues such as unconscious destructive urges, envy, hatred, resistance to treatment, and the death drive. Those left bereaved by suicide suffer intense emotions such as the pain of loss, unconscious guilt, shame, a sense of persecution, and self-punishment.

In the presence of these practical difficulties and difficult emotions, it is also important to consider how to support the patient and how to manage the relationship between the therapist and patient so that they can both survive. It is also inevitable that we will consider the therapist's countertransference.

The theme is how the therapist can handle the complex and difficult issue of suicide, as described above, and how they can continue to perform their functions while overcoming their pain. We would like to confirm what psychotherapy can do for suicide and deepen our thinking about the challenges that still exist.

## Symposium | Suicide prevention : [Symposium 60] Suicide and Psychotherapy

2025年9月27日(土) 9:00 ~ 10:30 Session Room 7 (Conference Room C)

**[Symposium 60] Suicide and Psychotherapy**

Moderator: Naoe Okamura (Hatsuishi Hospital)

**[SY-60-01] Psychoanalytic assessment as postvention**\*Nobuaki Eto<sup>1</sup> (1. Fukuoka University (Japan))

キーワード : Suicide survivor、postvention、psychoanalytic approach

When a member of an organisation committed suicide, it has a significant impact on both the organisation and individuals. A psychoanalytic approach is useful in such situations. Events and their effects are often absorbed into personal stories. The goal of intervention is to be able to distinguish between the two.

**Case Ms.A**

At a hospital, a staff member committed suicide. The next day, when he did not show up for work, his colleague A visited his home and found the man hanging in the bathroom. Immediately after the suicide, the hospital administrator contacted me and asked for advice on how to respond. I proposed holding regular after-work meetings with staff from relevant departments, and this was implemented. In addition to these meetings, individual support was continued for A. She was deeply traumatised, unable to sleep due to vivid images of the deceased man and parts of his body. Four days later, she was referred to a psychiatrist and decided to take a leave of absence from work. A became aware that the workplace itself was causing significant mental stress. I proposed four sessions (60 minutes each) of psychoanalytic psychotherapy assessment the following week, and she agreed. During these interviews, she reflected on the difficulties she had faced in her life since childhood. Her parents did not get along. Feeling suffocated within the family, A wanted to leave home as soon as possible. She got married, but divorced due to her husband's large debts and violence. At work, she had been promoted and often struggled with mentoring junior colleagues. Due to an ongoing organisational restructuring, she felt that the workplace had lost its former 'homey atmosphere.' After undergoing an assessment session, she decided to return to work.

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## [Symposium 60] Suicide and Psychotherapy

Moderator: Naoe Okamura (Hatsuishi Hospital)

### [SY-60-02] The 'Truth' About Suicide: Insights and Challenges for Clinicians and the Bereaved

\*Rachel Gibbons<sup>1</sup> (1. Royal College of Psychiatrists (UK))

キーワード : suicide、suicide bereavement、Clinician trauma

This presentation confronts the complex and often misunderstood nature of suicide, drawing on 16 years of research, clinical experience, and work with those bereaved by suicide. Based on the presenter's widely acclaimed talk and accompanied by the influential paper "*Eight Truths About Suicide*" (published in the *Psychiatric Bulletin*, September 2023), this session seeks to deepen the discussion on suicide, challenge conventional understandings, and bring solace to clinicians and the bereaved alike.

The presenter will begin by sharing her personal experience of losing three patients to suicide within her first three months as a consultant psychiatrist. These events, and her subsequent formation of a confidential peer support group, shaped her career and ignited a lifelong study into the profound impact of suicide on both clinicians and the bereaved. Having heard over 2000 accounts of suicide loss, the presenter will share recurring patterns or 'truths' that challenge traditional approaches to suicide prevention and understanding.

Through this lens, the session will address critical questions: What leads someone to take their own life? Can suicide be prevented?

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## [Symposium 60] Suicide and Psychotherapy

Moderator: Naoe Okamura (Hatsuishi Hospital)

[SY-60-03] The containment of persecution and recovery of thought; the role of a psychodynamically informed risk panel when working with suicidal states of mind.

\*Josephine Kate O'Reilly<sup>1</sup>, Rachel Gibbons<sup>1</sup>, Nobuaki eto (1. Royal College of Psychiatrists London (UK))

キーワード : Suicide、Containment of anxiety、Projection、Reflective Practice

This presentation will describe the impact of working with suicidal states of mind upon staff and mental health organisations, how fear and persecution can paralyse thought and iatrogenic harm and vicarious trauma can occur if staff are not adequately supported in this work. The capacity of staff to contain anxiety is dependent upon the containment offered by the organisation within which they work. The development of an innovative psychodynamically informed risk panel within an NHS mental health trust will be described as a powerful intervention in strengthening clinical understanding and the capacity of the organisation to contain anxiety in order for staff to offer compassionate and patient centred care, and to thrive in their work. How the panel is run and its central aims will be illustrated with clinical examples from a range of mental health teams within the NHS. The contributions of key psychoanalytic concepts in this work will be described.

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**[Symposium 60] Suicide and Psychotherapy**

Moderator: Naoe Okamura (Hatsuishi Hospital)

**[SY-60-04] Shame and the Unbearable Self:  
Psychoanalytic Reflections on Suicidality in the Korean Context**\*In-Soo Lee<sup>1</sup> (1. Korean Psychoanalytic Center (Korea))

キーワード : Suicide、Shame、Confucianism、Korean Culture

South Korea, despite its rapid modernization and global cultural influence, continues to experience the highest suicide rates among OECD nations. This paradox reveals a cultural psyche shaped by Confucian hierarchies, repression of aggression, and a pervasive culture of shame. This paper explores how internalized shame and narcissistic dynamics contribute to suicidality in the Korean context. Using a detailed clinical case of a 23-year-old woman with chronic suicidal ideation, I examine how unbearable self-states are formed when perfectionistic ideals collide with deep fears of being a burden, failing to meet ego ideals, or violating cultural taboos. The patient's apparent "shamelessness" masked a profound narcissistic defense against shame, which, when accessed, opened new therapeutic possibilities. Her suicidal fantasies functioned as omnipotent escape mechanisms, preserving a fragile grandiose self against perceived psychic annihilation. Through psychoanalytic work, she gradually began to accept the reality of human limitations, moving beyond a dichotomous, perfectionistic worldview and softening narcissistic defenses. This presentation argues that shame in Korean culture is intensified by collective identity, intergenerational trauma, and the cultural imperative to maintain emotional restraint and social conformity. These dynamics can hinder emotional development and lead to a split between the actual and idealized self. The psychoanalytic process must account for this heightened shame sensitivity by providing empathic attunement and a secure therapeutic space. Doing so allows the dissociated grandiose self to evolve into a more integrated, realistic ideal self—thereby reducing the patient's vulnerability to narcissistic collapse and suicidality. This paper offers a culturally grounded psychoanalytic framework for understanding and treating suicidality in Korea, where shame, rather than guilt, often dominates the emotional landscape.

Symposium | Forensic Psychiatry and Violence : [Symposium 61] Ethnic diversity, psychiatric conditions, and transgressive behavior: Insights from cases in forensic mental health care

2025年9月27日(土) 9:00 ~ 10:30 Session Room 8 (Meeting Room 1)

## [Symposium 61] Ethnic diversity, psychiatric conditions, and transgressive behavior: Insights from cases in forensic mental health care

Moderator: Charlotte Clous (Centre for Transcultural Psychiatry Veldzicht), Marjolein De Pau (Department of Special Needs Education, Ghent University)

[SY-61]

Ethnic diversity, psychiatric conditions, and transgressive behavior: Insights from cases in forensic mental health care

Charlotte Clous<sup>2</sup>, Marjolein De Pau<sup>1</sup>, Morten Deleuran Terkildsen<sup>3,4,5</sup>, Ilaria Rossetto<sup>6</sup> (1. Department of Special Needs Education, Ghent University (Belgium), 2. Centre for Transcultural Psychiatry Veldzicht (Netherlands), 3. Department of Forensic Psychiatry, Aarhus University (Denmark), 4. Institute of Clinical Medicine, Health, Aarhus University (Denmark), 5. DEFACUM - Public Health Research (Denmark), 6. University of Milan, School of Medicine (Italy))

[SY-61-01]

Exploring the impact of mandatory repatriation on cultural identity and pathways to recovery of migrant forensic psychiatric patients in a Dutch Centre for Transcultural Psychiatry.

\*Charlotte Clous<sup>1,2</sup>, Hannah Jongsma<sup>1,2</sup>, Aniek Van Weeghel<sup>5,6</sup>, Ria Reis<sup>4,3</sup>, Wim Veling<sup>1</sup> (1. University Medical Centre Groningen (UMCG) (Netherlands), 2. Centre for Transcultural Psychiatry Veldzicht (Netherlands), 3. Leiden University Medical Centre (LUMC) (Netherlands), 4. Amsterdam institute for Global Health Development (AIGHD) (Netherlands), 5. University of Amsterdam (UvA) (Netherlands), 6. Arq Psychotrauma International (Netherlands))

[SY-61-02]

A Tapestry of Self: Laila's Intersectional Identity in Forensic Mental Health Care

\*Marjolein De Pau<sup>1</sup>, Tom Vander Beken<sup>1</sup>, Stijn Vandevelde<sup>1</sup>, Sara Rowaert<sup>1</sup> (1. Ghent University (Belgium))

[SY-61-03]

*Culture and Care in Practice: A Greenlandic Forensic Psychiatric Ward in Denmark*

\*Morten Deleuran Terkildsen<sup>1,2,4</sup>, Parnuna Heilmann<sup>3</sup>, Karen Aalling Mikkelsen<sup>1</sup>, Irene Thorsager Kruitbosch Jensen<sup>1</sup>, Ida Margrethe Nielsen<sup>1,3</sup>, Harry Kennedy<sup>1,2,5</sup>, Lisbeth Uhrskov Sørensen<sup>1,2</sup> (1. Department of Forensic Psychiatry, Aarhus University Hospital Psychiatry, Denmark (Denmark), 2. Department of Clinical Medicine, Health, Aarhus University, Aarhus, Denmark (Denmark), 3. Psychiatric Area, Queen Ingrid's Hospital, Nuuk, Greenland (Greenland), 4. DEFACUM - Public Health Research, Aarhus, Denmark (Denmark), 5. Trinity College Dublin, Dublin (Ireland))

[SY-61-04]

Forensic Psychiatry and Migrant Populations in Italy: Clinical Challenges and Culturally Informed Response

\*Ilaria Rossetto<sup>1</sup>, Stefano Tambuzzi<sup>1</sup>, Cristina Cattaneo<sup>1</sup>, Lia Parente<sup>2</sup>, Felice Francesco Carabello<sup>2</sup> (1. University of Milan (Italy), 2. University of Bari (Italy))

Symposium | Forensic Psychiatry and Violence : [Symposium 61] Ethnic diversity, psychiatric conditions, and transgressive behavior: Insights from cases in forensic mental health care

2025年9月27日(土) 9:00 ~ 10:30 Session Room 8 (Meeting Room 1)

## [Symposium 61] Ethnic diversity, psychiatric conditions, and transgressive behavior: Insights from cases in forensic mental health care

Moderator: Charlotte Clous (Centre for Transcultural Psychiatry Veldzicht), Marjolein De Pau (Department of Special Needs Education, Ghent University)

### [SY-61] Ethnic diversity, psychiatric conditions, and transgressive behavior: Insights from cases in forensic mental health care

Charlotte Clous<sup>2</sup>, Marjolein De Pau<sup>1</sup>, Morten Deleuran Terkildsen<sup>3,4,5</sup>, Ilaria Rossetto<sup>6</sup> (1. Department of Special Needs Education, Ghent University (Belgium), 2. Centre for Transcultural Psychiatry Veldzicht (Netherlands), 3. Department of Forensic Psychiatry, Aarhus University (Denmark), 4. Institute of Clinical Medicine, Health, Aarhus University (Denmark), 5. DEFACUTUM - Public Health Research (Denmark), 6. University of Milan, School of Medicine (Italy))

キーワード : forensic mental health, ethnicity, culture

Forensic mental health care operates at the intersection of psychiatry and the criminal justice system, providing treatment for individuals whose mental health conditions have contributed to transgressive behavior. Ethnically diverse clients often face distinct challenges in (forensic) mental health care settings, where cultural differences, language barriers, and systemic biases can shape their experiences of care. While these settings can be sites of hope and recovery, they can also become sites of exclusion and despair where professionals struggle to navigate cultural complexity. This symposium explores the diverse experiences of both forensic clients and professionals in four European cases, analyzing how cultural identity, migration, and institutional practices influence pathways of forensic care and recovery. First, a retrospective study in an Italian forensic unit introduces us into differences in forensic pathways, legal status, and clinical outcomes between migrant and Italian national patients. Second, through a case-study from Belgium we illustrate how intersectional identity shapes experiences of mental health, transgressive behavior and forensic care. For the third presentation, we delve into cultural identity and recovery in the face of mandatory repatriation in a Dutch transcultural forensic clinic. Finally, we explore how culture and care are intertwined in practice in a Greenlandic forensic ward in Denmark. These cases clarify that understanding dynamics of culture and identification is crucial in forensic mental health care, as they are inherent to lived experiences of crime, mental illness and the provision of good care. They also reveal how discursive practices of difference have tangible effects on individuals' trajectories of recovery and desistance from transgressive behavior. The cases underscore the need for (forensic) mental health systems to adopt inclusive, strengths-based and culturally-sensitive approaches that recognize the diverse needs of clients. Through this discussion, we aim to promote greater dialogue between forensic mental health and the broader psychiatric field.

Symposium | Forensic Psychiatry and Violence : [Symposium 61] Ethnic diversity, psychiatric conditions, and transgressive behavior: Insights from cases in forensic mental health care

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Moderator: Charlotte Clous (Centre for Transcultural Psychiatry Veldzicht), Marjolein De Pau (Department of Special Needs Education, Ghent University)

[SY-61-01] Exploring the impact of mandatory repatriation on cultural identity and pathways to recovery of migrant forensic psychiatric patients in a Dutch Centre for Transcultural Psychiatry.

\*Charlotte Clous<sup>1,2</sup>, Hannah Jongsma<sup>1,2</sup>, Aniek Van Weeghel<sup>5,6</sup>, Ria Reis<sup>4,3</sup>, Wim Veling<sup>1</sup> (1. University Medical Centre Groningen (UMCG) (Netherlands), 2. Centre for Transcultural Psychiatry Veldzicht (Netherlands), 3. Leiden University Medical Centre (LUMC) (Netherlands), 4. Amsterdam institute for Global Health Development (AIGHD) (Netherlands), 5. University of Amsterdam (UvA) (Netherlands), 6. Arq Psychotrauma International (Netherlands))

キーワード : cultural psychiatry, ethnography, repatriation, cultural identity, recovery

Forensic psychiatric patients with a migration background in the Netherlands face unique challenges when their offences lead to revocation of residence rights, often resulting in repatriation to countries that may feel as alien to them as to their Dutch care providers. This ethnographic study explores how patients in a Dutch forensic transcultural psychiatric facility navigate these imposed repatriation perspectives, focusing on the negotiation of cultural identity and its impact on pathways to recovery. Through hospital ethnography we have examined how sociocultural identification processes influence recovery among ethnic minority forensic inpatients with pre-existing psychotic disorders. The study highlights how treatment progress is hindered by limited social leave and structural 'othering,' at the intersection of criminal and migration law. We discuss the role of discrimination and cultural identity as potential drivers of increased psychosis risk, extending beyond epidemiological frameworks to include lived experiences of inclusion and exclusion of people in closed forensic mental health care settings. Ethnic density theory frames how sociocultural inclusion can buffer against mental health deterioration, yet imposed multicultural environments and repatriation pressures limit possibilities for cultural expression. Our findings reveal complex patterns of cultural identity formation that challenge binary acculturation models and illustrate how vulnerable people display remarkable creativity, finding new ways to belong through cultural hybridization. By centering patients' voices in their interactions with staff and institutional values, we provide insight into the challenges and opportunities for culturally sensitive forensic mental healthcare. These results underscore the need for personalized, context-based care that integrates cultural identity negotiation and the structural realities faced by migrant patients. The findings may inform adaptations to clinical tools like the Cultural Formulation Interview to better address the nuanced needs of this vulnerable group.

Symposium | Forensic Psychiatry and Violence : [Symposium 61] Ethnic diversity, psychiatric conditions, and transgressive behavior: Insights from cases in forensic mental health care

2025年9月27日(土) 9:00 ~ 10:30 Session Room 8 (Meeting Room 1)

## [Symposium 61] Ethnic diversity, psychiatric conditions, and transgressive behavior: Insights from cases in forensic mental health care

Moderator: Charlotte Clous (Centre for Transcultural Psychiatry Veldzicht), Marjolein De Pau (Department of Special Needs Education, Ghent University)

### [SY-61-02] A Tapestry of Self: Laila's Intersectional Identity in Forensic Mental Health Care

\*Marjolein De Pau<sup>1</sup>, Tom Vander Beken<sup>1</sup>, Stijn Vandeveld<sup>1</sup>, Sara Rowaert<sup>1</sup> (1. Ghent University (Belgium))

キーワード : forensic mental health、ethnicity、intersectional identity、narrative portraiture

This presentation contributes to the symposium's focus on cultural identity and transgressive behavior in forensic mental health care by exploring how intersectional identities shape recovery processes within institutional settings. While ethnically diverse clients often encounter systemic and interpersonal barriers in forensic care, less is known about how they navigate these experiences in relation to their evolving sense of self. We present an in-depth case study using narrative portraiture—a relational, strengths-based methodology—to explore the lived experience of Laila, a young woman of Amazigh descent engaged in forensic mental health care in Belgium. Her story highlights how identity-related challenges—including migration history, gender, cultural hybridity, and institutional constraints—interact with processes of recovery and desistance. Rather than treating culture as a static trait or risk factor, this case reveals how identity is actively negotiated in and through relationships, institutional structures, and broader social discourses. Laila's narrative invites us to reconsider how forensic mental health care can better accommodate clients' identity work as a central part of recovery. Her experience shows how rigid institutional frameworks can undermine this process, while more responsive environments—those that offer “a place to be me”—enable greater engagement and wellbeing. In line with the symposium's aim to foster inclusive and culturally-sensitive forensic practices, this presentation advocates for a shift toward ethnographic and relational approaches that attend to clients' voices, hybrid identities, and lived experiences. It underscores the importance of moving beyond diagnostic or behavioral frames to recognize the ethical and therapeutic significance of belonging, recognition, and meaning-making in forensic care.

Symposium | Forensic Psychiatry and Violence : [Symposium 61] Ethnic diversity, psychiatric conditions, and transgressive behavior: Insights from cases in forensic mental health care

2025年9月27日(土) 9:00 ~ 10:30 Session Room 8 (Meeting Room 1)

## [Symposium 61] Ethnic diversity, psychiatric conditions, and transgressive behavior: Insights from cases in forensic mental health care

Moderator: Charlotte Clous (Centre for Transcultural Psychiatry Veldzicht), Marjolein De Pau (Department of Special Needs Education, Ghent University)

### [SY-61-03] *Culture and Care in Practice: A Greenlandic Forensic Psychiatric Ward in Denmark*

\*Morten Deleuran Terkildsen<sup>1,2,4</sup>, Parnūna Heilmann<sup>3</sup>, Karen Aalling Mikkelsen<sup>1</sup>, Irene Thorsager Kruitbosch Jensen<sup>1</sup>, Ida Margrethe Nielsen<sup>1,3</sup>, Harry Kennedy<sup>1,2,5</sup>, Lisbeth Uhrskov Sørensen<sup>1,2</sup> (1. Department of Forensic Psychiatry, Aarhus University Hospital Psychiatry, Denmark (Denmark), 2. Department of Clinical Medicine, Health, Aarhus University, Aarhus, Denmark (Denmark), 3. Psychiatric Area, Queen Ingrid's Hospital, Nuuk, Greenland (Greenland), 4. DEFACUTUM - Public Health Research, Aarhus, Denmark (Denmark), 5. Trinity College Dublin, Dublin (Ireland))

キーワード : Forensic Psychiatry、Cultural Psychiatry、Culturally Adapted Care

#### Abstract:

In many forensic psychiatric settings, patients from minority backgrounds must navigate systems embedded with unfamiliar cultural norms. These environments can hinder therapeutic relationships and complicate rehabilitation. This presentation offers a different perspective by exploring a forensic psychiatric ward in Denmark that exclusively treats Greenlandic patients and is designed to reflect and support Greenlandic culture.

At this ward, culture is not peripheral—it is central. Greenlandic-speaking staff, a full-time interpreter, and culturally specific activities such as kaffemik, traditional foods, and national celebrations create a setting where patients are to feel seen and understood. The physical environment is adorned with Greenlandic art and motifs, and the structure of daily life incorporates both therapeutic and culturally meaningful practices. Patients follow personalized weekly schedules, and progression toward greater freedoms is tied to active participation in this culturally integrated mode of care.

Rather than framing culture as a challenge to overcome, this ward illustrates how it can be a vehicle for therapeutic stability, emotional safety, and identity continuity. The design of care here invites reflection on how institutions can create belonging for those who are otherwise socially and geographically displaced.

As forensic psychiatry continues to engage with the complexities of cultural difference, this case invites reflection on a subtle tension: when culture becomes central to care, how can we ensure that the individual, their unique experiences, needs, and personal history, remains fully visible? Might a strong emphasis on shared cultural identity, however well-intentioned, risk overlooking the diversity that exists within cultural groups themselves?

Symposium | Forensic Psychiatry and Violence : [Symposium 61] Ethnic diversity, psychiatric conditions, and transgressive behavior: Insights from cases in forensic mental health care

2025年9月27日(土) 9:00 ~ 10:30 Session Room 8 (Meeting Room 1)

## [Symposium 61] Ethnic diversity, psychiatric conditions, and transgressive behavior: Insights from cases in forensic mental health care

Moderator: Charlotte Clous (Centre for Transcultural Psychiatry Veldzicht), Marjolein De Pau (Department of Special Needs Education, Ghent University)

### [SY-61-04] Forensic Psychiatry and Migrant Populations in Italy: Clinical Challenges and Culturally Informed Response

\*Ilaria Rossetto<sup>1</sup>, Stefano Tambuzzi<sup>1</sup>, Cristina Cattaneo<sup>1</sup>, Lia Parente<sup>2</sup>, Felice Francesco Carabelles<sup>2</sup> (1. University of Milan (Italy), 2. University of Bari (Italy))

キーワード : Cultural Psychiatry、Forensic Treatment、Special Asylum procedures

As part of the 2015 legislative reform that reshaped the Italian forensic psychiatric care system, it is essential to examine the implications for migrant populations—a group particularly vulnerable within this context. This analysis focuses on two aspects: (1) a study conducted in the largest Italian forensic psychiatric unit, specifically investigating migrant patients, and (2) a psychological support service for migrants who have survived torture. The retrospective study analyzed the demographic, clinical, and legal characteristics of 184 migrant patients (134 men and 50 women) admitted between 2010 and 2019 to an Italian forensic psychiatric facility. These were compared to Italian patients matched by age, sex, and admission period. Results showed significant differences: male migrants were more frequently diagnosed with schizophrenia spectrum disorders ( $p=0.04$ ) and less frequently with personality disorders ( $p=0.047$ ) than their Italian counterparts. These differences were not statistically significant among female patients. Discharge outcomes also varied: migrants were more often repatriated or transferred, whereas Italians were more likely to be conditionally released ( $p<0.001$ ). Language and cultural barriers negatively affected diagnostic accuracy and treatment planning. The apparent overdiagnosis of psychosis among migrants may reflect both real clinical differences and diagnostic bias due to limited use of culturally sensitive assessment tools. The study emphasizes the urgent need for trained interpreters, cultural mediators, and clinician training in cultural competence. In parallel, migrants who claim to have been victims of torture are routinely examined at the Institute of Forensic Medicine in Milan for special asylum procedures. Given frequent psychological distress or psychiatric disorders, an integrated approach involving ethnopsychiatry experts is essential for diagnosis and care. These examples highlight the urgent need for intercultural approaches in forensic psychiatry to ensure equitable, high-quality mental health care for a diverse and complex patient population.

Symposium | Community care : [Symposium 62] Community mental health care: perspectives in Canada, Korea, and Japan inspired by a cultural -ecosocial view.

2025年9月27日(土) 10:40 ~ 12:10 Session Room 2 (Main Hall B)

## [Symposium 62] Community mental health care: perspectives in Canada, Korea, and Japan inspired by a cultural -ecosocial view.

Moderator: Masayuki Noguchi (Okayama Prefectural Mental Health & Welfare Center)

[SY-62]

Community mental health care: perspectives in Canada, Korea, and Japan inspired by a cultural -ecosocial view.

Laurence Kirmayer<sup>2</sup>, Boung Chul Lee<sup>3</sup>, Chiyo Fujii<sup>4</sup>, Masayuki Noguchi<sup>1</sup> (1. Okayama Prefectural Mental Health & Welfare Center (Japan), 2. McGill University (Canada), 3. Hallym University Hangang Sacred Heart Hospital (Korea), 4. National Institute of Mental Health National Center of Neurology and Psychiatry (Japan))

[SY-62-01]

Community Mental Health: A Cultural-Ecosocial Approach

\*Laurence J Kirmayer<sup>1</sup> (1. McGill University (Canada))

[SY-62-02]

Disasters and Community Mental Health

\*Boung Chul Lee<sup>1</sup> (1. Hangang Sacred Heart Hospital (Korea))

[SY-62-03]

Evolving Roles of Psychiatric Care Providers in Community Mental Health: Collaborative Outreach for People with Unmet Mental Health Needs in Japan

\*Chiyo Fujii<sup>1</sup> (1. National Center of Neurology and Psychiatry (Japan))

[SY-62-04]

Community-based Integrated Mental Health Care System for People with Mental Health Needs in Japan: Addressing Unmet Mental Health Needs through the Public Mental Health Sector.

\*Masayuki Noguchi<sup>1</sup> (1. Okayama Prefectural Mental Health & Welfare Center (Japan))

Symposium | Community care : [Symposium 62] Community mental health care: perspectives in Canada, Korea, and Japan inspired by a cultural -ecosocial view.

2025年9月27日(土) 10:40 ~ 12:10 Session Room 2 (Main Hall B)

## [Symposium 62] Community mental health care: perspectives in Canada, Korea, and Japan inspired by a cultural -ecosocial view.

Moderator: Masayuki Noguchi (Okayama Prefectural Mental Health & Welfare Center)

### [SY-62] Community mental health care: perspectives in Canada, Korea, and Japan inspired by a cultural -ecosocial view.

Laurence Kirmayer<sup>2</sup>, Boung Chul Lee<sup>3</sup>, Chiyo Fujii<sup>4</sup>, Masayuki Noguchi<sup>1</sup> (1. Okayama Prefectural Mental Health & Welfare Center (Japan), 2. McGill University (Canada), 3. Hallym University Hangang Sacred Heart Hospital (Korea), 4. National Institute of Mental Health National Center of Neurology and Psychiatry (Japan))

キーワード : community mental health、cultural-ecosocial perspective、cultural psychiatry、disaster psychiatry

This symposium will focus on community mental health systems that provide care for individuals experiencing psychological distress, including those with severe mental illness, disaster victims, immigrants, and refugees.

These populations often face significant vulnerabilities due to precarious living conditions, socioeconomic challenges, stigma, and prejudice.

Psychological distress can exacerbate these vulnerabilities, creating a cycle that deepens their burden.

Community mental health systems, whether addressing severe mental illness, disaster recovery, or the needs of immigrants and refugees, share core features and functions. These systems strive to:

1. Understand the distress of individuals within their unique socio-cultural contexts.
2. Engage clients collaboratively alongside multidisciplinary and multi-sectoral service providers to address the social determinants of mental health.
3. Strengthen social resources to support recovery and wellness and to facilitate the integration of individuals into their communities.
4. Promote understanding and reduce stigma associated with psychological distress and mental illness at the community level.

This symposium brings together speakers from Canada, South Korea, and Japan, each with expertise in supporting immigrants and refugees, disaster psychiatry, and community-based mental health services. Particularly a "cultural-ecosocial" perspective of psychiatry (Kirmayer, 2019), would be a shared principle and framework expected to integrate these diverse perspectives globally. Our goal aligns with the WHO's vision of providing "mental health for all" (WHO, 2022).

Symposium | Community care : [Symposium 62] Community mental health care: perspectives in Canada, Korea, and Japan inspired by a cultural -ecosocial view.

2025年9月27日(土) 10:40 ~ 12:10 Session Room 2 (Main Hall B)

## [Symposium 62] Community mental health care: perspectives in Canada, Korea, and Japan inspired by a cultural -ecosocial view.

Moderator: Masayuki Noguchi (Okayama Prefectural Mental Health & Welfare Center)

### [SY-62-01] Community Mental Health: A Cultural-Ecosocial Approach

\*Laurence J Kirmayer<sup>1</sup> (1. McGill University (Canada))

キーワード : community mental health、ecosocial systems view、culturally responsive services

This presentation will discuss the basic concepts, structure and practice of community care from a cultural-ecosocial perspective. The ideals of community mental health include providing local access to comprehensive care, understanding patients' mental health problems in social context, maintaining the community integration of people with severe mental illness, and mobilizing community resources for the treatment, recovery, and prevention of mental health problems as well as mental health promotion. The cultural ecosocial approach emphasizes the embedding of mental health problems in specific social contexts that create niches with resources, affordances, challenges and constraints. Local niches are embedded in larger social systems with their own dynamics. Systemic thinking is central to understanding the cause and course of mental disorders and to developing treatment services and prevention strategies.

Symposium | Community care : [Symposium 62] Community mental health care: perspectives in Canada, Korea, and Japan inspired by a cultural -ecosocial view.

2025年9月27日(土) 10:40 ~ 12:10 Session Room 2 (Main Hall B)

## [Symposium 62] Community mental health care: perspectives in Canada, Korea, and Japan inspired by a cultural -ecosocial view.

Moderator: Masayuki Noguchi (Okayama Prefectural Mental Health & Welfare Center)

### [SY-62-02] Disasters and Community Mental Health

\*Boung Chul Lee<sup>1</sup> (1. Hangang Sacred Heart Hospital (Korea))

キーワード : Disaster、Community mental health、Trauma

Community mental health in South Korea has developed more slowly compared to other sectors. The treatment environment remains heavily focused on inpatient care, and although the number of mental health welfare centers and psychiatric rehabilitation facilities has increased, it is still insufficient to meet the needs of the population. Social stigma surrounding mental illness remains prevalent in South Korea, with only about 15.3% of individuals with mental disorders receiving treatment. This stigma often manifests in real-world disadvantages, such as limitations in obtaining insurance or concerns about discrimination in the workplace. While there have been gradual improvements, this societal atmosphere continues to hinder interest and investment in community-based mental health services. In South Korea, shifts in public perception of mental health have often been driven by large-scale disasters. When nationally significant crises occur, public and governmental attention tends to focus on supporting the victims and their families. These social and natural disasters have heightened public awareness of the need for psychological support, gradually normalizing the importance of mental health among the general population. Volunteer efforts and government-led counseling initiatives have played a significant role in reshaping attitudes toward those affected by disasters, with many mental health professionals devoting themselves to these efforts. However, the fragmented approach—where multiple government ministries develop separate psychological support systems—remains a challenge that requires future improvement. Disaster victims often need psychological care not only for trauma directly caused by the event but also for related issues such as anxiety about an uncertain future, depression, social withdrawal, and stigmatization during infectious disease outbreaks. For example, 64.6% of parents who lost children in disasters reportedly left their jobs, and 44.9% of disaster survivors experienced prejudice, conflict, or discrimination from their communities, showing that psychological trauma can affect all aspects of life. While such experiences may not always lead to diagnosable mental disorders, they highlight the necessity of a comprehensive psychological support system. Expanding the scope of community mental health services can be key to reducing the stigma associated with mental illness. A proactive psychological response during national disasters can not only support the recovery of victims but also foster broader public awareness and positive shifts in societal attitudes toward mental health. Early intervention and prevention at the community level can help stop psychological distress from developing into full-blown mental disorders, ultimately contributing to a healthier and more inclusive society.

Symposium | Community care : [Symposium 62] Community mental health care: perspectives in Canada, Korea, and Japan inspired by a cultural -ecosocial view.

2025年9月27日(土) 10:40 ~ 12:10 Session Room 2 (Main Hall B)

## [Symposium 62] Community mental health care: perspectives in Canada, Korea, and Japan inspired by a cultural -ecosocial view.

Moderator: Masayuki Noguchi (Okayama Prefectural Mental Health & Welfare Center)

### [SY-62-03] Evolving Roles of Psychiatric Care Providers in Community Mental Health: Collaborative Outreach for People with Unmet Mental Health Needs in Japan

\*Chiyo Fujii<sup>1</sup> (1. National Center of Neurology and Psychiatry (Japan))

キーワード : community mental health、psychiatric care providers、unmet mental health needs、comprehensive care

In Japan, psychiatric care providers have traditionally focused on inpatient treatment. However, recent developments show a shift toward community-based engagement, especially through collaboration with public agencies to support individuals with unmet mental health needs (UMHNs)—those disconnected from care and facing complex life challenges.

In several municipalities, psychiatric care providers now work alongside public health centers and local government staff to conduct outreach and care coordination for people with UMHNs. These initiatives, often commissioned by local authorities, involve multidisciplinary teams engaging directly with individuals who might otherwise fall through the cracks of the mental health system.

This shift has been supported by national policy changes. Revisions to the health insurance fee schedule have introduced reimbursement for case management, multidisciplinary collaboration, and inter-agency coordination. Additionally, the Ministry of Health, Labour and Welfare has issued a national guideline on post-discharge support, encouraging continuity of care through stronger partnerships between psychiatric care providers and community services.

Together, these developments reflect a broader movement toward integrating psychiatric services into local ecosystems in collaborative and non-hierarchical ways. Still, this expansion must be approached with care to avoid the risk of over-medicalization. Psychiatric care providers should act not as dominant actors, but as partners within broader support networks involving welfare, housing, and other sectors.

This presentation will highlight emerging practices in which psychiatric care providers contribute to community-based outreach and support for UMHNs, discussing both the policy context and practical challenges in building inclusive mental health care systems.

Symposium | Community care : [Symposium 62] Community mental health care: perspectives in Canada, Korea, and Japan inspired by a cultural -ecosocial view.

2025年9月27日(土) 10:40 ~ 12:10 Session Room 2 (Main Hall B)

## [Symposium 62] Community mental health care: perspectives in Canada, Korea, and Japan inspired by a cultural -ecosocial view.

Moderator: Masayuki Noguchi (Okayama Prefectural Mental Health & Welfare Center)

[SY-62-04] Community-based Integrated Mental Health Care System for People with Mental Health Needs in Japan: Addressing Unmet Mental Health Needs through the Public Mental Health Sector.

\*Masayuki Noguchi<sup>1</sup> (1. Okayama Prefectural Mental Health & Welfare Center (Japan))

キーワード : community mental health care、unmet mental health needs、Community-based Integrated Mental Health Care System for People with Mental Health Needs、multidisciplinary outreach team、public mental health

Since 2019, Japan has implemented the *Community-based Integrated Mental Health Care System for People with Mental Health Needs* (CIMHS). Japan's mental health care system comprises three sectors: psychiatric, public mental health, and welfare. The public mental health sector includes municipal health and welfare departments, public health centers, and prefectural mental health & welfare centers. A key responsibility of this sector is to coordinate the CIMHS within its jurisdiction—whether at the municipal or prefectural level. A critical issue faced by the public mental health sector is supporting individuals with unmet mental health needs (UMHNs), particularly those disengaged from psychiatric treatment. Psychiatric institutions are bound by regulations requiring formal treatment contracts with clients, which limits their ability to reach individuals who are reluctant to engage in care. In contrast, the public mental health sector is permitted to contact and support these individuals directly. People with UMHNs often experience multiple, interrelated challenges such as inadequate housing, poverty, poor hygiene, malnutrition, social isolation. Typically, municipal public health nurses or social workers serve as the first point of contact. When cases become particularly complex, public health centers are expected to provide additional support. Prefectural mental health & welfare centers—comprising psychiatrists, clinical psychologists, and other professionals—offer further assistance through supervision, training workshops, and the deployment of multidisciplinary outreach teams. Engaging people with UMHNs is profoundly challenging. However, the “eco-social perspective” proposed by Kirmayer (2019, 2024) offers valuable guidance: Understanding distress within unique socio-cultural contexts of people with UMHNs; Collaborative engagement with clients, supported by multidisciplinary and multi-sectoral service provider to address the social determinants of mental health; Strengthening social resources to support recovery and reintegration into the community. The public mental health sector is expected to meet this challenge through its continued efforts in developing and implementing CIMHS.

Symposium | Immigrant, Refugee : [Symposium 63] Rethinking Mental Health Support for Refugees

2025年9月27日(土) 10:40 ~ 12:10 Session Room 3 (Large Hall A)

## [Symposium 63] Rethinking Mental Health Support for Refugees

Moderator: Simon Groen (De Evenaar Center for Transcultural Psychiatry), Hans Rohlof (Mental Care Center)

[SY-63]

### Rethinking Mental Health Support for Refugees

UKAWA Ko<sup>1</sup>, Hans J.G.B.M. Rohlof<sup>2</sup>, Mario Braakman<sup>3</sup>, Simon Groen<sup>4</sup>, Valerie DeMarinis<sup>5</sup>, Claudia Blankenstijn<sup>6</sup> (1. Taisho University (Japan), 2. Mental Care Center (Netherlands), 3. Tilburg University (Netherlands), 4. De Evenaar Center for Transcultural Psychiatry (Netherlands), 5. Umeå University (Medical School) (Sweden), 6. linguist (Netherlands))

[SY-63-01]

#### Narrative Language Therapy® for refugee children

\*Claudia Blankenstijn<sup>1</sup> (1. linguist (Netherlands))

[SY-63-02]

#### Psychodiagnostic assessment and treatment of refugees

\*Hans Rohlof<sup>1</sup> (1. Private Practice Rohlof (Netherlands))

[SY-63-03]

#### Victimmigration, a longitudinal study of refugees suffering from stress and trauma in Greece and the Netherlands

\*Mario Hubertus Braakman<sup>1</sup> (1. Tilburg University (Netherlands))

[SY-63-04]

#### The recognition of grief in traumatized refugees in Dutch mental health care

\*Simon Groen<sup>1</sup> (1. De Evenaar, Center for Transcultural Psychiatry, GGZ Drenthe (Netherlands))

[SY-63-05]

#### Examining the situation on mental health support for refugees in Sweden

\*Valerie DeMarinis<sup>1</sup>, Sofie Bäärnhielm<sup>2</sup>, Mattias Strand<sup>2</sup> (1. Innlandet Hospital Trust, Norway; Umeå University, Sweden (Sweden), 2. Department of Clinical Neuroscience, Karolinska Institutet, Sweden (Sweden))

Symposium | Immigrant, Refugee : [Symposium 63] Rethinking Mental Health Support for Refugees

2025年9月27日(土) 10:40 ~ 12:10 Session Room 3 (Large Hall A)

## [Symposium 63] Rethinking Mental Health Support for Refugees

Moderator: Simon Groen (De Evenaar Center for Transcultural Psychiatry), Hans Rohlof (Mental Care Center)

### [SY-63] Rethinking Mental Health Support for Refugees

UKAWA Ko<sup>1</sup>, Hans J.G.B.M. Rohlof<sup>2</sup>, Mario Braakman<sup>3</sup>, Simon Groen<sup>4</sup>, Valerie DeMarinis<sup>5</sup>, Claudia Blankenstijn<sup>6</sup> (1. Taisho University (Japan), 2. Mental Care Center (Netherlands), 3. Tilburg University (Netherlands), 4. De Evenaar Center for Transcultural Psychiatry (Netherlands), 5. Umeå University (Medical School) (Sweden), 6. linguist (Netherlands))

キーワード : Refugees、Trauma、Mental Health Care

Refugees experience things they never imagined during their exodus from their home country and their life in the host country. They experience traumatic events in their home country, experience various losses in the process of becoming refugees, and are forced to resettle in a country with a completely different society, language, and culture. These events are stressful and significantly impact their physical and mental health. Although refugee psychosis does not exist, refugees are prone to mental illnesses such as PTSD due to two factors: (1) the process of becoming a refugee and (2) migration and adaptation. Also, as with immigrants, this illness behavior is strongly influenced by the cultural factors and norms of each ethnic group. This symposium will focus on the trauma that is often experienced during the process of becoming a refugee and will provide an opportunity to learn from the forerunners in the psychiatric treatment of refugees, including the following: (1) Treatment planning from a process-oriented perspective in the refugee experience, (2) Tensions between cultural and personal situations of grief, and (3) New treatments in refugee mental health, such as support for improving self-engagement and the use of games to treat trauma. The number of refugees will continue to grow worldwide. The latest findings in Europe will lead to a review of mental health care for refugees.

Symposium | Immigrant, Refugee : [Symposium 63] Rethinking Mental Health Support for Refugees

2025年9月27日(土) 10:40 ~ 12:10 Session Room 3 (Large Hall A)

**[Symposium 63] Rethinking Mental Health Support for Refugees**

Moderator: Simon Groen (De Evenaar Center for Transcultural Psychiatry), Hans Rohlof (Mental Care Center)

**[SY-63-01] Narrative Language Therapy® for refugee children**\*Claudia Blankenstijn<sup>1</sup> (1. linguist (Netherlands))

In the Netherlands, in a small university town Leiden (130.000 inhabitants) not far from the sea, 650 refugees from the Ukraine are making a living, of which 180 are children.

All of these refugee children from the Ukraine, are multi-lingual, as most of them speak Ukrainian, Russian, a few words of English and in the mean while also a little bit of Dutch, because they all are receiving extra Dutch language lessons in school since 2022. Grief and trauma about a lost peaceful family life, about a lost or far away father, about a lost culture and land slumber within all these children.

Some of these refugee children from the Ukraine, approximately 3 to 5%, have not only a severe psychiatric impairment, like Anxiety Disorder and PTSS (APA, DSM5), but also have a Communication Disorder (APA, DSM5).

This special group of children with comorbid communication and psychiatric disorders out of the group of refugee children from the Ukraine, suffer, for example, from Selective Mutism or have otherwise difficulties in the pronunciation and explication of the form, the content and the communicative function of words and sentences in both Ukraine and Dutch. This could be detected by taking clinical linguistic observation tests of the Ukrainian and Dutch language used, executed by a highly educated and specialized Clinical Linguist and a Ukrainian interpreter.

Narrative Language Therapy® (NL-T®) is then deployed to support these children in telling their personal story, while drawing it. And here the healing art comes in, both in words and in pictures.

NL-T® was invented by the author in 2003 in a Centre of Mental Health Transparant and a Clinic of Child- and Youth Psychiatry LUMC CURIUM, both in Leiden, the Netherlands, and is used ever since in a population of children with comorbid communication and psychiatric impairment (Blankenstijn & Schepers, 2003).

In this lecture, one case of a refugee from the Ukraine of 9 years old will be described in detail. Her personal story and the picture she draw by telling her personal story will be shown. Both the theoretical background and practical application of the Narrative Language Therapy® will be made accessible.

Claudia Blankenstijn (PhD) is language and communication expert in the Netherlands, with special interest in comorbid communication and psychiatric impairment in children in all sorts of populations, like in refugee children. The book on Narrative Language Therapy® is in the making and will be finished this summer. Lectures, workshops and other forms of education on Narrative Language Therapy® are within her expertise. Narrative Language Therapy® is given to the children with severe communicative needs for over twenty years in the Netherlands and Europe.

Symposium | Immigrant, Refugee : [Symposium 63] Rethinking Mental Health Support for Refugees

2025年9月27日(土) 10:40 ~ 12:10 Session Room 3 (Large Hall A)

## [Symposium 63] Rethinking Mental Health Support for Refugees

Moderator: Simon Groen (De Evenaar Center for Transcultural Psychiatry), Hans Rohlof (Mental Care Center)

### [SY-63-02] Psychodiagnostic assessment and treatment of refugees

\*Hans Rohlof<sup>1</sup> (1. Private Practice Rohlof (Netherlands))

キーワード : cultural psychiatry, psychodiagnostics, psychiatric treatment, refugees

The arrival of refugees from high conflict zones in Western countries has resulted in major challenges in health care, especially in psychiatry. Initial superficial assessment gave the impression that only traumatic experiences could result in psychiatric disorders. The diagnosis of posttraumatic stress disorder was generally the main starting point of therapy. Consecutive more accurate assessments showed quite diverse viewpoints. Nowadays, psychiatric disorders in refugees are viewed as consequences of four groups of experiences: migration and loss, acculturation, traumatization, and social marginalization. Psychiatric treatment should be focused on each of these experiences, and include all these in one treatment plan. Reference: Hans Rohlof, Psychodiagnostic assessment with refugees, 2018, Arq Psychotrauma Expert Group, Diemen, The Netherlands.

Symposium | Immigrant, Refugee : [Symposium 63] Rethinking Mental Health Support for Refugees

2025年9月27日(土) 10:40 ~ 12:10 Session Room 3 (Large Hall A)

**[Symposium 63] Rethinking Mental Health Support for Refugees**

Moderator: Simon Groen (De Evenaar Center for Transcultural Psychiatry), Hans Rohlof (Mental Care Center)

**[SY-63-03] Victimmigration, a longitudinal study of refugees suffering from stress and trauma in Greece and the Netherlands**\*Mario Hubertus Braakman<sup>1</sup> (1. Tilburg University (Netherlands))

キーワード : Refugees、Asylumseekers、Trauma、prospective longitudinal study

The research focuses on the psychological impact of victimization among migrants and refugees, a process termed "victimmigration," which encompasses traumatic experiences before, during, and after migration. This study investigates how such victimization affects psychological well-being and how migration policies and asylum procedures might influence these outcomes. The research consists of two complementary studies: **Victimmigration I** and **II**. **Victimmigration I** examines victimization in the post-migration phase in the Netherlands. It follows 200 migrants and refugees from Syria and Iraq over one year using a mixed-methods design. The study includes qualitative interviews and digital open-ended questions, as well as quantitative digital questionnaires. Additionally, it tests the effectiveness of a simple smartphone-based intervention — playing Tetris — aimed at improving psychological well-being and preventing psychological complaints. A randomized controlled trial will compare outcomes between an intervention group and a control group. **Victimmigration II** mirrors the design of the first study but focuses on the peri-migration phase, tracking the same number and profile of migrants during and after their journey from Greece. The same mixed-method approach and Tetris intervention are applied to assess victimization experiences and psychological resilience during migration. The expected outcome of both studies is to determine whether low-threshold digital interventions can enhance the psychological well-being of migrants and refugees. The research aims to generate empirical data on the effects of victimization throughout different migration phases, informing evidence-based migration and asylum policies. These insights can help policymakers better understand how pre-, peri-, and post-migration experiences affect mental health and potentially reduce further victimization through more humane and psychologically informed procedures and reception conditions.

Symposium | Immigrant, Refugee : [Symposium 63] Rethinking Mental Health Support for Refugees

2025年9月27日(土) 10:40 ~ 12:10 Session Room 3 (Large Hall A)

## [Symposium 63] Rethinking Mental Health Support for Refugees

Moderator: Simon Groen (De Evenaar Center for Transcultural Psychiatry), Hans Rohlof (Mental Care Center)

### [SY-63-04] The recognition of grief in traumatized refugees in Dutch mental health care

\*Simon Groen<sup>1</sup> (1. De Evenaar, Center for Transcultural Psychiatry, GGZ Drenthe (Netherlands))

キーワード : grief、refugees、PTSD

Metareviews have shown that common mental disorders (CMD) such as posttraumatic stress disorder, depression and anxiety disorders are most prevalent in refugees worldwide. Clinicians may therefore focus on these disorders in the diagnostic process. The clinical case of a Syrian patient who received four types of trauma treatment without success until a clinician found out about the loss of his child. Treatment focused on prolonged grief disorder (PGD) resulted in reduction of symptoms. Research among refugees and Dutch CMD patients revealed that one third met criteria for PGD. Refugees run four to five times higher risk of developing PGD after the loss of a loved one. Qualitative research among clinicians showed that they are more focused on CMD than on PGD, discover grief-related mental health symptoms only during treatment and are unaware of differences between CMD and PGD. Thematic analysis of bereavement and grief interviews among patients who met criteria for PGD symptoms clarified tensions between cultural and individual circumstances of grief.

Symposium | Immigrant, Refugee : [Symposium 63] Rethinking Mental Health Support for Refugees

2025年9月27日(土) 10:40 ~ 12:10 Session Room 3 (Large Hall A)

## [Symposium 63] Rethinking Mental Health Support for Refugees

Moderator: Simon Groen (De Evenaar Center for Transcultural Psychiatry), Hans Rohlof (Mental Care Center)

### [SY-63-05] Examining the situation on mental health support for refugees in Sweden

\*Valerie DeMarinis<sup>1</sup>, Sofie Bäärnhielm<sup>2</sup>, Mattias Strand<sup>2</sup> (1. Innlandet Hospital Trust, Norway; Umeå University, Sweden (Sweden), 2. Department of Clinical Neuroscience, Karolinska Institutet, Sweden (Sweden))

キーワード : Migration changes and challenges for mental healthcare、Sweden、public mental health and health-promotion model

A brief overview is provided of the situation for mental health support of refugees in Sweden in light of the Swedish cultural context and recent migration changes. A public mental health framework is used for presenting this overview. Sweden has changed from being one of the most generous host countries to one of the most restrictive. Formally, all with residency permits and almost all children have the right to free healthcare. Different rights exist for different migrant classifications. Despite relatively good access to mental healthcare, refugees and other migrant groups face barriers to and challenges within mental healthcare: underuse of psychiatric services during the first decade in Sweden; adults and children are more likely, than the Swedish born population, to be admitted compulsorily for psychiatric disorder; at risk of not receiving adequate treatment following BD diagnosis due to lack of cultural competence in healthcare, economic restraints, as well as community factors, migrant children risk underdiagnosis of various mental health conditions and not receiving optimal care; migrant youth use less mental health services compared to Swedish-born peers. In addition to these consequences for refugees, there are also important consequences for mental health professionals, and for the wider Swedish society. These barriers and challenges identify areas of need for constructing a model that has an emphasis on health-promotion, competency and engagement for those providing and receiving mental healthcare. This is a model for improving access to and quality of mental health care for people on the move at a structural level of a local health care system, a model for improving access to and quality of mental healthcare. One such working model in the Stockholm Region, Transcultural Center, will be presented, focusing on cultural training for mental health and primary care professionals, and health communication in native languages for newcomers.

