



## Poster

 Sun. Sep 28, 2025 2:00 PM - 3:00 PM JST | Sun. Sep 28, 2025 5:00 AM - 6:00 AM UTC  Poster  
Session Hall (Foyer 2)

**Poster 30**

[P-30-01]

Mental Health Literacy, Stigma, Empathy, and Confidence in Managing Psychiatric Patients: Perspectives of Doctors and Nurses in a Singapore Emergency Department

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[P-30-02]

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

\*Ernesto Magallon-Neri<sup>1,2</sup>, Sandra Mateus-Gómez<sup>1</sup>, Josep Lluís Matalí<sup>3</sup>, Elena Flores<sup>3</sup>, Daniel Ilzarbe<sup>4</sup>, Rosa Díaz<sup>4</sup> (1.Department of Clinical Psychology and Psychobiology. Faculty of Psychology. University of Barcelona(Spain), 2.Institute of Neurosciences, UB. Group of Studies about Measure Invariance and Analysis of Change (GEIMAC) 2021SGR01071(Spain), 3.Child and Adolescent Psychiatry and Psychology Department of Hospital Sant Joan de Déu, Barcelona(Spain), 4.Department of Child and Adolescent Psychiatry and Psychology. Institute of Neurosciences. Hospital Clínic Universitari of Barcelona(Spain))

[P-30-03]

Speaking Out or Staying Silent: Self-Injury Disclosure Among Incarcerated Youth

\*Masaru Takahashi (Ochanomizu University(Japan))

[P-30-04]

From Parent to Child: Fear of Negative Evaluation and Mindreading in Japanese Adolescents

\*Satoko Sasagawa, Eriko Suwa (Mejiro University(Japan))

[P-30-05]

Preliminary Machine Learning-Based Prediction of Short-Term Psychiatric Crisis in Depressive Outpatients Using Structured and NLP-Derived EHR Features



\*Sunyoung Park<sup>1</sup>, Guaja Park<sup>2</sup> (1.Department of Psychiatry, National Insurance Service Ilsan Hospital(Korea), 2.Data Analytics Research Lab, Cheongdam Gounson Clinic(Korea))

[P-30-06]

Factors influencing the use of telemedicine and the satisfaction of the patient on the telemedicine visit in the outpatient psychiatric department of Siriraj Hospital, a medical school in Bangkok.

\*Atitaya Prushyapornsri, Kamonnet Wannasewok, Teerasakdi Satra (Department of Psychiatry, Faculty of medicine Siriraj Hospital(Thailand))

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## [P-30-01] Mental Health Literacy, Stigma, Empathy, and Confidence in Managing Psychiatric Patients: Perspectives of Doctors and Nurses in a Singapore Emergency Department

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Keywords : Confidence、 Empathy、 Stigma、 Mental Health Literacy、 Healthcare workers

**Background**

With the global rise in mental health disorders, Singapore has seen an increase in prevalence from 13.4% in 2020 to 17% in 2022. Despite strategic efforts to expand psychiatric services and integrate mental health care into primary settings, Emergency Departments (EDs) continue to experience growing patient volumes, which contribute to increased workloads, stress, and burnout among healthcare professionals. This study examines mental health literacy, stigma, empathy, and confidence in managing psychiatric patients among doctors and nurses in a Singaporean ED.

**Methodology**

110 ED professionals (47 doctors and 63 nurses) from a restructured general hospital completed an anonymous survey in late 2021. The survey included validated tools such as the Mental Health Literacy Scale (MHLS), the Opening Minds Scale for Health Care Providers-15 (OMS-HC-15), and the Jefferson Scale of Empathy (JSE), along with original questionnaires that assessed confidence in managing psychiatric patients and familiarity with the local Mental Health Care and Treatment Act (MHCTA).

**Results**

Doctors had higher scores in mental health literacy (MHLS: 121.89 vs. 118.27) and empathy (JSE: 109.32 vs. 101.44) while exhibiting lower stigma (OMS-HC-15: 41.98 vs. 43.57) compared to nurses. When compared to their Western counterparts, Singaporean ED professionals showed lower levels of mental health literacy, empathy, and stigma, but they performed better than those in East Asia. Both groups expressed moderate confidence in managing psychiatric patients and emphasised the need for additional training.

**Conclusion**

These findings underscore the importance of targeted educational initiatives and systemic policies aimed at enhancing mental health literacy, reducing stigma, and fostering empathy and confidence among ED professionals, ultimately improving psychiatric care in Singapore's emergency settings.



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[P-30-02] Are related the Psychological Inflexibility and their subprocess with Psychopathological symptoms in adolescents with and without psychiatric care?