Symposium | Trauma : [Symposium 64] The long-term effects of the Asia-Pacific War and its transmission across generations in individuals, collectives and societies

2025年9月27日(土) 10:40 ~ 12:10 Session Room 5 (Conference Room A)

## [Symposium 64] The long-term effects of the Asia-Pacific War and its transmission across generations in individuals, collectives and societies

Moderator: Koh Eugen (University of Melbourne), Tadashi Takeshima (Taisho University)

[SY-64]

The long-term effects of the Asia-Pacific War and its transmission across generations in individuals, collectives and societies

Koh Eugen<sup>2</sup>, Tadashi Takeshima<sup>1</sup>, Shin Kurumizawa<sup>3</sup> (1. Taisho University (Japan), 2. University of Melbourne (Australia), 3. Hananotani Clinic (Japan))

[SY-64-01]

The transmission of Second World War Trauma across generations

\*Eugen Koh<sup>1</sup> (1. University of Melbourne (Australia))

[SY-64-02]

The Impact of the Asia-Pacific War on Suicide and Mental Health Policy in Japan

\*Tadashi Takeshima<sup>1</sup> (1. Taisho University (Japan))

[SY-64-03]

Transgenerational transmission of responsibility of perpetrator

\*Shin Kurumizawa<sup>1</sup> (1. Hananotani Clinic (Japan))

Symposium | Trauma : [Symposium 64] The long-term effects of the Asia-Pacific War and its transmission across generations in individuals, collectives and societies

2025年9月27日(土) 10:40 ~ 12:10 Session Room 5 (Conference Room A)

## [Symposium 64] The long-term effects of the Asia-Pacific War and its transmission across generations in individuals, collectives and societies

Moderator: Koh Eugen (University of Melbourne), Tadashi Takeshima (Taisho University)

### [SY-64] The long-term effects of the Asia-Pacific War and its transmission across generations in individuals, collectives and societies

Koh Eugen<sup>2</sup>, Tadashi Takeshima<sup>1</sup>, Shin Kurumizawa<sup>3</sup> (1. Taisho University (Japan), 2. University of Melbourne (Australia), 3. Hananotani Clinic (Japan))

キーワード : Asia-Pacific War、transgenerational trauma、long term effects

80 years after it ended, the Asia-Pacific region is still experiencing the long term effects of the war that left some 30 millions dead and many more millions injured. The transmission of the impact of the war over generations in individuals has been conceptualised as transgenerational trauma. Its long-term impact on collectives and society may be conceptualised as cultural trauma, where the way people feel about themselves, behave, and relate to one another as a group has been changed by their shared experience of the War. This symposium is on the long term effects of the Asia-Pacific War and its transmission across generations in individuals and collectives and societies.

Symposium | Trauma : [Symposium 64] The long-term effects of the Asia-Pacific War and its transmission across generations in individuals, collectives and societies

2025年9月27日(土) 10:40 ~ 12:10 Session Room 5 (Conference Room A)

## [Symposium 64] The long-term effects of the Asia-Pacific War and its transmission across generations in individuals, collectives and societies

Moderator: Koh Eugen (University of Melbourne), Tadashi Takeshima (Taisho University)

### [SY-64-01] The transmission of Second World War Trauma across generations

\*Eugen Koh<sup>1</sup> (1. University of Melbourne (Australia))

キーワード : War、Cultural trauma、generations

Even though 80 years and three generations have passed since the end of the Second World War, the long-term effects of that war remain. In individuals, the psychological effects of the trauma of one generation affect the development of their children and grandchildren – we call this phenomenon transgenerational trauma. In groups and society, the impacts are embedded in their social, collective or shared consciousness - which is their culture – causing cultural trauma. *Cultural trauma can be defined as the distortion or destruction to a culture resulting from widely shared experiences that cannot or have not been processed.* These changes affect the behaviour of individuals and large groups, including social institutions and processes, and government policies and operations. The impact of cultural trauma on a country can continue for generations if it remains unexamined and unaddressed. This presentation highlights the potential long-term impacts of the war through cultural trauma and discusses a unique project to address them in Japan, through a series of interdisciplinary symposia involving over a thousand participants over 7 years, and the subsequent formation of the Japanese Society for Interdisciplinary Studies on the Long-Term Effects of War (J-SISLEW).

Symposium | Trauma : [Symposium 64] The long-term effects of the Asia-Pacific War and its transmission across generations in individuals, collectives and societies

2025年9月27日(土) 10:40 ~ 12:10 Session Room 5 (Conference Room A)

## [Symposium 64] The long-term effects of the Asia-Pacific War and its transmission across generations in individuals, collectives and societies

Moderator: Koh Eugen (University of Melbourne), Tadashi Takeshima (Taisho University)

### [SY-64-02] The Impact of the Asia-Pacific War on Suicide and Mental Health Policy in Japan

\*Tadashi Takeshima<sup>1</sup> (1. Taisho University (Japan))

キーワード : suicide、mental hospital bed、Asia-Pacific War、long-term effect、mental health policy

Japan experienced three waves of suicide increase after the Asia-Pacific War. The first wave was around 1955, when suicides among young people who had experienced drastic social changes before and after the war increased sharply. The second wave was around 1985, and the third wave was from 1998 for about a decade. The second and third waves were characterized by a significant increase in suicides among the same generation as the first wave. The first national law regarding mental healthcare in Japan was the Psychiatric Patients Custody Law of 1900. This law permitted private confinement and was inadequate in terms of medical care. To address this, the Mental Hospital Law was enacted in 1919, but many psychiatric patients remained in private confinement. With the outbreak of the Asia-Pacific War, the number of psychiatric beds decreased due to war damage and other factors. After the war, with the approval of the GHQ, the Mental Health Law was enacted in 1950 through a private member's bill, abolishing private confinement and requiring the hospitalization of psychiatric patients in psychiatric hospitals. The 1954 National Survey by the Ministry of Health revealed a severe shortage of psychiatric beds, leading to the establishment of national budgetary provisions for the establishment and operation of psychiatric hospitals, resulting in a rapid increase in mental hospital beds, which is known as the "psychiatric hospital boom," with a sharp increase in the number of hospital beds. The post-war surge in suicide deaths, the rapid increase in mental hospital beds, and the delayed development of community care are all considered to be part of the negative legacy of the Asia-Pacific War. It cannot be denied that the war had a significant impact on mental health policy in Japan.

Symposium | Trauma : [Symposium 64] The long-term effects of the Asia-Pacific War and its transmission across generations in individuals, collectives and societies

2025年9月27日(土) 10:40 ~ 12:10 Session Room 5 (Conference Room A)

## [Symposium 64] The long-term effects of the Asia-Pacific War and its transmission across generations in individuals, collectives and societies

Moderator: Koh Eugen (University of Melbourne), Tadashi Takeshima (Taisho University)

### [SY-64-03] Transgenerational transmission of responsibility of perpetrator

\*Shin Kurumizawa<sup>1</sup> (1. Hananotani Clinic (Japan))

キーワード : cultural trauma、taboos、Transgenerational transmission、responsibility of perpetrator

War is not fought only on the battlefield. Within a nation, any thoughts, feelings, or intentions that interfere with the conduct of war are suppressed as evil and must not be spoken of. Culture is only allowed to conform to the needs of a nation at war, and anything that does not conform is deemed unacceptable and cannot develop. Trauma is encapsulated in its culture, and the taboo of not being able to speak about that trauma perpetuates in it. Even after war ends, if the taboos formed during the war are not resolved, cultural trauma remains and continues to influence the minds of post-war people. This is the transgenerational transmission of cultural trauma. When taboos are touched upon, not only the experiences of victims but also those of perpetrators remain unspoken, contributing to the formation of cultural trauma.

Symposium | Asylum and Mental Disorders : [Symposium 65] Assessment and care for asylum seekers with severe mental health problems

2025年9月27日(土) 10:40 ~ 12:10 Session Room 6 (Conference Room B)

## [Symposium 65] Assessment and care for asylum seekers with severe mental health problems

Moderator: Seline van den Ameele (Department of Psychiatry and Medical Psychology, University Hospital Brugmann, Brussels Collaborative Antwerp Psychiatric Research Institute (CAPRI), Antwerp University, Antwerp)

[SY-65]

### Assessment and care for asylum seekers with severe mental health problems

Seline van den Ameele<sup>1,2</sup>, Lukas Claus<sup>2,3</sup>, Laura Van de Vliet<sup>5,3</sup>, Sofie Vindevogel<sup>4</sup> (1. Department of Psychiatry and Medical Psychology, University Hospital Brugmann, Brussels (Belgium), 2. Collaborative Antwerp Psychiatric Research Institute (CAPRI), Antwerp University, Antwerp (Belgium), 3. Psychiatric Hospital Sint-Alexius, Brothers of Charity, Grimbergen (Belgium), 4. EQUALITY ResearchCollective, University of Applied Sciences and Arts HOGENT, Ghent (Belgium), 5. POZAH, Psychiatric Care for Asylum Seekers, Sint-Alexius, Grimbergen (Belgium))

[SY-65-01]

#### The Voices Not Heard: Asylum seekers' explanatory models of mental illness as elicited by the Cultural Formulation Interview

\*Seline van den Ameele<sup>1,2</sup> (1. Department of Psychiatry and Medical Psychology, University Hospital Brugmann, Brussels (Belgium), 2. Collaborative Antwerp Psychiatric Research Institute (CAPRI), Antwerp University, Antwerp (Belgium))

[SY-65-02]

#### Value of the CFI in asylum seekers' diagnostic assessment

\*Lukas Claus<sup>1,2</sup> (1. Resident Psychiatrist at Vrije Universiteit Brussel (Brussels, Belgium); (Belgium), 2. PhD researcher CAPRI (Collaborative Antwerp Psychiatric Research Institute), Universiteit Antwerpen (Antwerp, Belgium) (Belgium))

[SY-65-03]

#### Barriers to mental health care for asylum seekers and how to overcome them: an introduction

\*Laura Van de Vliet<sup>1</sup> (1. PZ St. Alexius Grimbergen (Belgium))

[SY-65-04]

#### Strengthening the frontline workforce to enhance transcultural mental health support in Belgian asylum reception centres.

\*Sofie Vindevogel Vindevogel<sup>1</sup>, Fayed Alabbas<sup>1</sup>, Yasmine Boumahdi<sup>1</sup>, Jürgen Magerman<sup>1</sup> (1. University of Applied Sciences and Arts Gent (Belgium))

Symposium | Asylum and Mental Disorders : [Symposium 65] Assessment and care for asylum seekers with severe mental health problems

2025年9月27日(土) 10:40 ~ 12:10 Session Room 6 (Conference Room B)

## [Symposium 65] Assessment and care for asylum seekers with severe mental health problems

Moderator: Seline van den Ameele (Department of Psychiatry and Medical Psychology, University Hospital Brugmann, Brussels Collaborative Antwerp Psychiatric Research Institute (CAPRI), Antwerp University, Antwerp)

### [SY-65] Assessment and care for asylum seekers with severe mental health problems

Seline van den Ameele<sup>1,2</sup>, Lukas Claus<sup>2,3</sup>, Laura Van de Vliet<sup>5,3</sup>, Sofie Vindevogel<sup>4</sup> (1. Department of Psychiatry and Medical Psychology, University Hospital Brugmann, Brussels (Belgium), 2. Collaborative Antwerp Psychiatric Research Institute (CAPRI), Antwerp University, Antwerp (Belgium), 3. Psychiatric Hospital Sint-Alexius, Brothers of Charity, Grimbergen (Belgium), 4. EQUALITY ResearchCollective, University of Applied Sciences and Arts HOGENT, Ghent (Belgium), 5. POZAH, Psychiatric Care for Asylum Seekers, Sint-Alexius, Grimbergen (Belgium))

キーワード : Cultural psychiatry、Asylum seekers、Cultural Formulation、Explanatory models、Mental health care

As of mid-2024, 122 million people were forcibly displaced globally, including 8 million asylum seekers. Asylum seekers face numerous risk factors for mental health illness, such as trauma, lack of shelter, uncertainty, and prolonged asylum procedures. Despite the high prevalence of mental health illness, asylum seekers' use of mental health services remains low compared to the need. This may be explained by various barriers, such as limited knowledge of the healthcare system, language barriers, distrust of authority, structural difficulties (financial constraints, precariousness, lack of capacity…), social exclusion, and differing beliefs and expectations about mental health and healthcare. This symposium will explore different interventions to address these barriers. First, we present the results of a research project conducted in Belgium, examining the value of the Cultural Formulation Interview (CFI) in asylum seekers with severe mental health problems. We discuss the explanatory models of asylum seekers' suffering as elicited by the CFI, which provide insights into the very personal narratives of asylum seekers within their difficult current reality and the burden of the past. Secondly, we examine the added value of the CFI in the diagnostic assessment of asylum seekers and explore how it can be integrated in daily care and treatment planning. Based on our findings, we emphasize the need for a more holistic, recovery-oriented approach in order to improve mental health care for asylum seekers. Thirdly, we present a Belgian clinical model that fosters a close collaboration between a psychiatric clinic and the Belgian agency for the reception of asylum seekers. We discuss their mental health care program for asylum seekers as well as their education programs for first-line workers in the asylum reception centres. At last, we demonstrate a recently developed education and intervention program designed together with, and specifically for the staff of the asylum seekers' reception centres.

Symposium | Asylum and Mental Disorders : [Symposium 65] Assessment and care for asylum seekers with severe mental health problems

2025年9月27日(土) 10:40 ~ 12:10 Session Room 6 (Conference Room B)

## [Symposium 65] Assessment and care for asylum seekers with severe mental health problems

Moderator: Seline van den Ameele (Department of Psychiatry and Medical Psychology, University Hospital Brugmann, Brussels Collaborative Antwerp Psychiatric Research Institute (CAPRI), Antwerp University, Antwerp)

### [SY-65-01] The Voices Not Heard: Asylum seekers' explanatory models of mental illness as elicited by the Cultural Formulation Interview

\*Seline van den Ameele<sup>1,2</sup> (1. Department of Psychiatry and Medical Psychology, University Hospital Brugmann, Brussels (Belgium), 2. Collaborative Antwerp Psychiatric Research Institute (CAPRI), Antwerp University, Antwerp (Belgium))

キーワード : Cultural psychiatry、Asylum seekers、Cultural Formulation、Explanatory models

Despite the high prevalence of mental health problems among asylum seekers, they often face barriers to accessing mental healthcare. Lack of understanding of asylum seekers' explanatory models of mental illness appears to be an important barrier. A better understanding of these explanatory models is crucial for ensuring the inclusion of asylum seekers in healthcare services. The Cultural Formulation Interview (CFI) might help to explore asylum seekers' explanatory models of mental illness. Based on the results of a research project conducted in Belgium (the ASCOMH-study), we discuss the explanatory models of asylum seekers' mental illness as elicited by the CFI. By a thematic analysis, three core themes characterising asylum seekers' explanatory models were identified: a burden of the past, a disenabling current reality, and a personal position and individual experience. The interplay among pre-, peri- and post-migration experiences, having a continuous impact on asylum seekers' mental health, was highlighted by the themes 'a burden of the past', and 'a disenabling current reality'. The theme 'a personal position and individual experience' involved a very diverse and individual idiom of distress. Participants described a suffering that exceeded their mental capacities, that affected their sense of self, and social relations. Our findings show how the CFI can help asylum seekers and clinical caregivers to improve the understanding of the suffering of asylum seekers in a personal and context-sensitive way. By eliciting the personal idioms of distress, interventions can emerge from asylum seekers' strengths and capacities within their current challenging context.

Symposium | Asylum and Mental Disorders : [Symposium 65] Assessment and care for asylum seekers with severe mental health problems

2025年9月27日(土) 10:40 ~ 12:10 Session Room 6 (Conference Room B)

## [Symposium 65] Assessment and care for asylum seekers with severe mental health problems

Moderator: Seline van den Ameele (Department of Psychiatry and Medical Psychology, University Hospital Brugmann, Brussels Collaborative Antwerp Psychiatric Research Institute (CAPRI), Antwerp University, Antwerp)

### [SY-65-02] Value of the CFI in asylum seekers' diagnostic assessment

\*Lukas Claus<sup>1,2</sup> (1. Resident Psychiatrist at Vrije Universiteit Brussel (Brussels, Belgium); (Belgium), 2. PhD researcher CAPRI (Collaborative Antwerp Psychiatric Research Institute), Universiteit Antwerpen (Antwerp, Belgium) (Belgium))

キーワード : Cultural Formulation Interview、Asylum Seekers、Diagnostic Assessment

Asylum seekers face significant mental health challenges and are at increased risk of misdiagnosis. The Cultural Formulation Interview (CFI) has been proposed to enhance cultural sensitivity in mental health care, but its application in asylum seekers and its impact on clinical outcomes remain largely unexplored. Therefore, we conducted a study on the use of the CFI in asylum seekers. In this presentation, we will present our results on the value of the CFI in asylum seekers' diagnostic assessment. First, this presentation will demonstrate the CFI's impact on diagnostic outcomes. We observed significant shifts away from diagnoses of psychotic and depressive disorders, with those symptoms being recontextualized as trauma- and stressor-related disorders. We also found an increase in cases classified as having no psychopathology or conditions outside of traditional DSM categories, including grief. The CFI led to diagnoses being confirmed, changed, or narrowed, each in about one-third of cases. Second, qualitative analysis revealed four key themes demonstrating the CFI's value. It allowed a more profound understanding of personal suffering. The CFI also clarified the role of individual context in suffering, including traumatic life events, migration experiences, and current difficulties. Furthermore, it provided insight into the social context of asylum seekers' problems, such as family separation and loneliness. Lastly, the CFI offered a perspective on participants' strengths, coping strategies, and therapeutic needs. This presentation will demonstrate how the CFI facilitates a more holistic, recovery-oriented approach and prompts conceptual reflections on psychopathology in asylum seekers. We will finally discuss the CFI's potential for broader clinical implementation and emphasize the need for comprehensive training that focuses on sensitivity for context-specific suffering, trauma, and migration.

Symposium | Asylum and Mental Disorders : [Symposium 65] Assessment and care for asylum seekers with severe mental health problems

2025年9月27日(土) 10:40 ~ 12:10 Session Room 6 (Conference Room B)

## [Symposium 65] Assessment and care for asylum seekers with severe mental health problems

Moderator: Seline van den Ameele (Department of Psychiatry and Medical Psychology, University Hospital Brugmann, Brussels Collaborative Antwerp Psychiatric Research Institute (CAPRI), Antwerp University, Antwerp)

### [SY-65-03] Barriers to mental health care for asylum seekers and how to overcome them: an introduction

\*Laura Van de Vliet<sup>1</sup> (1. PZ St. Alexius Grimbergen (Belgium))

キーワード : Cultural psychiatry、Asylum seekers、Mental healthcare

The number of forcibly displaced people has been increasing progressively in recent years. In 2024 there were 8.4 million asylum seekers among the 123.2 million forcibly displaced people worldwide. Refugees and asylum seekers often have to cope with traumatic events such as conflict, loss or separation from family, life-threatening migration journeys and lengthy asylum procedures during their migration experience. A sizable proportion are therefore at risk of developing psychological symptoms and major mental illness. A recent meta-analysis reports high prevalence rates of psychiatric problems among asylum seekers, with 25,5% of post-traumatic stress disorder (PTSD) and 30,1% of depression. Despite the high prevalence of mental health illness, asylum seekers' use of mental health services remains low. A notion of possible barriers to mental health care for asylum seekers is therefore necessary. Based on a literature review, we structured the barriers to mental health care for asylum seekers around following 6 central themes: "lack of knowledge of the healthcare system and healthcare rights", "language barriers", "expressions of psychological distress and illness explanations", "expectations about therapeutic relationship and treatment", "lack of trust and stigma", "structural difficulties". In order to overcome those barriers we developed a clinical model that fosters a close collaboration between a psychiatric clinic and the Belgian agency for the reception of asylum seekers. Hence, we provide psychiatric care for asylum seekers with severe mental illness through both in- and outpatient settings. We don't look for a one-size-fits all approach, but we adapt our care to the unique person and his or her needs. In addition we coach teams working in regular psychiatric care settings as well as in asylum centers in how to deal with these severe mental health conditions in a culturally sensitive way.

Symposium | Asylum and Mental Disorders : [Symposium 65] Assessment and care for asylum seekers with severe mental health problems

2025年9月27日(土) 10:40 ~ 12:10 Session Room 6 (Conference Room B)

## [Symposium 65] Assessment and care for asylum seekers with severe mental health problems

Moderator: Seline van den Ameele (Department of Psychiatry and Medical Psychology, University Hospital Brugmann, Brussels Collaborative Antwerp Psychiatric Research Institute (CAPRI), Antwerp University, Antwerp)

### [SY-65-04] Strengthening the frontline workforce to enhance transcultural mental health support in Belgian asylum reception centres.

\*Sofie Vindevogel Vindevogel<sup>1</sup>, Fayed Alabbas<sup>1</sup>, Yasmine Boumahdi<sup>1</sup>, Jürgen Magerman<sup>1</sup> (1. University of Applied Sciences and Arts Gent (Belgium))

キーワード : asylum seekers、mental health、frontline workers、capacity building、reception network

International frameworks on mental health and psychosocial support (MHPSS) highlight the critical role of basic psychosocial care provided by non-specialised staff as a foundation for mental health promotion. In asylum reception centres, this positions frontline workers as key actors in observing, identifying and responding to residents' mental health needs. Yet in practice, MHPSS is mostly outsourced to specialised professionals, which leaves the potential of frontline staff under-leveraged. This presentation draws on an applied research project on MHPSS in Belgian asylum reception centres. It commences with findings from a large-scale survey and qualitative interviews with staff across the reception network, exploring their existing competences, perceived training needs, and preferred learning modalities related to MHPSS. Building on these insights, the presentation outlines a participatory approach to strengthening MHPSS capacity, showing how the training needs assessment—combined with the experiential knowledge of residents—led to the co-design of an e-learning and interview programme tailored to the multidisciplinary teams in the sector. It further underscores the importance of organisational scaffolding to support the integration of newly acquired competences into daily practice, emphasising the need to address both individual capacity and the institutional conditions in which staff operate. By integrating insights from research and practice, the presentation offers actionable pathways to foster sustainable ecosystems of mental health care for people navigating displacement and asylum in host countries.

Symposium | AI&IT : [Symposium 66] Digital Frontiers in Psychiatry: Innovative Approaches from Asia

2025年9月27日(土) 14:10 ~ 15:40 Session Room 2 (Main Hall B)

## [Symposium 66] Digital Frontiers in Psychiatry: Innovative Approaches from Asia

Moderator: Taishiro Kishimoto (Keio University School of Medicine)

[SY-66]

### Digital Frontiers in Psychiatry: Innovative Approaches from Asia

Taishiro Kishimoto<sup>1</sup>, Hwa-Young Lee<sup>2</sup>, Hsin-An Chang<sup>3</sup>, Hironobu Nakamura<sup>4</sup> (1. Keio University School of Medicine (Japan), 2. Soonchunhyang University Hospital (Korea), 3. Tri-Service General Hospital (Taiwan), 4. Institute of Science Tokyo (Japan))

[SY-66-01]

#### Development of software as a medical device for depression screening

\*Taishiro Kishimoto<sup>1</sup> (1. Keio University School of Medicine (Japan))

[SY-66-02]

#### AIOT (AI+IOT) based prediction system for suicide/aggressive behavior in psychiatric wards

\*Hwa-Young Lee Lee<sup>1</sup> (1. Soonchunhyang University Cheonan Hospital (Korea))

[SY-66-03]

#### Diagnosing and Treating Major Depressive Disorder Using EEG-Based Machine Learning

\*Hsin-An Chang<sup>1</sup>, Yi-Hung Liu<sup>2</sup> (1. Department of Psychiatry, Tri-Service General Hospital, National Defense Medical Center, Taipei (Taiwan), 2. Institute of Electrical and Control Engineering, National Yang Ming Chiao Tung University, Hsinchu (Taiwan))

Symposium | AI&IT : [Symposium 66] Digital Frontiers in Psychiatry: Innovative Approaches from Asia

2025年9月27日(土) 14:10 ~ 15:40 Session Room 2 (Main Hall B)

## [Symposium 66] Digital Frontiers in Psychiatry: Innovative Approaches from Asia

Moderator: Taishiro Kishimoto (Keio University School of Medicine)

### [SY-66] Digital Frontiers in Psychiatry: Innovative Approaches from Asia

Taishiro Kishimoto<sup>1</sup>, Hwa-Young Lee<sup>2</sup>, Hsin-An Chang<sup>3</sup>, Hironobu Nakamura<sup>4</sup> (1. Keio University School of Medicine (Japan), 2. Soonchunhyang University Hospital (Korea), 3. Tri-Service General Hospital (Taiwan), 4. Institute of Science Tokyo (Japan))

キーワード : digital technology、AI、prediction

Information and communication technology advancement has significantly transformed our daily lives, making them more convenient. This evolution has also impacted the field of psychiatry, where clinical practices are undergoing remarkable changes. Innovations such as telemedicine, hospital system support, prognosis prediction, diagnostic assistance, and app-based therapies are reshaping the landscape. This symposium will focus on cutting-edge initiatives in psychiatry across Asia that leverage digital technologies. Each presenter will share insights into their notable achievements. Dr. Kishimoto will open the symposium by summarizing the applications of digital technology in psychiatry and presenting the development of a wearable wristband device for depression screening. Dr. Chang will discuss EEG-based diagnostic technologies for depression, while Dr. Nakamura will present quantitative techniques for assessing schizophrenia symptoms using natural language processing. Dr. Lee will introduce a system designed for predicting suicide and aggressive behaviors in psychiatric wards.

Symposium | AI&amp;IT : [Symposium 66] Digital Frontiers in Psychiatry: Innovative Approaches from Asia

2025年9月27日(土) 14:10 ~ 15:40 Session Room 2 (Main Hall B)

## [Symposium 66] Digital Frontiers in Psychiatry: Innovative Approaches from Asia

Moderator: Taishiro Kishimoto (Keio University School of Medicine)

### [SY-66-01] Development of software as a medical device for depression screening

\*Taishiro Kishimoto<sup>1</sup> (1. Keio University School of Medicine (Japan))

キーワード : depression、AI、wearable device

**Background:** Few biomarkers can be used clinically to diagnose and assess the severity of depression. However, a decrease in activity and sleep efficiency is often observed in depressed patients. In addition, autonomic nerve symptoms, such as changes in heart rate variability, can be used to distinguish depressed patients from healthy people; these parameters can be used to improve diagnostic accuracy.

**Method:** Patients with depressive symptoms and healthy subjects are asked to wear a wristband-type wearable device for 7 days and data on triaxial acceleration, pulse rate, skin temperature, and ultraviolet light are collected. On the seventh day of wearing, clinical assessments are conducted using Structured Clinical Interview for DSM-5 (SCID-5), Hamilton Depression Rating Scale (HAMD), and other scales. Using wearable device data associated with clinical symptoms as supervisory data, a machine learning model capable of identifying the presence or absence of depressive episodes and predicting the HAMD scores is developed.

**Results:** As of November 2024, over 800 data sets were collected from approximately 250 subjects.

**Conclusion:** Data from the pilot study of this study (86 subjects) showed a screening accuracy of 76% for depression identification. While there is room for improvement, the results indicate that screening and severity assessment of depression can be performed at a certain level using wearable devices.

Symposium | AI&amp;IT : [Symposium 66] Digital Frontiers in Psychiatry: Innovative Approaches from Asia

2025年9月27日(土) 14:10 ~ 15:40 Session Room 2 (Main Hall B)

## [Symposium 66] Digital Frontiers in Psychiatry: Innovative Approaches from Asia

Moderator: Taishiro Kishimoto (Keio University School of Medicine)

### [SY-66-02] AIOT (AI+IOT) based prediction system for suicide/aggressive behavior in psychiatric wards

\*Hwa-Young Lee Lee<sup>1</sup> (1. Soonchunhyang University Cheonan Hospital (Korea))

キーワード : AI、IOT、suicide、Aggression

**Objective:** Aggression is a psychiatric emergency and predicting it in psychiatric inpatients enhances the efficacy and safety of patient management. We established a real-time vital sign monitoring system based on AIoT technology in the psychiatric ward and compiled a collection of clinical scales to predict and evaluate aggression in hospitalized patients.

**Methods:** Existing scales were comprehensively reviewed to select items for a set of clinical scales that could predict a crisis that immediately preceded aggressive behavior. The work is based on an understanding of how aggressive behavior develops, and the contributory factors. To establish a ward environment based on AIoT technology, a monitoring dashboard, vision sensors, and object interaction sensors were implemented.

**Results:** Seven clinical scales, including the Nurses' Global Assessment of Suicide Risk, the Positive and Negative Syndrome Scale (PANSS), the Modified Overt Aggression Scale (MOAS), the Inpatient Aggression Prediction Scale, the Broset Violence Checklist (BVC), the Staff Observation Aggression Scale-Revised (SOAS-R), and the State-Trait Anger Expression Inventory (STAXI), were used in the aggression monitoring protocol. Among all modalities, vision-based monitoring showed the highest predictive response (68.8%), followed by clinical assessments (53%).

**Conclusion:** The establishment of a ward environment utilizing AIoT technology to enable the early prediction of aggression/suicide in psychiatric inpatients is anticipated to aid in creating a safer ward environment through further refinement processes.

Symposium | AI&amp;IT : [Symposium 66] Digital Frontiers in Psychiatry: Innovative Approaches from Asia

2025年9月27日(土) 14:10 ~ 15:40 Session Room 2 (Main Hall B)

## [Symposium 66] Digital Frontiers in Psychiatry: Innovative Approaches from Asia

Moderator: Taishiro Kishimoto (Keio University School of Medicine)

### [SY-66-03] Diagnosing and Treating Major Depressive Disorder Using EEG-Based Machine Learning

\*Hsin-An Chang<sup>1</sup>, Yi-Hung Liu<sup>2</sup> (1. Department of Psychiatry, Tri-Service General Hospital, National Defense Medical Center, Taipei (Taiwan), 2. Institute of Electrical and Control Engineering, National Yang Ming Chiao Tung University, Hsinchu (Taiwan))

キーワード : Major depressive disorder、EEG、Machine learning

Electroencephalography is a widely used research and clinical tool to monitor and record the electrical activity of the brain – the electroencephalogram (EEG). Machine learning algorithms have been developed to extract features from the EEG to identify various brain states from different neuropsychiatric disorders. Major depressive disorder (MDD) is a leading mental disorder worldwide. According to the World Health Organization, the annual global economic impact of depression is estimated at \$1 trillion and is projected to be the leading cause of disability by 2020. Nowadays, the role of artificial intelligence in efforts to diagnose and treat MDD is getting more and more important. A growing body of research aims to better predict, diagnose, and treat MDD by using EEG-based machine learning as a potential solution. Our research team aims to explore the role of EEG-based machine learning in supporting depression diagnosis and treatment response prediction. We previously used EEG-based machine learning model to classify MDD patients versus healthy controls with acceptable accuracy. We subsequently used the combination of EEG-based machine learning plus self-reported depression severity to predict MDD patients with suicidal risks. In real-world observational studies, we tested the performance of the models of machine learning trained from the resting-state EEG data at baseline to predict treatment response to either 8-week antidepressant treatment in MDD patients or 30-session repetitive transcranial magnetic stimulation (rTMS) in treatment-resistant MDD patients. The results showed that specific machine learning classifiers can effectively predict treatment response in these patients. EEG-based machine learning shows substantial promise in the diagnosis and management of depression. However, the applications of EEG-based machine learning require further validation before they can be relied upon as diagnostic tools or a biomarker to predict treatment response.

Symposium | Community care : [Symposium 67] De-hospitalization and community psychiatry-1. Human Rights

2025年9月27日(土) 14:10 ~ 15:40 Session Room 3 (Large Hall A)

## [Symposium 67] De-hospitalization and community psychiatry-1. Human Rights

Moderator: Yuka Kudo (Gunma Hospital)

[SY-67]

### De-hospitalization and community psychiatry-1. Human Rights

Kazuo Okuma, Vittorio De Luca<sup>6</sup>, Donato Zupin<sup>4,2,7,8</sup>, Goffredo Bartocci<sup>2,7,8</sup>, Yoshikazu Ikehara<sup>3</sup>, Yuka Kudo<sup>1,5</sup> (1. Keio University (Japan), 2. Italian Institute of Transcultural Mental Health (Italy), 3. Tokyo Advocacy Law Office (Japan), 4. Mental Health Area – WHO Collaborative Center, ASUGI (Italy), 5. Gunma Hospital (Japan), 6. ASL ROMA5, Psychiatric Emergency Inward Monterotondo (RM) (Italy), 7. World Association of Cultural Psychiatry (Italy), 8. Transcultural Psychiatry Section, Italian Society of Psychiatry (Italy))

[SY-67-01]

#### Deinstitutionalization & human rights in emergency psychiatry in Italy

\*Vittorio De Luca<sup>1,2,3</sup>, Silvia Gubbini<sup>1</sup> (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))

[SY-67-02]

#### Deinstitutionalization in Italy: the Trieste model and its complex cultural path to human and social rights

\*Donato Zupin<sup>2,3,4,1</sup>, \*Goffredo Bartocci<sup>2,3,4</sup> (1. DDSM - Mental Health Area-WHO Collaborative Center, ASUGI. Psychiatrist (Italy), 2. Italian Institute of Transcultural Mental Health (Italy), 3. Transcultural Psychiatry Section, Italian Society of Psychiatry (Italy), 4. World Association of Cultural Psychiatry (Italy))

[SY-67-03]

#### Roadmap to abolish involuntary hospitalizations and restore the dignity of persons with psychosocial disabilities by Japan Federation of Bar Associations

\*Yoshikazu Ikehara<sup>1</sup> (1. Tokyo Advocacy Law Office (Japan))

Symposium | Community care : [Symposium 67] De-hospitalization and community psychiatry-1. Human Rights

2025年9月27日(土) 14:10 ~ 15:40 Session Room 3 (Large Hall A)

## [Symposium 67] De-hospitalization and community psychiatry-1. Human Rights

Moderator: Yuka Kudo (Gunma Hospital)

### [SY-67] De-hospitalization and community psychiatry-1. Human Rights

Kazuo Okuma, Vittorio De Luca<sup>6</sup>, Donato Zupin<sup>4,2,7,8</sup>, Goffredo Bartocci<sup>2,7,8</sup>, Yoshikazu Ikehara<sup>3</sup>, Yuka Kudo<sup>1,5</sup> (1. Keio University (Japan), 2. Italian Institute of Transcultural Mental Health (Italy), 3. Tokyo Advocacy Law Office (Japan), 4. Mental Health Area – WHO Collaborative Center, ASUGI (Italy), 5. Gunma Hospital (Japan), 6. ASL ROMA5, Psychiatric Emergency Inward Monterotondo (RM) (Italy), 7. World Association of Cultural Psychiatry (Italy), 8. Transcultural Psychiatry Section, Italian Society of Psychiatry (Italy))

キーワード : Community psychiatry、Coercive practice、Recovery-approach

WHO's guidance on community mental health services, "Promoting people-centred and rights-based approaches," calls for a focus on expanding community-based mental health services that promote people-centred, recovery-oriented and rights-based health services. However, in many countries, including Japan, services rely too heavily on the biomedical model, with care focused on diagnosis, medication and symptom relief, overlooking various social determinants that affect people's mental health. In this symposium, legendary journalist Kazuo Okuma, who infiltrated a psychiatric hospital more than half a century ago by disguising himself as an alcoholic and publishing "Reportage: Psychiatric Ward," will talk about why Japan's psychiatric care has not changed in more than half a century and introduce the film he created, "The Road to Breaking Away from Psychiatric Hospitals." Afterwards, we will hear from psychiatrists from Italy, a country that has abolished psychiatric hospitals. Dr Vittorio De Luca will present the process of affirming human rights within psychiatric emergency settings and inpatient psychiatric facilities. Dr Donato Zupin and Goffredo Bartocci will focus on the history of the deinstitutionalization movement that led to the development of the community mental health system in Trieste, and the socio-cultural factors that made it possible. And finally, Yoshikazu Ikehara, a lawyer who has been working to abolish involuntary hospitalization at the Japan Federation of Bar Associations, will talk about the roadmap for abolishing involuntary hospitalization. Yoshikazu aims to bring together people who are seeking non-coercive mental health care, and to create a culture that not only reforms the law but also protects the human rights of those in vulnerable positions. The purpose of this symposium is for each participant to deepen their understanding of the WHO's best practices of "respect for legal capacity," "non-coercive practice," "co-production," "community inclusion," and "recovery approaches," and to consider how they can be put into practice in their own communities.

Symposium | Community care : [Symposium 67] De-hospitalization and community psychiatry-1. Human Rights

2025年9月27日(土) 14:10 ~ 15:40 Session Room 3 (Large Hall A)

## [Symposium 67] De-hospitalization and community psychiatry-1. Human Rights

Moderator: Yuka Kudo (Gunma Hospital)

### [SY-67-01] Deinstitutionalization & human rights in emergency psychiatry in Italy

\*Vittorio De Luca<sup>1,2,3</sup>, Silvia Gubbini<sup>1</sup> (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 : Deinstitutionalisation in Italy、Emergency psychiatry、Forensic psychiatry hospitals

The authors will present the process of affirming human rights within psychiatric emergency settings and inpatient psychiatric facilities, taking into account the cultural challenges arising from the closure of psychiatric hospitals in Italy. Particular attention will be given to both the legal and cultural foundations of current hospitalization practices, as well as the challenges posed by the reduction—and, in some contexts, the elimination—of coercive measures. The presentation will also address the cultural impact that the closure of forensic psychiatric hospitals has had on public discourse and current case law, along with the challenges that lie ahead, from the point of view of emergency psychiatry.

Symposium | Community care : [Symposium 67] De-hospitalization and community psychiatry-1. Human Rights

2025年9月27日(土) 14:10 ~ 15:40 Session Room 3 (Large Hall A)

## [Symposium 67] De-hospitalization and community psychiatry-1. Human Rights

Moderator: Yuka Kudo (Gunma Hospital)

### [SY-67-02] Deinstitutionalization in Italy: the Trieste model and its complex cultural path to human and social rights

\*Donato Zupin<sup>2,3,4,1</sup>, \*Goffredo Bartocci<sup>2,3,4</sup> (1. DDSM - Mental Health Area-WHO Collaborative Center, ASUGI. Psychiatrist (Italy), 2. Italian Institute of Transcultural Mental Health (Italy), 3. Transcultural Psychiatry Section, Italian Society of Psychiatry (Italy), 4. World Association of Cultural Psychiatry (Italy))

キーワード : Deinstitutionalization、Human and Social Rights、Cultural psychiatry、Community mental health

The process of deinstitutionalization in Italy represents one of the most radical reforms in the history of mental health care. Beginning in the early 1970s and culminating in the Mental Health Act (Law 180) of 1978, the Italian movement was not only a clinical and organizational revolution, but also a profound socio-cultural shift. Trieste (Italy) became the most emblematic example of this transformation, where the psychiatrist Franco Basaglia, as the spokesperson for a broader movement of radical critique of psychiatry, helped shape a 'freedom-first' approach to care, grounded in human rights, social inclusion, and community-based services. This presentation will explore the specific historical, cultural, and social factors that enabled such a radical transformation in Trieste. The success of deinstitutionalization was not merely a result of legislative change, but of a broader cultural movement that redefined the relationship between mental health services and civil society. Factors such as local governance, grassroots activism, and a commitment to social rights were crucial in creating an environment where a no-restraint, open-door model could thrive. At the same time, the Italian experience highlights the inherent challenges of sustaining a rights-based approach within shifting political, economic, and institutional landscapes. The presentation will reflect on how social rights—such as access to housing, work, and social participation—are essential to making human rights a concrete reality for people with mental health conditions. By examining the Trieste model within its historical and socio-cultural context, this contribution aims to offer a critical reflection on how the principles of deinstitutionalization can be implemented, maintained, and adapted in diverse global settings.

Symposium | Community care : [Symposium 67] De-hospitalization and community psychiatry-1. Human Rights

2025年9月27日(土) 14:10 ~ 15:40 Session Room 3 (Large Hall A)

## [Symposium 67] De-hospitalization and community psychiatry-1. Human Rights

Moderator: Yuka Kudo (Gunma Hospital)

[SY-67-03] Roadmap to abolish involuntary hospitalizations and restore the dignity of persons with psychosocial disabilities by Japan Federation of Bar Associations

\*Yoshikazu Ikehara<sup>1</sup> (1. Tokyo Advocacy Law Office (Japan))

キーワード : de-institutionalization、involuntary hospitalization、the Convention on the Rights of Persons with Disabilities、biomedical reductionism、roadmap

The features of the mental health system in Japan include huge numbers and long-term inpatients, and heavy use of medication and coercive measures compared with other OECD countries. It can be said that de-institutionalization has not begun yet, and mainstream mental health depends on biomedical reductionism. Italy and Japan seem to be upside-down. Japan ratified the Convention on the Rights of Persons with Disabilities in 2014. Japan Federation of Bar Associations adapted the resolution to abolish involuntary hospitalizations and restore the dignity of persons with psychosocial disabilities in line with the CRPD, and organized a task force to make it a reality. Our task force has developed a roadmap to achieve our goal, as required by the CRPD. Abolishing involuntary hospitalizations, promoting de-institutionalization, and protecting community living for persons with psychosocial disabilities cannot be accomplished overnight. We aim to reach a final stage by 2035, twenty years after the ratification of the CRPD. Some psychiatrists criticize JFBA's opinion, and the CRPD does not understand psychiatry. Now that WHO recommends rights-based, community-based, person-centered, and recovery-oriented mental health reform in line with the CRPD and proposes a holistic approach that embraces all social determinants, the requirements of human rights and mental health are consistent. Discussions on these controversial issues in Japan to date have been limited to theories. People who look in the same direction but have different opinions about how far they will reach have not started and walked partway together. They have spent all their time just discussing which goal is right. However, unfortunately, almost none of us have experienced a situation where there have not been vast numbers of psychiatric beds because we have kept those numbers of beds for over fifty years. Now is the time to start walking together based on the roadmap.

Symposium | Trauma : [Symposium 68] Rethinking Trauma: Cultural Models of Care Across Clinical Practice and Treatment Systems

2025年9月27日(土) 14:10 ~ 15:40 Session Room 4 (Large Hall B)

## [Symposium 68] Rethinking Trauma: Cultural Models of Care Across Clinical Practice and Treatment Systems

Moderator: Selim G. Atici (Princeton University and University of Tokyo), Junko Kitanaka (The Department of Human Sciences at Keio University in Tokyo) Discussant: Laurence J. Kirmayer (McGill University)  
Discussant: Laurence J. Kirmayer (McGill University)

[SY-68]

### Rethinking Trauma: Cultural Models of Care Across Clinical Practice and Treatment Systems

Jessica Carlsson<sup>1</sup>, Charlotte Sonne<sup>1</sup>, Naoko Miyaji<sup>2</sup>, Selim G. Atici<sup>3,4</sup>, Laurence Kirmayer<sup>5</sup> (1. University of Copenhagen (Denmark), 2. Hitotsubashi University (Japan), 3. Princeton University (United States of America), 4. University of Tokyo (Japan), 5. McGill University (Canada))

[SY-68-01]

#### Comparative Analysis of Post-Traumatic Stress Disorder and Complex Post-Traumatic Stress Disorder utilizing the International Trauma Interview Across Three Distinct Trauma-Affected populations: Veterans, Civilians, and Refugees

\*Jessica Mariana Carlsson Lohmann<sup>1,3,4</sup>, Hinuga Sandahl<sup>1,3,4</sup>, Sofie Folke<sup>2</sup>, Erik Vindbjerg<sup>1</sup>, Maja Bruhn<sup>1,4</sup> (1. Competence Centre for Transcultural Psychiatry, Mental Health Centre Ballerup (Denmark), 2. Department of Military Psychology, Danish Veterans Centre, Copenhagen, Denmark (Denmark), 3. Centre for Culture and the Mind, University of Copenhagen (Denmark), 4. Faculty of Health and Medical Science, University of Copenhagen (Denmark))

[SY-68-02]

#### Integrating research in the treatment of trauma-related disorders in a transcultural context

\*Charlotte Sonne<sup>1</sup> (1. Competence center for Transcultural Psychiatry (CTP), Denmark (Denmark))

[SY-68-03]

#### Trauma Island: Listening to Silenced Voices

\*Naoko Miyaji<sup>1</sup> (1. Hitotsubashi University (Japan))

[SY-68-04]

#### Medico-Legal Recognition of Trauma for Asylum-Seeking Immigrants in Japan

\*Selim Gokce Atici<sup>1,2</sup> (1. University of Tokyo (Japan), 2. Princeton University (United States of America))

Symposium | Trauma : [Symposium 68] Rethinking Trauma: Cultural Models of Care Across Clinical Practice and Treatment Systems

2025年9月27日(土) 14:10 ~ 15:40 Session Room 4 (Large Hall B)

## [Symposium 68] Rethinking Trauma: Cultural Models of Care Across Clinical Practice and Treatment Systems

Moderator: Selim G. Atici (Princeton University and University of Tokyo), Junko Kitanaka (The Department of Human Sciences at Keio University in Tokyo) Discussant: Laurence J. Kirmayer (McGill University)  
Discussant: Laurence J. Kirmayer (McGill University)

### [SY-68] Rethinking Trauma: Cultural Models of Care Across Clinical Practice and Treatment Systems

Jessica Carlsson<sup>1</sup>, Charlotte Sonne<sup>1</sup>, Naoko Miyaji<sup>2</sup>, Selim G. Atici<sup>3,4</sup>, Laurence Kirmayer<sup>5</sup> (1. University of Copenhagen (Denmark), 2. Hitotsubashi University (Japan), 3. Princeton University (United States of America), 4. University of Tokyo (Japan), 5. McGill University (Canada))

This panel brings together clinical psychiatrists and social scientists in dialogue on emerging practices for understanding and treating trauma in its cultural, migratory, and gendered dimensions. The complexities of providing trauma care within diverse settings—particularly for refugees and asylum seekers—highlight the need for culturally competent clinical interventions and research on treatment effectiveness. However, models of trauma and clinical pathways often struggle to keep pace with new insights arising from cross-cultural contexts and rapidly shifting migratory realities. A key focus of the panel is how medical practitioners and mental health professionals address the gaps between existing cultural frameworks of trauma and the institutional protocols that shape conditions of care. By drawing on clinical and experiential data, we aim to showcase how diverse actors adapt and reinterpret standard trauma models, thereby revealing specific iterations and contested nature of cultural competency.

Panelists are invited to discuss their clinical accounts and share perspectives on how definitions of trauma are formed, recognized, and sometimes reconfigured through interactions that bridge legal, medical, and cross-cultural domains. Knowledge generated in practice can both advance and complicate understandings of trauma and its manifestations in co-morbidities. We explore how emergent cultural and geographic mobilities intersect with different health systems to reshape trauma experiences, with potential challenges and transformations to clinical practice.

Symposium | Trauma : [Symposium 68] Rethinking Trauma: Cultural Models of Care Across Clinical Practice and Treatment Systems

2025年9月27日(土) 14:10 ~ 15:40 Session Room 4 (Large Hall B)

## [Symposium 68] Rethinking Trauma: Cultural Models of Care Across Clinical Practice and Treatment Systems

Moderator: Selim G. Atici (Princeton University and University of Tokyo), Junko Kitanaka (The Department of Human Sciences at Keio University in Tokyo) Discussant: Laurence J. Kirmayer (McGill University)  
Discussant: Laurence J. Kirmayer (McGill University)

### [SY-68-01] Comparative Analysis of Post-Traumatic Stress Disorder and Complex Post-Traumatic Stress Disorder utilizing the International Trauma Interview Across Three Distinct Trauma-Affected populations: Veterans, Civilians, and Refugees

\*Jessica Mariana Carlsson Lohmann<sup>1,3,4</sup>, Hinuga Sandahl<sup>1,3,4</sup>, Sofie Folke<sup>2</sup>, Erik Vindbjerg<sup>1</sup>, Maja Bruhn<sup>1,4</sup> (1. Competence Centre for Transcultural Psychiatry, Mental Health Centre Ballerup (Denmark), 2. Department of Military Psychology, Danish Veterans Centre, Copenhagen, Denmark (Denmark), 3. Centre for Culture and the Mind, University of Copenhagen (Denmark), 4. Faculty of Health and Medical Science, University of Copenhagen (Denmark))

キーワード : PTSD、Culture、refugee、veteran

The prevalence and severity of Post-Traumatic Stress Disorder (PTSD) and Complex Post-Traumatic Stress Disorder (CPTSD) vary across distinct trauma-affected populations. This study compared veterans (N=123), civilians (N=49), and refugees (N=33) regarding the prevalence and severity of ICD-11 PTSD and CPTSD, assessed using the International Trauma Interview (ITI), alongside trauma history and well-being (WHO-5). Preliminary findings indicate that 65% of veterans meet CPTSD criteria, compared to 69% of civilians and 52% of refugees, while 14%, 25%, and 27% meet PTSD criteria, respectively. Civilians with CPTSD scored significantly lower on 'Disturbances in self-organization' symptoms compared to veterans with CPTSD ( $p=0.0198$ ) and refugees with CPTSD ( $p=0.0472$ ), but higher on PTSD symptoms compared to veterans ( $p=0.0228$ ). When comparing overall well-being, refugees had the lowest score, although this difference was not statistically significant ( $p=0.0873$ ). Furthermore, notable demographic differences were observed, with the veteran population predominantly male, the civilian population primarily female, and the refugee population exhibiting a mixed sex composition. Primary trauma types for veterans and refugees were combat-related, whereas civilians most frequently reported sexual assault. This comparative analysis seeks to elucidate and discuss the complex impacts of trauma across these populations. The presentation will discuss how to offer culturally competent clinical interventions across trauma-affected populations.

Symposium | Trauma : [Symposium 68] Rethinking Trauma: Cultural Models of Care Across Clinical Practice and Treatment Systems

2025年9月27日(土) 14:10 ~ 15:40 Session Room 4 (Large Hall B)

## [Symposium 68] Rethinking Trauma: Cultural Models of Care Across Clinical Practice and Treatment Systems

Moderator: Selim G. Atici (Princeton University and University of Tokyo), Junko Kitanaka (The Department of Human Sciences at Keio University in Tokyo) Discussant: Laurence J. Kirmayer (McGill University)  
Discussant: Laurence J. Kirmayer (McGill University)

### [SY-68-02] Integrating research in the treatment of trauma-related disorders in a transcultural context

\*Charlotte Sonne<sup>1</sup> (1. Competence center for Transcultural Psychiatry (CTP), Denmark (Denmark))

キーワード : Transcultural psychiatry、Refugee、Research

Although more treatment outcome studies for trauma-affected refugees have been published in recent years, many remain limited in design and quality. This scarcity of robust data likely reflects a combination of methodological challenges inherent in conducting research within transcultural settings, difficulties in fostering effective interdisciplinary collaboration between researchers and clinical staff, as well as a lack of resources to support larger-scale studies.

The Treatment and Research Integrated Model (TRIM), developed at the Competence Centre for Transcultural Psychiatry (CTP) in Denmark, has gained international attention for its simple yet structured approach to optimizing the use of clinical data for research purposes. The primary goal of TRIM is to engage all personnel in generating high-quality research data while minimizing additional costs and time commitments. While treatment programs at CTP are based in manuals adapted to the patient population, TRIM promotes a continuous improvement of the treatment delivered on an evidence base.

This presentation outlines the rationale behind TRIM, demonstrating the feasibility of integrating outcome research into real-world clinical practice. Although challenges persist in conducting treatment outcome studies among trauma-affected refugees, these can be addressed through careful consultation and negotiation within a setting committed to scientific rigor and interdisciplinary teamwork. Ultimately, identifying the most effective interventions will enhance treatment and improve quality of life for the many trauma-affected refugees seeking mental health support.

Different elements of the TRIM model will be discussed, with examples of implementation across various study types. The focus will be on offering practical advice and guidance for integrating research into clinical facilities working in mental health care for trauma-affected refugees, emphasizing the importance of a transcultural, interdisciplinary, and patient-centered approach.

Symposium | Trauma : [Symposium 68] Rethinking Trauma: Cultural Models of Care Across Clinical Practice and Treatment Systems

2025年9月27日(土) 14:10 ~ 15:40 Session Room 4 (Large Hall B)

## [Symposium 68] Rethinking Trauma: Cultural Models of Care Across Clinical Practice and Treatment Systems

Moderator: Selim G. Atici (Princeton University and University of Tokyo), Junko Kitanaka (The Department of Human Sciences at Keio University in Tokyo) Discussant: Laurence J. Kirmayer (McGill University)  
Discussant: Laurence J. Kirmayer (McGill University)

### [SY-68-03] Trauma Island: Listening to Silenced Voices

\*Naoko Miyaji<sup>1</sup> (1. Hitotsubashi University (Japan))

キーワード : trauma、silence、secrecy、shame、Trauma Island

In this presentation, I introduce the Trauma Island Model, a metaphorical framework I developed to explore the unspoken aspects of trauma and the dynamics surrounding survivors and supporters. Trauma often remains unspoken due to the extreme pain, emotional instability, and fear of societal reactions experienced by survivors. Those most severely affected—whether physically, mentally, or socially—are often silenced entirely, unable to testify or even survive.

The Trauma Island Model uses the image of a doughnut-shaped island with a landlocked inner sea to represent this phenomenon. The inner sea symbolizes those who are silenced, stigmatized, or marginalized, while the slopes of the island represent survivors who begin to speak out and supporters who approach from the outer sea.

The model highlights power dynamics affecting survivors and supporters, including the prolonged effects of trauma (gravity), interpersonal conflicts (wind), and societal misrecognition (water level). Lowering the water level—through increased social recognition and acceptance—creates a safer space for survivors to share their experiences, fostering solidarity and collective movements, such as the "Me Too" movement. However, stigma, shame, and guilt often lead to secrecy and lies, which can perpetuate silence and transgenerational trauma.

While secrecy and lies can be pathogenic, it also has positive aspects, such as inspiring imagination, creativity, and artistic expression. Art plays a vital role in addressing trauma, offering survivors a non-verbal means to express their experiences, fight against trauma symptoms, and foster connection.

The Trauma Island Model provides an interdisciplinary framework to understand trauma, respect silence, and inspire social change, encouraging survivors to speak out and find solidarity in their healing journey.

Symposium | Trauma : [Symposium 68] Rethinking Trauma: Cultural Models of Care Across Clinical Practice and Treatment Systems

2025年9月27日(土) 14:10 ~ 15:40 Session Room 4 (Large Hall B)

## [Symposium 68] Rethinking Trauma: Cultural Models of Care Across Clinical Practice and Treatment Systems

Moderator: Selim G. Atici (Princeton University and University of Tokyo), Junko Kitanaka (The Department of Human Sciences at Keio University in Tokyo) Discussant: Laurence J. Kirmayer (McGill University)  
Discussant: Laurence J. Kirmayer (McGill University)

### [SY-68-04] Medico-Legal Recognition of Trauma for Asylum-Seeking Immigrants in Japan

\*Selim Gokce Atici<sup>1,2</sup> (1. University of Tokyo (Japan), 2. Princeton University (United States of America))  
キーワード : cultural psychiatry、asylum、detention、evidence、trauma

This presentation examines how Japan's undocumented immigrants who are awaiting deportation while living temporarily outside of detention because of severe illnesses conceive trauma from the lens of chronicity, relapse, and repetitive cycles that are aligned with the schedule of medical interrogations and the temporality of stuckness. Drawing on 18 months of anthropological field research in shelters, courtrooms, and psychiatric clinics, it sheds light on how trauma becomes an impediment for civic belonging yet also its condition of possibility. The Japanese case complements frameworks that link embodied trauma to evidentiary regimes of documentation and border-making. Finally, the presentation asks how medical practice intersects with bureaucratic processes, ultimately affecting the moral and political significance of testimony and evidence. This connection between conditions of recognition and cultural models of trauma underlines the specific contexts and relationships of care that enable the clinical recognition and social life of trauma.

Symposium | Global Mental Health : [Symposium 69] Global Mental Health in a Polarized World: Building Bridges, Sharing Solutions.

2025年9月27日(土) 14:10 ~ 15:40 Session Room 5 (Conference Room A)

## [Symposium 69] Global Mental Health in a Polarized World: Building Bridges, Sharing Solutions.

Moderator: Itsuo Asai (Heart Clinic Medical Corporation)

[SY-69]

Global Mental Health in a Polarized World: Building Bridges, Sharing Solutions.

Itsuo Asai<sup>1</sup>, Muhammad Irfan<sup>2,5</sup>, Kenneth Fung<sup>4</sup>, Azaad Kassam<sup>3</sup>, Yonas Baheretibeb<sup>7</sup>, Samuel Okpaku<sup>6</sup>  
(1. Heart Clinic Medical Corporation (Japan), 2. Peshawar Medical College (Pakistan), 3. University of Ottawa (Canada), 4. University of Toronto (Canada), 5. President-Elect, World Association of Cultural Psychiatry (Pakistan), 6. the Center for Health, Culture, & Society (United States of America), 7. Addis Ababa University (Ethiopia))

[SY-69-01]

Global Mental Health Equity:

Addressing Barriers and Building Sustainable Solutions

\*Muhammad Irfan<sup>1</sup> (1. Department of Mental Health, Psychiatry & Behavioral Sciences, Peshawar Medical College, Riphah International University, Islamabad (Pakistan))

[SY-69-02]

Cultural Psychiatry & Global Mental Health: Bridging Perspectives for Inclusive Care

\*Kenneth Po-Lun Fung<sup>1</sup> (1. University of Toronto (Canada))

[SY-69-03]

Serving the Mental Health Needs of a Culturally and Geographically Diverse Faith Community

\*Azaad Kassam<sup>1</sup> (1. University of Ottawa (Canada))

[SY-69-04]

Bridging Cultural and Biomedical Paradigms: An Inter-Modality Approach to Mental Health Services in Ethiopia through Holy Water Practices

\*Yonas Baheretibeb Alemu<sup>1</sup>, Sam Law<sup>2</sup>, Lisa Andermann<sup>2</sup> (1. Addis Ababa University (Ethiopia), 2. University of Toronto (Canada))

[SY-69-05]

Reflections on Global Mental Health: Ethical and Humanitarian Considerations

Sam O. Okpaku<sup>1</sup> (1. Center for Health, Culture and Society)

Symposium | Global Mental Health : [Symposium 69] Global Mental Health in a Polarized World: Building Bridges, Sharing Solutions.

2025年9月27日(土) 14:10 ~ 15:40 Session Room 5 (Conference Room A)

## [Symposium 69] Global Mental Health in a Polarized World: Building Bridges, Sharing Solutions.

Moderator: Itsuo Asai (Heart Clinic Medical Corporation)

### [SY-69] Global Mental Health in a Polarized World: Building Bridges, Sharing Solutions.

Itsuo Asai<sup>1</sup>, Muhammad Irfan<sup>2,5</sup>, Kenneth Fung<sup>4</sup>, Azaad Kassam<sup>3</sup>, Yonas Baheretibeb<sup>7</sup>, Samuel Okpaku<sup>6</sup>  
 (1. Heart Clinic Medical Corporation (Japan), 2. Peshawar Medical College (Pakistan), 3. University of Ottawa (Canada), 4. University of Toronto (Canada), 5. President-Elect, World Association of Cultural Psychiatry (Pakistan), 6. the Center for Health, Culture, & Society (United States of America), 7. Addis Ababa University (Ethiopia))

キーワード : Global Health、Mental Health、Mental Health Services、Health Status Disparities、Cultural Competency

#### Abstract:

Global mental health continues to face major structural and cultural gaps. This symposium features five international experts who discuss how inclusive, sustainable, and context-aware approaches—both culturally and geopolitically—can promote mental health equity worldwide.

Prof. Muhammad Irfan (Pakistan) begins by pointing out the main challenges to achieving mental health equity, such as access gaps, stigma, and systemic inequalities in low- and middle-income countries. He stresses the importance of culturally rooted and community-driven strategies to build sustainable care systems.

Dr. Yonas Baheretibeb (Ethiopia) explains that mental health services are often separate, with traditional healing practices and biomedical systems functioning independently. Using Ethiopia as an example, he highlights missed opportunities for integration and emphasizes the urgent need for culturally grounded collaboration.

Dr. Azaad Kassam (Canada) shares a case study from the Ismaili faith community, which spans 22 countries. In collaboration with the Aga Khan University Brain and Mind Institute, he describes the development of a global mental health course designed to support culturally diverse professionals. His presentation emphasizes the importance of pluralism, cultural safety, and capacity-building as essential for resilient systems.

Prof. Kenneth Fung (Canada) offers a critical view from cultural psychiatry, warning against blindly adopting Western models. He advocates for ‘reverse innovation’ by learning from practices in low-resource settings—such as task-sharing, storytelling, and arts-based care—and encourages mutual, two-way learning to develop culturally relevant global mental health solutions.

Prof. Samuel Okpaku (USA) draws on decades of leadership in global mental health research and practice. He reflects on ethical and humanitarian aspects, highlighting how mental health systems can be strengthened through capacity-building, human rights protections, and cross-sector collaboration. His contribution underscores both policy innovations and the importance of values-based practice in bridging gaps in a polarized world.

Together, these presentations outline a global framework for equitable mental health, emphasizing cultural humility, community participation, and mutual knowledge sharing.

Symposium | Global Mental Health : [Symposium 69] Global Mental Health in a Polarized World: Building Bridges, Sharing Solutions.

2025年9月27日(土) 14:10 ~ 15:40 Session Room 5 (Conference Room A)

## [Symposium 69] Global Mental Health in a Polarized World: Building Bridges, Sharing Solutions.

Moderator: Itsuo Asai (Heart Clinic Medical Corporation)

### [SY-69-01] Global Mental Health Equity: Addressing Barriers and Building Sustainable Solutions

\*Muhammad Irfan<sup>1</sup> (1. Department of Mental Health, Psychiatry & Behavioral Sciences, Peshawar Medical College, Riphah International University, Islamabad (Pakistan))

キーワード : Global Mental Health、Mental Health Equity、Sustainable Solutions

This presentation focuses on the critical challenges in achieving mental health equity globally, particularly in low- and middle-income countries. It highlights systemic barriers such as limited access to care, cultural stigmas, and resource disparities, while emphasizing innovative, culturally sensitive, and sustainable solutions to bridge these gaps. Strategies for fostering collaboration and empowering communities to create equitable mental health systems will also be discussed.

Symposium | Global Mental Health : [Symposium 69] Global Mental Health in a Polarized World: Building Bridges, Sharing Solutions.

2025年9月27日(土) 14:10 ~ 15:40 Session Room 5 (Conference Room A)

## [Symposium 69] Global Mental Health in a Polarized World: Building Bridges, Sharing Solutions.

Moderator: Itsuo Asai (Heart Clinic Medical Corporation)

### [SY-69-02] Cultural Psychiatry & Global Mental Health: Bridging Perspectives for Inclusive Care

\*Kenneth Po-Lun Fung<sup>1</sup> (1. University of Toronto (Canada))

キーワード : global mental health、cultural psychiatry、inclusion

Mental disorders remain among the top ten leading causes of disease burden worldwide, with little reduction since 1990. A significant treatment gap persists between the prevalence of mental disorders and the proportion of individuals receiving care, particularly in low- and middle-income countries (LMICs). The field of global mental health has emerged to address these disparities. However, from a cultural psychiatry perspective, there are critical concerns regarding the dominance of Western, Educated, Industrialized, Rich, and Democratic (WEIRD) populations in shaping mental health research, diagnostic criteria, and treatment models. Without careful consideration, there is a risk of exporting culturally specific concepts and interventions that may not align with diverse sociocultural contexts.

To address these challenges, global mental health has increasingly integrated strategies such as task-shifting/sharing, cultural adaptation, and implementation science. There is also growing recognition of the role of social determinants of health, the continuum between mental health and illness, consideration of the care gap, and the importance of cultural safety and cultural competence in service delivery. Furthermore, the field acknowledges the need for bidirectional learning—recognizing that high-income countries (HICs) have much to learn from LMICs, especially in resource-limited settings, and that marginalized populations within HICs face similar structural barriers to care.

In addition, global challenges—including war, pandemics, climate change, and the rise of nationalism and populism—continue to shape the trajectory of global mental health. This presentation will explore how cultural psychiatry can deepen the understanding of global mental health and inform its evolution. It will also highlight why cultural psychiatry and cultural psychiatrists need to actively engage with global mental health to foster equitable, contextually relevant mental health care worldwide.

**Learning Objectives:** 1. Reflect on the interplay between cultural psychiatry and global mental health by examining how Western-based mental health frameworks influence diagnosis, treatment, and research, and identifying strategies to promote culturally informed care. 2. Discuss approaches to reducing the global mental health treatment gap through interventions such as task-shifting, cultural adaptation, and implementation science while considering their ethical and cultural implications. 3. Discuss the impact of global challenges on mental health (e.g., war, pandemics, climate change, nationalism) and explore how cultural

psychiatry can contribute to developing resilient, inclusive mental health responses across diverse settings.

Symposium | Global Mental Health : [Symposium 69] Global Mental Health in a Polarized World: Building Bridges, Sharing Solutions.

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## [Symposium 69] Global Mental Health in a Polarized World: Building Bridges, Sharing Solutions.

Moderator: Itsuo Asai (Heart Clinic Medical Corporation)

### [SY-69-03] Serving the Mental Health Needs of a Culturally and Geographically Diverse Faith Community

\*Azaad Kassam<sup>1</sup> (1. University of Ottawa (Canada))

キーワード : Culture、Faith、Global、Training、Collaboration

The Ismaili community traverses multiple countries, cultures, and languages served by a common leadership and ethic. In this session, I will describe the work of a Global Mental Health Task Force that was formed to support the well-being and resilience of this dynamic community. Connections were fostered in order to assess local cultural idioms of distress and mental health needs, followed by collaborative efforts to build capacity. In partnership with the Aga Khan University Brain and Mind Institute, a global mental health course was developed and delivered in person to mental health professionals coming from 22 jurisdictions. The project is built on a foundation of collaboration, cultural safety, humility, pluralism, trauma-informed care, contextuality, best practice, and sustainability.

Symposium | Global Mental Health : [Symposium 69] Global Mental Health in a Polarized World: Building Bridges, Sharing Solutions.

2025年9月27日(土) 14:10 ~ 15:40 Session Room 5 (Conference Room A)

## [Symposium 69] Global Mental Health in a Polarized World: Building Bridges, Sharing Solutions.

Moderator: Itsuo Asai (Heart Clinic Medical Corporation)

### [SY-69-04] Bridging Cultural and Biomedical Paradigms: An Inter-Modality Approach to Mental Health Services in Ethiopia through Holy Water Practices

\*Yonas Baheretibeb Alemu<sup>1</sup>, Sam Law<sup>2</sup>, Lisa Andermann<sup>2</sup> (1. Addis Ababa University (Ethiopia), 2. University of Toronto (Canada))

キーワード : Collaborative Care、Holistic Approaches、Community Engagement

In Africa, over 80% of individuals seek mental health care from traditional healers, highlighting their vital role in the mental health landscape. This reliance necessitates a collaborative framework that integrates traditional healing practices with biomedical approaches; however, progress remains limited despite advocacy from the UN and WHO. Often, these systems operate in isolation and, at times, in direct opposition to one another. This presentation delves into the complex social and cultural contexts of mental health care in Ethiopia, focusing specifically on the potential synergy between traditional practices, such as Holy Water rituals performed by Orthodox Church priests, and biomedical psychiatry. By examining a case of collaboration between these two modalities, we will analyze the cultural beliefs and practices that shape mental health care in Ethiopia and how these factors influence patient experiences and treatment-seeking behaviors. The presentation will also highlight the unique roles and contributions of both traditional healers and biomedical professionals in addressing mental health conditions, fostering mutual respect and understanding. In addition, we will address the challenges that impede effective collaboration, including stigma, inadequate training, and differing treatment philosophies. Ultimately, we will discuss the benefits of an inter-modality approach, emphasizing the potential for improved patient outcomes, enhanced accessibility of care, and the overall enrichment of mental health services through a culturally attuned, integrative framework. By fostering dialogue between cultural and biomedical paradigms, this presentation aims to illuminate pathways toward a more cohesive and effective mental health care system in Ethiopia, promoting a collaborative approach that respects and incorporates both traditional and modern practices.

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## [Symposium 69] Global Mental Health in a Polarized World: Building Bridges, Sharing Solutions.

Moderator: Itsuo Asai (Heart Clinic Medical Corporation)

### [SY-69-05] Reflections on Global Mental Health: Ethical and Humanitarian Considerations

Sam O. Okpaku<sup>1</sup> (1. Center for Health, Culture and Society)

This presentation will review a suggested definition of global mental health in order to emphasize rigor and discipline in global mental health research and services. It will review the humanitarian and ethical foundations of the movement. The aspects of global mental health as diplomacy will be mentioned, predictions for the future of globalization and global mental health will also be discussed.

Symposium | Psychotherapy : [Symposium 70] Approaches to the clients' 'everyday life' in psychotherapy and its links to 'mental liveliness'

2025年9月27日(土) 14:10 ~ 15:40 Session Room 6 (Conference Room B)

## [Symposium 70] Approaches to the clients' 'everyday life' in psychotherapy and its links to 'mental liveliness'

Moderator: Rieko Shioji (Faculty of Health Sciences, Tokyo Metropolitan University), Yuichiro Abe (Department of Psychiatry, Ishiki Hospital)

[SY-70]

Approaches to the clients' 'everyday life' in psychotherapy and its links to 'mental liveliness'

Kentaro Morita<sup>3</sup>, Rieko Shioji<sup>1</sup>, Farooq Naeem<sup>4</sup>, Francisco Figueroa Medina<sup>5</sup>, Yuichiro Abe<sup>2</sup> (1. Faculty of Health Sciences, Tokyo Metropolitan University (Japan), 2. Department of Psychiatry, Ishiki Hospital (Japan), 3. Day hospital (Psychiatric Day Care) Department of Rehabilitation, University of Tokyo Hospital (Japan), 4. Department of Psychiatry, University of Toronto & Centre for Addiction and Mental Health (Canada), 5. The Faculty of Integrated Human Studies, Kyoto University (Japan))

[SY-70-01]

Seikatsu-Rinsho: A Japanese Approach to Co-Producing Recovery through Everyday Life

\*Kentaro Morita<sup>1</sup> (1. Department of Rehabilitation University of Tokyo Hospital (Japan))

[SY-70-02]

Morita Therapy's treatment process and its resonance with clients' daily lives

\*Rieko Shioji<sup>1</sup> (1. Faculty of Health Sciences, Tokyo Metropolitan University (Japan))

[SY-70-03]

Southampton Adaptation Framework for culturally adapting Cognitive Therapy

\*farooq naeem<sup>1</sup> (1. university of toronto, toronto, canada (Canada))

[SY-70-04]

Settling the Body, the Breath, and the Mind: Zazen Meetings as Group Therapy

\*Francisco Figueroa Medina<sup>1</sup> (1. Kyoto University (Japan))

[SY-70-05]

Raising awareness of social rhythm in daily clinical practices

\*Yuichiro Abe<sup>1</sup> (1. 1) Ishiki Hospital 2) Tokyo University and Graduate School of Social Welfare (Japan))

Symposium | Psychotherapy : [Symposium 70] Approaches to the clients' 'everyday life' in psychotherapy and its links to 'mental liveliness'

2025年9月27日(土) 14:10 ~ 15:40 Session Room 6 (Conference Room B)

## [Symposium 70] Approaches to the clients' 'everyday life' in psychotherapy and its links to 'mental liveliness'

Moderator: Rieko Shioji (Faculty of Health Sciences, Tokyo Metropolitan University), Yuichiro Abe (Department of Psychiatry, Ishiki Hospital)

### [SY-70] Approaches to the clients' 'everyday life' in psychotherapy and its links to 'mental liveliness'

Kentaro Morita<sup>3</sup>, Rieko Shioji<sup>1</sup>, Farooq Naeem<sup>4</sup>, Francisco Figueroa Medina<sup>5</sup>, Yuichiro Abe<sup>2</sup> (1. Faculty of Health Sciences, Tokyo Metropolitan University (Japan), 2. Department of Psychiatry, Ishiki Hospital (Japan), 3. Day hospital (Psychiatric Day Care) Department of Rehabilitation, University of Tokyo Hospital (Japan), 4. Department of Psychiatry, University of Toronto & Centre for Addiction and Mental Health (Canada), 5. The Faculty of Integrated Human Studies, Kyoto University (Japan))

キーワード : Psychotherapy、Daily life、therapeutic culture、quality of life (QOL)、mental health

This symposium focuses on how clients' daily lives are approached in various types of psychotherapy, and how this links to client's 'mental liveliness'. While Psychotherapy is a process primarily centered on dialogue between the therapist and client, but the clients spend most of their time in day-to-day situations that are removed from therapeutic setting. The goal of psychotherapy is not just to achieve an improvement in symptom but also improve their lives and achieve 'mental liveliness'.

In this symposium, five speakers will make presentations; they will present from the perspective of Morita Therapy, Social Rhythm Therapy, "Seikatsu-Rinsyo" (clinical guidance to the way of life), Cognitive Behavioral Therapy (CBT), and Zazen as a series of practices, respectively. The speakers will introduce how they approach the topic of their clients' daily lives in their sessions, how the content of the sessions is applied to clients' real lives, how their daily lives are transformed, consequently how this makes their clients' minds more active and alive. Presenters will also refer to records written by clients between sessions such as activity records and diary entries. Discussions will focus on the differences and similarities between these processes, as well as the underlying therapeutic culture. We hope this symposium will promote an understanding of the processes that occur over the course of psychotherapy wherein clients' quality of life (QOL) improves and mental liveliness are achieved.

Symposium | Psychotherapy : [Symposium 70] Approaches to the clients' 'everyday life' in psychotherapy and its links to 'mental liveliness'

2025年9月27日(土) 14:10 ~ 15:40 Session Room 6 (Conference Room B)

## [Symposium 70] Approaches to the clients' 'everyday life' in psychotherapy and its links to 'mental liveliness'

Moderator: Rieko Shioji (Faculty of Health Sciences, Tokyo Metropolitan University), Yuichiro Abe (Department of Psychiatry, Ishiki Hospital)

### [SY-70-01] Seikatsu-Rinsho: A Japanese Approach to Co-Producing Recovery through Everyday Life

\*Kentaro Morita<sup>1</sup> (1. Department of Rehabilitation University of Tokyo Hospital (Japan))

キーワード : Seikatsu-Rinsho、Personal Values、Co-Production、Cultural Psychiatry

"Seikatsu-Rinsho," a support approach for individuals with mental illnesses such as schizophrenia, was developed in Japan between the 1950s and 1960s. Emerging at a time when psychiatric care was predominantly inpatient-focused, Seikatsu-Rinsho shifted the emphasis to individuals' everyday lives and community environments. The basic philosophy of this approach is to integrate co-productive, person-centered principles with individualized support. It aimed not only to improve symptoms and social functioning but also to strengthen individuals' sense of personal agency in shaping their own daily lives. In Seikatsu-Rinsho, "mental liveliness" was cultivated through deep engagement with each person's lived experiences and personal context. Central to Seikatsu-Rinsho is assessment within the context of everyday living, which examines an individual's daily patterns, social roles, interpersonal relationships, and coping abilities. Practitioners also explore personal values and family histories to uncover the individuals' true needs. Characteristic features include unique conceptual tools such as classifying "life traits"—behavioral patterns leading to relapse—into "Active" and "Passive" types, and an emphasis on five principles during directive interventions: timely, concrete, repetitive, assertive, and minimally necessary guidance. These served as common language among multidisciplinary professionals, especially in group support settings. Furthermore, they played a crucial role as professionals and individuals collaborate to consider the individual's own path in life. Though Seikatsu-Rinsho still remains a valuable approach, there is room for improvement. First, it treats people's daily lives as relatively fixed rather than recognizing that individuals constantly change through interactions with the world around them. This makes the approach less adaptable to different cultures and eras. Second, labeling people as specific "types" can oversimplify their complex, evolving nature. The role of the practitioner is not to end up with just labels but to integrate professional knowledge with the individual's lived experience to collaboratively explore their life path. This presentation will discuss the application of Seikatsu-Rinsho—particularly within psychiatric day-care settings—illustrate client case studies demonstrating gains in agency and social integration, and consider how these outcomes can inform next-generation, recovery-oriented services.

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2025年9月27日(土) 14:10 ~ 15:40 Session Room 6 (Conference Room B)

## [Symposium 70] Approaches to the clients' 'everyday life' in psychotherapy and its links to 'mental liveliness'

Moderator: Rieko Shioji (Faculty of Health Sciences, Tokyo Metropolitan University), Yuichiro Abe (Department of Psychiatry, Ishiki Hospital)

### [SY-70-02] Morita Therapy's treatment process and its resonance with clients' daily lives

\*Rieko Shioji<sup>1</sup> (1. Faculty of Health Sciences, Tokyo Metropolitan University (Japan))

キーワード : Psychotherapy、Morita Therapy、daily life、quality of life (QOL)、anxiety disorder

One of the characteristics of Morita therapy, a psychotherapy that originated and developed in Japan, is that it does not view anxiety as something to be eliminated or controlled, but rather as an expression of humanity. This approach focuses on the client's overall life rather than on controlling specific symptoms or anxieties. For example, for clients with panic disorder who hesitate to go out, encourage them to "go out and buy necessary items" rather than conducting step-by-step training to go out. Shoma Morita, the founder of Morita therapy, described his perspective on client recovery using the following metaphor. "Even from a distance, I can tell the difference between the sound of a maid sweeping and a hospitalized patient sweeping 'mental cultivation' and sweeping their own room to keep it clean. Each produces a vigorous sound, a monotonous sound, and a freely changing and complex sound, making it possible to distinguish between them. Thus, when the client's attitude changes to one of "responding immediately" to their surroundings, their lives become more vibrant, and ultimately, their minds become more active. Interviews and diaries are used to share the client's daily experiences with the therapist. In sessions, detailed descriptions are essential. This presentation explores the interaction between the treatment process of Morita therapy and clients' daily lives.

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## [Symposium 70] Approaches to the clients' 'everyday life' in psychotherapy and its links to 'mental liveliness'

Moderator: Rieko Shioji (Faculty of Health Sciences, Tokyo Metropolitan University), Yuichiro Abe (Department of Psychiatry, Ishiki Hospital)

### [SY-70-03] Southampton Adaptation Framework for culturally adapting Cognitive Therapy

\*farooq naeem<sup>1</sup> (1. university of toronto, toronto, canada (Canada))

キーワード : culture、cognitive therapy、southampton、adaptation、framework

Evidence-based therapies, such as Cognitive Behaviour Therapy (CBT) are recommended for a variety of emotional and mental health problems. However, it has been suggested that Western cultural values underpin CBT and for it to be effective for clients from diverse backgrounds, it should be culturally adapted. It has been suggested that cultures differ in core values, for example, Individualism-Communalism, Cognitivism-Emotionalism, Free will-Determinism and Materialism-Spiritualism. The literature describing guidance for cognitive therapists is limited. Our group has culturally adapted CBT in our previous work in England, Pakistan, the Middle East, China and Morocco for common to severe mental health problems. Our cultural adaptation model is currently being used to adapt CBT in Nigeria and Canada. We used a mixed-methods approach. During the qualitative phase, interviews and focus groups are conducted with stakeholders (patients, carers, community leaders and mental health professionals). This work highlighted the need to gather information to increase awareness of cultural, spiritual and systematic factors to inform assessment and engagement, which are the significant barriers in delivering therapy to this group. Data is also gathered to make therapy adjustments. The adapted therapy is then initially tested in a feasibility RCT. We have conducted more than 20 RCTs to test this method with positive outcomes. In this talk, we will describe our experience of adaptation of therapies and how the lessons learned can be used to deliver culturally adapted interventions

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## [Symposium 70] Approaches to the clients' 'everyday life' in psychotherapy and its links to 'mental liveliness'

Moderator: Rieko Shioji (Faculty of Health Sciences, Tokyo Metropolitan University), Yuichiro Abe (Department of Psychiatry, Ishiki Hospital)

### [SY-70-04] Settling the Body, the Breath, and the Mind: *Zazen* Meetings as Group Therapy

\*Francisco Figueroa Medina<sup>1</sup> (1. Kyoto University (Japan))

キーワード : *Zazen* Meetings、Group Therapy、Postwar Japan

Neuroscientific research has mainly focused on the individual therapeutical benefits of *zazen* or seated meditation. In this paper, we will show that Zen practice does not consist merely of *zazen* and that *zazen* is not merely an individual practice. We will do this by analyzing *Recommendations for Zazen Meetings*, written by Yamada Mumon and Shibayama Zenkei. In this text, Yamada and Shibayama explain how to organize *zazen* meetings. According to them, *zazen* meetings include not only the collective practice of *zazen*, but also other interrelated practices like one-on-one encounters with the teacher, dharma lectures, chanting scriptures, tea ceremony, meal etiquette, and manual labor. Furthermore, they re-think *zazen* meetings as a form of group therapy, while arguing that these meetings have a special characteristic individual psychotherapy lacks: it allows a practitioner to expand himself to include others. When the participants bring their minds on a single thing, Yamada and Shibayama explain, their individual selves are absorbed in the collective self. Through this experience, the individual's concern will begin to head not only towards himself but also towards others. At this stage, it is advisable to assign a *koan* to a practitioner, so that he can discover the individual that encompasses the whole, that is, his true nature, through one-on-one encounters with his teacher. This continuous discovery, Yamada and Shibayama argue, is a truly healing experience. Finally, we will argue that a multidisciplinary perspective that combines history, anthropology, and neurobiology is necessary to determine when and how *zazen* meetings began to be understood as group therapy and to determine whether and how they can help an individual to expand himself and include others and transcend his ordinary self.

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2025年9月27日(土) 14:10 ~ 15:40 Session Room 6 (Conference Room B)

## [Symposium 70] Approaches to the clients' 'everyday life' in psychotherapy and its links to 'mental liveliness'

Moderator: Rieko Shioji (Faculty of Health Sciences, Tokyo Metropolitan University), Yuichiro Abe (Department of Psychiatry, Ishiki Hospital)

### [SY-70-05] Raising awareness of social rhythm in daily clinical practices

\*Yuichiro Abe<sup>1</sup> (1. 1) Ishiki Hospital 2) Tokyo University and Graduate School of Social Welfare (Japan))  
キーワード : Routine、Social Rhythm Therapy、bipolar disorder

Interpersonal and Social Rhythm Therapy (IPSRT) was invented around 1990 by Ellen Frank and his colleagues at the University of Pittsburgh. Since then, this method has been promoted as a psychosocial intervention for people living with bipolar spectrum. SRT is based on the scientific knowledge that was developed at the time, namely chronobiological empirical research, while theoretically modifying the traditional interpersonal therapy for unipolar depression. IPSRT is also actively incorporated into the educational pamphlet of the Japanese Society of Mood Disorders, as a minimum method of psycho-education. The speaker has been involved in introducing and raising awareness of this clinician's manual (Seiwa Shoten, 2016). During the COVID-19 pandemic, the impact of lockdowns on the mind and body became an issue, and it was once again brought to attention (Murray, 2021). The routine that Social Rhythm Therapy (SRT) aims for is expected to promote resilience against illness relapse. Frank's insight was that they assumed the Social Zeitgeber theory (Ehlers, 1988) to be at the heart of the pathological mechanism of bipolar disorder, while relying on the traditional stress-vulnerability model. In addition, they utilized Social Rhythm Metrics (SRM), which they devised with her colleague, chronobiologist Timothy Monk (1990; 2002), to derive therapeutic effects from a self-report assessment of the regularity of a person's weekly lifestyle based on sleep hygiene behavior. This also relates to recent interests in measurement-based approaches in psychiatry. Habits are also an important element in reconstructing rhythm. Although the digitalization of SRT seems to be an inevitable trend, it is valuable that additional brief human support is still recommended (Swartz et al., 2021). Currently, as a new discipline called rhythmology has been developed, we have to reconsider social (societal) rhythm once more.

Symposium | Psychopharmacology : [Symposium 71] Exploring the potential of Traditional Indian yoga as a psychotherapy based on clinical experiences from other countries

2025年9月27日(土) 14:10 ~ 15:40 Session Room 7 (Conference Room C)

## [Symposium 71] Exploring the potential of Traditional Indian yoga as a psychotherapy based on clinical experiences from other countries

Moderator: Sachiyo Morita (Shiga university of Medical Science Hospital, Cancer Center)

[SY-71]

Exploring the potential of traditional Indian yoga as a psychotherapeutic modality: Clinical insights and cross-cultural perspectives

Keishin Kimura<sup>2</sup>, Sachiyo Morita<sup>1</sup>, Kahori Ito<sup>3</sup>, TumurOchir Gantsetseg<sup>4</sup>, Hengsheng Chen<sup>5</sup> (1. Shiga university of Medical Science Hospital, Cancer Center (Japan), 2. Japan Yoga Therapy Society (Japan), 3. Sinsapporo Mental Clinic (Japan), 4. National Center of Mental Health Mongolia, Department of Mental Health, School of Medicine, MNUMS (Mongolia), 5. China Academy of Sciences, Institute of Psychology Chengdu (China))

[SY-71-01]

Assessment and Instruction theory & methods in yoga as a therapy

\*Keishin Kimura<sup>1</sup> (1. Japan Yoga Therapy Society (Japan))

[SY-71-02]

Effects of Yoga Therapy on Psychiatric Symptoms and Cognitive Restructuring

\*Sachiyo Morita<sup>1</sup> (1. Shiga university of Medical Science Hospital, Cancer Center (Japan))

[SY-71-03]

Involvement of Yoga Therapy in Patients with Mental Illnesses

\*KAHORI ITO<sup>1</sup> (1. Sinsapporo Mental Clinic (Japan))

[SY-71-04]

FROM THE RESULTS OF THE FIRST STAGE OF EXPERIMENTAL RESEARCH ON THE USE OF THERAPEUTIC YOGA IN PEOPLE DEPENDENT ON ALCOHOL

\*Gantsetseg Tumur-Ochir<sup>1,2</sup>, Nasanjargal Lkhgavasuren<sup>1</sup>, Enkhchimeg Birenbaral<sup>1</sup>, Uranchimeg Erdenebaatar<sup>1</sup>, Enkhchimeg Chuluunbaatar<sup>1</sup>, Binderiya Bayanmunkh<sup>2</sup>, Uuriintuya Batmend<sup>2,3</sup>, Naidan Bat-Ulzii<sup>3,4</sup>, Bayarmaa Ganbold<sup>5</sup>, Gijir Jamsran<sup>1</sup>, Enkhnaran Tumurbaatar<sup>2,3</sup>, Enkhsaikhan Tumurbaatar<sup>1</sup>, Kherlenzaya Enkhtungalag<sup>1</sup>, Elena Kazantseva<sup>1,6</sup>, Hiromi Mori<sup>7</sup>, Yukiko Kezuka<sup>7</sup>, Kimura Keishin<sup>7</sup> (1. National Center for Mental Health of Mongolia (Mongolia), 2. Mongolian Neuroscience Society (Mongolia), 3. Brain and Mind Research Institute, Mongolian Academy of Sciences (Mongolia), 4. Department of Psychology, National University of Mongolia (Mongolia), 5. Creative Brain " Psychology Institute NGO (Mongolia), 6. SodMed Mental Health Center (Mongolia), 7. Japan Yoga Therapy Society (Mongolia))

[SY-71-05]

An Intervention Study on Yoga Therapy-Based Body-Mind Relaxation Exercises for Improving Adolescent Depressive Symptoms

\*HENGSHENG CHEN<sup>1</sup> (1. China Academy of Sciences Institute of Psychology Chengdu CHINA. (China))

Symposium | Psychopharmacology : [Symposium 71] Exploring the potential of Traditional Indian yoga as a psychotherapy based on clinical experiences from other countries

2025年9月27日(土) 14:10 ~ 15:40 Session Room 7 (Conference Room C)

## [Symposium 71] Exploring the potential of Traditional Indian yoga as a psychotherapy based on clinical experiences from other countries

Moderator: Sachiyo Morita (Shiga university of Medical Science Hospital, Cancer Center)

### [SY-71] Exploring the potential of traditional Indian yoga as a psychotherapeutic modality: Clinical insights and cross-cultural perspectives

Keishin Kimura<sup>2</sup>, Sachiyo Morita<sup>1</sup>, Kahori Ito<sup>3</sup>, TumurOchir Gantsetseg<sup>4</sup>, Hengsheng Chen<sup>5</sup> (1. Shiga university of Medical Science Hospital, Cancer Center (Japan), 2. Japan Yoga Therapy Society (Japan), 3. Sinsapporo Mental Clinic (Japan), 4. National Center of Mental Health Mongolia, Department of Mental Health, School of Medicine, MNUMS (Mongolia), 5. China Academy of Sciences, Institute of Psychology Chengdu (China))

キーワード : yoga therapy、mental illness、cognitive distortion、alcohol use disorder、adolescent depression

Originating in ancient India, Yoga is a traditional discipline that fosters enlightenment and holistic well-being. In recent years, its therapeutic potential has attracted increasing attention in medical research, and studies are being conducted to explore its effectiveness across a variety of physical illnesses, including asthma, cardiovascular disease, hematological malignancies, stroke, and breast cancer. Concurrently, research into the impact of yoga on mental health conditions is expanding. However, methodological heterogeneity across studies, particularly regarding yoga practice methods, makes it difficult to clearly understand its direct impact on core symptoms of mental illness, particularly cognition. This symposium aims to address these critical gaps by bringing together researchers and clinicians who are actively developing yoga therapy developed from traditional Indian yoga into mental illness treatment. Presenters will share their clinical experiences, report on observed patient outcomes, and collectively explore yoga's potential as a cross-cultural psychotherapeutic modality. The symposium features five speakers:

**1. Dr. Keishin Kimura** will present on his development of a structured yoga therapy, which integrates traditional Indian yoga principles for identifying and addressing cognitive distortions in clients. He will discuss his methodology for developing patient-specific practices and for training certified yoga therapists, highlighting the broader impact of his work across diverse therapeutic fields.

**2. Dr. Sachiyo Morita** will elucidate the impact of yoga therapy on mental illnesses by presenting findings derived from patient narratives and validated psychological assessments, aiming to clarify its therapeutic mechanisms.

**3. Dr. Kahori Ito** will share clinical cases demonstrating how the implementation of yoga therapy assessments within general outpatient settings facilitated the recovery process for patients with mental health conditions.

**4. Dr. Gantsetseg Tumulocir** will detail the practical application and observed effectiveness of yoga therapy for patients with alcohol use disorder in Mongolia.

**5. Dr. Hengsheng Chen** will present the efficacy of yoga therapy in improving moderate depressive symptoms among adolescents from a study in China.

Symposium | Psychopharmacology : [Symposium 71] Exploring the potential of Traditional Indian yoga as a psychotherapy based on clinical experiences from other countries

2025年9月27日(土) 14:10 ~ 15:40 Session Room 7 (Conference Room C)

## [Symposium 71] Exploring the potential of Traditional Indian yoga as a psychotherapy based on clinical experiences from other countries

Moderator: Sachiyo Morita (Shiga university of Medical Science Hospital, Cancer Center)

### [SY-71-01] Assessment and Instruction theory & methods in yoga as a therapy

\*Keishin Kimura<sup>1</sup> (1. Japan Yoga Therapy Society (Japan))

キーワード : yoga therapy、darsana、traditional medicine

It is thought that yoga was practiced in the Indus River basin during the Indus civilization, which flourished around 5000 years ago. For the past 100 years, there has been a movement to utilize this traditional method as a therapy (yoga therapy) for clients with mental and physical illnesses based on scientific evidence. Traditionally, the techniques of the yoga master and his disciples practicing darsana (a method of counseling) on a daily basis to assess the disciples' growth in humanity and the master's ability as a teacher have been passed down to this day. In particular, traditional yoga has attempted to modify the disciple's cognition. Traditional yoga is a form of cognitive behavioral therapy that has been handed down in India for thousands of years. The theory and practice of this "assessment and instruction" technique, as well as the theory and practice of "5,000 years of cognitive behavioral therapy in India", have been passed down over the years along with their own unique theories for understanding the structure and function of the human body and mind, and are now beginning to be used around the world as yoga therapy. The World Health Organization (WHO), which has its headquarters in Geneva, Switzerland, held a "The Working Group Meeting about benchmarks for training in Yoga" in New Delhi, India, just before the new coronavirus infection spread. More than 20 yoga instructors and experts from around the world were invited to participate, and the author also attended as a representative of East Asia. The WHO is trying to include yoga as a therapy in the same category as traditional Chinese medicine and other 7 forms of "traditional complementary and alternative medicine". In this presentation, I would like to outline the assessment theory and practical instruction techniques of yoga therapy, as well as these movements.

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## [Symposium 71] Exploring the potential of Traditional Indian yoga as a psychotherapy based on clinical experiences from other countries

Moderator: Sachiyo Morita (Shiga university of Medical Science Hospital, Cancer Center)

### [SY-71-02] Effects of Yoga Therapy on Psychiatric Symptoms and Cognitive Restructuring

\*Sachiyo Morita<sup>1</sup> (1. Shiga university of Medical Science Hospital, Cancer Center (Japan))

キーワード : effect of yogatherapy、cognitive distortion、mental illness

Yoga therapy is posited to exert beneficial effects on people with mental illness through specific poses and breathing techniques that promote body awareness with an emphasis on tension and relaxation. In our study, continuous engagement in these practices by patients with mental illness has demonstrated improvements in insomnia, reductions in anxiety, and an enhanced awareness of self and their surroundings. Furthermore, many participants exhibited a proactive approach to independent problem-solving. Another notable outcome is the spontaneous cognitive transformation observed. It's as if yoga brings out the power that humans originally have. Rooted in traditional Indian scriptures, yoga therapy aims to systematically evaluate cognitive distortions and normalize them through traditional meditation techniques. A typical example of this type of cognitive distortion is the misinterpretation of finite things as infinite, such as the belief that pain will last forever. This presentation will elucidate the observed changes and the amelioration of cognitive distortions through yoga therapy, supported by research conducted on patients with mental illness.

Symposium | Psychopharmacology : [Symposium 71] Exploring the potential of Traditional Indian yoga as a psychotherapy based on clinical experiences from other countries

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## [Symposium 71] Exploring the potential of Traditional Indian yoga as a psychotherapy based on clinical experiences from other countries

Moderator: Sachiyo Morita (Shiga university of Medical Science Hospital, Cancer Center)

### [SY-71-03] Involvement of Yoga Therapy in Patients with Mental Illnesses

\*KAHORI ITO<sup>1</sup> (1. Sinsapporo Mental Clinic (Japan))

キーワード : Mental illnesses、relapse、yoga therapy assessment

Mental illnesses often relapse, and treatment often takes a long time. Patients have to live with their condition, but so do their doctors. Doctors try to find the cause to stop the relapse. However, the repetition of relapse may make doctors give up elucidating the cause as something intractable, or attribute it to the patient's personality. The speaker was one of such doctors. In 2019, speaker encountered the concept of yoga therapy and realized that our behavior was a mistake. Yoga therapy was arranged and structured by Dr. Kimura Keishin from the ancient Indian yoga scriptures. It is a method of restoring physical and mental health by providing a yoga therapy assessment and teaching three stages of yoga, such as exercise, breathing techniques, and meditation that are tailored to the individual. Unfortunately, it is not possible to do all of these procedure in daily medical practice in Japan, where consultation time is limited, so the future challenge seems to be to train yoga therapists. This time, the speaker will present a case in which yoga therapy assessment was incorporated into medical treatment and helped the patient recover. By adopting this method, doctors would be able to understand the true suffering and hopes of their patients and offer them the support they need without blindly providing guidance on rehabilitation or adjusting medication. A case was a woman in her 20s with depression.

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## [Symposium 71] Exploring the potential of Traditional Indian yoga as a psychotherapy based on clinical experiences from other countries

Moderator: Sachiyo Morita (Shiga university of Medical Science Hospital, Cancer Center)

### [SY-71-04] FROM THE RESULTS OF THE FIRST STAGE OF EXPERIMENTAL RESEARCH ON THE USE OF THERAPEUTIC YOGA IN PEOPLE DEPENDENT ON ALCOHOL

\*Gantsetseg Tumur-Ochir<sup>1,2</sup>, Nasanjargal Lkhgavasuren<sup>1</sup>, Enkhchimeg Birenbaral<sup>1</sup>, Uranchimeg Erdenebaatar<sup>1</sup>, Enkhchimeg Chuluunbaatar<sup>1</sup>, Binderiya Bayanmunkh<sup>2</sup>, Uuriintuya Batmend<sup>2,3</sup>, Naidan Bat-Ulzii<sup>3,4</sup>, Bayarmaa Ganbold<sup>5</sup>, Gijir Jamsran<sup>1</sup>, Enkhnaran Tumurbaatar<sup>2,3</sup>, Enkhsaikhan Tumurbaatar<sup>1</sup>, Kherlenzaya Enkhtungalag<sup>1</sup>, Elena Kazantseva<sup>1,6</sup>, Hiromi Mori<sup>7</sup>, Yukiko Kezuka<sup>7</sup>, Kimura Keishin<sup>7</sup> (1. National Center for Mental Health of Mongolia (Mongolia), 2. Mongolian Neuroscience Society (Mongolia), 3. Brain and Mind Research Institute, Mongolian Academy of Sciences (Mongolia), 4. Department of Psychology, National University of Mongolia (Mongolia), 5. Creative Brain" Psychology Institute NGO (Mongolia), 6. SodMed Mental Health Center (Mongolia), 7. Japan Yoga Therapy Society (Mongolia))

キーワード : alcohol, exercise, psychology, society

Research from countries such as Japan, Thailand, and the United States has demonstrated that incorporating therapeutic yoga into addiction recovery programmes improves treatment outcomes. However, there is limited research on this approach among individuals with alcohol use disorders in Mongolia. This study aims to examine the impact of combining yoga therapy with cognitive behavioural therapy (CBT) on alcohol abstinence, refusal ability, and quality of life. A clinical trial has been conducted since March 2025 in collaboration with the Japanese Society of Therapeutic Yoga, involving in-patient members of a hospital-based "Self-Help Group". Participants were randomly assigned to an experimental group (yoga + CBT) and a control group (CBT only) in a 1:1 ratio. Each participant in the experimental group practised yoga daily for 3 months. Data collection used three internationally validated instruments: the Alcohol Relapse Risk Assessment Scale (ARRS), WHOQOL-BREF, and the Rosenberg Self-Esteem Scale (RSES). We administered these in four phases through one-on-one interviews. The study received ethical approval from the Ministry of Health of Mongolia. Data were analysed using SPSS 25. A total of 121 individuals aged 27–71 participated, with 66 in the experimental group and 55 in the control group. By comparing baseline and fourth-week scores, the experimental group showed statistically significant improvements in physical health (35.87 to 44.57), mental well-being (32.87 to 46.13), and social relationships (34.3 to 42.6), while the control group saw declines in all three areas. Self-esteem scores also improved in the experimental group (from 39.2 to 42.03) but declined in the control group. In conclusion, integrating therapeutic yoga into conventional treatment significantly enhanced participants' physical and mental health, self-esteem, and social functioning compared to CBT alone.

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## [Symposium 71] Exploring the potential of Traditional Indian yoga as a psychotherapy based on clinical experiences from other countries

Moderator: Sachiyo Morita (Shiga university of Medical Science Hospital, Cancer Center)

### [SY-71-05] An Intervention Study on Yoga Therapy-Based Body-Mind Relaxation Exercises for Improving Adolescent Depressive Symptoms

\*HENGSHENG CHEN<sup>1</sup> (1. China Academy of Sciences Institute of Psychology Chengdu CHINA. (China))

キーワード : Yoga therapy、Teenagers health services、Relieve depression

The "2023 China Depression Blue Book" reveals that there are 95 million depression patients in China, with those under 18 accounting for up to 30% of the total. A survey of over 30,000 teenagers conducted by the Institute of Psychology, Chinese Academy of Sciences, indicates that 14.8% of them are at risk of depression. In light of this, exploring non-pharmacological treatments is particularly urgent. This study aims to explore the effectiveness of yoga therapy in improving depressive symptoms among teenagers. The study selected 60 middle school students aged 13-18 with depressive symptoms and randomly assigned them to an intervention group (yoga therapy, n=30) and a control group (routine rehabilitation, n=30) using a randomized controlled trial (RCT) method. After a three-month intervention, changes in depressive symptoms were compared between the two groups. The intervention group received yoga therapy tailored to students' schedules, guided by professional instructors in a "5+1" model weekly, which involved 10 minutes of online practice on weekdays and 50 minutes of offline practice on weekends, to ensure standardized movements and reduce bias. As the first application of yoga therapy among Chinese teenagers, this study is of great significance in promoting the development of psychiatry among this group, strengthening early prevention and non-pharmacological rehabilitation for minors' mental health. It provides a diversified safeguard plan for the mental health of teenagers worldwide and contributes to the development of psychiatry.

## Symposium | Medical Anthropology : [Symposium 72] Anthropology Philosophy, Spirituality, and Psychiatry

2025年9月27日(土) 15:50 ~ 17:20 Session Room 1 (Main Hall A)

## [Symposium 72] Anthropology Philosophy, Spirituality, and Psychiatry

Moderator: Tsuyoshi Akiyama (World Federation for Mental Health), Goffredo Bartocci (World Association of Cultural Psychiatry, Co-Founder and Past President)

[SY-72]

### Anthropology Philosophy, Spirituality, and Psychiatry

Tsuyoshi Akiyama<sup>1</sup>, Nami Lee<sup>2</sup>, Junko Kitanaka<sup>3</sup>, Marcos de Noronha<sup>4</sup>, Goffredo Bartocci<sup>5</sup> (1. Rokubancho Mental Clinic (Japan), 2. Seoul National University (Korea), 3. Keio University (Japan), 4. Brazilian Association of Cultural Psychiatry (Brazil), 5. University of Torino (Italy))

[SY-72-01]

#### Dementia as a basis of neurodiversity in Japan: A Medical Anthropological Perspective

\*Junko Kitanaka<sup>1</sup> (1. Keio University (Japan))

[SY-72-02]

#### NEUROSCIENCE, SPIRITUALITY AND PSYCHIATRY

\*Marcos de Noronha<sup>1</sup> (1. Brazilian Association of Cultural Psychiatry (Brazil))

[SY-72-03]

#### The Role of Mythology in Shaping the Self and Its Transcendental Counterpart

\*Goffredo Bartocci<sup>1,2,3</sup> (1. Italian Institute of Transcultural Mental Health, Co-Founder (Italy), 2. World Association of Cultural Psychiatry, Co-Founder and Past President (Italy), 3. Transcultural Psychiatry Section, Italian Society of Psychiatry, Co-Founder and Past President (Italy))

## Symposium | Medical Anthropology : [Symposium 72] Anthropology Philosophy, Spirituality, and Psychiatry

2025年9月27日(土) 15:50 ~ 17:20 Session Room 1 (Main Hall A)

**[Symposium 72] Anthropology Philosophy, Spirituality, and Psychiatry**

Moderator: Tsuyoshi Akiyama (World Federation for Mental Health), Goffredo Bartocci (World Association of Cultural Psychiatry, Co-Founder and Past President)

**[SY-72] Anthropology Philosophy, Spirituality, and Psychiatry**

Tsuyoshi Akiyama<sup>1</sup>, Nami Lee<sup>2</sup>, Junko Kitanaka<sup>3</sup>, Marcos de Noronha<sup>4</sup>, Goffredo Bartocci<sup>5</sup> (1. Rokubancho Mental Clinic (Japan), 2. Seoul National University (Korea), 3. Keio University (Japan), 4. Brazilian Association of Cultural Psychiatry (Brazil), 5. University of Torino (Italy))

キーワード : Anthropology、Philosophy、Spirituality

This symposium aims to show syncretism among anthropological, philosophical, historical, psychological, and biological approaches. Nami Lee presents spirituality as a psychological engagement in a search for purposes and meanings beyond the individual dimension. A holistic medical approach, including psycho-socio-spiritual realms, can facilitate individual well-being regardless of religious background. Based on the literature review, practical guidelines to improve spirituality in medical education and training will be suggested. Junko Kitanaka discusses dementia in Japan from the basis of neurodiversity, presenting a medical anthropological perspective. She questions how we can discuss the brain in psychiatry in a way that fosters understanding and empathy. While the dementia population exceeds five million in Japan, she asks in what ways the “brain talks” can lead not to alienation and social fragmentation but rather to a broader scope for empathy and social empowerment. Marcos de Noronha clarifies that anthropology and psychiatry provide complementary insight. By expanding its studies across diverse cultures, anthropology reveals that behaviors in modern societies are not universally normative but deeply influenced by cultural factors. Suicide is undoubtedly associated with sociocultural dynamics. With the Nahua in Mexico, death is not inherently harmful; rather, recurring suicide among Indigenous groups suggests a linkage between social disintegration and the loss of cultural cohesion. Bartocci delves into the cultural construction of the Western approach to understanding the coexistence, clash, and interaction between “Science and Faith.” Following the principles of Cultural Psychiatry, the focus will be on the role of mythologies in shaping different manifestations of the Self. Identity construction is deeply rooted in specific psychological and social contexts. The emphasis will be on the recurring and influential narratives that often define the ethnic identity of populations. These narratives, embedded in parental structures and broader social groups, exert a profound influence usually attributed in traditional psychiatry to interpersonal relationships.