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Keywords : psychological inflexibility、 psychopathological symptoms、 adolescents

Objective: To examine the relationships between different processes linked to psychological inflexibility (cognitive fusion and experience avoidance) with a global index of psychopathological symptoms. Method: in a sample of adolescents (n= 248; 58,8% women; 136 community subjects and 102 psychiatric patients) from Barcelona Spain, were applied: the Avoidance and Fusion Questionnaire for Youth (AFQ-Y) and the Symptom Assessment Questionnaire (SA-45) to analyze their Global Severity Index (GSI) of psychopathological symptoms. Results: significant correlations were identified ( $r = .68$  in community adolescents and  $r = .72$  in clinical sample;  $p < .001$ ), between psychological inflexibility and GSI. Also, cognitive fusion and experience avoidance were related significantly to GSI. Subsequently, linear regression analysis identified a high capacity to explain the GSI starting from psychological inflexibility and their subprocesses, in community adolescents the model with these three variables explains ( $R^2$  adjusted = .505;  $F = 46.84$ ;  $p < .001$ ) and for clinical sample ( $R^2$  adjusted = .538;  $F = 40.16$ ;  $p < .001$ ). Discussion: The concept of psychological inflexibility is partially related to global psychiatric distress; therefore, this would be a good indicator for screening psychopathology not focusing only on overtly pathological symptoms and could be useful for clinical and community adolescent samples.

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## [P-30-03] Speaking Out or Staying Silent: Self-Injury Disclosure Among Incarcerated Youth

\*Masaru Takahashi (Ochanomizu University(Japan))

Keywords : Non-suicidal self-injury、 disclosure、 suicide prevention、 youth offender、 correctional institution

Non-suicidal self-injury (NSSI) represents a significant public health issue among adolescents, exerting considerable effects on both physical and mental health. Despite its widespread occurrence, many adolescents engaging in NSSI do not disclose their behavior, a critical step toward obtaining support and treatment. This study sought to examine factors influencing the disclosure of NSSI among adolescents detained in correctional institutions in Japan. A questionnaire was administered to 436 adolescents (351 males, 85 females; mean age 16.85 years) residing in four Juvenile Classification Homes between September 2021 and March 2023. Among the 94 participants who reported engaging in repetitive NSSI, 48.39% of males and 62.50% of females had disclosed their behavior, with approximately 70% preferring to disclose to partners or friends and 50% to parents. The age at NSSI onset and avoidant attitudes towards help-seeking were correlated with NSSI disclosure. Participants who did not disclose their NSSI cited reasons such as perceiving it as inconsequential, believing they could address the issue independently, concerns about causing distress to others, and anticipating a lack of understanding. The findings suggest that interventions focused on addressing beliefs and attitudes related to help-seeking behavior may be efficacious in promoting NSSI disclosure. Clinical interventions in the judicial field can serve as a potential avenue for suicide prevention support for youth at an elevated risk of suicide who do not voluntarily reach out to support services.

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## [P-30-04] From Parent to Child: Fear of Negative Evaluation and Mindreading in Japanese Adolescents

\*Satoko Sasagawa, Eriko Suwa (Mejiro University(Japan))

Keywords : Fear of Negative Child Evaluation、 Mindreading、 Social Anxiety、 Reading the Mind in the Eyes Test、 Theory of Mind

Fear of negative evaluation (FNE) is a core cognitive component of social anxiety. Although genetic predisposition contributes to the transmission of social anxiety, sensitivity to social evaluation is also shaped by environmental influences, such as parental modeling. Previous studies suggest that parental fear of negative child evaluation (FNCE) plays a key role in the intergenerational transmission of social evaluative fears.

Theory of Mind (ToM), or the ability to infer others' mental states, is essential for navigating social interactions. Deficits in ToM can contribute to social anxiety by increasing the likelihood of misinterpretation and ineffective interaction. Enhanced mindreading ability may also exacerbate anxiety by increasing sensitivity to others' thoughts and emotions. Mindreading is especially important in the Japanese high-context society as a means of understanding implicit communication and avoiding interpersonal conflict. Within such cultural context, parents may experience elevated FNCE, fostering greater FNE in children. Moreover, high parental FNCE combined with lower child mindreading abilities may be associated with increased risk of depression.

The present study investigated whether mindreading abilities and parental FNCE are linked to child FNE and depression in a Japanese sample. Participants were 1,200 adolescents who completed the Asian Reading the Mind in the Eyes Test (RMET), Mindreading Beliefs Scale (MBS), Parental FNCE Scale, Short FNE Scale, and PHQ-9.