## Symposium | Medical Anthropology : [Symposium 72] Anthropology Philosophy, Spirituality, and Psychiatry

2025年9月27日(土) 15:50 ~ 17:20 Session Room 1 (Main Hall A)

**[Symposium 72] Anthropology Philosophy, Spirituality, and Psychiatry**

Moderator: Tsuyoshi Akiyama (World Federation for Mental Health), Goffredo Bartocci (World Association of Cultural Psychiatry, Co-Founder and Past President)

**[SY-72-01] Dementia as a basis of neurodiversity in Japan: A Medical Anthropological Perspective**

\*Junko Kitanaka<sup>1</sup> (1. Keio University (Japan))

キーワード : dementia、Japan、Medical Anthropology、neurodiversity

In an age of increasing obsession with the healthy brain, how can we talk about the brain in psychiatry in a way that fosters understanding and empathy? How can we begin to care for the brain in a way that does not alienate those who already suffer from neurobiological diseases such as dementia? These are questions that people are beginning to grapple with in Japan, which currently stands as the world's number-one "super-aged" society. With one-third of the population already over age 65, the number of people afflicted with dementia exceeds five million, and those with MCI (mild cognitive impairments) five million. Drawing on more than a decade of fieldwork among dementia experts, patients, and their families, with a focus on a cutting-edge neuropsychiatric department in Japan, I first want to illuminate how doctors explain dementia symptoms through neuroimages as a means of repairing strained family relationships and mitigating patients' sense of loneliness. I will then discuss how such "brain talk" is taken up by the dementia patient movement in their attempt to challenge the current obsession with the healthy brain. I ask in what ways these "brain talks" can lead not to alienation and social fragmentation but rather to a broader scope for empathy and social empowerment.

Symposium | Medical Anthropology : [Symposium 72] Anthropology Philosophy, Spirituality, and Psychiatry

2025年9月27日(土) 15:50 ~ 17:20 Session Room 1 (Main Hall A)

**[Symposium 72] Anthropology Philosophy, Spirituality, and Psychiatry**

Moderator: Tsuyoshi Akiyama (World Federation for Mental Health), Goffredo Bartocci (World Association of Cultural Psychiatry, Co-Founder and Past President)

**[SY-72-02] NEUROSCIENCE, SPIRITUALITY AND PSYCHIATRY**\*Marcos de Noronha<sup>1</sup> (1. Brazilian Association of Cultural Psychiatry (Brazil))

キーワード : NEUROSCIENCE、SPIRITUALITY、PSYCHIATRY、Belief、mediums

This work arises from experience with healers, or mediums, aiming to verify possible genetic markers in this group that could differentiate them from other people. Faith, even if subjective, can be intensified by material evidence. Belief supports the interaction between healer/patient, doctor/patient, and psychologist/patient, besides intensifying the symbolic effects of medication. One can compare the activity of doctors with that of healers, as both require elements that can strengthen the results of their practice. One such element is belief in the practitioner. Many of them possess the gift of mediumship, which has both a universal and transcendental dimension. By searching for genetic markers correlated with mediumship, the goal is to broaden our understanding of this phenomenon. The study of the exome—the smallest portion of the genome, but responsible for 85% of the proteins essential for life—has recently brought a new perspective. Experienced mediums, with more than ten years of practice and who work spontaneously without charging for their services, were selected. These mediums were compared to groups of similar individuals without mediumship, chosen among their first-degree relatives (mainly siblings). These two groups, closely related by kinship, grew up in the same socio-cultural environment and shared the same socio-economic conditions. A large number of genetic variants were found in the mediums that were not found in the non-mediums. Findings: 33 genes, referred to as candidate genes, were present in about one third of the mediums and in none of the non-mediums.

Symposium | Medical Anthropology : [Symposium 72] Anthropology Philosophy, Spirituality, and Psychiatry

2025年9月27日(土) 15:50 ~ 17:20 Session Room 1 (Main Hall A)

**[Symposium 72] Anthropology Philosophy, Spirituality, and Psychiatry**

Moderator: Tsuyoshi Akiyama (World Federation for Mental Health), Goffredo Bartocci (World Association of Cultural Psychiatry, Co-Founder and Past President)

**[SY-72-03] The Role of Mythology in Shaping the Self and Its Transcendental Counterpart**

\*Goffredo Bartocci<sup>1,2,3</sup> (1. Italian Institute of Transcultural Mental Health, Co-Founder (Italy), 2. World Association of Cultural Psychiatry, Co-Founder and Past President (Italy), 3. Transcultural Psychiatry Section, Italian Society of Psychiatry, Co-Founder and Past President (Italy))

キーワード : cultural construction of the Self、Science–Faith Interface、worldviews

This lecture aims to delve into the cultural construction of the Western approach to understanding the coexistence, clash, and interaction between “Science and Faith.” By following the principles of Transcultural and Cultural Psychiatry, which consider the diversity of worldviews as a key avenue for evaluating the influence of cultural factors on mental health, the focus will be on the role of mythologies in shaping different manifestations of the Self. Identity construction, in fact, is deeply rooted in specific psychological and social contexts that deliver diverse inputs. In this lecture, the emphasis will be on the recurring and influential narratives that often define the ethnic identity of populations. These narratives, embedded in parental structures and broader social groups, exert a profound influence often attributed in traditional psychiatry to interpersonal relationships. Many mythologies include elements involving ultra-human events. Such narratives shift the locus of control from the pragmatic Self to a transcendent Non-Self domain. For instance, the widespread belief that spirituality is a divine gift significantly shapes the psychological climate where the pragmatic Self develops. Although academic disciplines such as anthropology, philosophy, and the social and biological sciences respect the foundation of secular psychiatry, the enduring tension between the concept of a cosmogony “out of nothing” and evolutionary scientific theories remains unresolved. This debate can become more constructive by introducing cultural variables. A cultural and transcultural approach can illuminate the often-overlooked effects of *Homo sapiens*’ unique capacity to enact extreme transcendental acts in response to external reality. The combined influence of cultural factors and individual or collective transcendence techniques activates biological mechanisms that lead to special states of consciousness, such as trance. By adopting a well-tuned bio-psycho-sociocultural approach, it becomes possible to explore the complex exchanges between the realms of Science and Faith without succumbing to the reductionist constraints imposed by institutional dogmas. To shed light on the interaction between culture and the construction of the Self—an implicit theme of this symposium—this lecture will draw on William James’ assertion that religious beliefs are “an intellectually respectable object of study.” From a Roman perspective, it seems evident that the forces promoting theological spirituality or idealized secular supremacy (which, at their core, share a similar intent) continue to overshadow the contributions of honest secular psychiatry. It is increasingly evident that psychiatrists require expertise to make clinical inferences and differential diagnoses regarding any form of idolatry.

Symposium | Neurodevelopmental disorder : [Symposium 73] Recent Findings in Adult Neurodevelopmental Disorders

2025年9月27日(土) 15:50 ~ 17:20 Session Room 2 (Main Hall B)

## [Symposium 73] Recent Findings in Adult Neurodevelopmental Disorders

Moderator: Haruhisa Ohta (Showa Medical University Medical Institute of Developmental Disabilities Research), Dan Nakamura (Department of Psychiatry, Showa Medical University)

[SY-73-01]

### Recent Findings in Adult Neurodevelopmental Disorders

\*Dan Nakamura<sup>1</sup>, \*Haruhisa Ohta<sup>2</sup>, \*Shoko Shimoyama<sup>3</sup>, \*Pietro De Rossi<sup>4</sup>, Akira Iwanami<sup>1</sup> (1. Department of Psychiatry, Showa Medical University (Japan), 2. Showa Medical University Medical Institute of Developmental Disabilities Research (Japan), 3. Research Center for Advanced Science and Technology, The University of Tokyo (Japan), 4. Unit of Child and Adolescent Psychiatry, Ospedale Pediatrico Bambino Gesù (Italy))

[SY-73-02]

### Diagnosis and Treatment of Adult Developmental Disorders: A Study Using autism diagnostic observation schedule, second edition

\*Dan Nakamura<sup>1</sup>, Kenji Sanada<sup>1</sup>, Akira Iwanami<sup>1</sup> (1. Department of Psychiatry, Showa University School of Medicine (Japan))

[SY-73-03]

### Brain imaging research on neurodevelopmental disorders

\*Haruhisa Ohta<sup>1</sup> (1. Showa Medical University (Japan))

[SY-73-04]

### Gender Dysphoria as a subset of *Pervasive Social Dysphoria*: A Qualitative Analysis of the Life Story of Japanese Autistic adults with Gender Dysphoria

\*Shoko Shimoyama<sup>1</sup> (1. Research Center for Advanced Science and Technology, The University of Tokyo (Japan))

[SY-73-05]

### *Understanding ADHD in Adults*

\*Pietro De Rossi<sup>1</sup> (1. Bambino Gesù Children's Hospital (Italy))

Symposium | Nurodevelopmental disorder : [Symposium 73] Recent Findings in Adult Neurodevelopmental Disorders

2025年9月27日(土) 15:50 ~ 17:20 Session Room 2 (Main Hall B)

## [Symposium 73] Recent Findings in Adult Neurodevelopmental Disorders

Moderator: Haruhisa Ohta (Showa Medical University Medical Institute of Developmental Disabilities Research), Dan Nakamura (Department of Psychiatry, Showa Medical University)

### [SY-73-01] Recent Findings in Adult Neurodevelopmental Disorders

\*Dan Nakamura<sup>1</sup>, \*Haruhisa Ohta<sup>2</sup>, \*Shoko Shimoyama<sup>3</sup>, \*Pietro De Rossi<sup>4</sup>, Akira Iwanami<sup>1</sup> (1. Department of Psychiatry, Showa Medical University (Japan), 2. Showa Medical University Medical Institute of Developmental Disabilities Research (Japan), 3. Research Center for Advanced Science and Technology, The University of Tokyo (Japan), 4. Unit of Child and Adolescent Psychiatry, Ospedale Pediatrico Bambino Gesù (Italy))

キーワード : Neurodevelopmental Disorders、ASD、ADHD、adult

Developmental disorders in adulthood are an area that is attracting attention in both the field of mental health and society. However, research on developmental disorders in adulthood is still insufficient, as for a long time the focus has been on children and adolescents. Firstly, diagnosing developmental disorders in adulthood is often difficult. In adults with ASD or ADHD, other mental disorders often co-occur, and mood and anxiety disorders are particularly common. In cases where the main complaint is depression, the developmental disorder that lies behind it is often overlooked. Furthermore, it is not uncommon for cases of transient depression or mood swings to be diagnosed as bipolar disorder, rather than developmental disorders. Furthermore, the relationship between ASD and ADHD is still unclear. Although they were previously defined as not co-existing, current diagnostic criteria now recognize that they can co-exist. However, the similarities between the two in terms of clinical symptoms and other factors are significant, and it is not uncommon for specialist doctors to disagree on the diagnosis. Furthermore, in many cases, the characteristics of developmental disorders interfere with social life, such as work and study. Looking at Japanese society as a whole, there is a strong link between the characteristics of developmental disorders and social pathological phenomena such as bullying, truancy and social withdrawal, but it cannot be said that sufficient measures are being taken to address this. There are many areas of developmental disorders in adulthood that have not been sufficiently researched, but in this symposium, we would like to discuss some of the topics that have been in the news recently from several perspectives, including clinical pharmacology and diagnostic imaging.

Symposium | Nurodevelopmental disorder : [Symposium 73] Recent Findings in Adult Neurodevelopmental Disorders

2025年9月27日(土) 15:50 ~ 17:20 Session Room 2 (Main Hall B)

## [Symposium 73] Recent Findings in Adult Neurodevelopmental Disorders

Moderator: Haruhisa Ohta (Showa Medical University Medical Institute of Developmental Disabilities Research), Dan Nakamura (Department of Psychiatry, Showa Medical University)

### [SY-73-02] Diagnosis and Treatment of Adult Developmental Disorders: A Study Using autism diagnostic observation schedule, second edition

\*Dan Nakamura<sup>1</sup>, Kenji Sanada<sup>1</sup>, Akira Iwanami<sup>1</sup> (1. Department of Psychiatry, Showa University School of Medicine (Japan))

キーワード : Autism Spectrum Disorder、Attention Deficit Hyperactivity Disorder、Autism Diagnostic Observation Schedule、Second Edition、Gaze measurement、Guanfacine

In this symposium, we will report on some studies on the diagnosis and treatment of developmental disorders in adulthood conducted at Showa University Karasuyama Hospital.

Although ASD and ADHD have been considered to be different developmental disorders, there are many overlapping symptoms, and the relationship between the two disorders remains unclear. So we compared ASD symptoms in adults with 50 ASD, 69 ADHD, and 31 neurotypical controls using the ADOS-2. As a result, it was revealed that there was a high degree of similarity in clinical symptoms between the two groups.

There are also many similarities between the symptoms of ASD and schizophrenia, and the similarity in their symptoms often makes differential diagnosis difficult. We conducted the ADOS-2 on 40 schizophrenia and 50 ASD, and compared the results between the two groups to identify similarities and differences in the symptoms of the two groups.

Furthermore, with the aim of establishing biological markers for the diagnosis of developmental disorders, we conducted eye gaze measurement in human motion scenes of two movies in adults with 22 ADHD and 26 normal subjects, and concluded that the eye movement patterns in ADHD were more similar to those of healthy controls than those of ASD.

Regarding pharmacological treatment, Guanfacine extended-release (GXR) has emerged as a promising alternative to stimulant for the pharmacological treatment of ADHD. GXR is approved globally for treating ADHD in children and adolescents and was first authorized for adult ADHD in Japan in 2019. Since many countries and regions approve GXR only for pediatric ADHD, research on its efficacy in adults has rarely been conducted. We conducted a retrospective medical chart review in adults with ADHD who attended an ADHD specialty clinic at Showa University Karasuyama Hospital, and evaluated clinical outcomes in adults with ADHD treated with GXR in routine clinical practice.

Symposium | Neurodevelopmental disorder : [Symposium 73] Recent Findings in Adult Neurodevelopmental Disorders

2025年9月27日(土) 15:50 ~ 17:20 Session Room 2 (Main Hall B)

## [Symposium 73] Recent Findings in Adult Neurodevelopmental Disorders

Moderator: Haruhisa Ohta (Showa Medical University Medical Institute of Developmental Disabilities Research), Dan Nakamura (Department of Psychiatry, Showa Medical University)

### [SY-73-03] Brain imaging research on neurodevelopmental disorders

\*Haruhisa Ohta<sup>1</sup> (1. Showa Medical University (Japan))

キーワード : MRI、ASD、ADHD

Neurodevelopmental disorders are considered to be disorders of brain function, and brain imaging studies of neurodevelopmental disorders are actively being conducted. At Showa Medical University, MRI brain imaging studies have been conducted on ASD and ADHD in adults. Previous studies have reported that children with ASD have larger brain volumes, while those with ADHD have smaller brain volumes. Although ASD and ADHD share common pathologies, differences in brain volume have been observed between the two disorders. MRI can measure not only brain volume, but also white matter tracts and brain function. However, the number of studies directly comparing ASD and ADHD is insufficient and the differences between the two remain unclear. In this presentation, we will report on our study to understand the similarities and differences between ASD and ADHD in adults.

Symposium | Nurodevelopmental disorder : [Symposium 73] Recent Findings in Adult Neurodevelopmental Disorders

2025年9月27日(土) 15:50 ~ 17:20 Session Room 2 (Main Hall B)

## [Symposium 73] Recent Findings in Adult Neurodevelopmental Disorders

Moderator: Haruhisa Ohta (Showa Medical University Medical Institute of Developmental Disabilities Research), Dan Nakamura (Department of Psychiatry, Showa Medical University)

### [SY-73-04] Gender Dysphoria as a subset of *Pervasive Social Dysphoria*: A Qualitative Analysis of the Life Story of Japanese Autistic adults with Gender Dysphoria

\*Shoko Shimoyama<sup>1</sup> (1. Research Center for Advanced Science and Technology, The University of Tokyo (Japan))

キーワード : autism、gender diversity、neurodiversity、gender dysphoria、pervasive social dysphoria

Recently, there has been increased attention on putative relationship between autism and gender dysphoria (GD). To understand the nature of co-occurrence, exploring these individual's experience is essential, but previous research has little focus on them. Therefore, Shimoyama and Endo (2024; 2025) explored the diverse GD experiences of Japanese autistic transgender adults. And we found that most of them not only accumulate distress over gender norms (i.e. GD) but pervasive social norms as well, which we termed ***pervasive social dysphoria (PSD)***. In other words, their GD, the gender-related conflict caused by the imposition of gender norms, was a subset of PSD—the conflict related to the broader sense of self caused by the imposition of pervasive social norms. Thus, the co-occurring phenomenon with autism may be PSD from the inner perspectives, which should be investigated in future. Additionally, the PSD concept has implications for understanding the social experiences of autistic people today. Within the conventional medical paradigm, autistic people have been viewed as having a disability, which WHO (1980, p. 143) defines as 'any limitation or lack of ability to perform an activity in the manner or within the range considered normal for a human being', due to their impairment (i.e. ASD; APA, 2013). However, our studies indicate that autistic participants found it difficult to perform 'normally' because social norms and their manner of sharing are not inclusive of autistic people. Additionally, their desires, and circumstances of experiencing uncertainty and burden from social norms were not accepted by society, which led them to develop PSD. This finding suggests a divergence in the conceptualization of autism between the conventional medical paradigm and the inner perspectives (Shimoyama & Endo, 2024, p. 2595). At the symposium, the implications of PSD and the importance of including autistic people's perspectives in autism science will be discussed.

Symposium | Neurodevelopmental disorder : [Symposium 73] Recent Findings in Adult Neurodevelopmental Disorders

2025年9月27日(土) 15:50 ~ 17:20 Session Room 2 (Main Hall B)

## [Symposium 73] Recent Findings in Adult Neurodevelopmental Disorders

Moderator: Haruhisa Ohta (Showa Medical University Medical Institute of Developmental Disabilities Research), Dan Nakamura (Department of Psychiatry, Showa Medical University)

### [SY-73-05] *Understanding ADHD in Adults*

\*Pietro De Rossi<sup>1</sup> (1. Bambino Gesù Children's Hospital (Italy))

キーワード : ADHD、Adults、Update

Attention-Deficit/Hyperactivity Disorder (ADHD) is increasingly recognized as a condition that often persists into adulthood, posing significant challenges in diagnosis and management. This presentation provides an updated overview of key findings in the neurobiology of adult ADHD, highlighting recent insights from neuroimaging, genetic, and neurochemical studies that shed light on the disorder's complex pathophysiology. Special emphasis is placed on the evolving understanding of gender differences in clinical presentation, symptom expression, and treatment response, with women often being underdiagnosed due to subtler symptom profiles. Diagnostic challenges are also addressed, particularly in distinguishing ADHD from overlapping psychopathological conditions such as mood and anxiety disorders, substance use, and personality disorders. Additionally, the frequent co-occurrence of ADHD with other neurodevelopmental disorders, including Autism Spectrum Disorders and learning disabilities, is explored. The presentation reviews current best practices for pharmacological and non-pharmacological interventions in adults, considering both efficacy and tolerability. Emerging treatment approaches and long-term management strategies are also discussed. By integrating findings across disciplines, this presentation aims to support clinicians in improving diagnostic accuracy and optimizing individualized care for adults with ADHD, ultimately enhancing functional outcomes and quality of life.

Symposium | Global Mental Health : [Symposium 74] Psychiatry in times of disaster

2025年9月27日(土) 15:50 ~ 17:20 Session Room 3 (Large Hall A)

## [Symposium 74] Psychiatry in times of disaster

Moderator: Glen Milstein (The City College of New York), Meryam Schouler-Ocak (Charité University)

[SY-74]

### Psychiatry in times of disaster

Mian Yoon Chong<sup>3</sup>, Hiroaki Tomita<sup>4</sup>, Maiko Fukasawa<sup>5</sup>, Meryam Schouler-Ocak<sup>2</sup>, Tsuyoshi Akiyama<sup>1</sup> (1. Rokubancho Mental Clinic (Japan), 2. Charité University (Germany), 3. HMI Medical, Singapore & Regency Specialist Hospital (Singapore), 4. Tohoku University (Japan), 5. Fukushima Medical University (Japan))

[SY-74-01]

#### Disaster Psychiatry: Managing crisis as a leader

\*Mian Yoon Chong<sup>1</sup> (1. Regency Specialist Hospital, Malaysia (Malaysia))

[SY-74-02]

#### Worry about radiation and mental health after the Fukushima nuclear disaster

\*Maiko Fukasawa<sup>1</sup> (1. Fukushima Medical University (Japan))

[SY-74-03]

#### Role of media during a disaster – how should the reporting look like?

\*Meryam Schouler-Ocak<sup>1</sup> (1. Psychiatric University Clinic of Charité at St. Hedwig Hospital (Germany))

Symposium | Global Mental Health : [Symposium 74] Psychiatry in times of disaster

2025年9月27日(土) 15:50 ~ 17:20 Session Room 3 (Large Hall A)

**[Symposium 74] Psychiatry in times of disaster**

Moderator: Glen Milstein (The City College of New York), Meryam Schouler-Ocak (Charité University)

**[SY-74] Psychiatry in times of disaster**

Mian Yoon Chong<sup>3</sup>, Hiroaki Tomita<sup>4</sup>, Maiko Fukasawa<sup>5</sup>, Meryam Schouler-Ocak<sup>2</sup>, Tsuyoshi Akiyama<sup>1</sup> (1. Rokubancho Mental Clinic (Japan), 2. Charité University (Germany), 3. HMI Medical, Singapore & Regency Specialist Hospital (Singapore), 4. Tohoku University (Japan), 5. Fukushima Medical University (Japan))

キーワード : Disaster、 Mental Health、 Crisis

Millions are affected yearly by natural or man-made disasters, such as earthquakes, typhoons, hurricanes, floods, pandemics, the Ukraine-Russia war, or the Middle East conflicts. Many come unexpectedly and abruptly, creating a crisis that threatens human lives and normal living and affects not only individuals or communities but also regional stability. Such events are described as 'destructive,' 'catastrophic,' or 'deadly.' In the acute phase of disaster, the psychiatrist primarily facilitates natural recovery rather than treating pathology. In the acute aftermath of a disaster, the psychiatrist must be alert to organic mental disorders secondary to head injury, toxic exposure, illness, and dehydration. About half to two-thirds of these victims suffer from mental distress and stress-related disorders. The most frequent diagnosis made is posttraumatic stress disorder (PTSD), often along with mood and substance use disorder. In addition, most individuals report psychological symptoms that do not amount to disorders.

The overarching goal of disaster psychiatry is to facilitate normal recovery processes and prevent or diminish psychiatric morbidity. Thus, psychiatrists need many vital skills to assist communities. Involvement in disaster planning is an excellent way to help their communities. Moreover, psychiatric interventions targeted at the various longitudinal phases of disaster response must be a part of disaster management.

In this symposium, the first speaker will discuss "Disaster Psychiatry: Managing Crisis as a Leader." The second speaker will focus on "Longitudinal alterations in the psychosocial conditions of a community affected by the catastrophe and the need to provide long-term support in response to changing situations after". The third speaker will present "The worry about radiation and mental health after the Fukushima nuclear power plant accident occurred in March 2011". The last presentation will be on "Role of media during a disaster – how should the reporting look like?". All presentations will be discussed with the plenum.

Symposium | Global Mental Health : [Symposium 74] Psychiatry in times of disaster

2025年9月27日(土) 15:50 ~ 17:20 Session Room 3 (Large Hall A)

**[Symposium 74] Psychiatry in times of disaster**

Moderator: Glen Milstein (The City College of New York), Meryam Schouler-Ocak (Charité University)

**[SY-74-01] Disaster Psychiatry: Managing crisis as a leader**\*Mian Yoon Chong<sup>1</sup> (1. Regency Specialist Hospital, Malaysia (Malaysia))

キーワード : Disaster Psychiatry、Crisis intervention、Trauma &amp; disaster、PTSD

Each year, millions are affected by natural or man-made disasters some of which include earthquakes, typhoons, hurricanes, floods and similar large-scale calamities such as the recent covid-19 pandemic, Ukraine-Russia war or the Middle East conflicts. Many come unexpectedly and abruptly with little or no warning, creating a crisis that leads to an unstable and dangerous situation that threaten human lives and normal living and affecting not only individuals or communities but also to regional stability. Terms like 'destructive', 'catastrophic' or 'deadly' are frequently used to describe such event that is usually unpredictable and causing lots of disruption and uncertainty. Studies have shown that about half to two thirds of these victims suffered from mental distress and stress-related disorders. The most frequent diagnosis made is posttraumatic stress disorder (PTSD), often along with mood and substance use disorder. In addition, most individuals report psychological symptoms that do not amount to disorders. Every crisis is different from one another but their characteristics are similar, and requires immediate intervention to reduce damages and to restore the affected individuals or community to pre-crisis functioning. It is a real test and also an opportunity for a leader to turning the challenges into opportunity while making wise and rapid decisions, and taking courageous action to confront the crisis that requires management than solutions. It demands certain quality of a leader with a personality of flexibility, patience and endurance that can withhold or sustain the pressure, and to be decisive and determine at this critical moment. Crisis work however is not suitable for everyone, and a Crisis Management Team is necessary with solid training in certain knowledge, skills and attitude. Other than emergency and rescue, psychiatric team plays a vital role specifically during and aftermath the disaster with the recovery of traumatized victims. With findings from studies of psychological impact and management of disaster in major earthquakes, typhoons, industrial explosions, and epidemics in Taiwan, this report aims to review and analyze some common key elements as a leader in the management of a crisis.

Symposium | Global Mental Health : [Symposium 74] Psychiatry in times of disaster

2025年9月27日(土) 15:50 ~ 17:20 Session Room 3 (Large Hall A)

**[Symposium 74] Psychiatry in times of disaster**

Moderator: Glen Milstein (The City College of New York), Meryam Schouler-Ocak (Charité University)

**[SY-74-02] Worry about radiation and mental health after the Fukushima nuclear disaster**\*Maiko Fukasawa<sup>1</sup> (1. Fukushima Medical University (Japan))

キーワード : nuclear disaster、posttraumatic stress symptoms、worry about radiation

The Fukushima nuclear power plant accident following the Great East Japan Earthquake in March 2011 increased worry about the adverse health effects of radiation and affected the mental health of community residents. Based on the results of a longitudinal survey of non-evacuee community residents in Fukushima conducted five to 10 years after the accident, its long-term effects on mental health were explored. Although worry about radiation has gradually decreased, some people still have worry more than 10 years after the accident. Concerning mental health, posttraumatic stress symptoms were persistent. In terms of worry about radiation, those who experienced traumatic events in the Great East Japan Earthquake had stronger worry than those who did not. As for posttraumatic stress symptoms, after adjusting for the experiences of traumatic events, distrust in the government was correlated. In addition, while those with larger social networks tended to recover, those with small social networks had retained their symptoms. Worry about radiation predicted later posttraumatic stress symptoms, however, while worry about radiation had decreased with time during the study period, posttraumatic stress symptoms had not. Such symptoms after the nuclear disaster may be strongly affected by the social factors including the personal relationships with people around one and trust in the government. Disruptions in a community stemmed from the differences in the risk perception of radiation among those around one or sense of inequality in compensation, and strong distrust in the government were characteristic factors after the nuclear disaster, which may have persistent adverse effects on the mental health of those affected. Furthermore, besides their personal experiences, societal attitude to the nuclear disaster might also affect their mental health.

Symposium | Global Mental Health : [Symposium 74] Psychiatry in times of disaster

2025年9月27日(土) 15:50 ~ 17:20 Session Room 3 (Large Hall A)

**[Symposium 74] Psychiatry in times of disaster**

Moderator: Glen Milstein (The City College of New York), Meryam Schouler-Ocak (Charité University)

[SY-74-03] Role of media during a disaster – how should the reporting look like?

\*Meryam Schouler-Ocak<sup>1</sup> (1. Psychiatric University Clinic of Charité at St. Hedwig Hospital (Germany))

Mass media play a pivotal yet often misunderstood role in disasters. While coverage can amplify misinformation and reinforce harmful myths, effective communication has the potential to strengthen early warning systems, support timely evacuations, and foster community resilience. Research highlights both the risks and opportunities within the media-disaster relationship, underscoring how media can influence public perception, disaster planning, and recovery efforts.

As the key link between the public and emergency organizations, the media disseminate vital information before, during, and after crises. They educate communities, warn of hazards, report on affected areas, and alert officials and relief agencies to urgent needs. To fully realize these benefits, proactive and sustained collaboration between media professionals and disaster management organizations is essential.

This presentation examines the dual role of mass media in disasters and discusses strategies to strengthen their positive impact on preparedness, response, and recovery.

Symposium | Schizophrenia : [Symposium 75] Current Topic of Biological Psychiatry: Synapse, Glia and Inflammation

2025年9月27日(土) 15:50 ~ 17:20 Session Room 4 (Large Hall B)

## [Symposium 75] Current Topic of Biological Psychiatry: Synapse, Glia and Inflammation

Moderator: Takahiro A. Kato (Department of Psychiatry, Hokkaido University Graduate School of Medicine), Shigenobu Kanba (Kyushu University)

[SY-75]

### Current Topic of Biological Psychiatry: Synapse, Glia and Inflammation

Takahiro A. Kato<sup>1</sup>, Shigenobu Kanba<sup>2</sup>, Sota Kyuragi<sup>2</sup>, Si Tianmei<sup>3</sup>, Masaaki Iwata<sup>4</sup> (1. Hokkaido University (Japan), 2. Kyushu University (Japan), 3. Peking University (China), 4. Tottori University (Japan))

[SY-75-01]

Reverse translational research using human blood induced microglia-like (iMG) cells: Are microglia causing fires in the brain?

\*Takahiro A. Kato<sup>1</sup> (1. Department of Psychiatry, Hokkaido University Graduate School of Medicine (Japan))

[SY-75-02]

Development of biomarkers of hikikomori focusing on inflammation and microglia

\*Sota Kyuragi<sup>1</sup>, Takahiro A Kato<sup>2</sup> (1. Kyushu University (Japan), 2. Hokkaido University (Japan))

[SY-75-03]

Study the Immunoinflammatory mechanisms of Depression: The role of protein tyrosine phosphatase receptor type Z1 and astrocyte-microglia interactions

\*Tian-Mei Si<sup>1,2</sup> (1. National Clinical Research Center for Mental Disorders(Peking University Sixth Hospital/Institute of Mental Health) (China), 2. The Key Laboratory of Mental Health, Ministry of Health (Peking University) (China))

[SY-75-04]

Antidepressant Effects of  $\beta$ -Hydroxybutyrate Based on the Neuroinflammation Hypothesis of Depression and Its Potential for Clinical Application

\*Masaaki Iwata<sup>1</sup> (1. Tottori University (Japan))

Symposium | Schizophrenia : [Symposium 75] Current Topic of Biological Psychiatry: Synapse, Glia and Inflammation

2025年9月27日(土) 15:50 ~ 17:20 Session Room 4 (Large Hall B)

## [Symposium 75] Current Topic of Biological Psychiatry: Synapse, Glia and Inflammation

Moderator: Takahiro A. Kato (Department of Psychiatry, Hokkaido University Graduate School of Medicine), Shigenobu Kanba (Kyushu University)

### [SY-75] Current Topic of Biological Psychiatry: Synapse, Glia and Inflammation

Takahiro A. Kato<sup>1</sup>, Shigenobu Kanba<sup>2</sup>, Sota Kyuragi<sup>2</sup>, Si Tianmei<sup>3</sup>, Masaaki Iwata<sup>4</sup> (1. Hokkaido University (Japan), 2. Kyushu University (Japan), 3. Peking University (China), 4. Tottori University (Japan))

キーワード : inflammation、microglia、NMDA

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In this symposium, we will discuss the current topic of biological psychiatry especially focusing on neuro-glia interactions and brain inflammation.

Symposium | Schizophrenia : [Symposium 75] Current Topic of Biological Psychiatry: Synapse, Glia and Inflammation

2025年9月27日(土) 15:50 ~ 17:20 Session Room 4 (Large Hall B)

## [Symposium 75] Current Topic of Biological Psychiatry: Synapse, Glia and Inflammation

Moderator: Takahiro A. Kato (Department of Psychiatry, Hokkaido University Graduate School of Medicine), Shigenobu Kanba (Kyushu University)

### [SY-75-01] Reverse translational research using human blood induced microglia-like (iMG) cells: Are microglia causing fires in the brain?

\*Takahiro A. Kato<sup>1</sup> (1. Department of Psychiatry, Hokkaido University Graduate School of Medicine (Japan))

キーワード : microglia、inflammation、reverse-translational research

Microglia play crucial roles of inflammation in the brain. Postmortem brain analysis and PET imaging analysis are two major methods to assess microglial activation in human, and these studies have suggested activation of human microglia in the brain of patients with various neurological and psychiatric disorders. However, by using the above methods, only limited aspects of microglial activation can be measured. We have originally developed a technique to create directly induced microglia-like (iMG) cells from fresh human peripheral blood monocytes adding GM-CSF and IL-34 for 2 weeks, instead of brain biopsy and iPS technique (Ohgidani, Kato et al. Sci Rep 2014). Using the iMG cells, dynamic morphological and molecular-level analyses such as phagocytosis and cytokine releases after cellular-level stress exposures are applicable. Recently, we have confirmed the similarity between human iMG cells and brain primary microglia by RNAseq (Tanaka, et al. Front Immunology 2021). We believe that patients-derived iMG cells will take a role as one of the important surrogate markers to predict microglial activation in patients with various neurological and psychiatric disorders. In this symposium, we will introduce our latest findings using iMG cells with such patients. We have already revealed previously-unknown dynamic pathophysiology of microglia in patients with Nasu-Hakola disease (Sci Rep 2014), fibromyalgia (Sci Rep 2017), rapid-cycling bipolar disorder (Front Immunology 2017) and Moyamoya Disease (Sci Rep 2023). The iMG cells can analyze both state- and trait- related microglial characteristics of human subjects by repeated blood collection, which is especially valuable because majority of psychiatric disorders express situation- and time- oriented symptoms. We believe that the iMG techniques shed new light on clarifying dynamic molecular pathologies of microglia in a variety of neuropsychiatric and other brain disorders.

Symposium | Schizophrenia : [Symposium 75] Current Topic of Biological Psychiatry: Synapse, Glia and Inflammation

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## [Symposium 75] Current Topic of Biological Psychiatry: Synapse, Glia and Inflammation

Moderator: Takahiro A. Kato (Department of Psychiatry, Hokkaido University Graduate School of Medicine), Shigenobu Kanba (Kyushu University)

### [SY-75-02] Development of biomarkers of hikikomori focusing on inflammation and microglia

\*Sota Kyuragi<sup>1</sup>, Takahiro A Kato<sup>2</sup> (1. Kyushu University (Japan), 2. Hokkaido University (Japan))

キーワード : hikikomori、inflammation、iMG cells、hsCRP、bilirubin

**Objective:** Hikikomori, a severe form of social withdrawal now listed in the Diagnostic and Statistical Manual of Mental Disorders, Text Revision (DSM-5-TR), is a recognized global issue that frequently co-occurs with various psychiatric disorders. Our previous studies have identified key psychological traits, such as high suicidal ideation and diminished social connection. Despite these insights, the biological basis of hikikomori remains largely unclear, and biomarker studies are limited. This study aims to identify the biological characteristics of hikikomori by investigating biomarkers using both plasma analysis and a blood-derived cellular model. **Methods:** Participants were recruited from the Mood Disorder/Hikikomori Clinic at Kyushu University Hospital and were diagnosed with hikikomori if they met the criterion of spending almost all their time at home for more than six months. Following informed consent, we collected peripheral blood samples and detailed clinical data. These samples were utilized for acquiring biochemical data and obtaining peripheral blood mononuclear cells. These cells were subsequently differentiated into induced microglia-like (iMG) cells, a patient-derived cellular model used to analyze microglial function.

**Results:** Our analyses revealed a distinct psychobiological profile for patients with hikikomori. Psychologically, they exhibited not only high suicidal ideation but also pronounced loneliness, anhedonia, and psychomotor retardation. Biochemically, patients had significantly higher levels of high-sensitivity C-reactive protein (hsCRP) and significantly lower levels of total bilirubin. Furthermore, the analysis of iMG cells revealed different gene expression phenotypes in hikikomori patients. **Discussion:** Our findings suggest that hikikomori has a distinct pathophysiological background involving inflammation and increased susceptibility to oxidative stress as indicated by elevated hsCRP levels, reduced bilirubin levels, and iMG gene phenotypes. In psychiatric practice, where objective data is scarce, this combined methodology offers a powerful strategy for developing objective biomarkers and identifying novel therapeutic targets for this complex condition.

Symposium | Schizophrenia : [Symposium 75] Current Topic of Biological Psychiatry: Synapse, Glia and Inflammation

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## [Symposium 75] Current Topic of Biological Psychiatry: Synapse, Glia and Inflammation

Moderator: Takahiro A. Kato (Department of Psychiatry, Hokkaido University Graduate School of Medicine), Shigenobu Kanba (Kyushu University)

### [SY-75-03] Study the Immunoinflammatory mechanisms of Depression: The role of protein tyrosine phosphatase receptor type Z1 and astrocyte-microglia interactions

\*Tian-Mei Si<sup>1,2</sup> (1. National Clinical Research Center for Mental Disorders(Peking University Sixth Hospital/Institute of Mental Health) (China), 2. The Key Laboratory of Mental Health, Ministry of Health (Peking University) (China))

キーワード : Neuroinflammation、Chronic stress、Cytokines、Astroglia-microglia interaction

Major depressive disorder (MDD) is a highly disabling mental disorder characterized by persistent low mood, anhedonia, and cognitive impairment. Its etiology is complex, and the neuroinflammatory responses are considered a critical pathogenic mechanism of MDD, with the homeostatic balance of inflammatory cytokines and the immunoregulatory functions of glial cells being essential for maintaining normal neuroimmune function. Protein tyrosine phosphatase receptor type Z1 (PTPRZ1) has recently been identified as a key molecule involved in the regulation of neuroinflammation, and its genetic variations have been associated with the pathogenesis of MDD. We used the post-witness social defeat stress model, which has been validated for studying the immune mechanisms of MDD. We found the notably increased the expression of PTPRZ1 protein, the significant enhancement of PTPRZ1 phosphatase activity in the hypothalamus and the higher levels of proinflammatory cytokines in stressed mice. The behaviors and immune response could be reversed by both the typical antidepressants (fluoxetine) treatment and administration of the PTPRZ1 phosphatase inhibitor MY10. And additionally, MY10 treatment significantly inhibited the overactivation of microglia in the hypothalamus of stressed mice, reduced the number of M1 pro-inflammatory microglia, and increased the number of M2 anti-inflammatory microglia. This study first unveiled the critical role of PTPRZ1 in the neuroimmune regulation of the hypothalamus in chronically stressed mice. The Immune-inflammatory and astrocyte-microglia interactions play the important role in the pathology of MDD. this immune response. Additionally, this study found that the PTPRZ1 phosphatase inhibitor MY10 modulates microglial polarization and effectively alleviates depressive-like behaviors in stressed mice. These findings provide new theoretical insights into the pathogenesis of MDD and offer potential therapeutic targets for developing novel PTPRZ1-based treatment strategies.

Symposium | Schizophrenia : [Symposium 75] Current Topic of Biological Psychiatry: Synapse, Glia and Inflammation

2025年9月27日(土) 15:50 ~ 17:20 Session Room 4 (Large Hall B)

## [Symposium 75] Current Topic of Biological Psychiatry: Synapse, Glia and Inflammation

Moderator: Takahiro A. Kato (Department of Psychiatry, Hokkaido University Graduate School of Medicine), Shigenobu Kanba (Kyushu University)

### [SY-75-04] Antidepressant Effects of $\beta$ -Hydroxybutyrate Based on the Neuroinflammation Hypothesis of Depression and Its Potential for Clinical Application

\*Masaaki Iwata<sup>1</sup> (1. Tottori University (Japan))

キーワード : Depression、Inflammation、beta hydroxybutyrate

The monoamine hypothesis, which attributes depression to reduced function of neurotransmitters such as serotonin and norepinephrine, has long dominated the understanding of depression's pathophysiology. However, many patients show limited response to monoaminergic treatments, highlighting the need for alternative models. Recently, the neuroinflammation hypothesis has emerged, suggesting that chronic stress and environmental factors activate microglia in the central nervous system, triggering the release of pro-inflammatory cytokines like IL-1 $\beta$  and TNF- $\alpha$ . These disrupt neuroplasticity and may underlie depressive symptoms. We focused on  $\beta$ -hydroxybutyrate (BHB), an endogenous ketone body with anti-inflammatory properties, as a novel therapeutic approach. BHB is produced in the liver during fasting, exercise, or ketogenic diets and crosses the blood-brain barrier to act within the central nervous system. In animal models of stress-induced depression, BHB administration significantly improved depression-like behaviors. Mechanistically, BHB suppressed activation of the NLRP3 inflammasome and reduced brain IL-1 $\beta$  expression. It may also enhance BDNF expression via HDAC inhibition, contributing to both anti-inflammatory and neuroplasticity-promoting effects. Based on these findings, we are currently conducting a specified clinical trial in patients with depression to evaluate BHB's therapeutic potential. As BHB is already used as a dietary supplement and demonstrates high safety and oral bioavailability, it is a promising candidate for clinical application. This research supports a shift from the monoamine-based model to a molecularly informed neuroinflammatory paradigm of depression, offering a foundation for novel, mechanism-based interventions. Further multi-institutional collaboration is ongoing to clarify BHB's efficacy and mechanisms, aiming toward its integration into personalized psychiatric care.

Symposium | Cultural Psychiatry : [Symposium 76] Transcultural Education in Psychiatry: The Enduring Global Legacy of Prof. Norman Sartorius for Emerging Clinicians

2025年9月27日(土) 15:50 ~ 17:20 Session Room 5 (Conference Room A)

## [Symposium 76] Transcultural Education in Psychiatry: The Enduring Global Legacy of Prof. Norman Sartorius for Emerging Clinicians

Moderator: Nozomu Oya (Kyoto Prefectural University of Medicine), Akihisa Iriki (Osaka Psychiatric Medical Center)

[SY-76]

Transcultural Education in Psychiatry: The Enduring Global Legacy of Prof. Norman Sartorius for Emerging Clinicians

Morio Aki<sup>1</sup>, Michael Wallies<sup>2</sup>, Ekachaeryanti Zain<sup>3,4</sup>, Kumi Aoyama<sup>5</sup>, Masuo Tanaka<sup>6</sup>, Norman Sartorius<sup>7</sup> (1. Kyoto University (Japan), 2. Therapie auf Augenhoede (Switzerland), 3. Mulawarman University (Indonesia), 4. Niigata University (Japan), 5. Kanagawa Psychiatric Center (Japan), 6. Jikei Hospital (Japan), 7. Association for the Improvement of Mental Health Programmes (Switzerland))

[SY-76-01]

Cultivating Transcultural Leaders through Peer-Led Narratives: Twenty Years of the Course for the Academic Development of Psychiatrists (CADP) and the Japan Young Psychiatrists Organisation (JYPO)

\*Morio Aki<sup>1,2</sup>, Akihisa Iriki<sup>1,3</sup>, Nozomu Oya<sup>1,4</sup>, Toshihiro Shimizu<sup>1,5</sup>, Fumiya Miyano<sup>1,6</sup>, Toru Horinouchi<sup>1,6</sup> (1. Japan Young Psychiatrists Organization (Japan), 2. Kyoto University (Japan), 3. Osaka Psychiatric Medical Center (Japan), 4. Kyoto Prefectural University of Medicine (Japan), 5. Saitama Psychiatric Medical Center (Japan), 6. Hokkaido University (Japan))

[SY-76-02]

'We owe it to humanity to have good people.' - The Impact of Norman Sartorius on European psychiatry

\*Michael Wallies<sup>1</sup> (1. Therapie auf Augenhoede (Switzerland))

[SY-76-03]

The Enduring Legacy of Professor Norman Sartorius on Psychiatry in Indonesia: Insights from Early-Career Psychiatrists

\*Ekachaeryanti Zain<sup>1,2</sup> (1. Department of Psychiatry, Niigata University Graduate School of Medical and Dental Sciences (Japan), 2. Department of Psychiatry, Faculty of Medicine, Mulawarman University (Indonesia))

[SY-76-04]

Beyond Education: Prof. Norman Sartorius' Mentorship and the Organizational Maturity of JYPO

\*Kumi Uehara Aoyama<sup>1</sup> (1. Kanagawa Psychiatric Center (Japan))

[SY-76-05]

Before Course for academic development of psychiatry (CADP) to After Development supported by Professor Sartorius and JYPO members.

\*Masuo Tanaka<sup>1</sup> (1. Zikei Hospital/Zikei psychiatric institute (Japan))

Symposium | Cultural Psychiatry : [Symposium 76] Transcultural Education in Psychiatry: The Enduring Global Legacy of Prof. Norman Sartorius for Emerging Clinicians

2025年9月27日(土) 15:50 ~ 17:20 Session Room 5 (Conference Room A)

## [Symposium 76] Transcultural Education in Psychiatry: The Enduring Global Legacy of Prof. Norman Sartorius for Emerging Clinicians

Moderator: Nozomu Oya (Kyoto Prefectural University of Medicine), Akihisa Iriki (Osaka Psychiatric Medical Center)

### [SY-76] Transcultural Education in Psychiatry: The Enduring Global Legacy of Prof. Norman Sartorius for Emerging Clinicians

Morio Aki<sup>1</sup>, Michael Wallies<sup>2</sup>, Ekachaeryanti Zain<sup>3,4</sup>, Kumi Aoyama<sup>5</sup>, Masuo Tanaka<sup>6</sup>, Norman Sartorius<sup>7</sup> (1. Kyoto University (Japan), 2. Therapie auf Augenhoede (Switzerland), 3. Mulawarman University (Indonesia), 4. Niigata University (Japan), 5. Kanagawa Psychiatric Center (Japan), 6. Jikei Hospital (Japan), 7. Association for the Improvement of Mental Health Programmes (Switzerland))

キーワード : Academic Education、Transcultural Education、Cross-cultural Psychiatry

For the advancement of psychiatry, it is important to offer young doctors an opportunity to gain an international perspective and to acquire professional and leadership skills. Prof Norman Sartorius is a leading psychiatrist who has enlightened the direction of psychiatry internationally. One of his contributions has been the establishment of the Courses for the Academic Development of Psychiatrists (CADP) which have been instrumental in fostering the acquisition of international perspectives and the development of leadership and professional skills of young psychiatrists around the world. In Japan, in particular, he organised the CADP for young psychiatrists in 2002 in collaboration with the Japanese Society of Psychiatry and Neurology. Since then, the CADP courses have been organised 22 times by young psychiatrists and have been handed down from generation to generation. This symposium will look back on Prof Sartorius' international awareness-raising activities and outline the systems that have emerged from his efforts and their impact on psychiatry in different countries. The symposium will introduce the Japan Young Psychiatrists Organisation (JYPO), an accredited NPO formed in Japan around the CADP, describe what activities its alumni are involved in, and what awareness-raising activities and results have been demonstrated in Europe and Asia. The session will then discuss the impact of these awareness-raising activities in the context of diverse cultures and changing times

Symposium | Cultural Psychiatry : [Symposium 76] Transcultural Education in Psychiatry: The Enduring Global Legacy of Prof. Norman Sartorius for Emerging Clinicians

2025年9月27日(土) 15:50 ~ 17:20 Session Room 5 (Conference Room A)

## [Symposium 76] Transcultural Education in Psychiatry: The Enduring Global Legacy of Prof. Norman Sartorius for Emerging Clinicians

Moderator: Nozomu Oya (Kyoto Prefectural University of Medicine), Akihisa Iriki (Osaka Psychiatric Medical Center)

### [SY-76-01] Cultivating Transcultural Leaders through Peer-Led Narratives: Twenty Years of the Course for the Academic Development of Psychiatrists (CADP) and the Japan Young Psychiatrists Organisation (JYPO)

\*Morio Aki<sup>1,2</sup>, Akihisa Iriki<sup>1,3</sup>, Nozomu Oya<sup>1,4</sup>, Toshihiro Shimizu<sup>1,5</sup>, Fumiya Miyano<sup>1,6</sup>, Toru Horinouchi<sup>1,6</sup> (1. Japan Young Psychiatrists Organization (Japan), 2. Kyoto University (Japan), 3. Osaka Psychiatric Medical Center (Japan), 4. Kyoto Prefectural University of Medicine (Japan), 5. Saitama Psychiatric Medical Center (Japan), 6. Hokkaido University (Japan))

キーワード : transcultural psychiatry、transcultural education、Leadership Development

#### Background

Since Prof. Norman Sartorius initiated the Course for the Academic Development of Psychiatrists (CADP) in Japan in 2002, the programme has evolved into a peer-run ecosystem that nurtures early-career psychiatrists capable of working across cultural and disciplinary borders. The Japan Young Psychiatrists Organisation (JYPO) now steward this legacy, hosting annual CADP courses and fostering a network that spans five continents.

#### Objective

This presentation offers a qualitative reflection on how a three-day residential course grew into a sustained platform for transcultural leadership, and distils lessons relevant to similar initiatives worldwide.

#### Approach

Drawing on personal narratives, archival documents, alumni testimonials, and informal dialogues held during CADP, we identified recurring motifs and transformative moments that illustrate the programme's impact. Themes were organised using Mezirow's Transformative Learning framework.

#### Findings

Three narrative arcs emerged: (1)From Observer to Actor - participants described a pivotal shift from passive learning to proactive global engagement; (2) Communities of Trust - cross-cohort mentoring cultivated psychological safety for experimentation; (3) Hand-over as Culture - a deliberate "train-the-next" ethic ensured continuity despite complete leadership turnover every two-to-three years. These stories reveal how experiential cross-cultural encounters can re-shape professional identity and inspire concrete actions, such as launching internationally-collaborated researches, coordinating other conferences worldwide, and influencing academic-conference management.

#### Conclusion

The CADP - JYPO experience demonstrates that brief, intensively shared experiences - when paired with peer governance and a narrative-driven culture - can seed enduring, border-spanning leadership. We propose practical heuristics for replicating such qualitative momentum in other regions.

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## [Symposium 76] Transcultural Education in Psychiatry: The Enduring Global Legacy of Prof. Norman Sartorius for Emerging Clinicians

Moderator: Nozomu Oya (Kyoto Prefectural University of Medicine), Akihisa Iriki (Osaka Psychiatric Medical Center)

### [SY-76-02] 'We owe it to humanity to have good people.' - The Impact of Norman Sartorius on European psychiatry

\*Michael Wallies<sup>1</sup> (1. Therapie auf Augenhoehe (Switzerland))

キーワード : Transcultural Education、Academic Education、Cross-cultural Psychiatry

Since Prof. Norman Sartorius lived and worked for many years in Europe in various positions his impact on transcultural psychiatry and the training of (young) psychiatrists was substantial and important. He gave numerous inspirational speeches at the Forum of the European Federation of Psychiatric Trainees (EFPT). This presentation aims to highlight the achievements of Professor Norman Sartorius in Europe over more than 50 years and how he inspired generations of young psychiatrists. To understand this better this presentation tries to put the broad range of activities he was and still is engaged in into perspective and context. The presentation is rounded off with a look into the future and how the positive impact can continue to inspire future generations of young people in Europe and around the world.

Symposium | Cultural Psychiatry : [Symposium 76] Transcultural Education in Psychiatry: The Enduring Global Legacy of Prof. Norman Sartorius for Emerging Clinicians

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## [Symposium 76] Transcultural Education in Psychiatry: The Enduring Global Legacy of Prof. Norman Sartorius for Emerging Clinicians

Moderator: Nozomu Oya (Kyoto Prefectural University of Medicine), Akihisa Iriki (Osaka Psychiatric Medical Center)

### [SY-76-03] The Enduring Legacy of Professor Norman Sartorius on Psychiatry in Indonesia: Insights from Early-Career Psychiatrists

\*Ekachaeryanti Zain<sup>1,2</sup> (1. Department of Psychiatry, Niigata University Graduate School of Medical and Dental Sciences (Japan), 2. Department of Psychiatry, Faculty of Medicine, Mulawarman University (Indonesia))

キーワード : Global Psychiatry、Early-Career Psychiatrists、Stigma Reduction、Leadership Development、Cultural Sensitivity

Professor Norman Sartorius's contributions to global psychiatry have profoundly influenced the development of psychiatric education, leadership, and stigma reduction worldwide. To explore his impact in Asia, we conducted a survey among Indonesian psychiatrists, gathering reflections on how his teachings shaped psychiatric practice and professional growth. The majority of respondents were early-career psychiatrists practicing in Indonesia, with 80% reporting familiarity with Professor Sartorius's work. A significant proportion identified his contributions as either "significant" or "very significant" to the advancement of psychiatry in Indonesia. His emphasis on international collaboration, leadership development, mental health advocacy, and stigma reduction emerged as key areas of influence. Indonesia, the world's largest archipelagic country, encompasses 1,331 ethnic categories, 633 ethnic groups, and 706 native languages. This diversity presents unique challenges for mental health professionals, who must navigate varying beliefs, stigma, and access to care. In this context, the global perspective championed by Professor Sartorius, emphasizing open-mindedness, cultural sensitivity, and mutual respect, has been particularly impactful. His teachings inspire Indonesian early-career psychiatrists to view cultural diversity not as a barrier, but as an opportunity for innovation, collaboration, and culturally sensitive mental health advocacy. The survey revealed remarkable resilience and commitment among young psychiatrists to advocacy and leadership. Stigma reduction was emphasized as a critical priority, highlighting how global mentorship and initiatives established by Professor Sartorius, such as the Courses for the Academic Development of Psychiatrists (CADP) and the formation of international professional networks among psychiatric trainees and early-career psychiatrists, can empower mental health professionals to perform leadership roles in countries where stigma remains prevalent. This presentation will share the survey findings, reflect on the continued relevance of Professor Sartorius's legacy in Indonesia, and discuss how his teachings continue to guide early-career psychiatrists in addressing evolving mental health challenges across Asia, with a particular focus on Indonesia.

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## [Symposium 76] Transcultural Education in Psychiatry: The Enduring Global Legacy of Prof. Norman Sartorius for Emerging Clinicians

Moderator: Nozomu Oya (Kyoto Prefectural University of Medicine), Akihisa Iriki (Osaka Psychiatric Medical Center)

### [SY-76-04] Beyond Education: Prof. Norman Sartorius' Mentorship and the Organizational Maturity of JYPO

\*Kumi Uehara Aoyama<sup>1</sup> (1. Kanagawa Psychiatric Center (Japan))

キーワード : Norman Sartorius、Japan Young Psychiatrists Organization、Postgraduate Training、International Collaboration、Mentorship

My journey with the Japan Young Psychiatrists Organization (JYPO) began in 2004, when it was still a voluntary group. I participated in the 3rd Course for Academic Development of Psychiatrists (CADP), supported by Prof. Norman Sartorius. Through his mentorship and that of other faculty, I gained essential skills in presentation, international communication, and psychiatric knowledge across cultures. Inspired by this experience, I joined JYPO's leadership and became its third president in 2007. Although JYPO's strengths lay in its youthful energy, agility, and broad, barrier-free network, we were independent from academic institutions and lacked access to expert guidance and research infrastructure. However, Prof. Sartorius generously supported our research planning, offering detailed advice that helped us succeed in various initiatives. With his encouragement, we expanded our activities to include research on postgraduate education, SCI-PANSS translation projects, international collaborations, and educational workshops. His mentorship shaped our vision and gave us the confidence to grow. A major milestone came in 2008, when JYPO became a registered NPO. That same year, with the support of Prof. Allan Tasman, President of PRCP, Prof. Fumitaka Noda, Chair of Congress, and Prof. Tsuyoshi Akiyama, and in collaboration with the PRCP 2008 Tokyo Congress, we hosted the "Pre Pacific Rim College of Psychiatrists The Fellowship Program for Academic Development of Psychiatrists," welcoming 42 young psychiatrists from 17 countries. Prof. Sartorius gave his signature lecture on "How to Give an Oral Presentation and Discussion," which he regularly delivers at CADP, greatly inspiring participants. As PRCP returns to Japan in 2025, we are grateful for this opportunity to reflect on the support we received from PRCP in 2008 and the enduring mentorship of Prof. Sartorius, who has guided us over many years.

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## [Symposium 76] Transcultural Education in Psychiatry: The Enduring Global Legacy of Prof. Norman Sartorius for Emerging Clinicians

Moderator: Nozomu Oya (Kyoto Prefectural University of Medicine), Akihisa Iriki (Osaka Psychiatric Medical Center)

[SY-76-05] Before Course for academic development of psychiatry (CADP) to After Development supported by Professor Sartorius and JYPO members.

\*Masuo Tanaka<sup>1</sup> (1. Zikei Hospital/Zikei psychiatric institute (Japan))

キーワード : JYPO、CADP、career change

A year and half ago, before I joined Japan Young Psychiatrists Organization (JYPO), and participated the Course for Academic Development of Psychiatrists (CADP), I had lost my confidence. My research topics was not going well, and I was stunned because I couldn't find a new goal to work hard. Additionally, I was frustrated and unable to find a new goal to work on. At a psychiatric hospital where I was newly assigned for training, I met a JYPO alumnus who was one of the founding members of JYPO, and he was introduced to JYPO and CADP, which I joined without fully understanding the content. The events there changed my outlook on life, many promising psychiatrists, who came to CADP from some countries, including Japan, were amazingly inspiring, and Professor Sartorius taught me to "think globally, act locally," and so on. Through these learnings in JYPO activities and CADP, I got the biggest paradigm shift in my life, and even looking back, it seemed like miracle. In this presentation, I would show you my story that how JYPO, CADP, and Professor Sartorius changed my career, including my life.

Symposium | Nerodiversity : [Symposium 77] Embracing Neurodiversity: Advancing Inclusive Workplaces for All Abilities

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## [Symposium 77] Embracing Neurodiversity: Advancing Inclusive Workplaces for All Abilities

Moderator: Fuminari Obuchi (Kaien Inc.)

[SY-77]

Embracing Neurodiversity: Advancing Inclusive Workplaces for All Abilities

Keita Suzuki<sup>1</sup>, Hasanen Al-Tairar, Takeo Kondo, Yoshihisa Kato (1. Kaien Inc. (Japan))

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[SY-77-01]

Unlocking Potential: Neurodiversity as a Competitive Advantage in the Modern Japanese Workplace

\*Keita Suzuki<sup>1</sup> (1. Kaien Inc. (Japan))

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[SY-77-02]

Diverse Abilities Center Leader of EY Japan

\*Yoshihisa Kato<sup>1</sup> (1. EY Japan (Japan))

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Symposium | Neurodiversity : [Symposium 77] Embracing Neurodiversity: Advancing Inclusive Workplaces for All Abilities

2025年9月27日(土) 15:50 ~ 17:20 Session Room 6 (Conference Room B)

## [Symposium 77] Embracing Neurodiversity: Advancing Inclusive Workplaces for All Abilities

Moderator: Fuminari Obuchi (Kaien Inc.)

### [SY-77] Embracing Neurodiversity: Advancing Inclusive Workplaces for All Abilities

Keita Suzuki<sup>1</sup>, Hasanen Al-Tairar, Takeo Kondo, Yoshihisa Kato (1. Kaien Inc. (Japan))

キーワード : Neurodiversity、Inclusion、Workplace

The "Embracing Neurodiversity: Advancing Inclusive Workplaces for All Abilities" symposium aims to foster a deeper understanding and appreciation of neurodiversity in the workplace. This event will bring together thought leaders, employers, neurodiverse individuals, and advocates to explore innovative strategies for creating more inclusive work environments. Attendees will gain insights into the unique strengths and challenges faced by neurodiverse employees, and learn about practical approaches for fostering inclusion, enhancing productivity, and driving organizational success. Sessions will cover topics such as inclusive hiring practices, workplace accommodations, the role of technology, and the importance of organizational culture in supporting neurodiverse talent. Join us in championing a future where all abilities are recognized and valued.

Symposium | Nerodiversity : [Symposium 77] Embracing Neurodiversity: Advancing Inclusive Workplaces for All Abilities

2025年9月27日(土) 15:50 ~ 17:20 Session Room 6 (Conference Room B)

## [Symposium 77] Embracing Neurodiversity: Advancing Inclusive Workplaces for All Abilities

Moderator: Fuminari Obuchi (Kaien Inc.)

### [SY-77-01] Unlocking Potential: Neurodiversity as a Competitive Advantage in the Modern Japanese Workplace

\*Keita Suzuki<sup>1</sup> (1. Kaien Inc. (Japan))

キーワード : Neurodiversity、Disability Employment、Workplace Inclusion、Japan

This presentation explores Japan's unique adoption of neurodiversity concept. Five domestic factors are crucial: 1) The government's economic and tech-focused framing, creating both opportunity and limitation; 2) A 50-year-old disability employment quota system, for which neurodiversity offers a more nuanced alternative to a rigid binary; 3) An urgent labor shortage due to severe demographic decline, increasing the value of diverse talent pools; 4) Rising school and work absenteeism, indicating a need for more flexible societal structures; and 5) The recent growth of online self-advocacy movements, empowering individuals to share their own stories.

Analyzing these trends, we argue that neurodiversity is a strategic necessity for Japan. It provides a vital framework to harness untapped human potential, foster innovation, and address the nation's most pressing socio-economic challenges.

Symposium | Neurodiversity : [Symposium 77] Embracing Neurodiversity: Advancing Inclusive Workplaces for All Abilities

2025年9月27日(土) 15:50 ~ 17:20 Session Room 6 (Conference Room B)

## [Symposium 77] Embracing Neurodiversity: Advancing Inclusive Workplaces for All Abilities

Moderator: Fuminari Obuchi (Kaien Inc.)

### [SY-77-02] Diverse Abilities Center Leader of EY Japan

\*Yoshihisa Kato<sup>1</sup> (1. EY Japan (Japan))

キーワード : Integrating neurodiverse individuals into the workforce、 Overcoming biases and stereotypes、 Providing appropriate training and support with PwD、 Fostering a culture of acceptance and understanding

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Yoshihisa Kato will address key challenges in integrating neurodiverse individuals into the workforce, such as overcoming biases and stereotypes, providing appropriate training and support, and fostering a culture of acceptance and understanding. Strategies for promoting self-awareness and advocacy among neurodiverse employees will be discussed, empowering them to effectively communicate their needs and contribute their unique perspectives.

Symposium | Suicide prevention : [Symposium 78] Suicide Prevention Laws in Japan, South Korea, and Taiwan: Achievements, Challenges, and Future Directions

2025年9月27日(土) 15:50 ~ 17:20 Session Room 7 (Conference Room C)

## [Symposium 78] Suicide Prevention Laws in Japan, South Korea, and Taiwan: Achievements, Challenges, and Future Directions

Moderator: Shu-Sen Chang (National Taiwan University), Tadashi Takeshima (Taisho University)

[SY-78]

Suicide Prevention Laws in Japan, South Korea, and Taiwan: Achievements, Challenges, and Future Directions

SHU-SEN CHANG<sup>1</sup>, Tae-Yeon Hwang<sup>2</sup>, Kevin Chien-Chang Wu<sup>1</sup>, Tadashi Takeshima<sup>3</sup> (1. National Taiwan University (Taiwan), 2. Korea Foundation for Suicide Prevention (Korea), 3. Taisho University (Japan))

[SY-78-01]

Historical development of Japan's suicide prevention: its attainments and challenges

\*Tadashi Takeshima<sup>1</sup>, Kazuhisa Najima<sup>2</sup> (1. Taisho University (Japan), 2. Ryukoku University (Japan))

[SY-78-02]

Suicide Prevention Act and Action Plan of Korea

\*Tae-Yeon Hwang<sup>1</sup> (1. Korea Foundation for Suicide Prevention (Korea))

[SY-78-03]

Suicide Prevention Act and Suicide Prevention Strategies in Taiwan

\*SHU-SEN CHANG<sup>1</sup> (1. National Taiwan University (Taiwan))

[SY-78-04]

A Global Examination of Suicide Prevention Legislations

\*Kevin Chien-Chang Wu<sup>1,2</sup>, Shu-Sen Chang<sup>3,4,5</sup> (1. Graduate Institute of Medical Education and Bioethics, National Taiwan University College of Medicine (Taiwan), 2. Department of Psychiatry, National Taiwan University Hospital (Taiwan), 3. Institute of Health Behaviors and Community Sciences and Global Health Program, College of Public Health, National Taiwan University (Taiwan), 4. Psychiatric Research Center, Wan Fang Hospital, Taipei Medical University (Taiwan), 5. Population Health Research Center, National Taiwan University (Taiwan))

Symposium | Suicide prevention : [Symposium 78] Suicide Prevention Laws in Japan, South Korea, and Taiwan: Achievements, Challenges, and Future Directions

⌚ 2025年9月27日(土) 15:50 ~ 17:20 🏠 Session Room 7 (Conference Room C)

## [Symposium 78] Suicide Prevention Laws in Japan, South Korea, and Taiwan: Achievements, Challenges, and Future Directions

Moderator: Shu-Sen Chang (National Taiwan University), Tadashi Takeshima (Taisho University)

### [SY-78] Suicide Prevention Laws in Japan, South Korea, and Taiwan: Achievements, Challenges, and Future Directions

SHU-SEN CHANG<sup>1</sup>, Tae-Yeon Hwang<sup>2</sup>, Kevin Chien-Chang Wu<sup>1</sup>, Tadashi Takeshima<sup>3</sup> (1. National Taiwan University (Taiwan), 2. Korea Foundation for Suicide Prevention (Korea), 3. Taisho University (Japan))

キーワード : Suicide、Suicide prevention、Suicide prevention law

Suicide remains a critical global public health issue, accounting for over 700,000 deaths annually. In East Asia, Japan, South Korea, and Taiwan have their national suicide rates above the global average level, with each recording a total number of 21037, 13978, and 3898 suicides in 2023, respectively. Recognizing suicide as a public health priority, these three nations have enacted comprehensive suicide prevention laws alongside other national strategies. Japan's Basic Act on Suicide Prevention, first introduced in 2006 and revised in 2016, represents a key national initiative in addressing the issue. South Korea followed with its Act on the Prevention of Suicide and the Creation of a Culture of Respect for Life in 2011, revising it multiple times in response to evolving challenges. Taiwan implemented its Suicide Prevention Act in 2019, marking a significant step forward in its national suicide prevention strategies. In this symposium, speakers from Japan, South Korea, and Taiwan will present the legislative history, implementation process, and subsequent revisions of these laws. They will discuss how these legal frameworks have shaped national suicide prevention strategies, resource allocation, and program development. Through an analysis of suicide trends before and after the introduction of these laws, the presenters will highlight key achievements, identify lessons learned, and explore ongoing challenges. The session will conclude with a panel discussion on future directions for strengthening suicide prevention laws and policies, focusing on the need for regional collaboration, a whole-of-government approach, and evidence-based interventions to further reduce national suicide rates.

Symposium | Suicide prevention : [Symposium 78] Suicide Prevention Laws in Japan, South Korea, and Taiwan: Achievements, Challenges, and Future Directions

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## [Symposium 78] Suicide Prevention Laws in Japan, South Korea, and Taiwan: Achievements, Challenges, and Future Directions

Moderator: Shu-Sen Chang (National Taiwan University), Tadashi Takeshima (Taisho University)

### [SY-78-01] Historical development of Japan's suicide prevention: its attainments and challenges

\*Tadashi Takeshima<sup>1</sup>, Kazuhisa Najima<sup>2</sup> (1. Taisho University (Japan), 2. Ryukoku University (Japan))

キーワード : suicide prevention、Japan、legal system

Japan has experienced three rapid increases in suicide deaths since the Asian-Pacific War: the first around 1955, the second around 1985, and the third beginning in 1998 and continuing until around 2011. In 2006, a sense of crisis over the increase in suicides led to the enactment of the Basic Act on Suicide Prevention by the Diet member's bill. Policies based on this Act, revisions to the Money Lending Business Act, and financial measures to encourage suicide prevention measures by local governments helped the number of suicides return to pre-surge level around 2016. The Basic Act was revised in 2016, transferring from the Cabinet Office to the Ministry of Health, Labor and Welfare, and requiring prefectures and municipalities to establish suicide prevention plans. Furthermore, in 2019, a new act was enacted by a legislative act of the Diet. The purpose of this act is to designate only one general incorporated association as a designated corporation to promote research and study on suicide prevention and the utilization of the results. The enactment of this act has been criticized as an abandonment by the government of the fundamental principles of suicide prevention. Although suicide deaths in Japan have returned to pre-surge level, the country now faces a new challenge: the increase in suicides among students. Japan's suicide prevention policy should be improved. This can be accomplished by addressing several issues. These are "stagnation in analysis of the actual situation and policy research" and "stagnation in efforts that require a long-term perspective. In addition, a scientific and bottom-up suicide prevention network needs to be developed. Furthermore, survivors' participation in policy making is indispensable. It is necessary to consolidate the two existing suicide prevention acts into one act and make the necessary amendments.

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## [Symposium 78] Suicide Prevention Laws in Japan, South Korea, and Taiwan: Achievements, Challenges, and Future Directions

Moderator: Shu-Sen Chang (National Taiwan University), Tadashi Takeshima (Taisho University)

### [SY-78-02] Suicide Prevention Act and Action Plan of Korea

\*Tae-Yeon Hwang<sup>1</sup> (1. Korea Foundation for Suicide Prevention (Korea))

キーワード : Suicide Prevention、 Suicide Prevention Act of Korea、 National Suicide Prevention Polivy

The Suicide Prevention Act was enacted in March 2011 as the suicide rate was surged. This act emphasizes the responsibilities of the central and local governments for suicide prevention and focuses on prevention and awareness improvement. To this end, the Minister of Health and Welfare establishes Action Plan every five years, and the central and local governments implement and evaluate annual suicide prevention plans. The government also perform the implementation of suicide surveys and psychological autopsies, integrate and manage suicide-related data, and establish and operate the national and regional suicide prevention centers to perform counseling, education, and crisis intervention tasks. The Suicide Prevention Act has been amended several times to reflect the latest suicide prevention programs, services and policies. The amendment in February 2022 included provisions of information on suicide attempt survivors from the police and fire departments to the local suicide prevention and community mental health and welfare centers (CMHC). The amendment in July 2023 incorporated measures for mandatory suicide prevention education in schools, public agencies, and medical and welfare facilities. The 5th Action Plan (2023-2027) aims to reduce the suicide death rate by 30% until 2027, through strengthening community-based suicide prevention policies and support for high-risk groups. This plan was structured around five major strategies and 15 key tasks. Firstly, in relation to the strategy of building Life Safety Network, the 5th Action Plan proposes expanding community-based suicide prevention programs and mental health screenings, mandating suicide prevention education, and introducing the Suicide Zero Town as a new project. The project is designed to implement community-specific suicide prevention programs at the township level, integrating various needed suicide prevention activities, including awareness campaigns, gatekeeper training, customized services for high-risk groups, and blocking access to suicide means.

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## [Symposium 78] Suicide Prevention Laws in Japan, South Korea, and Taiwan: Achievements, Challenges, and Future Directions

Moderator: Shu-Sen Chang (National Taiwan University), Tadashi Takeshima (Taisho University)

### [SY-78-03] Suicide Prevention Act and Suicide Prevention Strategies in Taiwan

\*SHU-SEN CHANG<sup>1</sup> (1. National Taiwan University (Taiwan))

キーワード : Suicide Prevention Act、 Suicide Prevention Strategies、 Taiwan

Taiwan's suicide rate more than doubled from 1990 to 2005, emerging as a major public health concern. In response, the National Suicide Prevention Center was established in 2005 to coordinate nationwide efforts. The Suicide Prevention Act, enacted in 2019, incorporated multiple strategies recommended by the World Health Organization, including public education, restricting access to means of suicide, improved media and online reporting practices, gatekeeper training, crisis hotlines, and aftercare services. Following the Act's implementation, Taiwan's suicide rate declined in 2020-2021. However, our research suggests this drop may have been influenced by the COVID-19 pandemic, which restricted access to and reduced the opportunity to implement certain methods for suicide (e.g., charcoal burning), complicating assessments of the Act's effectiveness. Our qualitative study with journalists found that the Suicide Prevention Act influenced media reporting practices, such as avoiding sensational descriptions and using alternative terms for suicide methods (e.g., "falling" instead of "jumping"). However, concerns were raised about ambiguous regulations, difficulties in maintaining reader engagement without sensational reporting, and a perceived inability to report factual details. Journalists expressed a need for clearer guidance and concrete examples of violations. We also evaluated the national aftercare program for individuals who attempted suicide. While aftercare was associated with increased repeat suicide attempt hospital presentations, it also correlated with reduced suicide risk. These findings suggest that aftercare may encourage help-seeking and prevent suicide. Overall, these findings underscore the importance and complexity of evaluating the implementation and effectiveness of national suicide prevention legislation and its strategies in reducing suicide rates.

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## [Symposium 78] Suicide Prevention Laws in Japan, South Korea, and Taiwan: Achievements, Challenges, and Future Directions

Moderator: Shu-Sen Chang (National Taiwan University), Tadashi Takeshima (Taisho University)

### [SY-78-04] A Global Examination of Suicide Prevention Legislations

\*Kevin Chien-Chang Wu<sup>1,2</sup>, Shu-Sen Chang<sup>3,4,5</sup> (1. Graduate Institute of Medical Education and Bioethics, National Taiwan University College of Medicine (Taiwan), 2. Department of Psychiatry, National Taiwan University Hospital (Taiwan), 3. Institute of Health Behaviors and Community Sciences and Global Health Program, College of Public Health, National Taiwan University (Taiwan), 4. Psychiatric Research Center, Wan Fang Hospital, Taipei Medical University (Taiwan), 5. Population Health Research Center, National Taiwan University (Taiwan))

キーワード : suicide prevention、legislation、law、act、WHO recommendation

#### Background

Suicide, defined as the intentional act of ending one's own life, caused an estimated 700,000 deaths globally in 2019, accounting for 1.3% of total mortality and ranking as the third leading cause of death among individuals aged 15 to 29. Beyond individual loss, suicide imposes significant emotional, social, and economic burdens on families and communities. In response, the World Health Organization (WHO) has emphasized the importance of comprehensive national prevention strategies, as outlined in *Preventing Suicide: A Global Imperative* (2014) and *Live Life: An Implementation Guide for Suicide Prevention in Countries* (2021). While some countries have enacted suicide prevention legislation, the extent to which these align with WHO recommendations remains uncertain.

#### Method

The research team conducted searches on Google and Google Scholar using the terms "suicide prevention" in combination with "act," "law," or "legislation" to identify countries and regions with relevant legal frameworks. Retrieved texts were translated into English and analyzed. Drawing from the two WHO reports, twelve key domains were identified as benchmarks for effective suicide prevention. These included public education, responsible media reporting, school-based programs, treatment of mental illness and substance use, care for somatic conditions linked to suicide, early risk identification, crisis response, post-attempt intervention, employment support, and limiting access to lethal means. Each legislation was assessed for inclusion of these domains.

#### Results

As of April 30, 2025, eight countries—Argentina, Brazil, Canada, Guyana, Japan, the Republic of Korea, Taiwan, and the United States—and two regions—Puerto Rico and South Australia—have enacted suicide prevention legislation. Canada's 2012 law focuses solely on urging a national suicide prevention framework and addresses only public education. Guyana's 2022 law covers most domains, except employment support and limiting access to lethal means. Notably, only Taiwan and the Republic of Korea explicitly address the restriction of lethal means in their legislations.

#### Conclusion

As a national policy instrument, suicide prevention legislation could play a critical role in

integrating efforts and defining priorities for suicide prevention. Aligning such laws with the WHO's evidence-based guidelines, alongside ongoing monitoring and evaluation, is essential for enhancing and sustaining their effectiveness.

Symposium | Psychiatric Diagnosis : [Symposium 115] Clinical Diagnosis is critical to advancing the improvement in clinical care and outcomes through research in mental health

2025年9月27日(土) 16:30 ~ 18:00 Session Room 8 (Meeting Room 1)

## [Symposium 115] Clinical Diagnosis is critical to advancing the improvement in clinical care and outcomes through research in mental health

Moderator: Megan Galbally (Monash University)

[SY-115]

Clinical Diagnosis is critical to advancing the improvement in clinical care and outcomes through research in mental health

Megan Galbally<sup>1</sup>, Josephine Power<sup>1</sup>, Izaak Lim<sup>1</sup>, Katherine Sevar<sup>1</sup>, Harish Kalra<sup>1</sup> (1. Monash University (Australia))

[SY-115-01]

Comparison and stability of measures of inattentive symptoms in childhood

\*Josephine Power<sup>1</sup> (1. Monash Health (Australia))

[SY-115-02]

Assessing depression in fatherhood research: Challenges and complexities in diagnostic and symptom measurement

\*Izaak Lim<sup>1,2</sup> (1. Monash University (Australia), 2. Monash Health (Australia))

[SY-115-03]

Clinical Diagnosis is critical to advancing the improvement in clinical care and outcomes through research in mental health

\*Katherine Sevar<sup>1,2</sup>, Harish Kalra<sup>1</sup> (1. Monash University (Australia), 2. Monash Health (Australia))

Symposium | Psychiatric Diagnosis : [Symposium 115] Clinical Diagnosis is critical to advancing the improvement in clinical care and outcomes through research in mental health

2025年9月27日(土) 16:30 ~ 18:00 Session Room 8 (Meeting Room 1)

## [Symposium 115] Clinical Diagnosis is critical to advancing the improvement in clinical care and outcomes through research in mental health

Moderator: Megan Galbally (Monash University)

### [SY-115] Clinical Diagnosis is critical to advancing the improvement in clinical care and outcomes through research in mental health

Megan Galbally<sup>1</sup>, Josephine Power<sup>1</sup>, Izaak Lim<sup>1</sup>, Katherine Sevar<sup>1</sup>, Harish Kalra<sup>1</sup> (1. Monash University (Australia))

キーワード : Clinical diagnosis、Research、Perinatal、Child

The importance of clinical diagnosis underpins much of contemporary health care decision making and poor diagnostic accuracy is frequently identified as a significant modifiable contributor to clinical variation and incidents. Research in perinatal and child mental health the use of diagnostic clinical measures would be by exception rather than an expectation of research design and methods in most research undertaken. Yet reviews continue to highlight as one of the barriers to progress in mental health research examining causal and aetiological pathways the gap in accuracy of phenotype and in particular the absence of inclusion of robust diagnostic measurement even when labour intensive and expensive methodologies such as genome wide association is undertaken. The paper will present data from a longitudinal pregnancy cohort study of 887 women that has followed these women and then their children from early pregnancy to 8 years of age using repeat diagnostic clinical measures in both mothers and children together with repeated dimensional and symptom based measures. This paper will first focus on the findings for repeat measurement of SCID and EPDS in mothers and the second part will focus on the repeat measurement of PAPA at 4 years and DISC at 8 years together with repeat CBCL in children within the study. Highlights will be the relationship between these measures of mental health, associations with predictors and outcomes in this sample and finally an exploration of subtypes of perinatal depression using EPDS and then the SCID collected in this study in mothers.

Symposium | Psychiatric Diagnosis : [Symposium 115] Clinical Diagnosis is critical to advancing the improvement in clinical care and outcomes through research in mental health

2025年9月27日(土) 16:30 ~ 18:00 Session Room 8 (Meeting Room 1)

## [Symposium 115] Clinical Diagnosis is critical to advancing the improvement in clinical care and outcomes through research in mental health

Moderator: Megan Galbally (Monash University)

### [SY-115-01] Comparison and stability of measures of inattentive symptoms in childhood

\*Josephine Power<sup>1</sup> (1. Monash Health (Australia))

キーワード : Inattentive symptoms、Diagnostic measurement、Child psychiatry

Accurate measurement of inattentive symptoms in children is essential to identify developmentally vulnerable individuals and plan intervention. However, discrepancies often arise between self-report tools and structured diagnostic interviews, complicated by interpretation of developmental norms. Measurement tools differ in mode of administration and content, their intended use for screening or diagnosis, and may vary in usefulness according to child developmental stage and age.

This study explores the alignment and predictive value of self-reported inattentive symptoms using the Child Behavior Checklist (CBCL) in comparison with clinician-administered diagnostic assessments—the Preschool Age Psychiatric Assessment (PAPA) and the Diagnostic Interview Schedule for Children (DISC) across two timepoints in childhood (4 and 8 years of age).

Participants included a community-based cohort of children assessed at early childhood and again at school age. At each wave, caregivers completed the CBCL as a measure of inattentive behaviors, while trained interviewers administered the PAPA and the DISC to establish the presence of inattentive symptoms meeting the threshold for DSM 5. We examined correlations and agreement between measures, assessed longitudinal stability of inattentive symptoms, and evaluated the predictive validity of early self-reports for later diagnostic outcomes.

Preliminary findings of this analysis will be presented. The results underscore the importance of integrating both caregiver-reported and diagnostic data in the evaluation of attention-related symptoms. These findings contribute to the ongoing discussion about the utility of brief screening tools versus structured diagnostic approaches, with a focus on early childhood.

Symposium | Psychiatric Diagnosis : [Symposium 115] Clinical Diagnosis is critical to advancing the improvement in clinical care and outcomes through research in mental health

2025年9月27日(土) 16:30 ~ 18:00 Session Room 8 (Meeting Room 1)

## [Symposium 115] Clinical Diagnosis is critical to advancing the improvement in clinical care and outcomes through research in mental health

Moderator: Megan Galbally (Monash University)

### [SY-115-02] Assessing depression in fatherhood research: Challenges and complexities in diagnostic and symptom measurement

\*Izaak Lim<sup>1,2</sup> (1. Monash University (Australia), 2. Monash Health (Australia))

キーワード : Fathers、Perinatal、Child and family

There is a growing body of research examining fathers' mental health and its impact on child development and family wellbeing. Depression has been of particular interest because of its high prevalence and potential impact on parenting experience and behaviour. Yet most of the screening tools and diagnostic frameworks for depression do not account for gender differences in symptom expression. This may have contributed to the under-recognition and under-diagnosis of depression in men.

This issue is especially relevant in perinatal mental health research, where studies of fathers rarely use diagnostic measures and typically rely on screening tools developed for mothers, such as the Edinburgh Postnatal Depression Scale (EPDS). Previous research has demonstrated that the EPDS has a different factor structure for fathers, and a lower positive predictive value for depression in fathers compared to mothers.

The transition to fatherhood represents a unique context for the onset of depression in men, associated with a unique combination of biological, psychological and social stressors. Yet few measures of depression have been validated in perinatal men, and most fail to capture the externalising symptoms more commonly reported by depressed men, such as irritability, substance use, risk taking, and poor impulse control.

Further conceptual and empirical work is required to enhance our understanding of depression in fathers and improve the methodological rigor of perinatal mental health research.

Symposium | Psychiatric Diagnosis : [Symposium 115] Clinical Diagnosis is critical to advancing the improvement in clinical care and outcomes through research in mental health

2025年9月27日(土) 16:30 ~ 18:00 Session Room 8 (Meeting Room 1)

## [Symposium 115] Clinical Diagnosis is critical to advancing the improvement in clinical care and outcomes through research in mental health

Moderator: Megan Galbally (Monash University)

### [SY-115-03] Clinical Diagnosis is critical to advancing the improvement in clinical care and outcomes through research in mental health

\*Katherine Sevar<sup>1,2</sup>, Harish Kalra<sup>1</sup> (1. Monash University (Australia), 2. Monash Health (Australia))

キーワード : perinatal psychiatry、cultural psychiatry、social determinants of psychiatry

The influence of migration on perinatal depression has been examined with evidence of the effect being mixed. A systematic review was undertaken to critically examine the influence of migration on the risk of developing perinatal depression among migrant women. A comprehensive search strategy using broad terms to capture the variation in language used to describe migrants, on multiple databases was applied. Most studies demonstrated increased perinatal depression in migrants with the majority of the studies (18/20) utilising only self-report measures with 15 using varied cut off scores of Edinburgh Postnatal Depression Scale (EPDS). The two studies utilising clinical diagnostic measures of depression demonstrated no difference in rates of perinatal depression. Firstly, the presentation will highlight the limitations of the reliance on current evidence using self-report measures for diagnosis of perinatal depression among women residing in low and middle income countries (LMIC), and women who migrate from LMIC. Secondly, the findings of the systematic review will be discussed with an emphasized need for robustly designed studies with inclusion of clinical diagnostic measures of depression and common covariates of perinatal depression, to influence policy and response. Thirdly, the presentation will argue that elevated scores on self-report measures including Edinburgh Postnatal Depression Scale (EPDS) may represent psychological distress secondary to other covariates such as domestic violence, or violence experienced during migration.

**Oral**

2025年9月27日(土) 10:40 ~ 12:10 Session Room 7 (Conference Room C)

**Oral 14**

[O-14-01]

A scoping review of qualitative studies assessing quality of life among individuals with Obsessive Compulsive Disorder across different cultural contexts.

\*Ku Nurul Izzah Ku Seman<sup>1</sup>, Shalisah Sharip<sup>1</sup>, Syahnaz Mohd Hashim<sup>1</sup>, Idayu Badilla Idris<sup>1</sup> (1. Universiti Kebangsaan Malaysia (Malaysia))

[O-14-02]

Personality Disorder and Culture

\*Roger Mulder<sup>1</sup> (1. University of Otago (New Zealand))

[O-14-03]

Development and Validation of a Perioperative Psychiatric Symptom Worsening Risk Score in Patients with Schizophrenia Spectrum Disorders: A retrospective cohort study

\*Yoshihiro Matsumoto<sup>1</sup>, Nobutaka John Ayani<sup>1,2</sup>, Masaki Fujiwara<sup>3</sup>, Toshiya Funatsuki<sup>4</sup>, Takashi Fukao<sup>3</sup>, Shinji Ueda<sup>3</sup>, Ai Takahashi<sup>4</sup>, Nozomu Oya<sup>1,5</sup>, Riki Kitaoka<sup>1</sup>, Shinichiro Inoue<sup>6</sup>, Jin Narumoto<sup>1</sup> (1. Kyoto Prefectural University of Medicine (Japan), 2. Maizuru Medical Center (Japan), 3. Okayama University Hospital (Japan), 4. Kansai Medical University (Japan), 5. Japanese Red Cross Kyoto Daini Hospital (Japan), 6. Nimi University (Japan))

[O-14-04]

36years in depression treatment ward

\*Yuichiro Tokunaga<sup>1</sup>, Michihiko Matsushita<sup>1</sup>, Reo Goto<sup>2,1</sup>, Hikaru Hori<sup>2</sup> (1. Shiranui Hospital (Japan), 2. Department of Psychiatry, Faculty of Medicine, Fukuoka University (Japan))

[O-14-06]

Cultural Dimensions of Hallucination and Delusion among Psychotic Patients in Java, Indonesia

\*Subandi Subandi<sup>1</sup>, Carla R. Marchira<sup>1</sup>, Nida Ul Hasanat<sup>1</sup>, Muhana Sofiati Utami<sup>1</sup>, Byron J Good<sup>2</sup> (1. Universitas Gadjah Mada (Indonesia), 2. Harvard Medical School (United States of America))

Oral

2025年9月27日(土) 10:40 ~ 12:10 Session Room 7 (Conference Room C)

## Oral 14

[O-14-01] A scoping review of qualitative studies assessing quality of life among individuals with Obsessive Compulsive Disorder across different cultural contexts.

\*Ku Nurul Izzah Ku Seman<sup>1</sup>, Shalisah Sharip<sup>1</sup>, Syahnaz Mohd Hashim<sup>1</sup>, Idayu Badilla Idris<sup>1</sup> (1. Universiti Kebangsaan Malaysia (Malaysia))

キーワード : Obsessive Compulsive Disorder、Quality of Life、scoping review

**Introduction:** The quality of life of individuals with Obsessive Compulsive Disorder (OCD) (QOL) was typically measured using available generic QOL scales, with the focus on evaluating its impact on their lives or as an intervention outcome. It has been acknowledged that the impact on QOL may vary across different societies and cultures. Some qualitative studies have been conducted to identify the effect of OCD on individuals' daily lives. Thus, this scoping review focused on synthesizing the literature on how QOL was affected in these individuals across different cultures, with a specific interest in extracting the core domains.

**Method:** A systematic search was conducted on MEDLINE, Web of Science, Science Direct, and Google Scholar databases to find relevant English-written articles published until 11 March 2025. Qualitative studies on adult patients' experiences dealing with OCD symptoms were included. This scoping review was performed following the PRISMA-Scr Checklist. Seven articles were included out of 38 articles screened for the analysis.

**Result:** Thematic synthesis revealed **five** core domains of QOL that typically affect individuals with OCD: *Psychological domain*, *Physical domain*, *Functional Outcomes*, *Spirituality*, and *Social domain*. The domains were interconnected, highlighting the complex nature of QOL in individuals with OCD. The Spirituality theme emerged, although it was not consistently discussed in different cultures, implying that assessments of QOL can be subjective and sensitive to cultural variations.

**Conclusion:** These findings highlight the multidimensional nature of QOL in OCD, where domains are interrelated and specific to cultures. This review emphasizes the importance of a holistic and culturally sensitive approach in measuring QOL for individuals with OCD.

Oral

2025年9月27日(土) 10:40 ~ 12:10 Session Room 7 (Conference Room C)

## Oral 14

### [O-14-02] Personality Disorder and Culture

\*Roger Mulder<sup>1</sup> (1. University of Otago (New Zealand))

キーワード : Personality Disorder、ICD 11 classification、Culture

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A review of the relationship between the new ICD 11 personality disorder classification system and the study of cultural influences on behaviour will be presented. The ICD 11 system offers significant advantages over previous classifications and aligns with models of normal personality such as the Five Factor model, which are widely used in cultural psychiatry. A new brief screening instrument for ICD 11 personality will be presented, which has been used in population studies. The author helped develop the measure and was also on the WHO ICD 11 Personality Disorder committee.

Oral

2025年9月27日(土) 10:40 ~ 12:10 Session Room 7 (Conference Room C)

**Oral 14****[O-14-03] Development and Validation of a Perioperative Psychiatric Symptom Worsening Risk Score in Patients with Schizophrenia Spectrum Disorders: A retrospective cohort study**

\*Yoshihiro Matsumoto<sup>1</sup>, Nobutaka John Ayani<sup>1,2</sup>, Masaki Fujiwara<sup>3</sup>, Toshiya Funatsuki<sup>4</sup>, Takashi Fukao<sup>3</sup>, Shinji Ueda<sup>3</sup>, Ai Takahashi<sup>4</sup>, Nozomu Oya<sup>1,5</sup>, Riki Kitaoka<sup>1</sup>, Shinichiro Inoue<sup>6</sup>, Jin Narumoto<sup>1</sup>  
 (1. Kyoto Prefectural University of Medicine (Japan), 2. Maizuru Medical Center (Japan), 3. Okayama University Hospital (Japan), 4. Kansai Medical University (Japan), 5. Japanese Red Cross Kyoto Daini Hospital (Japan), 6. Nimi University (Japan))

キーワード : schizophrenia spectrum disorders、Risk Score、Administrative psychiatry

**Background**

Some patients with schizophrenia spectrum disorders (SSDs) may experience a worsening of psychiatric symptoms during the perioperative period, even if their psychiatric symptoms are stable at the time of admission, requiring intervention by psychiatrists or transfer to a psychiatric ward. In Japan, the number of general hospitals with full-time psychiatrists or psychiatric beds is declining, highlighting the need for assessment tools to select the appropriate medical institution based on the risk of worsening psychiatric symptoms in patients. However, no objective tool currently exists to meet this need.

**Objective**

To develop and internally validate a simple scoring model to predict the risk of perioperative psychiatric symptom worsening in patients with SSDs.

**Methods**

We retrospectively analyzed medical records from three Japanese hospitals over five years (2017–2022). Eligible patients had SSDs and were admitted to non-psychiatric wards for surgery. Psychiatric symptom worsening was defined as: (1) changes in psychotropic medications for  $\geq 4$  consecutive days, (2) use of physical restraints due to psychiatric symptoms, or (3) transfer to a psychiatric ward. Three predictors were selected based on our previous research: (1) surgery duration  $>180$  minutes, (2) emergency surgery, and (3) admission from a location other than home. Each factor was assigned 1 point. Logistic regression confirmed all predictors as significant.

**Results**

Among 200 patients, 25 (12.5%) experienced psychiatric deterioration. The model demonstrated good discrimination (AUC = 0.743; bootstrap-adjusted AUC = 0.744, 95% CI: 0.632–0.841). A cutoff of  $\geq 1$  yielded high sensitivity (88.0%) and low specificity (37.1%); a score of 3 yielded high specificity (98.9%) and low sensitivity (24.0%). Patients were classified into three risk groups: low (0), medium (1–2), and high (3).

**Conclusion**

This model may support clinicians in assessing perioperative psychiatric risk and selecting appropriate care settings, and requires external validation.

Oral

2025年9月27日(土) 10:40 ~ 12:10 Session Room 7 (Conference Room C)

**Oral 14****[O-14-04] 36years in depression treatment ward**

\*Yuichiro Tokunaga<sup>1</sup>, Michihiko Matsushita<sup>1</sup>, Reo Goto<sup>2,1</sup>, Hikaru Hori<sup>2</sup> (1. Shiranui Hospital (Japan), 2. Department of Psychiatry, Faculty of Medicine, Fukuoka University (Japan))

キーワード : ward for mood disorders, patient assessment, ambivalence of dependence

**Introduction**

Since 1989, the fully open ward for mood disorders at Shiranui Hospital has admitted 6,544 patients. The ward's design incorporates natural sensory stimuli to activate the five senses and promote healing. I would like to report on the results so far.

**1. Method**

Treatment is not only medication, but also All 90 minutes of each week staff meeting, personal and group psychotherapy, family therapy, mindfulness, and so on.

**2. results**

2023 1 year, mean HAM-D scores improved from 24.7 at admission to 10.4 after one month, and 7.7 at discharge. These results were almost identical to those previously presented at APA .78% of patients had suicidal ideation at the time of hospitalization and it drops to 13% in one month. 15 persons committed suicide out of 6,544 people.

**3. patient assessment**

We conducted a comparative study of medical evaluations of inpatients in 2003 and 2022. The results were As for whether received the treatment you wanted, "Yes" it rose from 65% to 94%. As for treatment with guaranteed quality, "yes" it rose from 68% to 87%.

**consideratoin**

We believe that the following factors are responsible for the rapid recovery of symptoms and constant patient evaluation.

1. Emphasis on the treatment environment.

2. 90minutes weekly conferences.

3. Understanding the ambivalence of dependence of depressed people and the lack of security in relationships.

When patients expressed their repressed emotions, we accepted them as a team, even if they were aggressive.

Oral

2025年9月27日(土) 10:40 ~ 12:10 Session Room 7 (Conference Room C)

## Oral 14

## [O-14-06] Cultural Dimensions of Hallucination and Delusion among Psychotic Patients in Java, Indonesia

\*Subandi Subandi<sup>1</sup>, Carla R. Marchira<sup>1</sup>, Nida Ul Hasanat<sup>1</sup>, Muhana Sofiati Utami<sup>1</sup>, Byron J Good<sup>2</sup> (1. Universitas Gadjah Mada (Indonesia), 2. Harvard Medical School (United States of America))

キーワード : Hallucination、Delusion、Cultural dimension、Psychosis、Java、Indonesia

Hallucination and delusion are culturally and socially constructed. They are not only the manifestation of the internal world of psychotic patients, but also the reflection of their external world. This research aims to explore the varieties of hallucinations and delusions experienced by Javanese psychotic patients and their relation to their sociocultural environments. We employed a case study method by involving 15 psychotic patients recruited from the local hospitals. We conducted interviews with participants and their family members in their home settings, allowing us to observe their everyday lives. The thematic analysis identified six themes describing participants' experiences. First, Javanese mythology, in which some participants believed in meeting Nyai Loro Kidul, the beautiful and powerful spirit queen of the South Sea, who was always depicted as dressed in green. Second, some reported seeing Javanese spiritual beings, such as *buto ijo*, *genderuwo*, and *pocong*, which threatened them. Third, Islamic religious beliefs, in which some participants saw angels, were influenced by the archangel Gabriel and Jin, or involved experiencing the *padhang mahsyar*, a gathering place of final judgment after the Day of Doom. Fourth, participants mentioned national political issues such as the 1965 massacre of communist party members and the corruption trial of the son of former president Suharto. Finally, the fifth is the global issues, such as the 9/11 tragedy, and the figures of Osama bin Laden, Lady Diana, and were part of participants' delusional experiences. The study concludes that the hallucinations and delusions of psychotic patients are the pseudo-reality that the patient constructs as a reflection of the real-life of contemporary Javanese culture, incorporating traditional, religious, and modern cultures in a local, national, and global world.

Oral

2025年9月27日(土) 14:10 ~ 15:40 Session Room 8 (Meeting Room 1)

**Oral 15**

[O-15-02]

Impact of perceived parental parenting on maternal–infant bonding impairment in the early postpartum period: mediating role of adult attachment style

\*Muhammad Dwi Wahyu<sup>1</sup>, Naoki Fukui<sup>1</sup>, Yuichiro Watanabe<sup>1,2</sup>, Ekachaeryanti Zain<sup>1</sup>, Por Leakhena<sup>1</sup>, Koyo Hashijiri<sup>1</sup>, Takaharu Motegi<sup>1</sup>, Maki Ogawa<sup>1</sup>, Jun Egawa<sup>1</sup>, Koji Nishijima<sup>3</sup>, Shuken Boku<sup>1</sup> (1.

Department of Psychiatry, Niigata University Graduate School of Medical and Dental Sciences (Japan), 2. Department of Psychiatry, Uonuma Kikan Hospital (Japan), 3. Department of Obstetrics and Gynecology, Niigata University Graduate School of Medical and Dental Sciences (Japan))

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[O-15-04]

Multilingual screening of mental health problems among refugees in Sweden - *development and evaluation of an online tiered screening procedure (i-TAP)*

\*Jennifer Meurling<sup>1</sup>, Elisabet Rondung<sup>1</sup>, Gerhard Andersson<sup>2</sup>, Anna Bjärtå<sup>1</sup> (1. Mid Sweden University (Sweden), 2. Linköping University (Sweden))

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[O-15-05]

Renaming the 'high-risk for psychosis' concept in psychiatry. Young people's perspectives and cultural implications

\*Andrea Roberto Polari<sup>1</sup> (1. Orygen (Australia))

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Oral

2025年9月27日(土) 14:10 ~ 15:40 Session Room 8 (Meeting Room 1)

## Oral 15

[O-15-02] Impact of perceived parental parenting on maternal–infant bonding impairment in the early postpartum period: mediating role of adult attachment style

\*Muhammad Dwi Wahyu<sup>1</sup>, Naoki Fukui<sup>1</sup>, Yuichiro Watanabe<sup>1,2</sup>, Ekachaeryanti Zain<sup>1</sup>, Por Leakhena<sup>1</sup>, Koyo Hashijiri<sup>1</sup>, Takaharu Motegi<sup>1</sup>, Maki Ogawa<sup>1</sup>, Jun Egawa<sup>1</sup>, Koji Nishijima<sup>3</sup>, Shuken Boku<sup>1</sup> (1. Department of Psychiatry, Niigata University Graduate School of Medical and Dental Sciences (Japan), 2. Department of Psychiatry, Uonuma Kikan Hospital (Japan), 3. Department of Obstetrics and Gynecology, Niigata University Graduate School of Medical and Dental Sciences (Japan))

キーワード : paternal parenting、maternal parenting、adult attachment style、maternal–infant bonding impairment

**Background:** This study aimed to investigate the direct and indirect effects (via adult attachment style) of perceived paternal and maternal parenting on maternal–infant bonding impairment in early postpartum.

**Methods:** Parental Bonding Instrument (PBI) and Relationship Questionnaire (RQ) at early pregnancy and the Mother-to-Infant Bonding Scale (MIBS) at 1 month postpartum were measured. Path analysis was performed to analyze the paternal and maternal parenting (PBI subscales), adult attachment style (RQ subscales), and MIBS subscales (Lack of Affection and Anger and Rejection).

**Results:** Perceived paternal and maternal parenting did not directly predict maternal–infant bonding impairment. However, both perceived paternal and maternal parenting predicted adult attachment style, with maternal parenting showing a slightly stronger effect than paternal parenting ( $r = -0.32$  vs.  $-0.20$ , all  $P < 0.05$ ). Adult attachment style subsequently predicted bonding impairment, including lack of affection ( $r = -0.15$ ) and anger and rejection ( $r = -0.16$ ; both  $P < 0.05$ ).

**Conclusion:** The effect of perceived parental and maternal parenting on bonding impairment in the early postpartum period is fully mediated by the adult attachment style.