Hierarchical regression analyses demonstrated that both parental FNCE and RMET performance were positively associated with child FNE. Furthermore, interaction effects indicated that high parental FNCE, when combined with low RMET or high MBS scores, predicted greater depressive symptoms. These findings suggest that subjective and objective mindreading are distinct constructs, and that mindreading difficulties may increase vulnerability to both FNE and depression, particularly in the context of Japanese sociocultural norms.

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**Poster 30****[P-30-05] Preliminary Machine Learning-Based Prediction of Short-Term Psychiatric Crisis in Depressive Outpatients Using Structured and NLP-Derived EHR Features**

\*Sunyoung Park<sup>1</sup>, Guaja Park<sup>2</sup> (1.Department of Psychiatry, National Insurance Service Ilsan Hospital(Korea), 2.Data Analytics Research Lab, Cheongdam Gounson Clinic(Korea))

Keywords : Mental Disorders / prognosis、Machine Learning、Electronic Health Records、Suicide prevention、Natural Language Processing

**Background:** Short-term psychiatric crises, including suicide attempts and emergency visits, are critical in depressive patients. Predicting these events using electronic health records (EHR) may support timely clinical intervention. This study presents a preliminary analysis of a machine learning model for predicting such crises within 30 days after outpatient visits.

**Methods:** EHR data from 6,607 patients diagnosed with depressive disorders (ICD-10 F32, F33) who had  $\geq 2$  outpatient visits between January 1, 2019, and December 31, 2023, were analyzed. The dataset included 60,558 outpatient visit records. The prediction target was the occurrence of a psychiatric crisis (suicide attempt, psychiatric ER visit, or hospitalization) within 30 days post-visit. A total of 1,270 such events were identified. Features included structured clinical history during the 1, 2, and 3 months prior to each visit-such as prior ER visits, suicide attempts, outpatient frequency, guardian involvement, and medication changes-along with demographic data. In addition, symptom-related expressions (e.g., suicidal ideation, anxiety, insomnia) were extracted from free-text clinical notes using ChatGPT-assisted natural language processing. A gradient boosting model (XGBoost) was trained on 80% of patients and evaluated on a 20% held-out test set with patient-level separation.

**Results:** The model achieved an AUROC of 0.81 and PR-AUC of 0.30. Recent suicide attempts, emergency visits, and NLP-derived symptom features were among the strongest predictors.

**Conclusions:** Short-term psychiatric crises in depressive outpatients may be predicted with reasonable accuracy using structured EHR data and NLP-derived symptom information. These findings support the potential utility of combining structured and unstructured clinical data for early risk identification.

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[P-30-06] Factors influencing the use of telemedicine and the satisfaction of the patient on the telemedicine visit in the outpatient psychiatric department of Siriraj Hospital, a medical school in Bangkok.

\*Atitaya Prushyapornsri, Kamonnet Wannasewok, Teerasakdi Satra (Department of Psychiatry, Faculty of medicine Siriraj Hospital(Thailand))

Keywords : Telemedicine、 Satisfaction、 Factors influencing the use of telemedicine

The adoption of telemedicine for healthcare service was rising significantly during COVID-19 pandemic in Thailand. Even though the pandemic is currently subsiding, telemedicine is still used for healthcare services especially in mental health. To study the factors influencing the use of telemedicine and the satisfaction of the telemedicine service, we conducted questionnaire-based, cross-sectional study on 147 persons who had used telemedicine at the outpatient psychiatric department of Siriraj Hospital from March to May 2025. We collected demographic data, satisfaction of telemedicine service using CSQ-8 questionnaire Thai version (Client satisfaction questionnaire) and factors influencing the use of telemedicine which we reviewed from relevant articles and specialists in our department. The majority of participants (85.71%) reported that telemedicine services were either better than or comparable to in-person hospital visits. Most of the participants were female, average age of 42.28 years, and were diagnosed with depression. There is statistically significant difference between the median of CSQ-8 score in the group that reported telemedicine were either better than or comparable to in-person visits (Median=31, IQR=32-29), and the median of CSQ-8 score in the group that reported telemedicine services were worse than in-person visits (Median=29, IQR=32-27.5), with p-value= 0.038. Variables such as unnecessary to go to hospital, time savings, cost, privacy, and reducing risk of contact infectious disease did not show statistically significant associations with perspective of telemedicine use. However, multivariate logistic regression analysis identified education level as a significant predictor ( $p = 0.023$ ), with participants who graduated below Bachelor's degree level likely to perceive telemedicine as either better than or comparable to in-person hospital visits. The findings from this study are expected to provide insights into the factors affecting patients' choices to use telemedicine and their satisfaction levels which can inform the development of strategies to ensuring the services meet patients' needs and preferences.