Oral

2025年9月27日(土) 14:10 ~ 15:40 Session Room 8 (Meeting Room 1)

## Oral 15

[O-15-04] Multilingual screening of mental health problems among refugees in Sweden - *development and evaluation of an online tiered screening procedure (i-TAP)*

\*Jennifer Meurling<sup>1</sup>, Elisabet Rondung<sup>1</sup>, Gerhard Andersson<sup>2</sup>, Anna Bjärtå<sup>1</sup> (1. Mid Sweden University (Sweden), 2. Linköping University (Sweden))

キーワード : Accessible screening、Refugees、Multilingual、Multi-symptom

**Background:** Refugees are at increased risk of mental health problems, and prevalence is consistently found to be higher compared to the general population. Despite the high need for mental health interventions, services tend to be under-utilised by refugees resettled in high-income countries, and various barriers compromise access to mental health care. Multi-symptom online screening could increase accessibility to care, improve and facilitate initial assessment.

This study aimed to evaluate the i-TAP, a multilingual, multi-symptom, internet-based tiered screening procedure designed to identify clinically relevant psychiatric symptoms among refugees in Sweden.

**Methods:** We conducted a mixed methods study with 70 adult refugees speaking Arabic, Dari, Farsi or Swedish, in June-October 2022. Participants first answered the i-TAP, followed by a clinical interview accomplished by a psychologist. Adjacently, participants completed a short semi-structured interview about the user-experience and acceptability of the i-TAP. Diagnostic accuracy and screening efficiency were investigated, and reflexive thematic analysis was employed to explore acceptability.

**Results:** The i-TAP identified 91.7% of those with a clinical diagnosis, with an accuracy ranging from 77.1-84.3% for the respective disorders. The i-TAP was perceived as relevant, approachable, but not comprehensive of the refugee experience.

**Conclusion:** The results show that the i-TAP could identify clinically relevant symptoms of depression, anxiety, PTSD and insomnia, with good accuracy and efficiency among refugees in Sweden. Furthermore, the i-TAP was found acceptable and easy to complete by most participants, indicating feasibility. However, the lack of post-migration factors was put forward. Being a multi-symptom, adaptive screening procedure, available in several languages, the i-TAP poses an accessible, affordable and efficient alternative to formal help-seeking and initial assessment, and could thus facilitate access to mental health services for refugees.

Oral

2025年9月27日(土) 14:10 ~ 15:40 Session Room 8 (Meeting Room 1)

**Oral 15****[O-15-05] Renaming the high-risk for psychosis' concept in psychiatry. Young people's perspectives and cultural implications**\*Andrea Roberto Polari<sup>1</sup> (1. Orygen (Australia))

キーワード：Early Intervention、Stigma、Diagnosis、Labels

The language used in psychiatry is important because it provides an understandable and accurate way of describing clinical and theoretical concepts. However, the use of labels has often been associated with stigma and reduced engagement with clinical services. The presentation will cover process of generation of new terms for the 'at-risk mental state' (ARMS) for psychosis' concept, the perception of what young people, their caregivers and clinicians thought of these new terms as well as terms commonly used in early intervention clinics. Additionally, the presentation will address the participants' preference related to the best timing to introduce the at-risk concept, the extent and context of the information presented. New terms illustrating the at-risk concept have been generated by a youth reference group with lived experience of mental illness in Melbourne, Australia: 'pre-diagnosis stage' (PDS), 'potential of developing a mental illness' (PDMI) and 'disposition for developing a mental illness' (DDMI). The preferred terms were PDS, PDMI and ARMS. The least favoured terms were Ultra High Risk and Attenuated Psychotic Syndrome, which were thought to be associated with the most stigma. Most participants agreed that disclosure about diagnosis should be delivered early in care by the key clinician. The presentation will look at the replication of those findings in culturally diverse settings such as Japan and Italy. Results indicate that partnership with people with living and lived experience is possible and that ARMS has good intercultural consistency. Depending on the cultural context patients-generated terms can be used, but may be stigmatizing too and not culturally appropriate. Stigma may be related to terms used, their translation and cultural setting.

**Oral** 2025年9月27日(土) 15:40 ~ 16:25  Session Room 8 (Meeting Room 1)**Oral 16**

[O-16-01]

The mourning process and its importance in mental illness: a psychoanalytic understanding of psychiatric diagnosis and classification

\*Rachel Gibbons<sup>1</sup> (1. Royal College of Psychiatrists (UK))

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[O-16-02]

Screening for Major Depressive Disorder with the Patient Health Questionnaire-9 (PHQ-9) by Primary Care-Type Physicians in Japan

\*Ariel Kiyomi Daoud<sup>1</sup> (1. University of Cincinnati (United States of America))

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[O-16-03]

Validation of the Embodied Mindfulness Questionnaire (EMQ) in a Chinese Context: Preliminary Evidence for Cross-cultural Measurement Invariance

\*Jieting Zhang<sup>1</sup>, Ruixi Ji<sup>1</sup>, Rodrigo Clemente Vergara<sup>2,3</sup>, Mingcong Tang<sup>4</sup>, Bassam Khoury<sup>5</sup> (1. College of Psychology, Shenzhen University (China), 2. Centro Nacional de Inteligencia Artificial CENIA (Chile), 3. Universidad Metropolitana de Ciencias de La Educación (Chile), 4. Boston University (United States of America), 5. McGill University (Canada))

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Oral

2025年9月27日(土) 15:40 ~ 16:25 Session Room 8 (Meeting Room 1)

**Oral 16****[O-16-01] The mourning process and its importance in mental illness: a psychoanalytic understanding of psychiatric diagnosis and classification**

\*Rachel Gibbons<sup>1</sup> (1. Royal College of Psychiatrists (UK))

キーワード : mourning、Grief、Loss

This session brings together the psychiatric and psychoanalytic views of mental illness to deepen the understanding of mental disorder. The aim is to provide a psychoanalytic model by which to understand the nature of psychiatrically diagnosed disorders. Why has this person developed this particular disorder, been diagnosed and classified in this particular way, at this point in their life? Psychiatrists tend to view the mind from the outside and diagnose different disorders depending on the symptom constellations observed, using classification systems (e.g. DSM). Psychoanalysts look from the inside of the mind at the unifying human psychodynamics where mental illness is understood to arise from difficulties in the response to the human experience of loss and grief. In summary, psychiatric illness can be understood to result from 'pathological mourning' due to arrests, or retreats, in the passage through the mourning process. The characteristic symptoms of different psychiatric illnesses used to classify disorders can be conceptualised as resulting from the overuse of different constellations of psychic defences used at specific and different stages in the mourning process. Differently classified illnesses have different symptoms depending on the particular point in mourning where the arrest occurs. There is a very well received paper that goes with this talk. <https://www.cambridge.org/core/journals/bjpsych-advances/article/mourning-process-and-its-importance-in-mental-illness-a-psychoanalytic-understanding-of-psychiatric-diagnosis-and-classification/AADC76B72F52556A897A41B131A25D37>

Oral

2025年9月27日(土) 15:40 ~ 16:25 Session Room 8 (Meeting Room 1)

**Oral 16****[O-16-02] Screening for Major Depressive Disorder with the Patient Health Questionnaire-9 (PHQ-9) by Primary Care-Type Physicians in Japan**\*Ariel Kiyomi Daoud<sup>1</sup> (1. University of Cincinnati (United States of America))

キーワード：Japan、Major Depressive Disorder、Primary Care、Mental Health Screening

This project reviews available English-language literature to examine the process of translation, adaptation, and validation of a Japanese version of the Patient Health Questionnaire-9 (PHQ-9) as a screening tool for Major Depressive Disorder (MDD) in primary care-type settings. A structured literature search was conducted across multiple databases to identify studies evaluating a Japanese version of the PHQ-9. Abstracts were screened for relevance, and nine articles were selected for full-text review. The process used for the Japanese PHQ-9 (J-PHQ-9) was extracted from these studies and compared against a standardized framework for cross-cultural adaptation of health measures. Among the nine reviewed studies, eight utilized a common Japanese version of the PHQ-9, while one study employed an independent version. All studies reported that the J-PHQ-9 is a valid and clinically useful tool. The development of the J-PHQ-9 did not fully adhere to the recommended protocol for cross-cultural validation. However, psychometric analyses consistently demonstrated its reliability and validity in selected samples of the Japanese population. In Japan, preventive care centers on annual health checks by general internal or family medicine physicians, yet depression screening is not routinely included. MDD prevalence estimates range from 1.9%-7.3%, with increasing incidence. Depression-related absenteeism costs the Japanese economy an estimated \$6 billion annually, while diagnosis and treatment reduce healthcare costs. Despite this, mental health services are underutilized. Patients often first present to a generalist physician. It is critical that these doctors have and use effective tools for screening. The J-PHQ-9 appears to be appropriate, though key questions emerge from this review: Should depression screening be included in annual exams? Do generalist physicians in Japan feel confident diagnosing and assessing the severity of MDD? Should screening be performed for disorders in Japan with depressive overlap such as modern type depression or *hikikomori*?

Oral

2025年9月27日(土) 15:40 ~ 16:25 Session Room 8 (Meeting Room 1)

**Oral 16**

**[O-16-03] Validation of the Embodied Mindfulness Questionnaire (EMQ) in a Chinese Context: Preliminary Evidence for Cross-cultural Measurement Invariance**

\*Jieting Zhang<sup>1</sup>, Ruixi Ji<sup>1</sup>, Rodrigo Clemente Vergara<sup>2,3</sup>, Mingcong Tang<sup>4</sup>, Bassam Khoury<sup>5</sup> (1. College of Psychology, Shenzhen University (China), 2. Centro Nacional de Inteligencia Artificial CENIA (Chile), 3. Universidad Metropolitana de Ciencias de La Educación (Chile), 4. Boston University (United States of America), 5. McGill University (Canada))

キーワード：Embodiment、Mindfulness、Embodied Mindfulness Questionnaire、Cross-cultural validation、Measurement invariance

**Objectives:** The Embodied Mindfulness Questionnaire (EMQ), based on the notion of embodied mindfulness and the theory of embodiment, has been developed and validated among an English Canadian population but not yet among Eastern populations. The current study aimed to validate a Chinese version of the EMQ and examine its cross-cultural measurement invariance.

**Methods:** In Study 1, we translated the EMQ into Chinese, explored its factor structure and then examined its internal validity using a sample of Chinese adults ( $N=330$ ). In Study 2, after excluding participants with over 600 hours of meditation practice, we assessed the reliability and validity of the EMQ using a separate sample of Chinese adults ( $N=380$ ). Then, multiple confirmatory factor analyses was used to examine the measurement invariance of EMQ between the Chinese and Canadian samples ( $N=1077$ ).

**Results:** The original five-factor structures were replicated with acceptable internal reliability and construct and criterion-related validity. Only configural and metric invariance were supported between the Chinese and Canadian samples. Differences in item intercepts, residual variances, and latent variable covariances suggest potential cultural differences in conceptualizing and measuring embodied mindfulness.

**Conclusions:** The Chinese EMQ replicated the five-factor structure of the original version, with reasonably acceptable reliability and validity. The Chinese samples showed smaller intercepts and larger residual variance for most items, and inequivalent factor covariances.

## Poster

2025年9月27日(土) 10:00 ~ 11:00  Poster Session (Foyer 1)

## Poster 17

[P-17-01]

Conditions Associated with Deaths in Individuals with Schizophrenia in Psychiatric Units

\*Michitaka Funayama<sup>1</sup> (1. Ashikaga Red Cross Hospital (Japan))

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[P-17-02]

Exploring Changes in Recognition and Stigmatization Toward Individuals with Schizophrenia in Singapore from 2014 to 2022

\*Ke Cao<sup>1</sup>, Edimansyah Abdin<sup>2</sup>, Mythily Subramaniam<sup>2</sup> (1. Duke-NUS Medical School (Singapore), 2. Institute of Mental Health (Singapore))

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[P-17-03]

A study on the treatment of psychosis induced by invocation, Kitousei-Seishinbyo

\*Fumiya Miyano<sup>1</sup> (1. Department of Psychiatry, Hokkaido University Graduate School of Medicine (Japan))

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[P-17-04]

PHARMACOTHERAPY OF CATATONIA WITH MODERN ANTIPSYCHOTIC AGENTS: ETHNO-CULTURAL FEATURES OF TREATMENT OF PATIENTS WITH SCHIZOPHRENIA AND COMORBID CHEMICAL ADDICTIONS IN THE NORTHWESTERN AND SIBERIAN FEDERAL DISTRICTS OF RUSSIA.

Georgy Yu. Selivanov<sup>1,2,3</sup>, Nikolay A. Bokhan<sup>1</sup>, \*Svetlana V. Vladimirova<sup>1</sup> (1. Mental Health Research Institute, Tomsk (Russia), 2. Saint Petersburg University of State Fire Service of Emercom of Russia (Russia), 3. Psychiatric Hospital of St. Nicholas, St. Petersburg (Russia))

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[P-17-05]

Evaluation of ZNF804A (rs1344706) Polymorphism in a Familial Case of Schizophrenia

\*Halil ibrahim tas<sup>1</sup> (1. Ordu university (Turkey))

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[P-17-06]

Contemporaneous changes in cytokines and cognitive function during chemotherapy in patients with breast cancer- a prospective follow up study

\*Shu-I Wu<sup>1</sup>, Ching-Hung Chen<sup>2</sup> (1. Mackay Memorial Hospital (Taiwan), 2. Chia-Yi Chang Gung Memorial Hospital (Taiwan))

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Poster

2025年9月27日(土) 10:00 ~ 11:00 Poster Session (Foyer 1)

## Poster 17

### [P-17-01] Conditions Associated with Deaths in Individuals with Schizophrenia in Psychiatric Units

\*Michitaka Funayama<sup>1</sup> (1. Ashikaga Red Cross Hospital (Japan))

キーワード : Catatonia、Pulmonary embolism、Suffocation

**Background:** Individuals with schizophrenia die 11–25 years earlier than the general population, yet few studies have examined mortality among hospitalized patients or psychiatric factors contributing to these deaths.

**Methods:** We retrospectively analyzed 41 inpatients with schizophrenia who died among 1,823 hospitalized at Ashikaga Red Cross Hospital. Psychiatric diagnoses followed ICD-10 criteria, and causes of death were determined by medical specialists.

**Results:** Pulmonary diseases, including pneumonia (29.3%), were the leading cause of death, followed by cancer (22.0%), heart diseases (14.6%), and pulmonary embolism (4.9%).

Psychiatric factors contributed to 48.8% of deaths, with catatonia (29.2%) being most frequent, followed by bedridden status due to severe apathy (7.3%), choking (4.9%), suicide (4.9%), and water intoxication (2.4%). The mean age at death was lower for psychiatric-related deaths ( $53.1 \pm 14.7$  years) than for other cases ( $62.2 \pm 8.3$  years;  $p < 0.02$ ). Catatonic patients often succumbed to aspiration pneumonia, tachyarrhythmia, or pulmonary embolism, particularly those with malignant catatonia. Severe apathy led to refractory aspiration pneumonia and pulmonary embolism.

**Conclusions:** Psychiatric conditions significantly impact mortality among schizophrenia inpatients, with some deaths potentially preventable. Improved recognition and management of catatonia and severe apathy could reduce mortality. Despite limitations of a single-center, retrospective design, these findings provide important insights into the interplay between psychiatric and medical conditions in schizophrenia inpatients.

Poster

2025年9月27日(土) 10:00 ~ 11:00 Poster Session (Foyer 1)

**Poster 17****[P-17-02] Exploring Changes in Recognition and Stigmatization Toward Individuals with Schizophrenia in Singapore from 2014 to 2022**

\*Ke Cao<sup>1</sup>, Edimansyah Abdin<sup>2</sup>, Mythily Subramaniam<sup>2</sup> (1. Duke-NUS Medical School (Singapore), 2. Institute of Mental Health (Singapore))

キーワード：Schizophrenia、Mental Health Literacy、Mental Illness Stigma、Mental Health Campaigns、Singapore

Schizophrenia is a debilitating illness that poses long-term impairment in individuals and a significant economic burden on society. Early recognition of schizophrenia is essential for ensuring successful treatment outcomes. Understanding mental health literacy, i.e., recognition of and stigma towards mental illnesses, is crucial for guiding policy and informing targeted interventions. The current study aimed to examine changes in schizophrenia recognition, personal stigma and social distancing as well as shifts in sociodemographic factors influencing recognition and stigma over 8 years in Singapore. The study utilized data from two consecutive nationwide cross-sectional surveys on mental health literacy using a vignette approach. Singapore citizens and permanent residents aged 18-65 were recruited via disproportionate stratified sampling. Respondents were presented with a schizophrenia vignette and recognition was assessed using an open-ended question. Stigmatizing attitudes were assessed by the personal stigma scale and the social distance scale. Correct schizophrenia recognition increased from 11.5% to 15.1%, though the difference was not statistically significant ( $p$ -value = 0.192). Recognition response categories changed significantly with more recognizing schizophrenia as another mental disorder and fewer recognizing it as a general psychological issue. There was a statistically significant reduction in 'weak, not sick' and 'dangerous, unpredictable' stigma scores. A higher 'weak, not sick' score was consistently associated with lower odds of recognition of schizophrenia. The lack of significant improvement in recognition was likely due to a lack of targeted schizophrenia awareness campaigns in Singapore, while the significant improvement in personal stigma was likely due to general mental health initiatives. Younger age and social contact with individuals with schizophrenia were associated with better recognition and less stigma. Individuals of Malay and Indian ethnicities attributed schizophrenia as a personal weakness but showed less social distancing. Future initiatives should focus on culturally tailored anti-stigma interventions for schizophrenia accessible to older individuals and leveraging social contact.

## Poster

2025年9月27日(土) 10:00 ~ 11:00 Poster Session (Foyer 1)

## Poster 17

### [P-17-03] A study on the treatment of psychosis induced by invocation, Kitousei-Seishinbyo

\*Fumiya Miyano<sup>1</sup> (1. Department of Psychiatry, Hokkaido University Graduate School of Medicine (Japan))

キーワード：Posession、Dissociative Disorder、Dissociative Trance

Kitousei-Seishinbyo(psychosis induced by invocation), initially conceptualized by Masatake Morita, was subsequently identified in various regions across Japan. Over time, it evolved into a broader field of “Possession research,” encompassing investigations into phenomena such as personality transformation and altered states of consciousness. More recently, new psychosocial triggers have emerged, including self-improvement seminars and newly formed religious organizations. Despite this shift, the frequency of reports of possession-related episodes has declined as scientific rational thought has advanced, and accordingly, the volume of academic research and publications on the subject has also decreased. In terms of treatment, there have been cases suggesting that psychotherapy can be particularly challenging, owing to blurred boundaries between self and others or inherent psychological vulnerability, thereby highlighting the necessity for continued scrutiny. During our clinical experience, we encountered a noteworthy case of psychosis induced by invocation involving a patient who developed personality transformation and delusional beliefs of possession after contacting a medium, ultimately leading to hospitalization. Nevertheless, we found that addressing practical life challenges and implementing behaviorally oriented treatment strategies yielded significant improvements. Drawing upon previous studies, we offer some preliminary thoughts on therapeutic approaches to prayer-induced psychosis, which remain imperative for contemporary mental health practice. As part of our presentation, we have tried safeguarding the patient’s identity and personal details. Written informed consent was obtained to ensure confidentiality and respect for privacy throughout the study and its subsequent dissemination. We hope that this report contributes to a deeper understanding of prayer-induced psychosis and stimulates further exploration into efficacious therapeutic modalities for individuals affected by this condition. In psychiatric treatment, in addition to basic treatments such as medication and psychotherapy, it goes without saying that attention must be paid to family and social aspects. This presentation on Kitousei-Seishinbyo is one such therapeutic perspective.

Poster

2025年9月27日(土) 10:00 ~ 11:00 Poster Session (Foyer 1)

## Poster 17

[P-17-04] PHARMACOTHERAPY OF CATATONIA WITH MODERN ANTIPSYCHOTIC AGENTS: ETHNO-CULTURAL FEATURES OF TREATMENT OF PATIENTS WITH SCHIZOPHRENIA AND COMORBID CHEMICAL ADDICTIONS IN THE NORTHWESTERN AND SIBERIAN FEDERAL DISTRICTS OF RUSSIA.

Georgy Yu. Selivanov<sup>1,2,3</sup>, Nikolay A. Bokhan<sup>1</sup>, \*Svetlana V. Vladimirova<sup>1</sup> (1. Mental Health Research Institute, Tomsk (Russia), 2. Saint Petersburg University of State Fire Service of Emercom of Russia (Russia), 3. Psychiatric Hospital of St. Nicholas, St. Petersburg (Russia))

キーワード : General psychiatry、Catatonia、novel antipsychotics

**Relevance:** In Russia, the development of new methods of pharmacotherapy of catatonia with antipsychotics in patients with schizophrenia with and without comorbid chemical addictions is relevant, considering ethno-cultural diversity. **Objective.** To study the effectiveness of atypical antipsychotics in the treatment of catatonia in schizophrenia, considering the presence and absence of chemical addictions and ethno-cultural characteristics of patients. **Patients and methods:** The study included 188 patients, 18-45 years old, drug-independent (n=50), alcohol-dependent (n=44), psychostimulants (n=36), cannabinoids (n=32), opioids (n=26) (Northwestern and Siberian Federal Districts of Russia, 2022-2025). Patients (n=188) were divided into groups receiving antipsychotics: aripiprazole (A=29), brexpiprazole (B=27), cariprazine (K=38), lurasidone (L=34), olanzapine (O=32), risperidone (R=28). **Research methods:** clinical and psychopathological, psychometric, statistical (Python 3.11.0). The study was approved by the Ethics Committee of the TNRMC RAS (protocol No. 172 of 04/15/2024, case No. 172/2.2024). **Results:** The leading position among patients was occupied by the following ethnic groups: Russians, Tatars; Uzbeks; Germans; Azerbaijanis and Armenians. Anxiolytics and rarely typical antipsychotics were added to the therapy for 14 days. Stages: I. assessment - 21 days, II. - Day 35.  $\Delta$  change indices on the CGI (K=0.031; O=0.041; L=0.051; R=0.061; A=0.121; B=0.14) and PANSS (K=1.32; O=1.58; L=1.65; R=2.28; A=-3.12; B=-3.41) scales. **Conclusions:** In the temperate climate zones of Russia, Russians, Tatars and Uzbeks were in the lead. The following showed effective treatment: cariprazine (3 mg), olanzapine (15 mg), lurasidone (80 mg), risperidone (6 mg), aripiprazole (15 mg), brexpiprazole (4 mg). Cariprazine improved negative symptoms.

Poster

2025年9月27日(土) 10:00 ~ 11:00  Poster Session (Foyer 1)

## Poster 17

### [P-17-05] Evaluation of ZNF804A (rs1344706) Polymorphism in a Familial Case of Schizophrenia

\*Halil ibrahim tas<sup>1</sup> (1. Ordu university (Turkey))

キーワード : genetic、schizophrenia、familial

#### Objective:

Schizophrenia is a complex neuropsychiatric disorder resulting from the interaction of genetic predisposition and environmental factors. This study aimed to evaluate the genotype-phenotype correlation of the rs1344706 single nucleotide polymorphism (SNP) in the *ZNF804A* gene within a family affected by schizophrenia.

**Methods:** Peripheral blood samples were collected from a female proband diagnosed with schizophrenia and five of her close relatives (mother, father, two brothers, and maternal aunt). The rs1344706 SNP genotypes were analyzed and compared with the clinical status of each individual.

**Results:** The proband, her father, and her brother (also diagnosed with schizophrenia) were found to have the heterozygous T/G genotype. The mother and another, unaffected brother carried the G/G genotype. Interestingly, the maternal aunt—who had no history of psychiatric illness—had the T/T genotype. These findings suggest that while the presence of the T allele may be associated with increased risk for schizophrenia, it is not solely sufficient for disease onset.

**Conclusion:** The rs1344706 T allele of *ZNF804A* appears to be a shared genetic factor among affected individuals in this family. However, the occurrence of schizophrenia in a G/G individual (mother) and its absence in a T/T carrier (aunt) implies incomplete penetrance and highlights the importance of other genetic variants or environmental influences. These results support the polygenic and multifactorial nature of schizophrenia.

Poster

2025年9月27日(土) 10:00 ~ 11:00 Poster Session (Foyer 1)

## Poster 17

[P-17-06] Contemporaneous changes in cytokines and cognitive function during chemotherapy in patients with breast cancer- a prospective follow up study

\*Shu-I Wu<sup>1</sup>, Ching-Hung Chen<sup>2</sup> (1. Mackay Memorial Hospital (Taiwan), 2. Chia-Yi Chang Gung Memorial Hospital (Taiwan))

キーワード : Cancer、、 chemotherapy、、 contemporaneous changes、 Cognitive function

**Background:** This study investigated fluctuations in levels of chosen cytokines among patients with breast cancer before to after chemotherapy. Contemporaneous changes in cognitive function were examined. **Methods:** Adult patients with breast cancer stages I to III without brain metastasis were invited to participate in this longitudinal follow up study. A multidimensional neuropsychological examination was administered at two timepoints evaluating multiple subjective and objective cognitive domains, depression, anxiety, or fatigue before and at least 3 months after chemotherapy, and baseline demographic information. Cytokine levels were taken at the same times. Stepwise multivariate Generalized Linear Mixed Model was used to examine changes in cytokines and associations with changes in cognitive function. **Results:** Over a mean interval of 10.46 months, Event-based prospective memory ( $p<0.001$ ), Word list immediate ( $p<0.001$ ) or delayed recall ( $p=0.024$ ), and self-perceived cognitive impairment ( $p=0.026$ ) were significantly improved following chemotherapy. Higher levels of IFNy and worse performance on the Color Trails Test Part 1, inverse associations of IFNy or IL-12p70 with Block Design, and TNFa with Digit Symbol Substitution were found, but no significant time effects were noted. However, significant group and time effects were only observed in IL-2 and IL-12p70 with improvements in Event-based prospective memory. That is, from baseline to follow up, each increase in log values of IL-12p70 and IL-2 were associated with 2.18 ( $SE=0.65$ ,  $p=0.001$ ) and 2.16 ( $0.68$ ,  $p=0.002$ ) points of increase in Event-based prospective memory. No significant effects were detected for other cytokines or cognitive tests. **Conclusion:** Improvements in Event-based prospective memory were positively associated with contemporaneous changes in IL-2 and IL-12p70. Our finding may not only reduce BC patients' concerns about chemotherapy-related cognitive adverse effects, but also demonstrates the possible needs for further replications and investigations on interactions of systemic cytokines, inflammation, and cognitive functions associated with cancer and chemotherapy.

## Poster

2025年9月27日(土) 11:00 ~ 12:00  Poster Session (Foyer 1)

## Poster 18

[P-18-01]

Factors associated with depression and suicidality among unemployed adults

\*Jongbin Kim<sup>1</sup>, Young-Eun Jung<sup>1</sup> (1. Jeju National University Hospital (Korea))

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[P-18-02]

The Usefulness of an Employment Preparation Support Program through Metaverse: A Preliminary Study

\*Izumi Mashimo<sup>1,2</sup>, Tomomi Tsujimoto<sup>3</sup> (1. Aino University graduate school of Health science (Japan), 2. Department of Rehabilitation Science, Kobe University Graduate School of Health Sciences (Japan), 3. Yururiwork (Japan))

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[P-18-03]

Attempts to prevent social withdrawal through the use of school support volunteers

\*Shizuka Suzuki<sup>1</sup>, Masafumi Ohnishi<sup>1</sup>, Aiko Hirosawa<sup>1</sup>, Kaori Kawamura<sup>1</sup> (1. University of Fukui (Japan))

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[P-18-04]

The effect of carbohydrate intake and healthy eating index on depression and suicidality: a nationwide population-based study

\*Hyewon Kim<sup>1</sup> (1. Hallym University Sacred Heart Hospital (Korea))

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[P-18-05]

Development of a short form depression screening questionnaire for Korean career soldiers

\*Jong-Ik Park Park<sup>1</sup> (1. Kangwon National University (Korea))

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[P-18-06]

Otaku, Webs, and Social Wellbeing: Does Immersion in Niche Communities Help or Harm?

\*Jamie Parkerson<sup>1</sup>, \*Chaden Noureddine<sup>1</sup> (1. Icahn School of Medicine at Mount Sinai (United States of America))

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Poster

2025年9月27日(土) 11:00 ~ 12:00 Poster Session (Foyer 1)

**Poster 18****[P-18-01] Factors associated with depression and suicidality among unemployed adults**\*Jongbin Kim<sup>1</sup>, Young-Eun Jung<sup>1</sup> (1. Jeju National University Hospital (Korea))

キーワード：unemployed、depression、suicidality、employing training、vocational education

**Background:** Unemployed people often experience stress in relation to changes in their lives, and their mental health appears to be more vulnerable than that of the general population. Clinical studies have consistently shown that unemployment may be a risk factor for depression and suicide. We assessed factors associated with depression and suicidality among unemployed people in South Korea.

**Methods:** Data from 624 unemployed adults who took part in a community survey were analyzed. All participants completed self-report questionnaires: demographic variables, and the Patient Health Questionnaire-9 was used to assess depression. To obtain information regarding suicidal ideation, suicide plans, and suicide attempts, we administered the Mini International Neuropsychiatric Interview (MINI) suicidality module.

**Results:** The prevalence of depressive symptoms among the unemployed in Jeju was 28.4%. Factors associated with suicidality included age, gender, unemployment period, job application period and depression. Moreover, unemployed participants who had an opportunity to receive vocational education had fewer symptoms of depression regardless of the number of vocational education sessions. The multivariate regression model revealed that age ( $\beta = -0.08$ ,  $p = 0.024$ ) and depression ( $\beta = 0.51$ ,  $p < 0.001$ ) were significantly correlated with suicidality.

**Conclusions:** Unemployed participants were at significant risk of depression and suicidality, and these psychiatric issues were problematic from a young age, affecting those in their 20s and 30s. Our results also emphasize the importance of vocational training. Further research on the underlying mechanisms will enhance our understanding of the effects of unemployment and provide ideas for interventional strategies.

Poster

2025年9月27日(土) 11:00 ~ 12:00 Poster Session (Foyer 1)

**Poster 18****[P-18-02] The Usefulness of an Employment Preparation Support Program through Metaverse: A Preliminary Study**

\*Izumi Mashimo<sup>1,2</sup>, Tomomi Tsujimoto<sup>3</sup> (1. Aino University graduate school of Health science (Japan), 2. Department of Rehabilitation Science, Kobe University Graduate School of Health Sciences (Japan), 3. Yururiwork (Japan))

キーワード：Metaverse、Social withdrawal、Hikikomori、Employment Preparation、Adjustment Disorders

**Background:** In Japan, approximately 1.46 million individuals are estimated to be in a state of social withdrawal (hikikomori). Additionally, 13.5% of workplaces have reported employees taking extended leave or resigning because of mental health issues. Therefore, we developed the New Employment Experience Through Metaverse (NEXT) program for hikikomori or truancy. NEXT is a 10-session, seminar-style intervention conducted within a 2D metaverse environment that aims to social skills and work readiness.

**Methods:** A 20-something male production engineer, who was on leave because of adjustment disorder and social withdrawal, participated in the program. Data was collected using the General Health Questionnaire-30 (GHQ-30) and explored the participant's self-efficacy regarding career decision-making (CDMSE) before and after the NEXT experience.

**Results:** The participant reported increased confidence in workplace communication, particularly in reporting, contacting, and consulting (hou-ren-sou). He stated, "I wish I had these skills earlier. The GHQ-30 scores deteriorated from 10 to 20, and the CDMSE scores improved from 79 to 82 after the intervention.

**Discussion:** The results were contradictory: mental health worsened and self-efficacy improved after NEXT. A score of four or higher on the GHQ-30 indicates mental distress, whereas a score of 20 or more requires clinical intervention.

For individuals with psychiatric disorders, this suggests the need to establish a collaborative system with psychiatric medical institutions when implementing NEXT.

Regarding the improvement in self-efficacy related to career decision-making, we speculated that the program provided a non-intrusive platform for the participant to engage in social skills training, thereby reducing his resistance to interpersonal contact. This approach shows promise for socially withdrawn individuals who aspire to return to the workforce.

## Poster

2025年9月27日(土) 11:00 ~ 12:00  Poster Session (Foyer 1)

## Poster 18

### [P-18-03] Attempts to prevent social withdrawal through the use of school support volunteers

\*Shizuka Suzuki<sup>1</sup>, Masafumi Ohnishi<sup>1</sup>, Aiko Hirosawa<sup>1</sup>, Kaori Kawamura<sup>1</sup> (1. University of Fukui (Japan))

キーワード : Social functioning scale、Community-based school support volunteers、Preventive measures against social withdrawal

Currently, social withdrawal has become a major social problem, it is not uncommon for underlying diseases such as schizophrenia, depression, anxiety disorders, and personality disorders to exist in addition to developmental disorders in the background. It is said that there are a certain number of people who have experienced truancy while they are in school. Therefore, as part of the "prevention of social withdrawal", there is an urgent need to identify "people who may be socially withdrawn" from school age and continue to support the transition in the community. Educational institutions have been monitoring the number of truant children and students at the national level for many years, and regional trends have also been analyzed. However, there are very few reports that discuss the clinical profile of individual truant children and students, particularly the degree of "social participation" closely related to social withdrawal, and assess their "social functioning" from school age, with a focus on early prevention. In this study, we evaluated the degree of social participation using the Social and Occupational Functioning Assessment Scale (SOFAS) on children and students who were absent from school before and after the start of school support volunteer activities(Life-Partner Program: LPP in University of Fukui), and measured its effectiveness. Data analysis targeted 17 truant students were utilizing LPP volunteers during the 2023 academic year. Surveys were conducted with staff from educational counseling institutions and parents who know truant students involved with LP well. As a result, it was suggested that the participation of school support volunteers in the targeted students may increase the number of opportunities to visit educational counseling institutions outside the school, increase the time spent on social activities and communication with people other than family members, and improve the level of social participation.

Poster

2025年9月27日(土) 11:00 ~ 12:00  Poster Session (Foyer 1)

## Poster 18

### [P-18-04] The effect of carbohydrate intake and healthy eating index on depression and suicidality: a nationwide population-based study

\*Hyewon Kim<sup>1</sup> (1. Hallym University Sacred Heart Hospital (Korea))

キーワード : diet, carbohydrate, depression, suicide

**Introduction:** Evidence for the association between carbohydrate intake and dietary quality with depression and suicide has been poorly understood.

**Methods:** Data from the Korea National Health and Nutrition Examination Survey of 2013, 2015, 2017, 2019, and 2021 were used. We identified the Healthy Eating Index (HEI) and dietary carbohydrate intake in 23,623 eligible subjects. We analyzed the risk of depression and suicidal ideation, plan, attempt, and the composite of suicidality within the past year according to the dietary pattern.

**Results:** Compared to those in quartile 1 of carbohydrate intake, those who intake more carbohydrate showed the increased risk of depression. In addition, those in quartile 4 of carbohydrate intake showed the increased risk of suicidal ideation, plan, attempt, and the composite of suicidality. Compared to those with low HEI, those with a higher HEI showed a reduced risk of depression, suicidal ideation, plan, attempt and the composite of suicidality.

**Conclusion:** High carbohydrate intake was associated with the increased risk of depression and suicidality. On the other hand, high quality diet was associated with the reduced risk of depression and suicidality.

Poster

2025年9月27日(土) 11:00 ~ 12:00 Poster Session (Foyer 1)

**Poster 18****[P-18-05] Development of a short form depression screening questionnaire for Korean career soldiers**

\*Jong-Ik Park Park<sup>1</sup> (1. Kangwon National University (Korea))

キーワード : Suicide、Depression、Korean career soldiers

**Objectives :** This study uses the short-form Center for Epidemiological Studies-Depression Scale (CES-D) to screen for depression among Korean career soldiers, aiming to protect mental health and ensure military stability.

**Methods :** The study involves 2,922 career soldiers who completed online self-report questionnaires assessing suicidality, depression, anxiety, and social support. Diagnosis of major depressive episodes (MDEs) using the Korean version of the Mini International Neuropsychiatric Interview (K-MINI) was confirmed through Pearson correlation analysis of the 20 CES-D items. The top three correlated items form the Depression Screening Questionnaire for Korean Career soldiers (DSQ-KC). Receiver operating characteristic curves and area under the curve (AUC) values were obtained, with the DSQ-KC total score as the explanatory variable and MDEs as the response variable. Independent t-tests were performed to determine whether suicidality, anxiety, and social support differed based on the cut-off scores of the DSQ-KC.

**Results :** In the analysis of each CES-D item with an MDE diagnosis, items 4, 6, and 3 were obtained. The AUC value was 0.958. At a cut-off score of 2, sensitivity and specificity were 93.9% and 89.9%, respectively, with positive and negative predictive values of 14.7% and 99.6%, respectively. Conversely, at a cut-off score of 3, sensitivity and specificity were 83.7% and 94.4%, respectively, with positive and negative predictive values of 27.7% and 98.9%, respectively. Associations with suicidality, anxiety, and use of social networks from cut-off scores of 2 or 3 were examined.

**Conclusion :** The DSQ-KC, developed with three reliable items, is user-friendly and can be utilized in suicide prevention projects for career soldiers.

Poster

2025年9月27日(土) 11:00 ~ 12:00 Poster Session (Foyer 1)

**Poster 18****[P-18-06] Otaku, Weebs, and Social Wellbeing: Does Immersion in Niche Communities Help or Harm?**

\*Jamie Parkerson<sup>1</sup>, \*Chaden Noureddine<sup>1</sup> (1. Icahn School of Medicine at Mount Sinai (United States of America))

キーワード：Child and Adolescent、Internet Gaming Disorder、Cultural Psychiatry、Internet Addiction、Social Media

**Background:** Weeaboo or weeb is defined as “a mostly derogatory slang term for a Western person…obsessed with Japanese culture, especially anime, often regarding it as superior to all other cultures”. This subculture, a western analogue of the Japanese Otaku identity, which is often used to describe an intense interest in anime/manga, has reached critical mass and inspired academic inquiry. As mental health clinicians, it is imperative that we be aware of what cultural phenomena our patients engage with, and to understand potential implications of these “obsessions”.

**Methods:** Google Scholar and PubMed were searched using terms including variations of “weeaboo,” “weeb,” “otaku,” and “mental health”. Thirty-two studies were included from 813 search results.

**Results:** A Korean study of 71 college students found that otaku students had higher happiness levels compared to non-otaku. Another study of 1115 online participants found that otakus had higher pathological internet use and lower reported social support, while a German study of 4738 adults correlated interest in anime and manga with some adverse mental health/social outcomes, as well as greater subjective well-being, joy, and lower social isolation. Another study (n=300) revealed positive association between strong identity in anime/ACG (animation, comics, and games) with anxiety, aggression, depressive symptoms, and suicidal tendencies.

**Conclusions:** The heterogeneity of results illustrates the complexities of subcultures and the impacts of pop culture immersion. Differences across nationalities may reflect attitudes towards otaku and weeb communities, as the terms themselves have decidedly different and discourse-dependent connotations. With a dearth of information on these communities, further research is needed to better understand these nuances. In an increasingly culturally and socially globalized world, it is imperative that mental health professionals remain knowledgeable of relevant subcultural trends to provide patient-centered care.

## Poster

2025年9月27日(土) 14:00 ~ 15:00 Poster Session (Foyer 1)

## Poster 19

[P-19-01]

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

Sra Jung<sup>1</sup>, \*Yoosuk An<sup>2</sup>, Min-Kyung Kim<sup>1</sup>, Sung Joon Cho<sup>3,4</sup>, Sang-Won Jeon<sup>3,4</sup> (1. Department of Psychiatry, CHA University Ilsan Medical Center, Goyang, Republic of Korea (Korea), 2. Department of Psychiatry, Seoul National University Hospital, Seoul, Korea (Korea), 3. Department of Psychiatry, Kangbuk Samsung Hospital, Sungkyunkwan University School of Medicine, Seoul, Republic of Korea (Korea), 4. Workplace Mental Health Institute, Kangbuk Samsung Hospital, Seoul, Republic of Korea (Korea))

[P-19-02]

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

\*Young Myo Jae<sup>1</sup>, Eunsu Cho<sup>1</sup> (1. Bongseng Memorial Hospital (Korea))

[P-19-03]

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

\*SIN TUNG WAN<sup>1</sup> (1. The City University of Hong Kong (Hong Kong))

[P-19-04]

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

\*Hyejin Tae<sup>1,2</sup> (1. Stress Clinic, Health Promotion Center, Seoul St. Mary's Hospital, The Catholic University of Korea, Seoul, Republic of Korea (Korea), 2. Department of Medicine, Graduate School, The Catholic University of Korea, Seoul, Republic of Korea (Korea))

[P-19-05]

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

\*Hyeyoon Park<sup>1,2</sup>, Hye Jung Ahn<sup>2</sup>, Sun Young Lee<sup>3</sup> (1. Department of Psychiatry, Seoul National University College of Medicine (Korea), 2. Department of Psychiatry, Seoul National University Hospital (Korea), 3. Public Healthcare Center, Seoul National University Hospital (Korea))

[P-19-06]

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

\*Quankamon Dejatiwongse Na Ayudhya<sup>1</sup>, Punyisa Prachgosin<sup>1</sup>, Kritta Supanimitamorn<sup>1</sup>, Nipaporn Supaprasert<sup>1</sup>, Parawee Keawjamrus<sup>1</sup>, Kankamol Jaisin<sup>1</sup> (1. Department of Psychiatry, Faculty of Medicine Siriraj Hospital, Mahidol University (Thailand))

Poster

2025年9月27日(土) 14:00 ~ 15:00 Poster Session (Foyer 1)

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

Sra Jung<sup>1</sup>, \*Yoosuk An<sup>2</sup>, Min-Kyoung Kim<sup>1</sup>, Sung Joon Cho<sup>3,4</sup>, Sang-Won Jeon<sup>3,4</sup> (1. Department of Psychiatry, CHA University Ilsan Medical Center, Goyang, Republic of Korea (Korea), 2. Department of Psychiatry, Seoul National University Hospital, Seoul, Korea (Korea), 3. Department of Psychiatry, Kangbuk Samsung Hospital, Sungkyunkwan University School of Medicine, Seoul, Republic of Korea (Korea), 4. Workplace Mental Health Institute, Kangbuk Samsung Hospital, Seoul, Republic of Korea (Korea))

キーワード : workplace bullying、 mental health、 gender difference

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

**Conclusions:** Workplace bullying is a significant contributor to poor mental health among Korean workers, with more pronounced effects on depression and occupational stress in women. These findings support the need for gender-sensitive interventions and workplace policies that reduce bullying and address broader socioeconomic stressors to improve employee mental health.

## Poster

2025年9月27日(土) 14:00 ~ 15:00  Poster Session (Foyer 1)

## Poster 19

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

\*Young Myo Jae<sup>1</sup>, Eunsu Cho<sup>1</sup> (1. Bongseng Memorial Hospital (Korea))

キーワード : Quality of Life、HINT-8、Obesity、Health Survey、Korean Adults

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

**Methods:** This study utilized data from the ninth Korea National Health and Nutrition Examination Survey (KNHANES). A total of 5,620 adults aged 19 years and older were included after excluding cases with missing data. Obesity was defined as a body mass index (BMI) of  $\geq 25 \text{ kg/m}^2$ , and HRQoL was measured using the HINT-8 (Health-related Quality of Life Instrument with 8 Items). A complex sampling design and appropriate weights were applied. Differences in HRQoL by general characteristics and obesity were analyzed using general linear models, and multiple linear regression was conducted to identify factors associated with HRQoL.

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

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

Poster

2025年9月27日(土) 14:00 ~ 15:00 Poster Session (Foyer 1)

**Poster 19****[P-19-03] The Mediating Role of Self-Efficacy in the Relationship Between Gerontechnology Acceptance and Successful Aging Among Older Adults**\*SIN TUNG WAN<sup>1</sup> (1. The City University of Hong Kong (Hong Kong))

キーワード : Gerontechnology、Self-efficacy、Successful Aging

**Background:**

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

**Method:**

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

**Results:**

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

**Conclusion:**

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

Poster

2025年9月27日(土) 14:00 ~ 15:00 Poster Session (Foyer 1)

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

\*Hyejin Tae<sup>1,2</sup> (1. Stress Clinic, Health Promotion Center, Seoul St. Mary's Hospital, The Catholic University of Korea, Seoul, Republic of Korea (Korea), 2. Department of Medicine, Graduate School, The Catholic University of Korea, Seoul, Republic of Korea (Korea))

キーワード：Meal timing irregularity、Depression、Dietary diversity、Breakfast skipping、Lifestyle psychiatry

**Background**

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

**Methods**

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

**Results**

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

**Conclusions**

This study provides novel evidence that irregular eating patterns are associated with elevated depressive symptoms and that dietary diversity and breakfast habits may modulate this relationship. These findings underscore the need for targeted dietary interventions and public health strategies promoting regular and diverse eating patterns to support mental well-being.

## Poster

2025年9月27日(土) 14:00 ~ 15:00  Poster Session (Foyer 1)

## Poster 19

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

\*Hyeyoon Park<sup>1,2</sup>, Hye Jung Ahn<sup>2</sup>, Sun Young Lee<sup>3</sup> (1. Department of Psychiatry, Seoul National University College of Medicine (Korea), 2. Department of Psychiatry, Seoul National University Hospital (Korea), 3. Public Healthcare Center, Seoul National University Hospital (Korea))

キーワード : spirituality、religion、cancer patients、psycho-oncology

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

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

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

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

Poster

2025年9月27日(土) 14:00 ~ 15:00 Poster Session (Foyer 1)

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

\*Quankamon Dejatiwongse Na Ayudhya<sup>1</sup>, Punyisa Prachgosin<sup>1</sup>, Kritta Supanimitamorn<sup>1</sup>, Nipaporn Supaprasert<sup>1</sup>, Parawee Keawjamrus<sup>1</sup>, Kankamol Jaisin<sup>1</sup> (1. Department of Psychiatry, Faculty of Medicine Siriraj Hospital, Mahidol University (Thailand))

キーワード：Late-life depression、dementia、predictive model、geriatric psychiatry

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

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

**Methods:** We conducted a retrospective chart review of 141 patients aged 60 or older who presented to a geriatric psychiatry outpatient clinic. Chief complaints at initial evaluation were categorized and analyzed as predictors in a binary logistic regression model, with diagnosis of either depression or dementia as the dependent variable. Key covariates included age, sex, and cognitive screening scores. Model performance was evaluated using Nagelkerke R<sup>2</sup> and receiver operating characteristic (ROC) analysis.

**Results:** Binary logistic regression analysis revealed that chief complaints involving neurovegetative symptoms — such as sleep disturbance, fatigue, and appetite change — significantly predicted depression (OR = 5.70, 95 percent confidence interval 1.36 to 23.88, p = 0.017), as did depression-related symptoms — including sadness, boredom, and death wish (OR = 8.18, 95 percent confidence interval 1.73 to 38.65, p = 0.008). Cognitive complaints were strongly associated with dementia (OR = 0.06, 95 percent confidence interval 0.01 to 0.27, p < 0.001), while anxiety-related symptoms were not statistically significant in the model (OR = 2.01, 95 percent confidence interval 0.42 to 9.70, p = 0.383). The model showed robust explanatory power (Nagelkerke R<sup>2</sup> = 0.652) and excellent discriminative accuracy (AUC = 0.935).

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

## Poster

2025年9月27日(土) 15:00 ~ 16:10  Poster Session (Foyer 1)

## Poster 20

[P-20-01]

The higher ability of verbal fluency and attention and processing speed with clinical recovery in patients with schizophrenia than remitted patients through the comparison of schizophrenia and healthy controls: A cross-sectional study

\*Ryo Asada<sup>1</sup>, Hitoshi Iida<sup>1</sup>, Leo Gotho<sup>1</sup>, Kiyohiro Yasumatsu<sup>1</sup>, Hikaru Hori<sup>1</sup> (1. Department of Psychiatry, Faculty of Medicine, Fukuoka University (Japan))

[P-20-02]

Personality theory based on Chinese culture

\*zhuangsheng Wang<sup>1</sup> (1. Binzhou Medical school (China))

[P-20-03]

Comparative Network Structures of Depressive Symptoms in Asian Individuals With Guilt-Rich and Guilt-Free Depressive Disorders: Findings From the REAP-AD3

\*Seon-Cheol Park<sup>1</sup> (1. Department of Psychiatry, Hanyang University College of Medicine (Korea))

[P-20-04]

A Psychiatric Analysis of Batman and the Public Perception of Mental Illness

\*Tejbir Singh Deol<sup>1</sup>, Ella Bauwens<sup>1</sup>, Michael Rooney<sup>1</sup>, Saad Yawar<sup>1</sup>, Noah Beetge<sup>1</sup>, Madhusudan Dalvi<sup>1,2</sup> (1. King's College London (UK), 2. Kent and Medway NHS and Social Care Partnership Trust (UK))

[P-20-05]

Mapping the geography of depressive symptoms and early maladaptive schemas: Comparative network analysis between major depressive disorder and bipolar disorder

\*Myeongkeun Cho<sup>1</sup>, Chanhee Park<sup>1</sup>, Christopher Hyung Keun Park<sup>2</sup> (1. Asan Institute for Life Sciences (Korea), 2. Asan Medical Center (Korea))

[P-20-06]

Chi-Chi from Dragon Ball: An ICD-Informed Psychoanalytic and Cultural Analysis of Maternal Anxiety and Marital Imbalance

\*Tejbir Singh Deol<sup>1</sup>, Kyle McMullen<sup>1</sup>, Madhusudan Dalvi<sup>1,2</sup> (1. King's College London (UK), 2. Kent and Medway NHS and Social Care Partnership Trust (UK))

[P-20-07]

Cognitive Heterogeneity in First-Episode Schizophrenia Patients: A Latent Profile Analysis and Network Analysis Based on the CANTAB Test

\*Weiyang Wang<sup>1</sup>, Tao Li<sup>1</sup> (1. Affiliated Mental Health Centre & Hangzhou Seventh People's Hospital, Zhejiang University School of Medicine (China))

Poster

2025年9月27日(土) 15:00 ~ 16:10  Poster Session (Foyer 1)

## Poster 20

[P-20-01] The higher ability of verbal fluency and attention and processing speed with clinical recovery in patients with schizophrenia than remitted patients through the comparison of schizophrenia and healthy controls: A cross-sectional study

\*Ryo Asada<sup>1</sup>, Hitoshi Iida<sup>1</sup>, Leo Gotho<sup>1</sup>, Kiyohiro Yasumatsu<sup>1</sup>, Hikaru Hori<sup>1</sup> (1. Department of Psychiatry, Faculty of Medicine, Fukuoka University (Japan))

キーワード : Schizophrenia、Cognitive function、Recovery、Remission

Cognitive impairment is one of the core symptoms with schizophrenia (Jauhar et al., 2022) and several domains of cognitive function in patient with schizophrenia were associated with real world functions (Harvey et al., 2022). Regarding functional recovery with schizophrenia, only one cross-sectional study reported that the score of executive function, verbal fluency and verbal working memory in recovery patients with schizophrenia were higher than non-recovered patients (Kopelowicz et al., 2005). However, there are no evidence about the difference of cognitive function and relationships with social skills between recovery and remission states with schizophrenia. This cross-sectional study investigated that 55 patients with schizophrenia and 20 healthy controls. 25 schizophrenia patients were meted recovery criteria, and 30 patients were meted remission criteria. We used the Japanese version of the Brief Assessment of Cognition in Schizophrenia (BACS-J) to evaluate cognitive function. The Brief Psychiatric Rating Scale (BPRS) and the Calgary and Depression Scale for Schizophrenia (CDSS) were used to evaluate psychiatric symptoms. Social function was measured by the Japanese version of social functioning scale (SFS-J). This study was approved by the Fukuoka University Medical Ethics Committee (U-21-11-018), and verbal and written consent was obtained from all participants. In the demographics and clinical characteristics of each group, there was no significant difference except for education, duration of employment, and duration of illness. Each BACS-J score except for executive function was significant difference among three groups. From the post-hoc analysis, verbal fluency and attention and processing speed in recovery group were significantly higher than remission group but verbal fluency was no significant difference between recovery and healthy control group. The present study show that a part of cognitive functions might be relate to recovery for patients with schizophrenia. Furthermore, it may be important to focus on improving these cognitive functions for achieving recovery.

Poster

2025年9月27日(土) 15:00 ~ 16:10  Poster Session (Foyer 1)

## Poster 20

### [P-20-02] Personality theory based on Chinese culture

\*zhuangsheng Wang<sup>1</sup> (1. Binzhou Medical school (China))

キーワード : Chinese culture、 personality theory、 localization

**Abstract:** Based on Chinese indigenous culture and clinical practice, and drawing on the pattern of Western personality trait theory, the five-factor model of Chinese indigenous personality summarized three dimensions, the dimension of willfulness-constraint I, the dimension of social adaptability-maladaptability II, and the dimension of Chinese indigenous entering the world-remaining aloof III. Five typical personality types, type I personality of willfulness adaptive type (dominant type), type II personality of constraint adaptive type (adaptive type), type III of constraint maladaptive type (anxious type), type IV personality of willfulness maladaptive type (anti-social type), and type V personality of remaining aloof type (transcendent type). This classification method emphasizes the integrity of personality and acknowledges the convertibility between personality types and the relativity of social adaptability. The five- model of Chinese indigenous personality has certain application value in the cultivation of healthy personality, the formulation of mental health standards, the pathogenesis of abnormal personality, the development of indigenous personality, and the localization of psychological counseling and treatment.

Poster

2025年9月27日(土) 15:00 ~ 16:10  Poster Session (Foyer 1)

## Poster 20

### [P-20-03] Comparative Network Structures of Depressive Symptoms in Asian Individuals With Guilt-Rich and Guilt-Free Depressive Disorders: Findings From the REAP-AD3

\*Seon-Cheol Park<sup>1</sup> (1. Department of Psychiatry, Hanyang University College of Medicine (Korea))

キーワード : Christianity、depressive symptoms、guilt、melancholia、network structure

**Objective:** This study aimed to compare the network structures of depressive symptoms in individuals with guilt-rich versus guilt-free presentations of depression in a large-scale cross-national Asian data set. **Methods:** We analyzed data from the Research on Asian Psychotropic Prescription Patterns for Antidepressants, Phase 3 (REAP-AD3), which included patients with depressive disorders from 11 Asian countries. Network analysis was used to estimate symptom interactions and identify central symptoms in each group. Participants were categorized based on the presence or absence of prominent guilt symptoms. **Results:** The network structures of the two groups differed substantially. In the guilt-rich group, depressed mood was a highly central node, closely linked to self-blame. In contrast, the guilt-free group exhibited networks centralized with loss of energy. **Conclusions:** Variation in symptom network structures is consistent with Richard Baxter's and Robert Burton's early ideas on melancholia. From a clinical standpoint, symptoms related to moral judgment and self-criticism require specific therapeutic attention in individuals with prominent guilt.

## Poster

2025年9月27日(土) 15:00 ~ 16:10  Poster Session (Foyer 1)

## Poster 20

[P-20-04] A Psychiatric Analysis of Batman and the Public Perception of Mental Illness

\*Tejbir Singh Deol<sup>1</sup>, Ella Bauwens<sup>1</sup>, Michael Rooney<sup>1</sup>, Saad Yawar<sup>1</sup>, Noah Beetge<sup>1</sup>, Madhusudan Dalvi<sup>1,2</sup>  
(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

Batman, or Bruce Wayne, is one of the most psychologically complex figures in popular culture. Originating from the traumatic loss of his parents, his subsequent behaviour demonstrates a range of features aligning with diagnosable psychiatric conditions. This abstract applies a clinical lens, using ICD-11 criteria, to analyse Batman's character as depicted in major comic arcs, such as Batman: Year One, Hush, The Court of Owls, and Batman RIP.

### Clinical Features

Batman meets the core features of Post-Traumatic Stress Disorder (ICD-11: 6B40), including persistent re-experiencing, hypervigilance, and emotional numbing, particularly evident in Year One and The Long Halloween. He also exhibits traits consistent with Obsessive-Compulsive Personality Disorder (ICD-11: 6D10), such as perfectionism, moral rigidity, and overcontrol, especially in Hush. His enduring identification with his parents' death aligns with Prolonged Grief Disorder (ICD-11: 6B42), as explored in Batman RIP. In Batman of Zur-En-Arrh, elements of Dissociative Identity Disorder (ICD-11: 6B64) emerge, with fragmented identity and altered states of consciousness.

### Public Perception

Despite these features, Batman is not portrayed as mentally ill but rather as heroic. His pathology is romanticised as moral clarity and emotional discipline. This idealisation may obscure the disabling nature of psychiatric conditions, reinforce gendered stigma around emotional expression, and promote maladaptive coping as strength. However, Batman also presents a unique opportunity to engage the public with narratives of trauma, grief, and identity when framed through a psychiatric lens.

### Conclusion

This analysis highlights the importance of critically examining portrayals of mental illness in media. Batman exemplifies how fictional heroes can reflect real psychopathology, and how their portrayals shape cultural narratives about mental health, particularly trauma and masculinity.

Poster

2025年9月27日(土) 15:00 ~ 16:10  Poster Session (Foyer 1)**Poster 20**

[P-20-05] Mapping the geography of depressive symptoms and early maladaptive schemas: Comparative network analysis between major depressive disorder and bipolar disorder

\*Myeongkeun Cho<sup>1</sup>, Chanhee Park<sup>1</sup>, Christopher Hyung Keun Park<sup>2</sup> (1. Asan Institute for Life Sciences (Korea), 2. Asan Medical Center (Korea))

キーワード : network analysis、depressive symptom、early maladaptive schema、major depressive disorder、bipolar disorder

**Introduction:** Early maladaptive schemas (EMSs) are risk factors for depressive symptoms. However, the detailed process through which EMSs affect depressive symptoms remains unclear. We aimed to examine the associations among depressive symptoms and EMSs in patients with major depressive disorder (MDD) and bipolar disorder (BD), and compare these patterns. **Methods:** Two undirected networks were estimated for patients with MDD and BD. The node and bridge strength centralities were calculated in each network. The differences between the two networks were tested across four aspects: network structure, global strength, node centrality, and edge weight. **Results:** Several significant associations were observed within the depressive symptoms cluster and the EMSs cluster. Among the edges connecting the two clusters, only the edge connecting *feelings of worthlessness or guilt* and *defectiveness/shame* schema was significant in the MDD group (weight = .079, 95% CI = [.001, .157]). Only the edge connecting *suicidal ideation* and *defectiveness/shame* schema was significant in the BD group (weight = .087, 95% CI = [.026, .148]). *Feelings of worthlessness or guilt* and *suicidal ideation* exhibited high bridge strength centrality, and *defectiveness/shame* schema did so among EMSs. The differences between the two networks of the MDD and BD groups were not remarkable. **Conclusions:** Reciprocal causal relationships may be present among depressive symptoms and among the EMSs. Schema therapy addressing the *defectiveness/shame* schema or cognitive behavioral therapy may be effective for patients with both MDD and BD, considering the importance of the *defectiveness/shame* schema and two cognitive depressive symptoms in connecting depressive symptoms and EMSs.

Poster

2025年9月27日(土) 15:00 ~ 16:10 Poster Session (Foyer 1)

**Poster 20****[P-20-06] Chi-Chi from *Dragon Ball*: An ICD-Informed Psychoanalytic and Cultural Analysis of Maternal Anxiety and Marital Imbalance**

\*Tejbir Singh Deol<sup>1</sup>, Kyle McMullen<sup>1</sup>, Madhusudan Dalvi<sup>1,2</sup> (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、Anime

**Background and Methodology**

This study employs a qualitative, interpretive methodology that combines ICD-11-informed psychiatric semiotics, classical Freudian and object-relations psychoanalysis, and cultural psychiatry. The analysis involves close textual reading of Chi-Chi's portrayal across the original *Dragon Ball*, *Dragon Ball Z*, and *Dragon Ball Super* anime series. Chi-Chi's behaviours, dialogues, and relational dynamics are examined through the lens of symbolic symptom representation. Rather than giving a formal diagnosis, the study explores how her traits echo psychiatric categories and how these are mediated through gendered cultural scripts.

**Psychiatric and Psychoanalytic Framing**

Chi-Chi's recurring behaviours symbolically resemble traits within Generalised Anxiety Disorder under ICD-11, including pervasive worry, anticipatory fear, and emotional dysregulation. Her rigid insistence on academic excellence and structured domesticity reflects features of Anankastic Personality Disorder. These symbolic parallels are used to explore narrative constructions of maternal hypervigilance in emotionally unstable households. Psychoanalytically, her insistence on order functions as displacement for frustration with her emotionally absent partner, Goku. The loss of her marital identity in favour of maternal compliance indicates repression and superego dominance. Goku operates as an unstable attachment object, shaping Chi-Chi's anxiously overfunctioning maternal persona.

**Cultural and Ethical Dimensions**

Chi-Chi's depiction sits between East Asian ideals of filial duty and Western critiques of emotional labour. Her assertiveness is pathologised, while male emotional detachment is valorised. This contrast reveals gendered asymmetries in how emotional expression and responsibility are received. The portrayal raises ethical concerns around the romanticisation of neglectful masculinity and the burden of caregiving imposed on female characters in popular media.

**Conclusion**

Chi-Chi symbolises a culturally mediated psychological response to abandonment and unreciprocated caregiving. Her representation reveals deeper ethical tensions in how female distress is interpreted across media traditions.

Poster

2025年9月27日(土) 15:00 ~ 16:10 Poster Session (Foyer 1)

## Poster 20

## [P-20-07] Cognitive Heterogeneity in First-Episode Schizophrenia Patients: A Latent Profile Analysis and Network Analysis Based on the CANTAB Test

\*Weiyan Wang<sup>1</sup>, Tao Li<sup>1</sup> (1. Affiliated Mental Health Centre & Hangzhou Seventh People's Hospital, Zhejiang University School of Medicine (China))

キーワード : Schizophrenia、Cognitive Function、Subtyping

**Objective:** This study used the Cambridge Assessment Neuropsychological Test Battery (CANTAB) to assess cognitive function, combined with latent profile analysis (LPA) and network analysis, to explore cognitive subtypes and pathological network mechanisms in first-episode schizophrenia patients. **Methods:** A total of 157 first-episode schizophrenia patients and 342 healthy controls (HC) were included. CANTAB tests were used to assess the following: Rapid Visual Information Processing test, Delayed Matching to Sample, Pattern Recognition Memory, Spatial Working Memory, Intra-Extra Dimensional Set Shift, Stockings of Cambridge. LPA analysis used CANTAB metrics as continuous variables; the optimal number of subtypes was determined via model fitting statistics (AIC/BIC/entropy values etc.). Network analysis constructed a correlation network among cognitive metrics, comparing intra-group connection strengths (edge weights) and topological properties. **Results:** LPA identified two stable subtypes: the Cognitive Preserved Group (CPG, 48 cases) with cognitive function similar to healthy controls; and the Cognitive Impaired Group (CIG, 109 cases), accounting for a larger proportion of patients and showing significantly lower performance on multiple CANTAB metrics. The CIG had older age and shorter years of education. Network analysis revealed that healthy controls exhibited higher connectivity density among cognitive metrics; network connectivity in both the CIG and CPG was significantly weaker than in the HC. **Conclusion:** First-episode schizophrenia exhibits two subtypes. The impaired subtype is associated with advanced age, lower educational attainment, and weakened cognitive network connectivity, providing targeted evidence for early individualized intervention.

## Poster

2025年9月27日(土) 11:00 ~ 11:50  Poster Session (Foyer 2)

## Poster 21

[P-21-01]

Cultural Implications Of Fatherlessness In Indonesia: A Psychodynamic And Gender Identity Perspective

\*Amita Rouli Purnama Sitanggang<sup>1</sup>, Cokorda Bagus Jaya Lesmana<sup>2,3</sup>, I Putu Dharma Krisna Aji<sup>2,4</sup> (1. Murni Teguh Tuban Bali Hospital (Indonesia), 2. Department of Psychiatry, Faculty of Medicine Udayana University (Indonesia), 3. Ngoerah Hospital (Indonesia), 4. Udayana University Hospital (Indonesia))

[P-21-02]

Preliminary Study on the Current Situation and Issues in After-School Day Services in Japan

\*Satoshi Obata<sup>1</sup>, Nobuhiro Watanabe<sup>1</sup> (1. Kinoko club (Japan))

[P-21-03]

Preliminary survey on the actual situation of risk of obscenity in the caring for children with disabilities

Focusing on Child Development Support and After-school Day Care Service Providers and the staffs who work there

\*Nobuhiro Watanabe<sup>1</sup>, \*Satoshi Obata<sup>1</sup> (1. NPO Daichi (Japan))

[P-21-04]

Exploring the Influence of Continued Therapeutic Horseback Riding on Children with Neurodevelopmental Conditions: Focus on Sleep and Parental Well-Being

\*Namiko KAWAMURA<sup>1</sup>, Mayu SAKAMOTO<sup>1</sup>, Kayoko MACHIDA<sup>2</sup>, Hiroshi KADOTANI<sup>1</sup>, Yuji Ozeki<sup>1</sup> (1. Shiga University of Medical Science (Japan), 2. Sappo City University (Japan))

[P-21-05]

The Effectiveness of a Clinical Nature-Based Intervention for ASD Children from a Biopsychosocial Perspective

\*John Wong<sup>1,2</sup>, Tammy Neo<sup>1</sup>, Lina Lim<sup>2</sup>, Angelia Sia<sup>3</sup>, Esther Tai<sup>1</sup>, Sze-Yin Seow<sup>1</sup>, Michelle Lee, Maria Paula Leon Mora<sup>2</sup>, Chris Loo<sup>2</sup>, Christel Chang, Natalie Lei<sup>1</sup>, Tiffany Ho<sup>1</sup>, Kenneth Khoo<sup>3</sup>, Kian Seng Ding, Maria Koh, \*Kee Juan Yeo<sup>2</sup> (1. National University Hospital Singapore (Singapore), 2. National University of Singapore (Singapore), 3. National Parks Board, Singapore (Singapore))

Poster

2025年9月27日(土) 11:00 ~ 11:50 Poster Session (Foyer 2)

**Poster 21****[P-21-01] Cultural Implications Of Fatherlessness In Indonesia: A Psychodynamic And Gender Identity Perspective**

\*Amita Rouli Purnama Sitanggang<sup>1</sup>, Cokorda Bagus Jaya Lesmana<sup>2,3</sup>, I Putu Dharma Krisna Aji<sup>2,4</sup> (1. Murni Teguh Tuban Bali Hospital (Indonesia), 2. Department of Psychiatry, Faculty of Medicine Udayana University (Indonesia), 3. Ngoerah Hospital (Indonesia), 4. Udayana University Hospital (Indonesia))

キーワード : fatherlessness、identity、gender formation、cultural implication

**Background :** It is said that Indonesia ranks as the third most fatherless country. Unicef in 2024 stated that more than 20% children in Indonesia grew up fatherless; despite annual celebration of National Father's Day on November 12<sup>th</sup> as one way to promote paternal involvement in parenting. On a daily basis, a significant number of patients present with various identity and gender issues stemming from the absence of a father figure in their upbringing, leading to mental health problems.

**Metode :** Employing a narrative review approach, this paper discusses the importance of a father figure and the reality of fatherlessness, related to identity and gender issues, as well as the potential connections on psychodinamics process and Indonesian culture.

**Discussion :** Fatherless is a phenomenon where the father's role physically or psychologically absent that could trigger several impacts on children. In Indonesia, fatherlessness mainly caused by father's absence due to workloads and social believe that father doesn't includes in children's nurture process. Children who experiencing this condition often seek compensatory emotional attachment to made up the hole that supposed to be filled with fatherly figure. Feelings of rejection from the father are frequently linked to low self esteem and self acceptance, greatly affects the development of assertive attitude skills in children especially in girls. The absence of a father figure also influences a child's sexual identity. Girls tend to develope a strong need for male validation, immerse herself in activities with men or involved in sexual activity with many partners; while boys may be more inclined to exhibit a feminine gender identity, seeking care from another man to replace his father.

**Conclusion :** A proactive approach and collaboration are needed to establish greater awareness of the fatherless issue, along with economic improvements, therapy, premarital or marital counseling, and parenting classes, as an attempt to minimize fatherlessness.

Poster

2025年9月27日(土) 11:00 ~ 11:50  Poster Session (Foyer 2)

## Poster 21

### [P-21-02] Preliminary Study on the Current Situation and Issues in After-School Day Services in Japan

\*Satoshi Obata<sup>1</sup>, Nobuhiro Watanabe<sup>1</sup> (1. Kinoko club (Japan))

キーワード : After-school day care services、neurodevelopmental disorders、Japan

After-school day services are services that provide school-aged children with disabilities with training to improve their daily life skills, mainly after school. The number of children using after-school day services in Japan has been increasing year by year, reaching approximately 340,000 in 2023. Against this background, the quality of support provided by after-school day services have become an issue in recent years, and various institutional revisions have been made, including the formulation of new guidelines. However, many issues still remain, such as the content of support and the securing of personnel. In this study, we analyzed the current situation surrounding after-school day care services and examined the issues that need to be addressed in order to improve these services in Japan.

## Poster

2025年9月27日(土) 11:00 ~ 11:50 Poster Session (Foyer 2)

## Poster 21

[P-21-03] Preliminary survey on the actual situation of risk of obscenity in the caring for children with disabilities

Focusing on Child Development Support and After-school Day Care Service Providers and the staffs who work there

\*Nobuhiro Watanabe<sup>1</sup>, \*Satoshi Obata<sup>1</sup> (1. NPO Daichi (Japan))

キーワード : obscenity、children with disabilities、care staffs

### Purpose

The purpose of this study was to investigate the awareness of staffs of children with disabilities and the organizations to which they belong regarding obscenity in their practices.

### Method

The subjects of the study were 84 support centers for children with disabilities and the staff working there in X prefecture, Japan. Such facilities included Child Development Support Centers and After-School Daycare Centers. The survey was conducted online and included the following questions: Evaluation of obscenity in everyday care, such care includes, for example, body touch, changing posture, dressing and undressing assistance, application of medicine, physical observation, massage, wiping, excretion assistance, diaper assistance, bathing assistance, etc. If there is nothing obscene about routine care, we asked why. And they were asked if they were aware of the charges of Non-consensual Sexual Intercourse, Grooming, Non-consensual Indecent Assault and Filming or Shooting Crime. The survey took approximately one month to complete. In accordance with the university's ethical code, this research was conducted after explaining the privacy protection, research procedures and purpose of the research to the participants.

### Result

As a result of the survey, 18 responses were received (21%). In all responses, no one acknowledged that their daily support includes "obscenity." On the other hand, in all support situations listed in the survey, there were responses that "obscenity" occurs (or be observed) (each 44-72%). The background behind such responses were that there were appropriate reasons for providing such support (89%).

### Discussion

There is a possibility that caring for children with disabilities may be obscene. Therefore, it is necessary for staffs who are responsible for such care to immediately consider what kind of considerations they should take.

## Poster

2025年9月27日(土) 11:00 ~ 11:50  Poster Session (Foyer 2)

## Poster 21

[P-21-04] Exploring the Influence of Continued Therapeutic Horseback Riding on Children with Neurodevelopmental Conditions: Focus on Sleep and Parental Well-Being

\*Namiko KAWAMURA<sup>1</sup>, Mayu SAKAMOTO<sup>1</sup>, Kayoko MACHIDA<sup>2</sup>, Hiroshi KADOTANI<sup>1</sup>, Yuji Ozeki<sup>1</sup> (1. Shiga University of Medical Science (Japan), 2. Sapporo City University (Japan))

キーワード：Equine Assisted Activities and Therapies、Developmental disabilities、Sleep Habit、well-being

**Background:**

Therapeutic horseback riding is still limited in practice in Japan, but studies—particularly from Europe—have reported psychological benefits for children with autism spectrum disorder (ASD) or attention-deficit/hyperactivity disorder (ADHD), including improved emotional stability and communication. However, most research has focused on physical effects, and its psychological impact and influence on daily life remain underexplored.

**Aim:**

The aim of this study was to explore the influence of continued therapeutic horseback riding for children with developmental disabilities and its effects on parents in terms of various aspects of well-being.

**Method:**

A questionnaire survey was conducted with parents of children aged 4 to 15 years attending an after-school service where therapeutic horseback riding is a core activity. The Japanese version of the Children's Sleep Habits Questionnaire (CSHQ-J) assessed children's sleep, while the Patient Health Questionnaire-9 (PHQ-9) and PHQ-15 assessed depressive and somatic symptoms in parents. Data were analyzed using IBM SPSS Statistics Version 29.0. The Mann-Whitney U test was used to examine between children who had participated for less than six months versus more than six months.

**Result:**

Responses included 58 for the CSHQ-J, 70 for the PHQ-9, and 69 for the PHQ-15. The average CSHQ-J score (33 core items) was 46.45 (SD = 6.95). Parental PHQ-9 and PHQ-15 scores averaged 5.75 (SD = 5.02) and 6.01 (SD = 4.43), respectively. Children riding for over six months showed significantly lower CSHQ-J scores than those with less experience ( $p = 0.01$ ), suggesting better sleep quality.

**Conclusion:**

Continued therapeutic horseback riding may improve sleep in children with developmental disabilities. These findings highlight its potential as a holistic intervention. Further results are ongoing, and analyses will be presented during the full presentation.

Poster

2025年9月27日(土) 11:00 ~ 11:50 Poster Session (Foyer 2)

**Poster 21****[P-21-05] The Effectiveness of a Clinical Nature-Based Intervention for ASD Children from a Biopsychosocial Perspective**

\*John Wong<sup>1,2</sup>, Tammy Neo<sup>1</sup>, Lina Lim<sup>2</sup>, Angelia Sia<sup>3</sup>, Esther Tai<sup>1</sup>, Sze-Yin Seow<sup>1</sup>, Michelle Lee, Maria Paula Leon Mora<sup>2</sup>, Chris Loo<sup>2</sup>, Christel Chang, Natalie Lei<sup>1</sup>, Tiffany Ho<sup>1</sup>, Kenneth Khoo<sup>3</sup>, Kian Seng Ding, Maria Koh, \*Kee Juan Yeo<sup>2</sup> (1. National University Hospital Singapore (Singapore), 2. National University of Singapore (Singapore), 3. National Parks Board, Singapore (Singapore))

キーワード：Child Psychiatry/Psychology、Autism Spectrum Disorder、Nature-Based Intervention

Nature has been proven to be useful in improving the mental well-being of neurotypical children. Adopting a biopsychosocial perspective, this study aimed to prove the usefulness of a nature-based clinical therapeutic intervention in improving the emotional-behavioural difficulties of ASD children.

A 6-week 90-minute intervention program curated based on DIRFloortime® principles 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.

Child's psychosocial quality of life was measured using the Pediatric Quality of Life Inventory (PEDsQL) at T0, T2, and T3, while Emotional Regulation Checklist (ERC) – completed at T0 and T2 – tested for a child's negative emotional reactivity.

Salivary analyses were completed at T0, T2 and T3 for: Annexin-A1 – an immunomodulatory, glucocorticoid inducible protein with inflammation resolution properties – and IL6 – a pleiotropic cytokine which mediates autism-like behaviour through neuronal circuitry imbalances.

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 quality of life (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).

Paired t-test revealed a significant decrease in Annexin-A1 from T0 to T2 (mean difference = -38.47ng/ml,  $p=0.0074$ , 95% CI [64.84 to -12.09]). Paired Wilcoxon test showed a significant decrease in IL6 (square rooted transformation to reduce variation) from T0 to T3 (median difference = -40.3 [sqrt(ng/ml)],  $p=0.03$ ).

Hence, this clinical nature-based intervention helped to reduce ASD children's emotional reactivity and improve psychosocial quality of life as well as modulate inflammation.

## Poster

2025年9月27日(土) 14:00 ~ 15:00  Poster Session (Foyer 2)

## Poster 22

[P-22-01]

Factors related to the quality of life of people with mental disorders living in remote islands

\*Misako Hisamatsu<sup>1</sup>, Ayako Yamashita<sup>2</sup>, Norio Maeda<sup>3</sup>, Yasuhito Nerome<sup>2</sup> (1. Kumamoto Health Science University (Japan), 2. Kagoshima University (Japan), 3. Kio University (Japan))

[P-22-02]

Involuntary Psychiatric Admission in East Asia: A Case-Vignette-Based Comparative Analysis in Japan, South Korea, and Taiwan

\*Kei Kobayashi<sup>1,2</sup>, Eisuke Sakakibara<sup>1</sup>, Shinsuke Kondo<sup>1</sup>, Kanna Sugiura<sup>2</sup>, Keijin Yamamura<sup>3</sup>, Kaori Usui<sup>2</sup>, Mayui Nara<sup>2</sup>, Satoe Takashima<sup>2</sup>, Asami Matsunaga<sup>2</sup>, Chiyo Fujii<sup>2</sup>, Kiyoto Kasai<sup>1</sup>, Toshiya Murai<sup>3</sup> (1. Department of Neuropsychiatry, Graduate School of Medicine, The University of Tokyo (Japan), 2. Department of Community Mental Health & Law, National Institute of Mental Health, National Center of Neurology and Psychiatry (Japan), 3. Department of Psychiatry, Graduate School of Medicine, Kyoto University (Japan))

[P-22-03]

Development of Contraceptive Education Program for Labor Migrants and Students from Vietnam

\*UKAWA Ko<sup>1</sup> (1. Taisho University (Japan))

Poster

2025年9月27日(土) 14:00 ~ 15:00 Poster Session (Foyer 2)

## Poster 22

### [P-22-01] Factors related to the quality of life of people with mental disorders living in remote islands

\*Misako Hisamatsu<sup>1</sup>, Ayako Yamashita<sup>2</sup>, Norio Maeda<sup>3</sup>, Yasuhito Nerome<sup>2</sup> (1. Kumamoto Health Science University (Japan), 2. Kagoshima University (Japan), 3. Kio University (Japan))

キーワード : people with mental disorders、remote island、quality of life

**Objectives:** This study aimed to identify the association between quality of life (QOL), sense of belonging, and social support for people with mental disabilities living in remote islands with and without psychiatric hospitals.

**Methods:** This cross-sectional study included individuals with mental disabilities living in remote islands with and without psychiatric hospitals in Japan. Questionnaires, consisting of items regarding participant demographics, living conditions, use of social resources, the World Health Organization QOL Assessment 26, the Japanese version of the Duke Social Support Index (DSSI-J), and the Sense of Belonging Scale for people with mental disorders, were distributed to these individuals. Binomial logistic regression analysis was conducted to analyze data from two groups, one with psychiatric hospitals on the island and one without psychiatric hospitals.

**Results:** A total of 77 valid responses were received. Among the respondents, 48 (62.3%) were male and 29 (37.7%) were female, with a mean age of 55.3 years. Further, 43 (55.8%) and 34 (44.2%) respondents resided in islands with and without psychiatric hospitals, respectively. Individuals with mental disabilities living on a remote island with psychiatric hospitals had significantly higher emotional, instrumental, and cognitive-evaluative support as well as psychological and physical QOL. Binomial logistic regression analysis that compared scales for remote islands with and without psychiatric hospitals revealed that living on a remote island with psychiatric hospitals was significantly associated with higher QOL (odds ratio = 2.198, 95% confidence interval: 1.095–4.413). No significant differences in the DSSI-J and sense of belonging were observed.

**Conclusion:** The availability of psychiatric hospitals affected the QOL of people with mental disabilities living in remote islands. Further, outreach, local understanding, and support from family and friends are important for a fulfilling life for such individuals.

Poster

2025年9月27日(土) 14:00 ~ 15:00 Poster Session (Foyer 2)

**Poster 22****[P-22-02] Involuntary Psychiatric Admission in East Asia: A Case-Vignette-Based Comparative Analysis in Japan, South Korea, and Taiwan**

\*Kei Kobayashi<sup>1,2</sup>, Eisuke Sakakibara<sup>1</sup>, Shinsuke Kondo<sup>1</sup>, Kanna Sugiura<sup>2</sup>, Keijin Yamamura<sup>3</sup>, Kaori Usui<sup>2</sup>, Mayui Nara<sup>2</sup>, Satoe Takashima<sup>2</sup>, Asami Matsunaga<sup>2</sup>, Chiyo Fujii<sup>2</sup>, Kyoto Kasai<sup>1</sup>, Toshiya Murai<sup>3</sup>  
 (1. Department of Neuropsychiatry, Graduate School of Medicine, The University of Tokyo (Japan), 2. Department of Community Mental Health & Law, National Institute of Mental Health, National Center of Neurology and Psychiatry (Japan), 3. Department of Psychiatry, Graduate School of Medicine, Kyoto University (Japan))

キーワード : Involuntary admission、East Asia、Cross-national comparison、Convention on the Rights of Persons with Disabilities (CRPD)

In recent years, discussions on Japan's mental health care system have been advancing, influenced by multiple factors including the ratification of the Convention on the Rights of Persons with Disabilities (CRPD) and its subsequent Concluding Observations. A 2022 report by the Ministry of Health, Labour and Welfare emphasized the need to establish a seamless, community-based support system that enables individuals with mental health challenges to live safely in their communities aligned with their preferences and needs. The report also called for revisions to both inpatient and community care, including a review of "Involuntary Hospitalization for Medical Care and Protection (Iryo-hogo)" from a rights-protection perspective. Key areas for consideration included the legitimacy of non-consensual admission, the family burden, and cross-national comparisons. As part of a government-funded study, we examined legal and procedural frameworks for involuntary psychiatric admission across seven regions: Japan, South Korea, Taiwan, England, France, Germany, and three Canadian provinces. This poster focuses on the East Asian context, comparing Japan, South Korea, and Taiwan—three jurisdictions with distinct yet regionally situated mental health systems. We used carefully structured case vignettes based on challenging situations for Japanese clinicians, aiming to explore how similar cases might be approached under differing legal and clinical frameworks. To understand how decisions regarding involuntary admission are made and implemented, we conducted interviews with clinicians involved in these processes across each setting's mental health system. Our findings reveal both jurisdiction-specific differences as well as shared challenges in balancing patient rights, safety, and care delivery. This poster aims to inform ongoing international discussions on mental health system design, with reference to the evolving expectations outlined in the CRPD.

Poster

2025年9月27日(土) 14:00 ~ 15:00 Poster Session (Foyer 2)

**Poster 22****[P-22-03] Development of Contraceptive Education Program for Labor Migrants and Students from Vietnam**\*UKAWA Ko<sup>1</sup> (1. Taisho University (Japan))

キーワード : Labor Migrants、Vietnam、SRHR

As of the end of June 2024, the largest number of foreigners living in Japan were from China, followed by those from Vietnam. Their status of residence is Technical Intern Training or Specified Technical Skill. A characteristic of Vietnamese immigrants is that the male-female ratio is almost equal, and many are in their youth, which is a time when sexual activity becomes more active. After 2019, the Diet began discussing "Issues of unwanted pregnancy and childbirth of labor immigrants and foreign students staying in Japan." Therefore, a preliminary survey for developing "Psychological Education to Protect Sexual and Reproductive Health and Rights of Vietnamese People" was conducted from 2019 to 2020. The survey conducted in two technical intern-sending institutions (national and private) in Vietnam revealed the following. (1) Vietnamese people have a low level of understanding of contraceptive methods, (2) Vietnamese people do not have information on how to obtain modern contraceptives (birth control methods) after arriving in Japan, (3) Vietnamese people have few opportunities to learn how to utilize necessary medical services in Japan, (4) Vietnamese women have difficulty in taking a positive attitude toward contraception, and (5) In the event of unwanted pregnancy, many Vietnamese people choose to have an abortion even in their home country. A video for "Contraceptive Education for Vietnamese Living in Japan" was created in response to these results. In addition, from 2022 to 2024, we conducted psychoeducation programs using the video at five technical internship-sending institutions (national and private) in Vietnam. We also measured changes in knowledge of "sexual and reproductive health and rights" before and after the programs. Based on the results of this study, we will discuss the challenges of culturally sensitive sex education for foreign residents.

## Poster

2025年9月27日(土) 10:00 ~ 11:00 Poster Session (Foyer 2)

## Poster 23

[P-23-01]

### Co-Designing a Pharmacist-Led Wellness and Wellbeing Service for Long-Term Condition Patients with Subthreshold Depression and Anxiety

\*Patrick Cabasag<sup>1</sup>, Frederick Sundram<sup>2</sup>, Amy Hai Yan Chan<sup>1</sup>, Kebede Beyene<sup>3</sup>, Holly Wilson<sup>1</sup>, Jeff Harrison<sup>1</sup> (1. School of Pharmacy, Faculty of Medical and Health Sciences, The University of Auckland, Auckland (New Zealand), 2. Department of Psychological Medicine, Faculty of Medical and Health Sciences, The University of Auckland, Auckland (New Zealand), 3. Department of Pharmaceutical and Administrative Sciences, University of Health Sciences and Pharmacy in St Louis, St Louis, MO (United States of America))

[P-23-02]

### Diagnostic Distribution of Antidepressant Users: Findings from the REAP-AD3 Study

\*Huang-Li Lin<sup>1</sup>, Yueh-Pin Lin<sup>2</sup>, Tian-Mei Si<sup>3</sup>, Roy Abraham Kalliyalil<sup>4</sup>, Andi J Tanra<sup>5</sup>, Amir Hossein Jalali Nadoushan<sup>6</sup>, Toshiya Inada<sup>7</sup>, Seon-Cheol Park<sup>8,9</sup>, Kok Yoon Chee<sup>10</sup>, Afzal Javed<sup>11</sup>, Kang Sim<sup>12</sup>, Kuan-Lun Huang<sup>13</sup>, Pornjira Pariwatcharakul<sup>14</sup>, Norman Sartorius<sup>15</sup>, Mian-Yoon Chong<sup>16</sup>, Naotaka Shinfuku<sup>17</sup>, Takahiro A. Kato<sup>18</sup>, \*Shih-Ku Lin<sup>1,2</sup> (1. Department of Psychiatry, Linkou Chang Gung Memorial Hospital, Taoyuan, Taiwan (Taiwan), 2. Taipei City Hospital and Psychiatric Center, Taipei, Taiwan (Taiwan), 3. Institute of Mental Health, Peking University, Beijing, China (China), 4. Pushpagiri Institute of Medical Sciences and Research Centre, Thiruvalla, Kerala, India (India), 5. Department of Psychiatry, Faculty of Medicine, Hasanuddin University, Makassar 90245, Indonesia (Indonesia), 6. Psychiatry Department, Mental Health Research Center, Iran University of Medical Sciences, Tehran, Iran (Iran), 7. Department of Psychiatry, Nagoya University Graduate School of Medicine, Aichi, Nagoya, Japan (Japan), 8. Department of Psychiatry, Hanyang University College of Medicine, Seoul, Republic of Korea (Korea), 9. Department of Psychiatry, Hanyang University Guri Hospital, Guri, Republic of Korea (Korea), 10. Department of Psychiatry & Mental Health, Tunku Abdul Rahman Institute of Neurosciences, Kuala Lumpur Hospital, Kuala Lumpur, Malaysia (Malaysia), 11. Pakistan Psychiatric Research Centre, Fountain House, Lahore, Pakistan (Pakistan), 12. Institute of Mental Health, Buangkok Green Medical Park, Singapore (Singapore), 13. Tsaojun Psychiatric Center, Ministry of Health and Welfare, Nantou, Taiwan (Taiwan), 14. Faculty of Medicine Siriraj Hospital, Mahidol University, Bangkok, Thailand (Thailand), 15. Association for the Improvement of Mental Health Programs, Geneva, Switzerland (Switzerland), 16. Regency Specialist Hospital, Johor, Malaysia (Malaysia), 17. School of Human Sciences, Seinan Gakuin University, Fukuoka, Japan (Japan), 18. Department of Neuropsychiatry, Graduate School of Medical Sciences, Kyushu University, Fukuoka, Japan (Japan))

[P-23-03]

### Identification and Association of Sociodemographic Profile and Clinical Characteristics of Overseas Filipino Workers (OFW) referred by the Overseas Workers Welfare Administration (OWWA) in the Outpatient Section of National Center for Mental Health from January 2020 to December 2022

\*Francisco IV Gabriel Bolinao<sup>1</sup>, Robert Roy Mapa<sup>1</sup> (1. National Center for Mental Health (Philippines))

[P-23-04]

### Descriptive Study of Service Users with Movement Disorder Seen at the Neurology Out-Patient Section of the National Center for Mental Health, Philippines

\*Ryan Lazatin<sup>1</sup> (1. National Center for Mental Health (Philippines))

[P-23-05]

Descriptive Study of Service Users with Movement Disorder Seen at the Neurology Out-Patient Section of the National Center for Mental Health, Philippines "Grant Contest2"

\*Ryan Lazatin<sup>1</sup> (1. National Center for Mental Health (Philippines))

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[P-23-06]

Negotiating Normalcy and Patienthood: A Dialectical View of Mental Illness Narratives among Indian Women with Psychiatric Diagnoses

\*Annie Baxi Baxi<sup>1</sup> (1. Ashoka University (India))

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## Poster

2025年9月27日(土) 10:00 ~ 11:00  Poster Session (Foyer 2)

## Poster 23

### [P-23-01] Co-Designing a Pharmacist-Led Wellness and Wellbeing Service for Long-Term Condition Patients with Subthreshold Depression and Anxiety

\*Patrick Cabasag<sup>1</sup>, Frederick Sundram<sup>2</sup>, Amy Hai Yan Chan<sup>1</sup>, Kebede Beyene<sup>3</sup>, Holly Wilson<sup>1</sup>, Jeff Harrison<sup>1</sup> (1. School of Pharmacy, Faculty of Medical and Health Sciences, The University of Auckland, Auckland (New Zealand), 2. Department of Psychological Medicine, Faculty of Medical and Health Sciences, The University of Auckland, Auckland (New Zealand), 3. Department of Pharmaceutical and Administrative Sciences, University of Health Sciences and Pharmacy in St Louis, St Louis, MO (United States of America))

キーワード : depression、anxiety、chronic disease、community pharmacy services、primary care

Subthreshold depression and anxiety are prevalent conditions that cause distress and significantly impact the quality of life of individuals. If left untreated, up to 35% of individuals may develop clinically diagnosed mental health conditions. Subthreshold conditions are often linked with long-term conditions (LTCs). Community pharmacists, who already have an established rapport and regular contact with LTC patients, are in a unique position to address these conditions.

The aim of this research is to design a pharmacist-led service for LTC patients experiencing subthreshold depression and anxiety.

A co-design approach was taken to service design, involving community pharmacists, key stakeholders – including policymakers and health professionals – and consumers. The barriers and facilitators to implementation were identified through qualitative interviews and mapped using the Consolidated Framework for Implementation Research (CFIR) domains. The service was iteratively refined through feedback from the advisory group and interview participants.

The service model uses the Patient Health Questionnaire - 9 (PHQ-9) and Generalised Anxiety Disorder 7-item scale (GAD-7) to screen participants for subthreshold depression and anxiety. Depending on how participants screen in these questionnaires, participants will be managed appropriately. The main intervention component is Focused Acceptance and Commitment Therapy (FACT), with self-help cognitive behavioural therapy (CBT) resources and referral as the other management options.

There is potential for community pharmacies to play a key role in addressing subthreshold depression and anxiety in LTC patients. Future research would need to investigate the feasibility of the proposed service. If shown to be feasible, subsequent studies should evaluate the effectiveness and cost-effectiveness of the service.

Poster

2025年9月27日(土) 10:00 ~ 11:00 Poster Session (Foyer 2)

**Poster 23****[P-23-02] Diagnostic Distribution of Antidepressant Users: Findings from the REAP-AD3 Study**

\*Huang-Li Lin<sup>1</sup>, Yueh-Pin Lin<sup>2</sup>, Tian-Mei Si<sup>3</sup>, Roy Abraham Kalliyalil<sup>4</sup>, Andi J Tanra<sup>5</sup>, Amir Hossein Jalali Nadoushan<sup>6</sup>, Toshiya Inada<sup>7</sup>, Seon-Cheol Park<sup>8,9</sup>, Kok Yoon Chee<sup>10</sup>, Afzal Javed<sup>11</sup>, Kang Sim<sup>12</sup>, Kuan-Lun Huang<sup>13</sup>, Pornjira Pariwatcharakul<sup>14</sup>, Norman Sartorius<sup>15</sup>, Mian-Yoon Chong<sup>16</sup>, Naotaka Shinfuku<sup>17</sup>, Takahiro A. Kato<sup>18</sup>, \*Shih-Ku Lin<sup>1,2</sup> (1. Department of Psychiatry, Linkou Chang Gung Memorial Hospital, Taoyuan, Taiwan (Taiwan), 2. Taipei City Hospital and Psychiatric Center, Taipei, Taiwan (Taiwan), 3. Institute of Mental Health, Peking University, Beijing, China (China), 4. Pushpagiri Institute of Medical Sciences and Research Centre, Thiruvalla, Kerala, India (India), 5. Department of Psychiatry, Faculty of Medicine, Hasanuddin University, Makassar 90245, Indonesia (Indonesia), 6. Psychiatry Department, Mental Health Research Center, Iran University of Medical Sciences, Tehran, Iran (Iran), 7. Department of Psychiatry, Nagoya University Graduate School of Medicine, Aichi, Nagoya, Japan (Japan), 8. Department of Psychiatry, Hanyang University College of Medicine, Seoul, Republic of Korea (Korea), 9. Department of Psychiatry, Hanyang University Guri Hospital, Guri, Republic of Korea (Korea), 10. Department of Psychiatry & Mental Health, Tunku Abdul Rahman Institute of Neurosciences, Kuala Lumpur Hospital, Kuala Lumpur, Malaysia (Malaysia), 11. Pakistan Psychiatric Research Centre, Fountain House, Lahore, Pakistan (Pakistan), 12. Institute of Mental Health, Buangkok Green Medical Park, Singapore (Singapore), 13. Tsaojun Psychiatric Center, Ministry of Health and Welfare, Nantou, Taiwan (Taiwan), 14. Faculty of Medicine Siriraj Hospital, Mahidol University, Bangkok, Thailand (Thailand), 15. Association for the Improvement of Mental Health Programs, Geneva, Switzerland (Switzerland), 16. Regency Specialist Hospital, Johor, Malaysia (Malaysia), 17. School of Human Sciences, Seinan Gakuin University, Fukuoka, Japan (Japan), 18. Department of Neuropsychiatry, Graduate School of Medical Sciences, Kyushu University, Fukuoka, Japan (Japan))

キーワード : Antidepressants use、 diagnostic distribution、 training background

**Background:** Antidepressants are a category of psychotropic medications primarily indicated for major depression and anxiety-related disorders. In this study, we report the diagnostic distribution of patients receiving antidepressant treatment from the third survey of "The Research on East Asia Psychotropic Prescription Patterns for Antidepressants (REAP-AD).

**Method:** A cross-sectional survey of antidepressant prescription patterns was conducted from 2022 to 2023 in 11 countries in Asia, including China, India, Indonesia, Iran, Japan, Korea, Malaysia, Pakistan, Singapore, Taiwan, and Thailand. Demographics, clinical questionnaires, and prescribing medication information were collected through a unified data form using a web-based key-in system with a convenience sampling method.

**Results:** A total of 4,587 patients were enrolled. The most common diagnosis was Major Depression (F32, F33, 57.7%), followed by Anxiety-Related Disorders (F40, F41, 12.1%), Schizophrenia (F20, 5.5%), Bipolar Disorder (F31, 5.1%), Dysthymic Disorder (F34, 4.1%), Substance Use Disorder (F1x, 2.5%), Obsessive-Compulsive Disorder (F42, 2.4%), Adjustment Disorders (F43, 2.2%), Organic Mental Disorder (F0x, 2.2%), Schizoaffective Disorder (F25, 1.3%), and Others (5.0%). The individual diagnostic rates varied significantly among countries. Selective Serotonin Reuptake Inhibitors are the most commonly used antidepressants overall.

**Conclusion:** Antidepressants are widely utilized for symptomatic treatment beyond major

depression and anxiety-related disorders. The variation in diagnostic distribution may be attributed to several factors: the diverse training backgrounds of psychiatrists, the availability and cost of medications, patient characteristics, and the local healthcare reimbursement systems in each country. Future research should explore the clinical outcomes of such diverse usage to better inform healthcare practices and policies.

Poster

2025年9月27日(土) 10:00 ~ 11:00 Poster Session (Foyer 2)

**Poster 23**

[P-23-03] Identification and Association of Sociodemographic Profile and Clinical Characteristics of Overseas Filipino Workers (OFW) referred by the Overseas Workers Welfare Administration (OWWA) in the Outpatient Section of National Center for Mental Health from January 2020 to December 2022

\*Francisco IV Gabriel Bolinao<sup>1</sup>, Robert Roy Mapa<sup>1</sup> (1. National Center for Mental Health (Philippines))

キーワード：OFWs、OWWA、Sociodemographic profile、Clinical characteristics、Mental health

**Introduction:** The mental health of Overseas Filipino Workers (OFWs), one of the highest recipient of migrant worker remittances in the world, represents a critical area of concern, warranting in-depth investigation due to the unique stressors and challenges inherent in their work and living conditions abroad.

**Objective:** This study aims to identify risk factors and determinants for mental disorders among OFWs, given their significant contribution to the Philippine economy and their vulnerability to mental health issues.

**Methods:** A retrospective, descriptive, quantitative study was conducted to identify and measure an association of the sociodemographic profile and clinical characteristics of 70 OFWs referred by the OWWA to the adult outpatient section of the National Center Mental Health (NCMH) from January 2020 to December 2022 using the Chi Square Test ( $p < 0.005$ ).

**Results:** Majority of the OFWs referred to the center belong to the working age group, females, Roman Catholics, from the National Capital Region, reached secondary education, and worked as domestic helpers in Middle Eastern countries. Most had a diagnosis belonging to schizophrenia spectrum disorders and bipolar affective disorders. The findings revealed that civil status of OFWs exhibited an association to medical illnesses, while those from certain countries faced greater risks for both physical and mental health concerns, likely due to varying labor conditions and occupational hazards. Additionally, the strong association between religion and psychiatric diagnoses suggests that cultural and spiritual factors influence the perception and expression of mental health conditions, potentially impacting help-seeking behaviors.

**Conclusion:** The predominance of severe psychiatric illnesses, such as schizophrenia spectrum disorders and bipolar affective disorder with psychotic symptoms, underscores the urgent need for targeted mental health interventions for repatriated OFWs. Programs, policies and monitoring systems for repatriated OFWs should be strengthened and focused on the specific sociodemographic profile and clinical characteristics identified.

Poster

2025年9月27日(土) 10:00 ~ 11:00 Poster Session (Foyer 2)

**Poster 23****[P-23-04] Descriptive Study of Service Users with Movement Disorder Seen at the Neurology Out-Patient Section of the National Center for Mental Health, Philippines**

\*Ryan Lazatin<sup>1</sup> (1. National Center for Mental Health (Philippines))

キーワード：Movement disorders、extrapyramidal symptoms、psychiatry、neuropsychiatry、psychotropic side effects

**OBJECTIVES:** To describe the most common movement disorders seen among service users, along with their demographic characteristics, at the Neurology Out-Patient Section of the National Center for Mental Health; **METHODOLOGY:** A retrospective descriptive chart review was conducted on service users with movement disorder diagnoses seen from September 2019 to September 2023. Data on sociodemographic attributes, clinical presentations, comorbidities, medications, and diagnoses were extracted using a standardized collection form. Descriptive statistics including frequencies, percentages, means, and standard deviations were computed using Stata 17 BE; **RESULTS:** A total of 112 service users were included. The mean age was 43.9 years (SD = 19.64); the majority were male (61.1%) and unemployed (81.25%). Tremor (49.11%) was the most common initial clinical impression, while Parkinson's disease (36.61%) was the most frequent neurologic diagnosis. Psychiatric comorbidities were present in 57.14% of cases, most commonly schizophrenia (21.43%) and bipolar affective disorder (14.29%). Second-generation antipsychotics were prescribed in 42.86% of service users, with corresponding diagnoses of drug-induced tremors, parkinsonism, and dystonia; and **CONCLUSION:** This baselining study provides initial evidence on the burden and characteristics of movement disorders in a national mental health setting. The findings emphasize the need for integrated neuropsychiatric care and highlight the influence of psychiatric medications on movement disorders. Future studies should explore associations using analytical methods and extend data collection across multiple centers.

Poster

2025年9月27日(土) 10:00 ~ 11:00 Poster Session (Foyer 2)

**Poster 23****[P-23-05] Descriptive Study of Service Users with Movement Disorder Seen at the Neurology Out-Patient Section of the National Center for Mental Health, Philippines "Grant Contest2"**

\*Ryan Lazatin<sup>1</sup> (1. National Center for Mental Health (Philippines))

キーワード：Movement disorders、extrapyramidal symptoms、psychiatry、neuropsychiatry、psychotropic side effects

**OBJECTIVES:** To describe the most common movement disorders seen among service users, along with their demographic characteristics, at the Neurology Out-Patient Section of the National Center for Mental Health; **METHODOLOGY:** A retrospective descriptive chart review was conducted on service users with movement disorder diagnoses seen from September 2019 to September 2023. Data on sociodemographic attributes, clinical presentations, comorbidities, medications, and diagnoses were extracted using a standardized collection form. Descriptive statistics including frequencies, percentages, means, and standard deviations were computed using Stata 17 BE; **RESULTS:** A total of 112 service users were included. The mean age was 43.9 years (SD = 19.64); the majority were male (61.1%) and unemployed (81.25%). Tremor (49.11%) was the most common initial clinical impression, while Parkinson's disease (36.61%) was the most frequent neurologic diagnosis. Psychiatric comorbidities were present in 57.14% of cases, most commonly schizophrenia (21.43%) and bipolar affective disorder (14.29%). Second-generation antipsychotics were prescribed in 42.86% of service users, with corresponding diagnoses of drug-induced tremors, parkinsonism, and dystonia; and **CONCLUSION:** This baselining study provides initial evidence on the burden and characteristics of movement disorders in a national mental health setting. The findings emphasize the need for integrated neuropsychiatric care and highlight the influence of psychiatric medications on movement disorders. Future studies should explore associations using analytical methods and extend data collection across multiple centers.

Poster

2025年9月27日(土) 10:00 ~ 11:00  Poster Session (Foyer 2)

## Poster 23

### [P-23-06] Negotiating Normalcy and Patienthood: A Dialectical View of Mental Illness Narratives among Indian Women with Psychiatric Diagnoses

\*Annie Baxi Baxi<sup>1</sup> (1. Ashoka University (India))

キーワード：Psychiatric Narratives、Women and Health、Relational Distress

This paper explores how discourses of normalcy and patienthood shape illness narratives of Indian women psychiatric patients. Drawing on in-depth interviews and focus group discussions with ten women receiving inpatient psychiatric care in New Delhi, a discursive thematic analysis was conducted to understand how meanings of illness are constructed and embodied. A key finding is the dialectical movement in their narratives between the role of a "patient" and that of a "normal," relationally functional woman, illuminating the tensions between biomedical framings of illness and lived cultural realities.. Rather than treating constructs like self-sacrifice, domesticity, caregiving or emotionality as predisposing factors to illness, the paper examines how these notions are integral to participant's sense of their distress, maintain relational identities, and reassert a sense of moral worth. The analysis highlights the dialectical tension between illness and normalcy, where the desire to return to socially valued roles coexists with an embodied experience of incapacity. This study contributes to the growing literature on cultural idioms of distress and offers critical implications for feminist, community-based, and culturally competent mental health care.

## Poster

2025年9月27日(土) 15:00 ~ 16:10 Poster Session (Foyer 2)

## Poster 24

[P-24-01]

Metabolic dysfunction-associated steatotic liver disease and risk of depression in young adults: A nationwide population-based cohort study

\*Eunyoung Kim<sup>1</sup>, Su-Min Jeong, Sang Jin Rhee Rhee, Kyu Na Lee, Kyungdo Han (1. Department of Human Systems Medicine, Seoul National University College of Medicine, Seoul, Republic of Korea (Korea))

[P-24-02]

Alterations in Neurotransmitter-Related Brain Networks in Schizophrenia During Auditory Speech Stimulation

\*Hanxiaoran Li<sup>1</sup>, Tao Li<sup>1</sup>, Wei Wei<sup>1</sup> (1. Affiliated Mental Health Centre & Hangzhou Seventh People's Hospital, Zhejiang University School of Medicine (China))

[P-24-03]

Conceptualization of Recovery from Eating Disorders: A Qualitative Study Based on Interviews with Recovered Individuals

\*Akie Nakayama<sup>1</sup>, Masaru Takahashi<sup>1</sup> (1. Ochanomizu University (Japan))

[P-24-04]

The Association between Hemoglobin Level and Risk of Developing Dementia : National Health Screening Cohort(NHIS-HEALS) in Korea

\*SEONG HWAN KIM<sup>1</sup>, Ho Chan Kim<sup>2</sup>, Hyun Soo Kim<sup>1</sup> (1. Dong-A University (Korea), 2. Kosin University (Korea))

[P-24-05]

Association between auditory impairment and risk of VLOSLP: a multicenter, retrospective cohort study

\*Young Tak Jo<sup>1</sup> (1. Kangdong Sacred Heart Hospital (Korea))

[P-24-06]

Acculturation and Psychological Distress Among Adolescents in the United States: A Cross-Racial Analysis Using California Health Interview Survey (CHIS)

Franco Valencia<sup>1</sup>, \*Karin Kai Wing Wang<sup>1</sup>, So Hee Naomi Ahn<sup>1</sup>, Thirumagal Gowrikanthan<sup>1</sup>, Jasmin Choi<sup>1</sup>, Lester Andrew Uy<sup>1</sup>, Armaan Jamal<sup>1</sup>, Nitya Rajeshuni<sup>1,2</sup>, Robert Huang<sup>1,3</sup>, Gloria Kim<sup>1,3</sup>, Malathi Srinivasan<sup>1,3</sup>, Latha Palaniappan<sup>1,3</sup>, Steven Sust<sup>1,4</sup> (1. Stanford Center for Asian Health Research and Education (United States of America), 2. Department of Pediatrics, Stanford University School of Medicine (United States of America), 3. Department of Medicine, Stanford University School of Medicine (United States of America), 4. Department of Psychiatry and Behavioral Sciences, Stanford University School of Medicine (United States of America))

[P-24-07]

Aspects of Experiential Knowledge Accompanying Recovery among Survivors of Substance Use Disorder: A phenomenological study

\*Ayako Yamashita<sup>1</sup>, Yasuaki Akasaki<sup>1</sup> (1. School of Health Sciences, Faculty of Medicine, Kagoshima University (Japan))

## Poster

2025年9月27日(土) 15:00 ~ 16:10  Poster Session (Foyer 2)

## Poster 24

### [P-24-01] Metabolic dysfunction-associated steatotic liver disease and risk of depression in young adults: A nationwide population-based cohort study

\*Eunyoung Kim<sup>1</sup>, Su-Min Jeong, Sang Jin Rhee Rhee, Kyu Na Lee, Kyungdo Han (1. Department of Human Systems Medicine, Seoul National University College of Medicine, Seoul, Republic of Korea (Korea))

キーワード : depression、steatotic liver disease、alcohol

The prevalence of both steatotic liver disease (SLD) and depression is rising rapidly among young adults. This study aimed to evaluate the long-term risk of developing depression based on newly defined SLD subtypes, including metabolic dysfunction-associated steatotic liver disease (MASLD), and to assess the impact of alcohol consumption. We analyzed data from 6,226,824 young adults aged 20–39 years who underwent health screenings between 2009 and 2012, using the Korean National Health Insurance Service database. SLD was defined by a fatty liver index of 30 or higher and classified into five subtypes: MASLD, MASLD with increased alcohol intake (MetALD), alcohol-related liver disease (ALD) with cardiometabolic risk factors, MASLD with other combined etiology, and non-MASLD. Depression was identified using ICD-10 codes F32–33 over a median follow-up period of 10.4 years. All SLD subtypes were associated with an increased risk of depression compared to individuals without SLD. The highest hazard ratio (HR) was seen in MASLD with other combined etiology (HR 1.48), followed by ALD (HR 1.34), MetALD (HR 1.14), and MASLD (HR 1.03). Heavy alcohol use significantly raised depression risk regardless of cardiometabolic status, while mild alcohol consumption showed a protective effect, forming a J-shaped association. Stratified analyses revealed that females and individuals under 30 years had a higher susceptibility to depression in the presence of SLD. In conclusion, newly defined SLD subtypes carry varying risks for developing depression in young adults. These findings improve understanding of the role of alcohol, metabolic health, and liver disease etiology in mental health outcomes. The results highlight the importance of integrated screening and early mental health interventions for individuals with SLD, especially among high-risk subgroups.

Poster

2025年9月27日(土) 15:00 ~ 16:10 Poster Session (Foyer 2)

**Poster 24****[P-24-02] Alterations in Neurotransmitter-Related Brain Networks in Schizophrenia During Auditory Speech Stimulation**

\*Hanxiaoran Li<sup>1</sup>, Tao Li<sup>1</sup>, Wei Wei<sup>1</sup> (1. Affiliated Mental Health Centre & Hangzhou Seventh People's Hospital, Zhejiang University School of Medicine (China))

キーワード：Schizophrenia、Auditory verbal hallucinations、Receptor-enriched analysis of functional connectivity by targets、Partial Least Squares Correlation

Auditory verbal hallucinations (AVH) are a hallmark symptom of schizophrenia, associated with extensive alterations in functional brain networks. Prior research has suggested that the core pathophysiological mechanisms of schizophrenia may involve the dysregulation of multiple neurotransmitter signaling pathways. Yet, the specific impact of various neurotransmitters or transporters on brain functional networks remains poorly understood. This study aimed to link neurotransmitter function to abnormal functional brain networks in schizophrenia under auditory stimulation, thereby deepening our understanding of the pathophysiological mechanisms at play and setting a foundation for future pharmacological interventions. Data were sourced from a publicly available dataset, including 46 schizophrenia patients (23 with frequent AVH and 23 without) and 25 age-, sex-, and IQ-matched healthy controls. Participants underwent fMRI scans while exposed to auditory stimuli including white noise, words, sentences, and reversed speech. This study utilized publicly available PET atlases for six neurotransmitters or transporters (DAT, 5-HTT, mGluR5, GABAa, NET, VACHT). The structural and functional MRI data were preprocessed using fMRIprep, followed by extraction of time series data for each brain region, and the application of REACT to identify neurotransmitter-related brain activity. The analysis revealed three distinct patterns of dysregulation in schizophrenia. Pattern 1 showed decreased variability across extensive brain networks, particularly during white noise exposure compared to speech stimuli. Pattern 2 demonstrated that abnormalities in neurotransmitter-related brain regions varied significantly with the auditory task, with reversed speech inducing opposite effects compared to other types of auditory stimuli. Pattern 3 revealed that the presence of AVH influenced abnormalities in neurotransmitter-related brain regions. By integrating molecular data on various receptors and transporters in the brain with fMRI analyses, this study elucidates how speech stimulation impacts activation in different neurotransmitter-related brain regions. These findings enhance our understanding of the relationship between schizophrenia and neurotransmitter receptors or transporters, providing a theoretical basis for future exploration of multi-receptor or multi-medication treatment strategies.

Poster

2025年9月27日(土) 15:00 ~ 16:10  Poster Session (Foyer 2)

## Poster 24

### [P-24-03] Conceptualization of Recovery from Eating Disorders: A Qualitative Study Based on Interviews with Recovered Individuals

\*Akie Nakayama<sup>1</sup>, Masaru Takahashi<sup>1</sup> (1. Ochanomizu University (Japan))

キーワード : Eating disorders、Conceptualization of Recovery、Qualitative Study

This study aimed to explore how individuals with eating disorders conceptualize recovery. The study involved nine female participants who self-identified as having recovered from an eating disorder and had been symptom-free from eating disorders or other psychiatric conditions for a minimum of two years. Individual semi-structured interviews were conducted, enabling participants to articulate their recovery journey from the onset of their disorder to the point of self-recognition as recovered. The data were analyzed utilizing the Modified Grounded Theory Approach (Kinoshita, 2003). Five core elements emerged as central to the conceptualization of recovery. Firstly, participants distinctly recognized their ability to eat "normally," signifying both an objective and subjective absence of symptoms. Secondly, they experienced a sense of continuity between their past and present selves and accepted themselves as "good enough." Thirdly, they prioritized themselves in their lives and aspired towards the future, moving away from prioritizing others. Fourthly, they acquired social roles and experienced a sense of belonging. Fifthly, they perceived recovery as an ongoing and perpetual process. These findings suggest that recovery is a highly subjective experience that cannot be fully defined using objective criteria alone. Therefore, clinicians should refrain from imposing a fixed image or direction of recovery and instead respect individual differences. Furthermore, as all participants reported various challenges even after full remission, continuous support was deemed essential beyond the acute phase.

Poster

2025年9月27日(土) 15:00 ~ 16:10 Poster Session (Foyer 2)

**Poster 24****[P-24-04] The Association between Hemoglobin Level and Risk of Developing Dementia : National Health Screening Cohort(NHIS-HEALS) in Korea**

\*SEONG HWAN KIM<sup>1</sup>, Ho Chan Kim<sup>2</sup>, Hyun Soo Kim<sup>1</sup> (1. Dong-A University (Korea), 2. Kosin University (Korea))

キーワード : Hemoglobin、Dementia、Aging、NHIS、ICD-10

**Research Purpose**

The global aging population is raising concerns about the onset of dementia. The current treatment for dementia is lacking in fundamental treatment as it focuses on slowing the decline in function rather than improving symptoms. It is necessary to identify and adjust risk factors in advance in the preventive aspect of dementia, and several previous studies have shown that abnormal hemoglobin can increase the risk of dementia. Therefore, this study aims to investigate the association between hemoglobin levels and the risk of developing dementia by gender using a population-based cohort in Korea.

**Study Participants and Methods**

The study was conducted in 515,000 people aged from 40 to 79 years using National Health Examination Cohort (NHIS-HEALS) data based on the National Health Insurance (KNHI) program in South Korea. Subjects were followed up until December 31th, 2019. The independent variable was hemoglobin level, and it was analyzed by dividing it into quintiles according to the hemoglobin level, excluding the top 1% and the bottom 1%. The dependent variable was dementia, defined using the International Classification of Diseases (ICD-10) code and drug prescription information. This study was analyzed separately between men and women, and the relationship between hemoglobin levels and dementia incidence was investigated by adjusting various covariate variables.

**Results**

After adjusting for age, sex, body mass index, residence, smoking status, drinking status, regular exercise, income level, hypertension, diabetes, dyslipidemia, depression history, and the Charlson comorbidity index (CCI), the risk of developing dementia increased when the hemoglobin level was lower or higher than the baseline. In particular, in dementia, including all causes, the hazard ratio of developing dementia gradually increased as the hemoglobin level decreased. In addition, the U-shaped relationship in which the incidence of dementia increases when hemoglobin levels are low or high was more pronounced in women.

**Conclusion**

Hemoglobin levels were identified as independent risk factors affecting the incidence of dementia. When the hemoglobin level was low or high, the incidence of dementia increased.

Poster

2025年9月27日(土) 15:00 ~ 16:10  Poster Session (Foyer 2)**Poster 24****[P-24-05] Association between auditory impairment and risk of VLOSLP: a multicenter, retrospective cohort study**\*Young Tak Jo<sup>1</sup> (1. Kangdong Sacred Heart Hospital (Korea))

キーワード : VLOSLP、Schizophrenia、Auditory impairment、Common data model

**Introduction:** Very late-onset schizophrenia-like psychosis (VLOSLP) is defined as schizophrenia-like psychosis with onset after 60 years of age. It is a major functional psychosis in older adults, significantly impairing independence and quality of life. Growing evidence suggests sensory deprivation, especially hearing loss, may precipitate psychosis in later life. However, large-scale, population-based studies examining this relationship remain limited.

**Methods:** We conducted a retrospective cohort study using the Korean Observational Medical Outcomes Partnership Common Data Model (OMOP-CDM), which harmonizes electronic health records from over 50 million patients. Adults with documented auditory impairment were 1:2 propensity-score matched with controls without hearing loss based on age, sex, comorbidities, medication exposure, laboratory results, and composite risk scores. Incident VLOSLP cases were tracked following a one-year lag period. Center-specific Cox regression models were pooled using random-effects meta-analysis.

**Results:** A total of 11,722 hearing-impaired patients and 20,111 propensity score-matched controls from six medical centers were included. The analysis revealed a significantly increased risk of developing VLOSLP in patients with auditory impairment (Hazard ratio [HR] = 1.48; 95% confidence interval [CI] = 1.10 – 2.00; I<sup>2</sup> = 0.0%). Sensitivity analyses using 1:4 propensity score matching yielded consistent results (HR = 1.29; 95% CI = 1.00 – 1.67; I<sup>2</sup> = 0.0%), reinforcing the robustness of our findings across varying matching ratios.

**Conclusion:** Our findings indicate auditory impairment significantly increases the risk of VLOSLP, aligning with previous studies linking auditory impairment to psychosis. These results highlight the importance of routine auditory screening in elderly individuals and timely intervention with hearing aids if necessary. Further research is recommended to determine whether auditory rehabilitation through hearing aids can mitigate this risk by preserving sensory input and reducing vulnerability to late-life psychosis.

Poster

2025年9月27日(土) 15:00 ~ 16:10 Poster Session (Foyer 2)

**Poster 24****[P-24-06] Acculturation and Psychological Distress Among Adolescents in the United States: A Cross-Racial Analysis Using California Health Interview Survey (CHIS)**

Franco Valencia<sup>1</sup>, \*Karin Kai Wing Wang<sup>1</sup>, So Hee Naomi Ahn<sup>1</sup>, Thirumagal Gowrikanthan<sup>1</sup>, Jasmin Choi<sup>1</sup>, Lester Andrew Uy<sup>1</sup>, Armaan Jamal<sup>1</sup>, Nitya Rajeshuni<sup>1,2</sup>, Robert Huang<sup>1,3</sup>, Gloria Kim<sup>1,3</sup>, Malathi Srinivasan<sup>1,3</sup>, Latha Palaniappan<sup>1,3</sup>, Steven Sust<sup>1,4</sup> (1. Stanford Center for Asian Health Research and Education (United States of America), 2. Department of Pediatrics, Stanford University School of Medicine (United States of America), 3. Department of Medicine, Stanford University School of Medicine (United States of America), 4. Department of Psychiatry and Behavioral Sciences, Stanford University School of Medicine (United States of America))

キーワード：Acculturation、Adolescent Mental Health、Immigrants、Racial Disparities、Language

Mental health challenges affect one in five adolescents in the U.S., yet the relationship between acculturation and mental health among immigrant youth remains underexplored. This study examines how acculturation-related factors relate to psychological distress among adolescents across racial groups in California.

We analyzed data from 4,366 adolescents aged 12–17 using CHIS data from 2019 to 2022. Participants self-identified as White, African American, American Indian/Alaska Native, Asian, Hispanic, Pacific Islander/Other Single Race, or Multiracial. Psychological distress in the past year was assessed using the Kessler 6 scale. Acculturation was defined by nativity status, years lived in the U.S., and language(s) spoken at home. Survey-weighted logistic regression models were used to assess associations, adjusting for race, sex, age, and parental education.

Compared to White adolescents, African American, Asian, and Hispanic youth had lower odds of reporting psychological distress (OR = 0.36, 95% CI [0.21, 0.65], OR = 0.58 [0.44, 0.77], OR = 0.73 [0.60, 0.90]). Female adolescents were twice as likely to report distress (OR = 1.98 [1.67, 2.34]). Older age (OR = 1.14 [1.09, 1.19]) and parental higher education (OR = 1.39 [1.15, 1.68]) were also associated with increased odds of distress. Speaking one foreign language at home (OR = 0.55 [0.26, 1.19]) and living for 15+ years in the U.S. (OR = 0.72 [0.28, 1.89]) appeared protective, while speaking multiple foreign languages was associated with elevated risk (OR = 1.36 [0.90, 2.06]).

Though not at conventional levels of significance, monolingualism at home and longer U.S. residence may be protective against psychological distress, while bilingualism could reflect stress from the parent–child acculturation gap. Targeted efforts are therefore needed to address mental health challenges related to acculturation.

Poster

2025年9月27日(土) 15:00 ~ 16:10  Poster Session (Foyer 2)

## Poster 24

### [P-24-07] Aspects of Experiential Knowledge Accompanying Recovery among Survivors of Substance Use Disorder: A phenomenological study

\*Ayako Yamashita<sup>1</sup>, Yasuaki Akasaki<sup>1</sup> (1. School of Health Sciences, Faculty of Medicine, Kagoshima University (Japan))

キーワード : Substance use disorder、Recovery、Survivor

**Background:** Individuals with substance use disorders may continue to experience difficulties with daily life, even after overcoming drug dependency, making recovery support necessary to maintain a stable community life.

**Purpose:** This study aimed to clarify the experiential knowledge gained by survivors of substance use disorders during their recovery and contribute to the establishment of recovery support systems.

**Methods:** This qualitative study used a phenomenological design. Participants were recruited with the help of a self-help group representative for substance use disorders who introduced us to potential participants. Semi-structured interviews were conducted between October and November 2024. The survey items included personal characteristics: age, participation in self-help groups, age at diagnosis, treatment duration, and factors perceived as necessary for recovery. Data were analyzed using Colaizzi's phenomenological method. This study was approved by the Kagoshima University Epidemiological Research Ethics Committee.

**Results:** The participants had a mean age of  $41.8 \pm 10.1$  years. The following five themes were identified as triggers for recovery: encounters with role models; crisis management against relapse; healing through natural environments experienced sensorially; experiences that enhance self-esteem; and pursuit of new value systems for living.

**Conclusion:** Our findings indicate that recovery from substance use disorders requires encounters with role models and trustworthy healthcare professionals as well as spiritual healing of the mind and body in safe and secure environments.

## Poster

2025年9月27日(土) 11:00 ~ 12:10 Poster Session (6F Meeting Room 4-6)

## Poster 36

[P-36-01]

Electrophysiological changes in depressive patients with non-suicidal self-injury: An event-related potential study and source analysis

\*Sehoon Shim<sup>1</sup>, Sangwoo Hahn<sup>2</sup> (1. SOONCHUNHYANG UNIV. CHEONAN HOSPITAL (Korea), 2. SOONCHUNHYANG UNIV. HOSPITAL (Korea))

[P-36-02]

Effective Management of Severe Aggression and Self-Injurious Behaviours with Clozapine in Adults with Autism Spectrum Disorder and Intellectual Disability

\*Hui Xin Jenies Foo<sup>1</sup>, Jiaqian Sun<sup>1</sup>, Sajith Sreedharan Geetha<sup>1</sup> (1. Institute of Mental Health (Singapore))

[P-36-03]

Development of a visual assessment tool for screening major depressive episodes

\*Phannaratch Sritongkum<sup>1</sup>, Sirirat Kooptiwoot<sup>1</sup>, Woraphat Ratthaapha<sup>1</sup> (1. Faculty of medicine, Siriraj Hospital, Mahidol Univ. (Thailand))

[P-36-04]

Survey research on the development of employment support apps for people with disabilities

\*Miki MARUTANI Marutani<sup>1</sup>, Chie Usui<sup>2</sup>, Hiroo Wada<sup>2</sup>, Gensei Ishimura<sup>3</sup> (1. National Institute of Public Health (Japan), 2. Juntendo University (Japan), 3. Professional University of Information and Management for Innovation (Japan))

[P-36-05]

Habenular Abnormalities in Bipolar Disorder and Their Molecular Correlates: A Multimodal Imaging Study

\*Meng xuan Qiao<sup>1</sup>, Hua Yu<sup>1</sup>, Tao Li<sup>1</sup> (1. Affiliated Mental Health Center & Hangzhou Seventh People's Hospital and School of Brain Science and Brain Medicine, Zhejiang University School of Medicine (China))

[P-36-06]

Expectancy Violation Enhances Inhibitory Learning in Personalized Virtual Reality Exposure Therapy for Panic Disorder: A Randomized Controlled Trial

\*Daeyoung Roh<sup>1</sup>, Ki Won Jang<sup>1</sup>, Han Wool Jung<sup>2</sup> (1. Hallym University (Korea), 2. Yonsei University (Korea))

Poster

2025年9月27日(土) 11:00 ~ 12:10 Poster Session (6F Meeting Room 4-6)

**Poster 36****[P-36-01] Electrophysiological changes in depressive patients with non-suicidal self-injury: An event-related potential study and source analysis**

\*Sehoon Shim<sup>1</sup>, Sangwoo Hahn<sup>2</sup> (1. SOONCHUNHYANG UNIV. CHEONAN HOSPITAL (Korea), 2. SOONCHUNHYANG UNIV. HOSPITAL (Korea))

キーワード : Interpersonal Relations、NSSI、ERP、EEG、Depression

**Introduction:** Non-suicidal self-injury (NSSI) is increasingly being observed among adolescents as a maladaptive coping mechanism for alleviating emotional distress. Despite its high prevalence, the neurobiological underpinnings that link interpersonal distress to cognitive control deficits remain underexplored. Electroencephalography (EEG) studies suggest that the no-go P3 component may serve as a biomarker for impulsivity and response inhibition, offering insights into the mechanisms underlying NSSI behaviors. This study aimed to investigate the relationship between psychological characteristics, neural activity, and cognitive control in adolescents with NSSI and healthy controls (HC).  
**Methods:** A total of 51 adolescents with NSSI and 50 HC were recruited. Psychological characteristics were assessed using standardized scales including the Interpersonal Needs Questionnaire (INQ) and Short UPPS-P Impulsivity Scale (SUPPS-P). EEG were recorded during a go/no-go task to measure P3 amplitudes. Source analysis was performed to localize the neural activity. Group differences were analyzed using ANCOVA to control for depression and anxiety, followed by partial correlation and mediation analyses to evaluate the relationships among the variables.  
**Results:** The NSSI group exhibited significantly lower no-go P3 amplitudes at all electrodes than the HC group ( $p < 0.001$ ), even after controlling for depression and anxiety. No-go P3 amplitudes negatively correlated with INQ scores, suggesting that interpersonal distress affected response inhibition. Source analysis revealed reduced neural activity in the right superior frontal gyrus, the inferior parietal gyrus, and other regions associated with cognitive control and emotional regulation in the NSSI group. However, these differences disappeared after adjusting for depression and anxiety, indicating their potential mediating roles.  
**Conclusions:** These findings highlight the interplay between interpersonal distress, depression, anxiety, and cognitive control deficits among adolescents with NSSI. Future longitudinal studies are needed to confirm these pathways and explore therapeutic interventions targeting interpersonal distress and emotional regulation to mitigate NSSI.

## Poster

2025年9月27日(土) 11:00 ~ 12:10  Poster Session (6F Meeting Room 4-6)

## Poster 36

[P-36-02] Effective Management of Severe Aggression and Self-Injurious Behaviours with Clozapine in Adults with Autism Spectrum Disorder and Intellectual Disability

\*Hui Xin Jenies Foo<sup>1</sup>, Jiaqian Sun<sup>1</sup>, Sajith Sreedharan Geetha<sup>1</sup> (1. Institute of Mental Health (Singapore))

キーワード : Clozapine、Neurodevelopmental Disorders、Aggression、Autism、Intellectual Disabilities

**Introduction:**

Clozapine, effective in managing aggression in treatment-resistant schizophrenia, has shown promise for severe aggression in Autism Spectrum Disorder (ASD), where pharmacological options are limited. We report two adult cases with ASD and intellectual disability (ID) who showed significant improvement in aggression and self-injurious behaviours (SIB) following clozapine treatment.

**Methods:**

Two male patients (aged 28 and 32) with ASD and ID were admitted to a specialist unit due to severe aggression and SIB unresponsive to behavioural therapy and psychotropics, including risperidone. Clozapine was initiated with family's agreement in patient's best interest. Symptoms were tracked using HoNOS-LD and BPI-S, pre-and post-treatment (4 months).

**Results:**

The first patient (28yo) was treated with 250mg/day. His HoNOS-LD score dropped from 25 to 17, with reduction in aggression (4 to 2), SIB (4 to 0), and relationship problems (4 to 2). BPI-S scores reported reduction in aggression (29 to 6) and SIB (4 to 1). He no longer required physical restraints, engaged in therapy, and improved family interactions, prompting discharge planning.

The second patient (32yo), received 400mg/day. His HoNOS-LD improved from 32 to 25, with aggression reduced (2 to 1), SIB (3 to 1), and better self-care (3 to 2). BPI-S showed aggression reduced (18 to 11) and SIB resolved completely (7 to 0). He showed enhanced participation in therapeutic sessions and outings.

Both experienced sedation and mild tachycardia, resolved through dose adjustment. Blood monitoring showed no haematological complications.

**Discussion:**

Clozapine led to marked reductions in both aggression and SIB, alongside functional improvements in therapy participation and social interactions with favourable safety profile observed. These cases underscore clozapine's potential in ASD, particularly when behavioural and conventional pharmacological interventions fail.

**Conclusion:**

These findings suggest clozapine may offer significant benefits in select ASD patients. Larger controlled studies are needed to confirm safety, efficacy, and optimal dosing.

Poster

2025年9月27日(土) 11:00 ~ 12:10 Poster Session (6F Meeting Room 4-6)

## Poster 36

### [P-36-03] Development of a visual assessment tool for screening major depressive episodes

\*Phannaratch Sritongkum<sup>1</sup>, Sirirat Kooptiwoot<sup>1</sup>, Woraphat Ratthaapha<sup>1</sup> (1. Faculty of medicine, Siriraj Hospital, Mahidol Univ. (Thailand))

キーワード：Thai-PHQ9、VSD、Depression、communication impairment

**Background:** Depression is a high-prevalence mental health condition; standardized screening tools are widely used to assess depressive symptoms. These tools rely on linguistic comprehension, which may present barriers for individuals with communication impairments. The researchers designed the novel visual screening depression tools (VSD) specifically for this population. **Objective:** This study aims to develop and evaluate the validity and reliability of VSD, designed to minimize linguistic demands and improve accessibility for populations with limited verbal communication. This pilot study was conducted in the Thai population to prove the validity of the tools in normal communication ability before using this tool with individuals with communication impairments in the next study.

**Methods:** Concepts from each item of the PHQ-9 were analyzed and translated into easy-understanding images, each accompanied by a short caption. The VSD was administered alongside the Thai version of the PHQ-9 to 505 participants with normal Thai communication ability in the OPD unit of Siriraj Hospital. Psychometric analysis was used for statistical analyses. **Results:** The result of the VSD was compared with the Thai PHQ-9 as a gold standard. 501 subjects had completed both the VSD and the Thai-version PHQ-9. At the cut point for screening depression at a score  $\geq 9$  as the Thai PHQ-9. The sensitivity of the VSD is 94.08 (95% CI: 91.43, 96.73); specificity is 90.86 (95% CI: 86.84, 94.89). The internal consistency assessed through Cronbach's alpha coefficient is 0.885.

**Conclusion:** The VSD is a promising alternative for assessing depressive symptoms using images with small phrases in the normal Thai communication ability population. Its development may facilitate earlier detection and treatment of depression in the individual with limited language abilities.

## Poster

2025年9月27日(土) 11:00 ~ 12:10  Poster Session (6F Meeting Room 4-6)

## Poster 36

### [P-36-04] Survey research on the development of employment support apps for people with disabilities

\*Miki MARUTANI Marutani<sup>1</sup>, Chie Usui<sup>2</sup>, Hiroo Wada<sup>2</sup>, Gensei Ishimura<sup>3</sup> (1. National Institute of Public Health (Japan), 2. Juntendo University (Japan), 3. Professional University of Information and Management for Innovation (Japan))

キーワード : employment support、people with disabilities、apps development

#### Methods

Participants were people with disabilities recruited by employment transition support providers. From August 2024, for approximately one month, we requested the use of Waraifu to monitor the progress of people with disabilities by comparing their condition with their support environment, and to visualize the factors that hinder or promote employment. Before and after the trial period, we measured the authenticity sense scale (Ito, 2005) using a questionnaire survey, performed a relevant t-test, and investigated changes in self-understanding through self-monitoring. After the trial period, we surveyed users about their impressions of the app. This study was approved by the Ethics Committee of the National Institute of Public Health.

#### Results

A total of 36 respondents answered the questionnaire before and after using the app. All seven items related to the authenticity sense improved before and after using the app, and two items showed a significant difference. Usability was demonstrated by the fact that the app was well designed, with comments such as "the font size of the app was easy to read" and "the colors of the app were easy to see."

#### Conclusion

Japanese people tend to view themselves in relation to others, and Waraifu monitors the fluctuations in the condition of people with disabilities and the support environment, leading to a positive change in self-understanding. The small sample size and the fact that the survey was conducted non-face-to-face limit the interpretation of the results.

## Poster

2025年9月27日(土) 11:00 ~ 12:10  Poster Session (6F Meeting Room 4-6)

## Poster 36

### [P-36-05] Habenular Abnormalities in Bipolar Disorder and Their Molecular Correlates: A Multimodal Imaging Study

\*Meng xuan Qiao<sup>1</sup>, Hua Yu<sup>1</sup>, Tao Li<sup>1</sup> (1. Affiliated Mental Health Center & Hangzhou Seventh People's Hospital and School of Brain Science and Brain Medicine, Zhejiang University School of Medicine (China))

キーワード : habenula、bipolar disorder、Magnetic Resonance Imaging

Bipolar disorder (BD) is a chronic psychiatric condition marked by alternating manic and depressive episodes and a high degree of heritability. Growing evidence implicates the habenula—a central hub regulating dopaminergic and serotonergic signaling—in the pathophysiology of BD. This study integrated structural and functional neuroimaging with transcriptomic analyses to characterize habenular abnormalities in BD. Structural MRI and resting-state fMRI data from 78 BD patients and 102 healthy controls were analyzed.

Habenular volumes were manually segmented and compared via ANCOVA. Resting-state functional connectivity (rs-FC) was assessed using DPABI-SURF, with the habenula as the seed region. Spatial transcriptomic associations were examined using partial least squares correlation with the Allen Human Brain Atlas, followed by gene enrichment and polygenic risk score (PRS) analyses. We observed significantly reduced bilateral habenular volumes in BD patients, particularly during depressive episodes. Habenular volumes were negatively correlated with depressive symptoms and positively associated with manic symptoms. Functional analysis revealed increased rs-FC between the bilateral habenula and the right precentral gyrus during manic states. Transcriptomic analysis indicated that altered habenular rs-FC was associated with genes enriched in synaptic structure and neurotransmission pathways, several of which overlapped with BD risk loci identified in genome-wide association studies. PRS analysis further revealed that habenula-precentral gyrus connectivity was negatively correlated with PRS for G-protein-coupled serotonin receptor signaling, suggesting a genetic basis for these functional alterations. These findings provide multimodal evidence linking structural and functional abnormalities of the habenula to the molecular and genetic architecture of BD. This integrative approach offers novel insights into the neurobiological mechanisms underlying BD and highlights potential targets for individualized therapeutic strategies.

## Poster

2025年9月27日(土) 11:00 ~ 12:10  Poster Session (6F Meeting Room 4-6)

## Poster 36

[P-36-06] Expectancy Violation Enhances Inhibitory Learning in Personalized Virtual Reality Exposure Therapy for Panic Disorder: A Randomized Controlled Trial

\*Daeyoung Roh<sup>1</sup>, Ki Won Jang<sup>1</sup>, Han Wool Jung<sup>2</sup> (1. Hallym University (Korea), 2. Yonsei University (Korea))

キーワード : Virtual reality、Panic disorder、Agoraphobia、Personalization、Inhibitory learning

**Background:** Amid the global shortage of mental health professionals, virtual reality (VR) exposure therapy has emerged as a scalable solution for treating anxiety disorders. While standard hierarchical exposure focuses on habituation, newer models emphasize expectancy violation to foster lasting inhibitory learning. Personalized VR environments—designed to introduce variability and unpredictability—may promote stronger and more durable effects, particularly in panic disorder and agoraphobia.

**Methods:** We conducted a randomized controlled trial involving participants diagnosed with panic disorder and/or agoraphobia. Participants were assigned to receive either personalized enhancing VR exposure—incorporating variable, expectancy-violating elements—or standard hierarchical VR exposure over four weekly sessions. VR environments included individualized simulations of real-world settings such as supermarkets and roadways, with modifiable sensory elements (e.g., crowd density, brightness, and spatial constraints). Primary outcomes included the Panic Disorder Severity Scale (PDSS), Mobility Inventory for Agoraphobia (MI), State-Trait Anxiety Inventory-State (STAI), and a visual analog scale (VAS) for anxiety.

**Results:** Participants were randomly assigned with no significant baseline differences between groups. Repeated-measures ANOVA revealed significant main effects of time for STAI ( $F(4,34)=2.759, p=.043$ ) and VAS ( $F(4,25)=6.613, p<.001$ ), and significant time  $\times$  group interactions (STAI:  $F=3.219, p=.024$ ; VAS:  $F=4.610, p=.006$ ), indicating differential treatment response. No such interaction effects were found for PDSS or MI. Post hoc tests showed no group differences from Week 1 to Week 4, but significant differences at the final follow-up (3 months) for both VAS ( $p=.006$ ) and STAI ( $p=.016$ ), which survived Bonferroni correction.

**Conclusion:** This study highlights the potential of personalized enhancing VR as a scalable, safe, and engaging intervention for anxiety-related disorders, with sustained benefits observed after the intervention period. Furthermore, by embedding expectancy violation principles into immersive, individualized environments, VR exposure therapy may offer a novel pathway to strengthen inhibitory learning and overcome the limitations of traditional stepwise exposure.

## Poster

2025年9月27日(土) 14:00 ~ 15:10 Poster Session (6F Meeting Room 4-6)

## Poster 37

[P-37-02]

### Differentiating Non-Suicidal Self-Injury from Suicide Attempts in Patients Presenting to the Emergency Department

\*Kyoung-Uk Lee<sup>1</sup>, Sunghwan Kim<sup>2</sup>, Jung Taek Park<sup>3</sup>, Kyoung Ho Choi<sup>3</sup> (1. Department of Psychiatry, Uijeongbu St. Mary's Hospital, College of Medicine, The Catholic University of Korea, Seoul, Republic of Korea (Korea), 2. Department of Psychiatry, Yeouido St. Mary's Hospital, College of Medicine, The Catholic University of Korea, Seoul, Republic of Korea (Korea), 3. Department of Emergency Medicine, Uijeongbu St. Mary's Hospital, College of Medicine, The Catholic University of Korea, Seoul, Republic of Korea (Korea))

[P-37-03]

### Prevalence and Factors Associated with Depression Among Pregnant Women of Siriraj Hospital, Bangkok

Keerati Pattanaseri<sup>1</sup>, \*Suchada Samranjit<sup>1</sup>, Supawee Kaewchuen<sup>1</sup>, Kantanut Yutrirak<sup>1</sup>, Pattarawalai Talungchit<sup>2</sup>, Tachjaree Panchalee Boonbawornpong<sup>2</sup>, Napat Sittanomai<sup>3</sup>, Pasika Srinual<sup>4</sup>, Supaporn Kwadkweang<sup>2</sup> (1. Department of Psychiatry, Faculty of Medicine Siriraj Hospital, Mahidol University (Thailand), 2. Department of Obstetrics&Gynecology, Faculty of Medicine Siriraj Hospital, Mahidol University (Thailand), 3. Department of Pediatrics, Faculty of Medicine Siriraj Hospital, Mahidol University (Thailand), 4. Faculty of Medicine Siriraj Hospital, Mahidol University (Thailand))

[P-37-04]

### Validation the priority of Fixel-based Analysis of white matter alterations in drug-naïve patients with schizophrenia

\*Min Yang<sup>1</sup>, Wei Wei<sup>1</sup>, Tao Li<sup>1</sup> (1. Affiliated Mental Health Center & Hangzhou Seventh People's Hospital, Zhejiang University School of Medicine, Hangzhou, Zhejiang, China (China))

[P-37-05]

### Longitudinal Changes in Quality of Life and Posttraumatic Growth Among Colorectal Cancer Patients: A One-Year Prospective Study in Taiwan

\*CHUNGJEN TENG<sup>1,2,3</sup>, KUAN-HSUAN CHEN<sup>1</sup> (1. Far Eastern Memorial Hospital (Taiwan), 2. Institute of Public Health, College of Medicine, National Yang Ming Chiao Tung University (Taiwan), 3. School of Medicine, National Yang Ming Chiao Tung University (Taiwan))

[P-37-06]

### Prevalence of anhedonia in patients with psychiatric disorders: Results from a national survey in Thailand

\*Pornjira Pariwatcharakul<sup>1</sup> (1. Department of Psychiatry, Faculty of Medicine Siriraj Hospital, Mahidol University (Thailand))

[P-37-07]

### Evaluating the Factor Structure of the 25-item Autism-Spectrum Quotient Japanese Version as a Potential Screening Tool in Perinatal Women

\*Ekachaeryanti Zain<sup>1,2</sup>, Naoki Fukui<sup>1</sup>, Yuichiro Watanabe<sup>1,3</sup>, Koyo Hashijiri<sup>1</sup>, Takaharu Motegi<sup>1</sup>, Maki Ogawa<sup>1</sup>, Jun Egawa<sup>1</sup>, Koji Nishijima<sup>4</sup>, Toshiyuki Someya<sup>1</sup> (1. Department of Psychiatry, Niigata University Graduate School of Medical and Dental Sciences (Japan), 2. Department of Psychiatry, Faculty of Medicine, Mulawarman University (Indonesia), 3. Department of Psychiatry, Uonuma Kikan

Hospital (Japan), 4. Department of Obstetrics and Gynecology, Niigata University Graduate School of Medical and Dental Sciences (Japan))

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Poster

2025年9月27日(土) 14:00 ~ 15:10 Poster Session (6F Meeting Room 4-6)

**Poster 37****[P-37-02] Differentiating Non-Suicidal Self-Injury from Suicide Attempts in Patients Presenting to the Emergency Department**

\*Kyoung-Uk Lee<sup>1</sup>, Sunghwan Kim<sup>2</sup>, Jung Taek Park<sup>3</sup>, Kyoung Ho Choi<sup>3</sup> (1. Department of Psychiatry, Uijeongbu St. Mary's Hospital, College of Medicine, The Catholic University of Korea, Seoul, Republic of Korea (Korea), 2. Department of Psychiatry, Yeouido St. Mary's Hospital, College of Medicine, The Catholic University of Korea, Seoul, Republic of Korea (Korea), 3. Department of Emergency Medicine, Uijeongbu St. Mary's Hospital, College of Medicine, The Catholic University of Korea, Seoul, Republic of Korea (Korea))

キーワード : Non-suicidal self-injury、Suicide attempt、Risk factors

**Objectives:** Non-suicidal self-injury (NSSI) and suicide attempts (SA) are distinct yet overlapping behaviors. This study aimed to identify demographic, clinical, and behavioral differences between individuals presenting with NSSI and those with SA.

**Methods:** A total of 357 patients presenting with self-harm to an emergency department were categorized into an NSSI group ( $n=61$ ) and an SA group ( $n=296$ ). Demographic, clinical, and behavioral characteristics were compared between the two groups.

**Results:** The NSSI group was significantly younger ( $25.7 \pm 12.9$  vs.  $44.3 \pm 19.8$  years,  $p < 0.001$ ), with higher proportions of females ( $p = 0.05$ ) and employed individuals ( $p < 0.005$ ). The SA group had higher rates of medical illness ( $p < 0.01$ ), hopelessness ( $p < 0.001$ ), and severe depression ( $p < 0.001$ ). SA patients also exhibited more persistent suicidal ideation ( $p < 0.005$ ), greater medical severity, higher lethality of methods, and higher risk scores (all  $p < 0.001$ ). Conversely, the NSSI group showed more repeated self-injury ( $p < 0.001$ ), greater use of cutting ( $p < 0.001$ ), and exclusively impulsive, unplanned acts without suicide notes ( $p < 0.01$ ). Financial and other stressors were more common in the SA group.

**Conclusions:** NSSI and SA patients differ markedly in age, intent, method, and clinical severity. NSSI is more common in younger, female patients and characterized by impulsive, low-lethality behavior. SA is associated with more serious psychopathology, planning, and high-lethality methods. These findings underscore the need for differentiated assessment and tailored interventions in emergency settings.

Poster

2025年9月27日(土) 14:00 ~ 15:10 Poster Session (6F Meeting Room 4-6)

**Poster 37****[P-37-03] Prevalence and Factors Associated with Depression Among Pregnant Women of Siriraj Hospital, Bangkok**

Keerati Pattanaseri<sup>1</sup>, \*Suchada Samranjit<sup>1</sup>, Supawee Kaewchuen<sup>1</sup>, Kantanut Yutrirak<sup>1</sup>, Pattarawalai Talungchit<sup>2</sup>, Tachjaree Panchalee Boonbawornpong<sup>2</sup>, Napat Sittanomai<sup>3</sup>, Pasika Srinual<sup>4</sup>, Supaporn Kwadkweang<sup>2</sup> (1. Department of Psychiatry, Faculty of Medicine Siriraj Hospital, Mahidol University (Thailand), 2. Department of Obstetrics&Gynecology, Faculty of Medicine Siriraj Hospital, Mahidol University (Thailand), 3. Department of Pediatrics, Faculty of Medicine Siriraj Hospital, Mahidol University (Thailand), 4. Faculty of Medicine Siriraj Hospital, Mahidol University (Thailand))

キーワード：Prevalence、Risk Factor、Antenatal Depression、Thailand、Pregnancy

**Background** Depression affects over 280 million globally, with numbers rising. Women's risk is double men's, particularly during pregnancy, when insufficient self-care can increase the risk of disease and infection. This can negatively affect the mother, the baby, and the family. Early identification and assessment of depression during pregnancy are therefore crucial to reducing these adverse outcomes.

**Objectives** To identify the prevalence and associated factors of antenatal depression among women attending Siriraj Hospital, Bangkok, Thailand.

**Materials and methods** This prospective cohort study conducted among pregnant women attending antenatal care at Siriraj Hospital, since February 2025. Data were collected using a general information questionnaire, the Thai Edinburgh Postnatal Depression Scale (EPDS), and the Revised-Thai Multidimensional Scale of Perceived Social Support. Depression during pregnancy was defined as having an EPDS score of  $\geq 11$ .

**Results** Among 243 pregnant women, the prevalence of depression at Siriraj Hospital was found to be 19.34%. The median EPDS score for the depressed group was 13 (IQR: 12-15), while the healthy group had a median score of 5 (IQR: 2-7). Factors significantly associated with depression in pregnant women included: family financial status ( $p < 0.001$ ), desire for childcare ( $p = 0.001$ ), relationship problems with partner ( $p = 0.004$ ), history of past abuse and abuse by partner ( $p < 0.001$ ), and perceived social support ( $p < 0.001$ ).

**Conclusion** Depression during pregnancy was prevalent in nearly one-fifth of participants at Siriraj Hospital. The condition was significantly associated with financial difficulties, desire for childcare, relationship problems, history of abuse and low perceived social support. These findings highlight the need for routine screening and psychosocial support during antenatal care.

**Limitation** This analysis is based on preliminary data from first antenatal care visit. Finding may not reflect changes in depressive symptoms or risk factors later in pregnancy, data collection is on going.

Poster

2025年9月27日(土) 14:00 ~ 15:10  Poster Session (6F Meeting Room 4-6)

## Poster 37

### [P-37-04] Validation the priority of Fixel-based Analysis of white matter alterations in drug-naïve patients with schizophrenia

\*Min Yang<sup>1</sup>, Wei Wei<sup>1</sup>, Tao Li<sup>1</sup> (1. Affiliated Mental Health Center & Hangzhou Seventh People's Hospital, Zhejiang University School of Medicine, Hangzhou, Zhejiang, China (China))

キーワード : schizophrenia、white matter、diffusion imaging、fixel-based analysis、fibre bundles

**Background:** Previous Diffusion Tensor imaging (DTI) studies have found inconclusive white matter (WM) abnormalities in individuals with schizophrenia (SZ), and this may attribute to the limitations of DTI method. Fixel-based Analysis (FBA) is a recently developed method with advantages in assessing more biologically specific WM structures, and it is rarely applied in SZ Magnetic Resonance Imaging (MRI) researches. **Methods:** Diffusion MRI data were collected from 94 drug-naïve, first episode schizophrenia (FES) individuals and 114 healthy controls. MRI metrics including fractional anisotropy (FA), mean diffusivity (MD), fibre density (FD), fibre-bundle cross-section (FC), fibre density and fibre-bundle cross-section (FDC) were extracted. Group comparisons of these measures were conducted using Multivariate General Linear Model with age, gender, and years of education as covariates. Correlation analyses of MRI metrics with clinical variables were conducted. **Results:** We found only 6 bundles with altered FA, 34 with altered MD, 46 with altered FD, 29 with altered FC (log10-transformed, log(FC)), and 52 with altered FDC. No correlation of MRI metrics with clinical characteristics was found. **Conclusions:** This study strongly highlights the remarkable advantages of the FBA method to reveal the alterations of WM microstructures in individuals with schizophrenia.

## Poster

2025年9月27日(土) 14:00 ~ 15:10  Poster Session (6F Meeting Room 4-6)

## Poster 37

[P-37-05] Longitudinal Changes in Quality of Life and Posttraumatic Growth Among Colorectal Cancer Patients: A One-Year Prospective Study in Taiwan

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キーワード : Colorectal cancer、Quality of life、Posttraumatic growth、Type D personality、Psychosocial factors

**Background:** Colorectal cancer significantly disrupts patients' lives, especially during the first year post-surgery. While quality of life (QoL) may improve over time, the dynamics of posttraumatic growth (PTG) and the influence of psychosocial and medical factors remain unclear.

**Methods:** This longitudinal study followed newly diagnosed colorectal cancer patients at four time points (post-surgery, 3, 6, and 12 months), and examined QoL and PTG and their predictors. Measures included the Medical Outcome Study 36-item short-form health survey (MOS SF-36) including Physical Component Summary (PCS) and Mental Component Summary (MCS) scores, Posttraumatic Growth Inventory (PTGI), Hospital Anxiety and Depression Scale (HADS), Type D Personality Scale, Sense of Coherence Scale (SOC), and Social Provisions Scale (SPS).

**Results:** PCS improved significantly over time [ $F(3,294) = 8.28, p < 0.001$ ], with lower scores linked to stoma presence and higher Type D personality traits. MCS also increased [ $F(3,294) = 3.99, p = 0.008$ ], and was associated with older age and lower Type D personality. PTG declined at T4 [ $F(3,174) = 5.73, p = 0.001$ ], and was negatively predicted by Type D personality. Adding SPS enhanced prediction of PTG, indicating a buffering effect of social support.

**Conclusion:** This study highlights the critical role of personality traits over clinical status in determining psychological recovery among colorectal cancer patients. Interventions targeting type D traits and enhancing SOC may improve survivorship outcomes during the early recovery phase.

Poster

2025年9月27日(土) 14:00 ~ 15:10  Poster Session (6F Meeting Room 4-6)**Poster 37****[P-37-06] Prevalence of anhedonia in patients with psychiatric disorders:  
Results from a national survey in Thailand**

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キーワード：prevalence、anhedonia、transdiagnostic

**Background:** Anhedonia is a transdiagnostic feature found across many psychiatric disorders. Data on its prevalence and impact in each psychiatric diagnosis are still limited. **Methods:** We conducted a cross-sectional survey across 26 hospitals in Thailand. Patients diagnosed with psychiatric disorders and prescribed at least one psychotropic medication participated in the study. The study measured anhedonia using the first item of the Patient Health Questionnaire (PHQ-9) as a self-report response. **Results:** Among all 821 participants, their diagnoses included schizophrenia spectrum disorders (n=179), bipolar disorder (n=67), depressive disorders (n=355), anxiety disorders (n=167), substance-related disorders (n=96), personality disorders (n=23), and ADHD (n=16). The prevalence of anhedonia was 80.3% in depressive disorders, 82.5% in MDD, 68.7% in bipolar disorders, 71.9% in anxiety disorders, 82.6% in personality disorders, and 75.0% in ADHD. **Conclusion:** Anhedonia is a common transdiagnostic phenomenon across many psychiatric disorders. Research into the treatment strategies is warranted.

Poster

2025年9月27日(土) 14:00 ~ 15:10 Poster Session (6F Meeting Room 4-6)

## Poster 37

## [P-37-07] Evaluating the Factor Structure of the 25-item Autism-Spectrum Quotient Japanese Version as a Potential Screening Tool in Perinatal Women

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キーワード : Autism-Spectrum Quotient (AQ)、autism spectrum conditions (ASC)、autism spectrum disorder (ASD)、perinatal women

**Background:** Autism screening in pregnant women is increasingly recognized as vital in Japan for promoting perinatal health and supporting healthy motherhood. **Objective:** This study aimed to identify the optimal factor structure of the Japanese version of the Autism-Spectrum Quotient (AQ-J) as a prospective screening tool for autistic traits in perinatal women. **Methods:** The AQ-J was administered to 4,287 Japanese perinatal women (currently pregnant or within one month postpartum). Participants were divided into two groups for analysis. Exploratory factor analysis (EFA) was conducted on the first group ( $n = 2,154$ ) to identify factor structures and refine final item selection. Confirmatory factor analysis (CFA) was performed on the second group ( $n = 2,133$ ) to validate the model and assess fit indices. The resulting model was compared with 13 previously proposed models to determine the best fit. **Results:** The EFA identified a 25-item model comprising three factors: "Social Interaction" (9 items), "Non-Verbal Communication" (11 items), and "Restricted Interest" (5 items). Cronbach's alpha coefficients were 0.829 for the total AQ-J, 0.829 for "Social Interaction," 0.755 for "Non-Verbal Communication," and 0.576 for "Restricted Interest." McDonald's omega coefficients (95% confidence intervals) were 0.826 (0.821–0.836) for the total scale, 0.835 (0.821–0.837) for "Social Interaction," 0.755 (0.744–0.766) for "Non-Verbal Communication," and 0.603 (0.556–0.596) for "Restricted Interest." The CFA confirmed acceptable fit indices for the three-factor structure (goodness-of-fit index: 0.900, comparative fit index: 0.860, root mean square error of approximation: 0.066), indicating it provided a superior fit compared to all 13 previously proposed models. **Conclusion:** The 25-item AQ-J model is suitable for assessing autistic traits in perinatal women and outperforms previous models. Further research involving clinical populations is needed to establish a cutoff score, enhancing the utility of the 25-item AQ-J for screening autistic traits in non-clinical perinatal populations.